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Editor's Preface

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Editor's Preface

Volume 5 of *Clinical Sociology Review* continues the tradition of organizing contributions into five general areas: History of Clinical Sociology, Theories of Clinical Sociology, Practice of Clinical Sociology, Teaching of Clinical Sociology, and Book Reviews. As in years past, the division among these areas is somewhat arbitrary since there is overlap among the focus of the articles. Volume 5 has a higher proportion of contributions on practice, and less on teaching than in previous volumes. The reasons for this are not clear, but the distribution of articles published does reflect the distribution of articles received.

The publication of Volume 5 is an appropriate time to express appreciation to both authors and reviewers. Without the insightful comments of the reviewers the quality of the *Review* would not be assured. These colleagues have given generously of time and effort to evaluate contributions to the *Review*, and to suggest to authors ways in which the articles might be modified so that they would communicate important ideas and experiences to the readers of the *Review*. At the same time, contributed manuscripts are the lifeblood of any journal. Authors have maintained good humor in the face of sometimes extended delays in the review process, and have responded thoughtfully to the suggestions of the reviewers.

History of Clinical Sociology. In this section, Fritz introduces the work of William Foote Whyte, one of the pioneers in sociological intervention. The summary of his intervention interests is based in part on interviews with him, and in part on a review of his work. Two examples of Whyte's work are presented: his 1947 article on solving human problems in the hotel industry, and his 1981 presidential address to the American Sociological Association on using social inventions to solve human problems. An article by Elias H. Porter shows the value of Whyte's social system approach to solving human problems.

Theories and Methods of Clinical Sociology. This section contains two contributions which extend our understanding of sociologically based intervention. First, Straus extends clinical theory, showing how differing views of how the world functions affect our understanding of the mechanisms of change. Couto points out the differences between academic and participatory research, and how the latter can play an important role in bringing about change.

The Practice of Clinical Sociology. Clinical sociology is useful both in general intervention and in the design of programs for specific groups. Hoffman describes the development of an alcoholism treatment program for a specific group, Cuban refugees, whose cultural background requires modification in the traditionally Anglo-oriented treatment program. Byers shows how a knowledge of social theory is helpful in crisis intervention, ranging from the interpretation

that the event is a crisis to the development of appropriate intervention strategies. **Abbott** discusses the ways in which a study of quality circles could be used to develop interventions that would increase the effectiveness of the circles in reaching their goals. **Sengstock** shows how sociological knowledge and methods can be used in development of a community program to help abused women. Continuing in the theme of the uses of theory in intervention, **Black, Enos and Holman** show how intervention based on phenomenological theory and the social construction of reality brought important change in a hospital, and **Bruhn** discusses how the clinical sociologist can serve as a broker in health affairs. Moving from large organizations to the family, **Kassop** shows the sociological base of the theories of the family therapist, Salvador Minuchin.

The Teaching of Clinical Sociology. Jurgen Habermas' theories of communication and interaction were used by **Malhotra** to analyze the interactions of women in a small group interaction oriented course on the psychology of women. Part of the emphasis of this course was to bring about change; the course appears to have succeeded in this.

Book Reviews. **Robert's** review of Stahmann and Hiebert's third edition of *Counseling in Marital and Sexual Problems: A Clinician's Handbook* indicates that despite unevenness and an underrepresentation of clinical sociological approaches, it should be useful to the practitioner. **Adams** finds the comprehensiveness of Burnside's *Working with the Elderly: Group Process and Techniques* appropriate. Stone's *The Disabled State* is primarily oriented toward political scientists, according to **Randolph**, but its perspectives are important to clinical sociologists. **Rebach** finds that the symposium, *Group Workers at Work: Theory and Practice in the 80's*, edited by Glasser and Mayadas, has some utility for clinical sociologists interested in working with small groups. **Williams** finds Biller and Solomon's *Child Maltreatment and Paternal Deprivation: A Manifesto for Research, Prevention and Treatment* disappointing in its definition of almost all consequences of father absence as maltreatment.