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Designing Interventions for the Helping Professions

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Designing Interventions for the Helping Professions, by Edwin J. Thomas. Beverly Hills: Sage Publications, 1984, 301 pp. \$28.00 hardcover, \$14.00 paper.

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Increasing demand for cost effectiveness in organizations provides the background for this timely book. Thomas defines an intervention as "a planned intrusion into the life or environment of an individual, couple, family, or other target unit that is intended to bring about beneficial changes for the individual or others involved" (p. 29).

The book is divided into four parts: 1) introduction; 2) the anatomy of the helping strategy; 3) design and development of interventions; and 4) selected tools and techniques. In Part Two Thomas discusses the objectives, targets, and roles of intervention; assessment and intervention planning; intervention methods; implementation, maintenance and termination; monitoring, evaluation, and follow-up. These interesting chapters give practical information on the various steps to be taken. The author's emphasis on follow-up and evaluation is important because so often a patient is better when discharged, fine in six months, but a year later has relapsed when facing new stress. At the end of this section, Thomas makes a distinction between behavior theory and intervention theory. Under behavior theory he identifies "Freudian, neo-Freudian, behavioral, cognitive, cognitive-behavioral, personalistic, problem solving, humanistic, social psychological, psychobiological, transactional, or family systems among others" (p. 84). Thomas points out that all interventions are based on behavior theory but that the theory is seldom explicit. Intervention theory is directed toward "understanding and prescribing the behavior of the helping person and the activities involved in the process" (p. 84). It consists of "the concepts, informational content, assumptions, values, and prescriptions that serve to guide the practice activities of a helping strategy" (p. 87). He points out that intervention theory is still in its infancy. The problem is that he does not propose any hypotheses. It might be better at this stage to call Thomas' formulations a "model."

In Part Three, Thomas discusses the four steps of research and development. Although he introduces some new concepts, he also repeats some of the information given in Part Two. This is confusing for the reader who has to put together both sets of information. It would have been easier if he had proceeded systematically from an assessment or analysis of the problem to the follow-up evaluation of the intervention, and grouped all pertinent information. In this section he points out that a good intervention is effective and efficient, gives appropriate instructions to guide the practitioner, is usable, inexpensive, and protects the rights of the participants. The sources of information are extensive and include basic and applied research, scientific and allied technology, legal

policy, indigenous innovation, and personal and professional experience. But how an innovation is generated by investigating these different sources is not made clear.

He suggests that a feasibility study should be undertaken to evaluate whether technically, financially, organizationally, and politically the intervention is feasible. This recommendation is important. There are different schools of therapy and one has to be sure, particularly in clinical intervention, that the type of intervention proposed does not clash with the values, theoretical orientation, or training of the staff, or with some vested interest of the organization where the intervention takes place.

Design, which consists of planning the different stages of the intervention, involves the following steps: determining the objective of the innovation; identifying what it will accomplish; selecting information to solve problems; generating and selecting alternatives; assembling the different elements of the design, drawing some symbolic representation or blue print of what should be accomplished; and deciding on the procedure to be followed.

Development is the process by which an innovation is implemented, used on a trial basis, tested, and refined for its adequacy. The scope of the development has to be determined, bearing in mind that it must remain "a manageable and workable project" (p. 188). The size of the sample has to be carefully determined. Decisions about staff and supervision have to be made and implemented. Trial use and developmental testing are the last stages of development.

Evaluation of the intervention is indispensable because it determines whether an intervention should be retained, utilized as it is, or redesigned and developed further. The focus of the evaluation is outcome testing and an important criteria is whether it is effective. The different requirements of evaluation and treatment may cause some conflicts, and Thomas suggests some alternatives to this problem.

Indication of success and failure should consist of multiple indicators. The first is the target behavior but relevant correlated behavior should also be evaluated. Client behavior change has to be assessed by self-report, by observation of the client by the practitioner, and by other observers.

Evaluation should be carried out early in the process so that modifications in the design can be made when necessary. Single-case experiment and between-group experiments can both be used. Single-case experiment is more useful at the beginning of a project, while between-groups experiments can be conducted when the intervention has been established. Once the innovation has been proved successful it is important to diffuse the results through publication and the media so that it can be more generally adopted.

In Part Four, Thomas makes a distinction between empirical, analytic, and practice techniques. Information retrieval and review, task analysis, the critical incident technique, flow charting, and making recording forms are some of the

techniques he proposes. He mentions that neutral interviewing is important. This should be stressed because although it is crucial that the interviewer does not ask biased questions, in practice bias often occurs.

There is a great deal of valuable practical information in this book. The problem is that Thomas has too many concepts and repeats himself too much. More importance should have been given to an analysis of the socioeconomic background of the patient; whether a particular therapy is applicable and successful may depend to a certain extent on the educational level and ethnic background of the patient and on his or her lifestyle. At the end of each chapter Thomas has a summary in point form, but one has to study it carefully because so many concepts are presented. It would have been helpful if he had discussed the conduct of a few successful interventions and the techniques which were used. Despite a few reservations about the structure of this book, it pioneers a new area of practice and research.

Offenders, Deviants, or Patients?: An Introduction to the Study of Socio-Forensic Problems, by Herschel Prins. London: Tavistock Publications, 1980, 369 pp., \$25.00 hardcover, \$13.50 paperback.

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Offenders, Deviants, or Patients? was meant to serve as an introduction to the relationship between mental disorder and criminal behavior for a wide range of professionals and for interested lay readers. The book is divided into two parts. The first six chapters examine some of the general issues of criminal responsibility, the nature of the relationship between mental illness and criminal behavior, the relationships among psychiatry, the courts and the penal system, and the concept of "dangerousness." The substantive chapters in the second part explore arson, sexual offenses, alcohol and drugs, and "female" offending.

The relationship between criminal behavior and mental illness is a complicated topic and those who work in the field could benefit from a clear overview. The author, a senior lecturer in social work at the University of Leicester in England, has set forth an ambitious task for himself. The subject matter demands diverse perspectives. While social work treatment is a central concern, it is clear that a tremendous amount of legal, sociological, psychological and medical material has been amassed and organized in this book. For a variety of reasons, however, the presentation of the material does not live up to its promise.

Perhaps the most consistently frustrating issue for a reader in the United States is the cultural bias of the book. One should not fault the author for using his country's body of knowledge, but it is important that non-British readers be