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Review of *The Task Planner: An Intervention Resource for Human Service Professionals*. William J. Reid. Review by Cathleen Jordan

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William J. Reid, *The Task Planner: An Intervention Resource for Human Service Professionals*. New York: Columbia University Press, 2000. \$49.50 hardcover, \$22.50 paper cover.

William Reid has designed a user-friendly resource manual for social work practitioners and other human service personnel. His Task Planner aims to provide an overview of common client problems and to identify client tasks for problem resolution. The book compliments the current practice trend toward evidence-based practice and development of desk references to guide human service practitioners in planning client interventions. The manual also identifies best practices from a brief therapy perspective, an approach compatible with today's managed care environment.

Reid defines task planners as problem-task menu combinations accompanying common client problems. The task menu contains suggestions for actions the client can take to solve the problem, along with suggestions for practitioner facilitation of the process. These tasks or suggestions for client action are preceded by an overview of the research literature. For example, the client problem of depression is described by meta-analyses and research reviews of treatment efficacy studies. Then the task menu begins with item 1, "consult with psychiatrist to assess need for antidepressant medication" (page 102). These tasks are activities the client can do. Next, the practitioner's role to facilitate client task completion is specified. In this case, suggestions include such supportive practitioner tasks as educating the client on the medication and monitoring its effects. In all, 15 tasks are identified for treating depression, along with elaboration or specification of the practitioner's role as necessary.

The layout of the manual is user-friendly beginning with two sections: "Simplified Guidelines" and "Task Planners: Overview and Applications" which instruct the practitioner in the use of the manual. In this part, Reid describes and provides a rationale for task planners, citing the supporting literature on action oriented interventions and the positive effects of client participation in treatment. Reid then discusses the planner development process including problem selection. The author, masters and doctoral students, practitioners, educators and staff assistants, wrote the

planners. The problems included were chosen based on three criteria: (1) desire for a broad range of problems, (2) the informative value of the tasks, and (3) the expertise and interests of the contributors. The overview section ends with a detailed description of the task planner components and suggestions for clinical use of the manual including its use with individuals, couples, families and groups. Recommended are practitioners' activities such as establishing incentives and rationale, and modeling and rehearsal.

Next are the task planners for over 100 common client problems. These range from alcoholism/addiction to withdrawn child. The author acknowledges the differing degrees of detail in the various task menus due to the multiple authors writing these. Some of the problems are broken down into subcategories. For instance, couple problems are broken down into communication and lack of caring or involvement. Grief and loss is broken down into child's loss of loved one and loss of a child/sibling. All follow the same format: review of research or meta-analyses, task menu with appropriate elaboration and practitioner suggestions. A CD-ROM companion resource is included with the book.

Finally, the book ends with a chapter called "Common Procedures"; techniques recommended across several of the task planners are operationalized in this section. Examples are cognitive restructuring and problem solving. These are for the most part briefly defined, though as with the task planners, some are more detailed than others.

The book's weakness is also its strength in terms of the brevity of the tasks explicated. It does not help the practitioner to complete a full assessment of client problems, but that is not its intention. The book is meant to be an overview or a reminder for the practitioner about intervention possibilities and is not at the level of detail as would be a manualized version of the task. However, each is well referenced so that the practitioner may easily obtain complete references if further information is required. A problem, however, is in the unevenness in task planner detail, with some problems and tasks being much more detailed than others. Also, the manual is not a comprehensive one, but is limited to the inclusion of those problems of interest to the contributors. For example, childhood disabilities, couple sexual problems, habit disorders,

and adult antisocial behaviors, frequently seen in treatment, are not included in the manual.

What the book does, it does well; and that is to provide a quick overview, or a review for many common problems with specific recommendations for client and practitioner tasks. Unlike many of the resource manuals published recently, the Reid compendium provides tasks for the clients to perform, rather than for practitioners only, acknowledging the importance of client motivation and participation. The tasks defined are based on the best available literature and ethnically sensitive techniques and references are provided when available (see for example the literature on elder abuse, page 130). In sum, William Reid's Task Planner is a useful supplemental resource manual. In spite of its limitations, the book should provide a welcome addition to the intervention literature and I predict this will be a popular reference book for the well-prepared practitioner.

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