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**Review of *Social Work Diagnosis in Contemporary Practice*.
Francis J. Turner (Ed.). Reviewed by William M. Maesen.**

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Book Reviews

Francis J. Turner (Ed.), *Social Work Diagnosis in Contemporary Practice*. New York: Oxford University Press, 2005. \$65.00 hardcover.

Set in a mix of primary and secondary research reports, this anthology consists of 78 pieces published between 2000-2002 in various professional sources. Seeking to introduce the reader to a representation of the current state of the art, the editor chose this eclectic collection from a sample of about 2500 listed in *Social Work Abstracts*. Unlike the DSM with its classifications and codes for psychiatric pathology, the editor views social diagnosis as “a conscious and concise statement of the spectrum of judgments we make on first meeting a client and expand and modify throughout our contact with him or her. These judgments serve as the basis on which we decide to engage or not engage in particular activities for which we are prepared to accept professional responsibility (p. viii).”

Compared to other references tackling psychosocial diagnosis—evidence-based research to impressionistic practice wisdom—this collection is rather broad in scope. The editor assumes a maverick stand! How does he do this? By avoiding predetermining the treatment fate of those who fall within our purview via dogmatic preconceptions regarding the range of classifications of human behavior. Rather, the reader is invited to synthesize and to translate the material as it applies to one’s practice.

The volume is divided into four parts containing from 18 to 26 chapters. In the editor’s energetic writing style, each part is introduced by a brief introduction and succinct overview. Part I is entitled Who Is the Client from a Developmental Perspective. It has 22 chapters covering the range from low birth weight children, parenting stress, envisioning fatherhood, adoption issues, foster care, homoerotic behavior,

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grandparenting, widowhood, and end-of-life decisions. The bulk of the chapters are based upon primary research.

For the 20 chapters of Part II, *The Problem as a Component of Diagnosis*, there are three divisions: (a) problems with a mental illness basis, (b) problems of a psychosocial nature, and (c) problems with a physical basis. Specific subjects can range from borderline personality disorder, survivals of sexual abuse, domestic violence in later life, staking, and senile dementia. The chapters are generally based on secondary research with interpretations and applications.

The third part, *Elements of Diversity to be Addressed in Our Diagnosis*, consists of 18 chapters principally in the vein of conceptual and/or essentially literature review articles. This part is also divided into three parts: (a) specific components of diversity, (b) generic diversity factors, and (c) intra cultural factors in diversity. Specific chapters address such issues as treatment of Arab Americans, depressive symptoms in farm women, social work with immigrants and refugees, biracial sensitive practice, racism as a clinical syndrome, and the financial vulnerability of people with disabilities.

Part IV, *Interventions: What Does Our Diagnosis Lead Us To?*, contains 18 chapters constituting primarily case study and/or conceptual selections. Chapter topics extend to the use of crisis teams, therapeutic dream work, harm-reduction approach, long-distance psychoanalysis, value of pets in geriatric practice, parent training via CD-ROM, and being a strength coach.

This reference of 782 narrative pages extends over a breadth of diverse topics relevant to social work diagnosis and hence practice. In the various writing styles one journeys through sometimes complex issues affecting the here-and-now of social work diagnosis. One implicit underlying plea is for acceptance and affirmation of a range of human differences and outlooks. In other words, the reader needs to deflect any subtle conceptual ethnocentrism at the professional level, including setting aside anchoring on one's period of training and coming into the present. Yet the knowledge base is still uneven, developing, and diversified, but hopefully progressing—perhaps while even traversing into an occasional blind alley, or by having an unsubstantiated idea ricochet from yesteryear.

In references of this kind, some key topics may not be given relevant space. For instance, apart from a scattering of brief discussions in a few chapters, the subjects of substance abusers and substance abusing mentally ill (MISA) clients are not dealt with directly in the form of at least one unified chapter. The chapter on the harm-reduction approach does use the treatment of substance abuse as an illustration for that model. Yet in most inner city mental health agencies of which I am aware, MISA clients can constitute up to 70 to 90 percent of the caseload. Perhaps this is due to the paucity of literature on the topic in traditional social work journals. Yet in the timeframe there are many articles related to this topic in clinical psychology, psychiatry, and specialty substance abuse journals.

Considering the volume and diversity of material, shifts in writing styles, and the rather small print, this might not be considered as casual professional reading. The subject index is thorough. The sources for the chapters are identified in a "Credits" section at the end of the volume. One possible drawback is the lack of information on the authors themselves such place, position, and background. The discerning reader might view this as useful. Apart from these concerns, the reference would be a significant additional to any social worker's professional library.

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Michael T. Maly, *Beyond Segregation: Multiracial and Multiethnic Neighborhoods in the United States*. Philadelphia, PA: Temple University Press, 2005. \$68.50 hardcover, \$22.95 papercover.

A number of the plays in August Wilson's cycle on African American life in the 20th century carry memorable images of urban decay, geographic isolation of the African American community, and the impending negative impacts of gentrification. These images appear normal—congruent with what we