



Crisis Management and Brief Therapy A. R. Roberts, Editor

Journal:	Professional Development: The International Journal of Continuing Social Work Education
Article Title:	<i>Crisis Management and Brief Therapy A. R. Roberts, Editor</i>
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Volume and Issue Number:	<i>Vol. 2 No. 3</i>
Manuscript ID:	<i>23036</i>
Page Number:	<i>36</i>
Year:	<i>1999</i>

Professional Development: The International Journal of Continuing Social Work Education is a refereed journal concerned with publishing scholarly and relevant articles on continuing education, professional development, and training in the field of social welfare. The aims of the journal are to advance the science of professional development and continuing social work education, to foster understanding among educators, practitioners, and researchers, and to promote discussion that represents a broad spectrum of interests in the field. The opinions expressed in this journal are solely those of the contributors and do not necessarily reflect the policy positions of The University of Texas at Austin’s School of Social Work or its Center for Social Work Research.

Professional Development: The International Journal of Continuing Social Work Education is published three times a year (Spring, Summer, and Winter) by the Center for Social Work Research at 1 University Station, D3500 Austin, TX 78712. Journal subscriptions are \$110. Our website at www.profdevjournal.org contains additional information regarding submission of publications and subscriptions.

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ISSN: 1097-4911

URL: www.profdevjournal.org

Email: www.profdevjournal.org/contact

Crisis Management and Brief Therapy

A.R. Roberts, Editor. Chicago: Nelson-Hall Publishers, 1996.

The major objectives of this edited volume are to: 1) review the latest statistics on the prevalence of acute crisis episodes in America; 2) review and integrate basic theory and models of brief time-limited interventions; and 3) present the latest information on the application of crisis intervention and brief treatment to high-risk populations. This book contains seven chapters describing crisis intervention with various populations. These chapters cover working with people in hospital emergency departments, high risk suicidal youth, adult survivors of incest, parents who have an abducted child, abused women in shelters, families in crisis, and alcoholic clients. The book also contains one chapter on converging themes in crisis intervention and brief treatment, one chapter on the epidemiology of crisis in America, and one chapter on the integrative dialectical-pragmatic approach to time-limited therapy.

The book editor presented each of the contributors with a structure to follow in writing about crisis intervention or brief treatment. Authors were required to address the scope of the problem, provide case examples, and to apply Robert's seven-stage crisis intervention model to work with their population. The crisis intervention practice model was described in detail in one of the early chapters of the book. This structured approach makes this collection of writings far more useful to the reader than would be the case if the authors were allowed to write without guidelines. One can anticipate what to expect from each chapter before reading it. The reader knows in advance that each chapter will cover all stages of crisis intervention with the specific population being addressed. The structured approach also enables the reader to compare how the various stages of crisis intervention are similar and different for various client populations.

The book is far more successful in meeting its third objective than it is in meeting the first two. The chapter by Cournoyer, which is meant to integrate theory on crisis intervention and brief treatment, provides information that is already known

by most clinicians and graduate students. As for the book's objective to review the prevalence of acute crisis episodes in America, one chapter devotes a portion of its space to presenting various national data on this matter.

The chapters that apply crisis intervention and brief treatment to high-risk populations are successful at meeting the volume's third objective. Indeed, this is probably the best quality of the book. The authors provide a wealth of information about the crises experienced by their selected population, about establishing rapport, conducting assessment of lethality and other major problems, dealing with feelings, exploring alternative solutions, formulating an action plan, and conducting follow-up. The authors are generous with their expertise in working with their population, and consequently the reader feels as if the time spent on each chapter is time well spent. The editor's role has been to select a credible group of contributors.

I would have preferred if the editor had allowed the contributors to write longer chapters. With more space to write, the authors could have provided greater depth to their discussions of working with a particular population. Few of the authors provided information about resources available in the community or at a national level to assist people in crisis situations. For example, Greif could have provided helpful information about places to contact in the event of a child's abduction (e.g., National Center for Missing and Exploited Children). The World Wide Web is also becoming a place where people can obtain very helpful information for dealing with crisis situations.

Overall, I would say that the volume could serve as an excellent supplemental reader for graduate practice courses or to experienced clinicians who are looking for insights into working with specific high-risk populations.

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