FEATURED SECTION: Four Articles on CLINICAL SOCIOLOGY

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INTRODUCTION The clinical application of sociology has been part of sociologists’ activities for many decades (Wirth 1937). Yet it was not until 1978 that an effort was made to transform what had been a personal career practice of individual sociologists into a collective professional organization. At that time, a group of 50 sociologists established a network of interested professionals which evolved into the Clinical Sociology Association (CSA). CSA now has a membership of 500 and supports the journal, Clinical Sociology Review. The first meeting was held at the 1978 annual meeting of the American Sociological Association. It remains the intent of the membership to maintain professional identity as sociologists, and to base their theoretical and clinical practice in the discipline of sociology.

Three decades ago Straus (1957) in efforts to establish a link between sociology as a behavioral science and medicine as a health service profession proposed that one might refer to: 1) sociology of medicine and 2) sociology in medicine. Sociology of medicine is concerned with investigation of medicine, focusing on sociological theory testing conducted by professional sociologists outside formal medical settings. Sociology in medicine was conducted by sociologists cooperating with other professionals within a medical setting. Its goal is to use sociological theory and research in the medical setting to produce more effective service delivery by health practitioners. Clinical sociology is an addition to this typology. Although in no way practicing medicine, clinical sociologists are placed directly into the role of change agent in service to clients seeking help. Thus, sociologists take a position among the helping professions. In this role, practitioner sociologists focus on specific cases or clients who seek resolution of specific problems. Such clients may be individuals, families, organizations or communities seeking competent professional help. The goal of clinical process is to facilitate or engender change in the client that will result in resolution of the problem, and growth for the client (Freeman 1982).

This feature section of four articles is offered to clarify and identify clinical sociology as a part of the sociological process. 1) The authors offer examples of how the sociological imagination might serve as a conceptual framework for specifying clinical goals. 2) The authors point out how the application of clinical sociology is relevant for different content areas of human experience. 3) The authors illustrate various levels of analysis used by clinical sociologists.

I anticipate a continuation of this feature on clinical sociology in the November issue of FICS.

REFERENCES

Freeman J A 1982 Clinical Sociology: What it is and what it isn’t: a perspective. Clinical Sociol Rev 1 34-49
Wirth L 1931 Clinical sociology. Amer J Soc 34 49-66