**Book Review**


"Give me an example of a book title that is an oxymoron." Answer: "The one under review." The intrepid editors and contributors to *Scientific Standards of Psychological Practice* must savor challenges, for there is no greater challenge than that of getting practitioners of psychology to incorporate scientific guidelines in other than verbovocal ways. The American Association of Applied and Preventive Psychology, an association of scientifically oriented applied psychologists, was the primary sponsor of a 1995 conference held in Reno, NV at the University of Nevada. The purpose of the conference was to examine the implications of bringing to bear scientific standards on the practice of psychology. This volume presents versions of thirteen major addresses, each accompanied by a brief discussion.

Only one branch of applied psychology received attention at the conference—that known as clinical psychology. The vast majority of practitioners and considerable numbers of those at the academic end of this largest applied specialty persist in exhibiting non- and antiscientific behavior. Unsupported claims of efficacy, secretive practices, absence of satisfactory data, reliance on intuition, authoritarianism, explanations in terms of nonspatiotemporal constructs, attempts to treat inexistent entities, applications of discredited procedures, and more continue to run rampant in today's practice of psychology. This state of affairs is multiply determined and includes not only the behavior of practitioners but basic science training that too frequently is not applicable to practice. Unfortunately, the latter is not addressed in *Standards*. Yet, the book is an excellent source for those who aspire to redress the balance of science and "art" in clinical psychology.

Not surprisingly, many of the contributors have ties to the behavior therapy movement. Since the 1950s, behavior therapy has been a refuge for the relative few who have taken seriously the possibility of basing clinical psychological practices on scientific guidelines. The major emphasis of the book may be best described as methodological. Many authors stressed the necessity of practitioners using scientifically satisfactory methods to monitor and evaluate services. Another standard prominently featured was that, whenever possible, only empirically validated treatments should be provided. The academic orientation of many contributors may be reflected in their faith in the scientist-practitioner model of training as the route to making practice more in line with scientific guidelines. The empirical evidence suggests that the strategy of attempting to train clinical scientists has not been conducive to widespread practice based on science. Will more or better training designed to make service providers scientists as well be more effective at bringing about psychological services that are routinely infused with scientific methods? I have my doubts. At the same time, I do not hesitate to recommend this volume to all with training responsibilities in clinical psychology and to students. (*Dennis J. Delprato, Eastern Michigan University*)