

Primary Nursing Un Modello Applicato

This report takes a partial look at the emerging European Higher Education Area (EHEA). It is partial in two ways: the selection of topics for consideration, and the type of information gathered for analysis.

This innovative text uses concrete examples and hands-on exercises to help readers clearly understand and apply the five steps of the nursing process. Wellness concepts and independent critical thinking, major emphases of this text, are incorporated into each step of the nursing process. Book provides extensive treatment of collaborative practice and delegation, critical thinking, case management and critical pathways. For those interested in understanding the nursing process within a framework for providing holistic care.

Breakthrough pain is a common occurrence in patients with cancer pain, and is often associated with a deleterious effect on daily life, impairing quality of life substantially. It is a heterogeneous condition, and management needs to be individualized. This valuable pocketbook discusses the clinical features of breakthrough cancer pain and the different strategies for management. It covers assessment, treatment, and reassessment. It also reviews the evidence for pharmacological interventions, like rapid onset opioids, as well as non-pharmacological interventions and disease modifying treatments. This new edition has been

thoroughly updated to account for recent developments within the field. These updates ensure that Cancer-Related Breakthrough Pain (Oxford Pain Management Library) continues to be an invaluable resource for specialists and trainees in palliative care and pain management, as well as being a quick reference guide for GPs, specialist nurses, and other healthcare professionals.

This publication is a derived version of the International Classification of Functioning, Disability and Health (ICF, WHO, 2001) designed to record characteristics of the developing child and the influence of environments surrounding the child. This derived version of the ICF can be used by providers, consumers and all those concerned with the health, education, and well being of children and youth. It provides a common and universal language for clinical, public health, and research applications to facilitate the documentation and measurement of health and disability in child and youth populations.--Publisher's description.

Human Science and Human Care : a Theory of Nursing Against Bioethics

Bate's Nursing Guide to Physical Examination and History Taking Lippincott CoursePoint Access Code Action science

Children & Youth Version : ICF-CY.

An International Perspective

Synergy for Clinical Excellence

The main objective of this work is to provide a book with high

quality content that becomes a reference and support for graduate course (Mental Health, Public Health and Epidemiology) and for research in the domain of health economics applied to mental health. Also this book might be useful for policymakers on formulating mental health policies. Key messages of this book are based on: a) mental illness represent a huge cost for society and for health care; b) health economics applied to mental health could help in the optimization of resource allocation for mental health care and for better decision making in terms of balancing costs and benefits; c) interventions and treatment should be also chosen in general medical practice and in public decision-policy according to cost-effectiveness, burden of disease and equity principles; d) quality of care is related with better outcomes, higher quality of life for clients, and with lower costs for society and health system (best value for money); e) it is possible to decrease the burden of mental disorders with cost-effective treatments. The book is divided in four main topics: 1. Introduction to Health Economics applied to Mental Health - this section is an overview of basic principles, concepts and methods used in Economics and Health Economics to enable students to make critical appraisal of Health Economics texts and also to design research studies in this topic. 2. Health Economics applied to the evaluation of quality and costs of Mental Health Services - this section presents results of Brazilian studies on the costs of mental health care (hospital, outpatient care, residential care, informal care), methods on the measurement of costs and it discusses issues related with public policies decisions and quality of mental health care in the low and middle income countries context. There is also an overview of quality indicators of mental health care and instruments to evaluate mental health services and costs. 3. Health Economics applied to evaluate treatment of mental disorders - This

section presents a review of cost-effectiveness of pharmacological treatments and other interventions applied for treating the most burdensome mental disorders such as depressive and anxiety disorders, bipolar disorders, psychosis, alcohol and drug disorders, dementia, and hyper attention deficit disorders. 4. Health Economics, burden and indirect costs of mental disorders - This section highlights the social and economic burden caused by mental illness under societal perspective focusing on stigma, unemployment, indirect costs in the workplace (absenteeism and presenteeism), the relationship between poverty and mental disorders, global health and social determinants of mental health and on the costs of mental disorders (depression, anxiety, psychosis, alcohol and drug disorders). We present some instruments to measure indirect costs of mental disorders.

Catheter Ablation of Atrial Fibrillation Edited by Etienne Aliot, MD, FESC, FACC, FHRS Chief of Cardiology, H ôpital Central, University of Nancy, France Michel Haïssaguerre, MD Chief of Electrophysiology, H ôpital Cardiologique du Haut-Lévêque, France Warren M. Jackman, MD Chief of Electrophysiology, University of Oklahoma Health Science Center, USA In this text, internationally recognized authors explore and explain the advances in basic and clinical electrophysiology that have had the greatest impact on catheter ablation of atrial fibrillation (AF). Designed to assist in patient care, stimulate research projects, and continue the remarkable advances in catheter ablation of AF, the book covers: the fundamental concepts of AF, origin of signals, computer simulation, and updated reviews of ablation tools the present practical approaches to the ablation of specific targets in the fibrillating atria, including pulmonary veins, atrial neural network, fragmented electrograms, and linear lesions, as well as the strategies in paroxysmal or chronic AF or

facing left atrial tachycardias the special challenge of heart failure patients, the impact of ablation on mortality, atrial mechanical function, and lessons from surgical AF ablation. Richly illustrated by numerous high-quality images, *Catheter Ablation of Atrial Fibrillation* will help every member of the patient care team.

This coherent presentation of clinical judgement, caring practices and collaborative practice provides ideas and images that readers can draw upon in their interactions with others and in their interpretation of what nurses do. It includes many clear, colorful examples and describes the five stages of skill acquisition, the nature of clinical judgement and experiential learning and the seven major domains of nursing practice. The narrative method captures content and contextual issues that are often missed by formal models of nursing knowledge. The book uncovers the knowledge embedded in clinical nursing practice and provides the Dreyfus model of skill acquisition applied to nursing, an interpretive approach to identifying and describing clinical knowledge, nursing functions, effective management, research and clinical practice, career development and education, plus practical applications. For nurses and healthcare professionals.

This comprehensive text provides clinicians with practical and evidence-based guidelines to achieve effective, patient-centered communication in the areas of cancer and palliative care. Written by an outstanding panel of international experts, it integrates empirical findings with clinical wisdom, draws on historical approaches and presents a state-of-the-art curriculum for applied communication skills training for the specialist oncologist, surgeon, nurse and other multi-disciplinary team members involved in cancer care today. In this book communication is broken down into key modules that cover the life-cycle of cancer care. They include

coverage of diagnosis and treatment including clinical trials, empathic support in response to distress, transition to survivorship or palliative therapies, discussion of prognosis, conduct of family meetings, and care of the dying.

Complementary training of patients in their communication with the doctor completes the interactive dyad. The art of teaching, impact of gender and power in the consultation and the ethical context are carefully considered. Special communication challenges include discussion of genetic risk, rehabilitative and salvage surgery, promotion of treatment adherence, unanticipated adverse outcomes, intercultural issues, fertility and sexuality. The value of decision aides, question prompt lists, audio-recording of consultations and use of the internet is illustrated. By looking across the full spectrum of disciplines involved in the multidisciplinary team, discipline-specific issues are considered by experts in each field. In this manner, the needs of patients and their relatives are evaluated, including paediatric and geriatric populations. To achieve all of this, theoretical models are examined from the medical school to the highly specialized practice, facilitation training and actor training are made explicit, and international approaches to communication skills training are compared and contrasted. Finally, research tools that assist in coding cancer consultations, evaluating training courses, and employing mixed methods in studies aid the reader in providing clear and sensitive communication when handling challenging situations whilst treating cancer sufferers and palliative care patients.

International Classification of Functioning, Disability, and Health

risultati della prima indagine nazionale

Safe Patient Handling and Movement

Conceptualization, Measurement and Intervention

The AACN Synergy Model for Patient Care

Higher Education in Europe 2009

Catheter Ablation of Atrial Fibrillation

Evil is not confined to war or to circumstances in which people are acting under extreme duress. Today it more frequently reveals itself in the everyday insensitivity to the suffering of others, in the inability or refusal to understand them and in the casual turning away of one's ethical gaze. Evil and moral blindness lurk in what we take as normality and in the triviality and banality of everyday life, and not just in the abnormal and exceptional cases. The distinctive kind of moral blindness that characterizes our societies is brilliantly analysed by Zygmunt Bauman and Leonidas Donskis through the concept of adiaphora: the placing of certain acts or categories of human beings outside of the universe of moral obligations and evaluations. Adiaphora implies an attitude of indifference to what is happening in the world - a moral numbness. In a life where rhythms are dictated by ratings wars and box-office returns, where people are preoccupied with the latest gadgets and forms of gossip, in our 'hurried life' where attention rarely has time to settle on any issue of importance, we are at serious risk of losing our sensitivity to the plight of the other. Only celebrities or media stars can expect to be noticed in a society stuffed with sensational, valueless information. This probing inquiry into the fate of our moral sensibilities will be of great

interest to anyone concerned with the most profound changes that are silently shaping the lives of everyone in our contemporary liquid-modern world.

This text explains the fundamental concepts of nursing, as developed throughout the years and looks at where nursing may be going in the future.

Examines the effects of social and economic change on the aging populations of Asia

Come si può continuare a lavorare alla stessa maniera di 50 anni fa quando le esigenze dei cittadini, le competenze dei professionisti e il contesto sanitario sono così radicalmente modificati? In questo scenario nasce la richiesta da parte degli infermieri di abbandonare la logica industrializzata del processo di assistenza infermieristica; tale logica prevede la frammentazione dell'intervento professionale in compiti e la distribuzione degli stessi nell'arco del turno di servizio. Questa situazione, diffusa nelle corsie italiane, non contribuisce al riconoscimento, da parte dei pazienti e dei loro famigliari, dell'infermiere quale professionista autonomo e responsabile, in grado di prendersi cura della persona e di pianificare il processo assistenziale ed educativo conseguente alla situazione clinico assistenziale accertata. Inoltre, se ciò non bastasse sono sempre più numerose le ricerche che individuano nell'espansione del ruolo delle professioni sanitarie una possibile

strategia per il miglioramento della sostenibilità dei sistemi sanitari internazionali. Il volume si rivolge agli operatori che hanno già maturato esperienze nell'ambito del primary nursing, che necessitano di un confronto e di una sistematizzazione di quanto fatto finora, nonché una risposta alle domande potenzialmente sorte nella pratica assistenziale quotidiana, ma anche agli operatori che non conoscono il modello e vi si avvicinano per la prima volta. Il volume può essere visto come un vero e proprio manuale d'uso, una guida per la corretta applicazione e realizzazione del primary nursing. Destinatari del presente testo sono però anche dirigenti e appartenenti al top e middle management, che potranno cogliere il valore e l'importanza del modello descritto, valutarne una sua applicazione all'interno delle proprie strutture sanitarie e rendersi conto degli effetti 'benefici' dell'introduzione delle nuove logiche organizzative legate ai concetti del primary nursing. Prefazione a cura del Prof. Umberto Veronesi, Direttore Scientifico dell'IRCCS Istituto Europeo di Oncologia, Milano. Introduzione a cura del Prof. Davide Croce, Direttore del Centro di Ricerca in Economia e Management in Sanità e nel Sociale (CREMS), Università Cattaneo - LIUC. Giorgio Magon Direttore SITRA - IRCCS Istituto Europeo di Oncologia, Milano, insegna all'Università degli Studi di Milano, è autore di testi e pubblicazioni di settore. Tiziana Suardi È

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World Report on Violence and Health

Infusion Nursing - E-Book

Special Educational Needs and Inclusive Practices

A Guide for Health Care Professionals

Palliative Care in Neurology

Moral Blindness

This report is part of WHO's response to the 49th World Health Assembly held in 1996 which adopted a resolution declaring violence a major and growing public health problem across the world. It is aimed largely at researchers and practitioners including health care workers, social workers, educators and law enforcement officials.

This report is based on an exhaustive review of the published literature on the definitions, measurements, epidemiology, economics and interventions applied to nine chronic conditions and risk factors.

This book presents real-world decision support systems, i.e., systems that have been running for some time and as such have been tested in real environments and complex situations; the cases are from various application domains and highlight the best practices in each stage of the system's life cycle, from the initial requirements

analysis and design phases to the final stages of the project. Each chapter provides decision-makers with recommendations and insights into lessons learned so that failures can be avoided and successes repeated. For this reason unsuccessful cases, which at some point of their life cycle were deemed as failures for one reason or another, are also included. All decision support systems are presented in a constructive, coherent and deductive manner to enhance the learning effect. It complements the many works that focus on theoretical aspects or individual module design and development by offering 'good' and 'bad' practices when developing and using decision support systems. Combining high-quality research with real-world implementations, it is of interest to researchers and professionals in industry alike.

For many health care professionals and social service providers, the hardest part of the job is breaking bad news. The news may be about a condition that is life-threatening (such as cancer or AIDS), disabling (such as multiple sclerosis or rheumatoid arthritis), or embarrassing (such as genital herpes). To date medical education has done little to train practitioners in coping with such situations. With this guide Robert Buckman and Yvonne Kason provide help. Using plain, intelligible language they outline the basic principles of breaking bad news and present a technique, or protocol, that can be easily

learned. It draws on listening and interviewing skills that consider such factors as how much the patient knows and/or wants to know; how to identify the patient's agenda and understanding, and how to respond to his or her feelings about the information. They also discuss reactions of family and friends and of other members of the health care team. Based on Buckman's award-winning training videos and Kason's courses on interviewing skills for medical students, this volume is an indispensable aid for doctors, nurses, psychotherapists, social workers, and all those in related fields.

A Four-country Comparative Study

An Evidence-Based Approach

Case Studies

Excellence and Power in Clinical Nursing Practice

The Practice of Primary Nursing

Manual for Administration, Scoring, and Interpretation

How To Break Bad News

Palliative care is the duty of every neurologist: however, to date, this has not been a standard feature of neurological practice or training. This book helps define a new field, namely palliative care in neurology. It brings together all necessary information for neurologists caring for a patient with advance disease.

Patient engagement should be envisaged as a key priority today to innovate healthcare services delivery and to make it more effective

and sustainable. The experience of engagement is a key qualifier of the exchange between the demand (i.e. citizens/patients) and the supply process of healthcare services. To understand and detect the strategic levers that sustain a good quality of patients' engagement may thus allow not only to improve clinical outcomes, but also to increase patients' satisfaction and to reduce the organizational costs of the delivery of services. By assuming a relational marketing perspective, the book offers practical insights about the developmental process of patients' engagement, by suggesting concrete tools for assessing the levels of patients' engagement and strategies to sustain it. Crucial resources to implement these strategies are also the new technologies that should be (1) implemented according to precise guidelines and (2) designed according to a user-centered design process. Furthermore, the book describes possible fields of patients' engagement application by describing the best practices and experiences matured in different fields

Jean Watson's first edition of Nursing, now considered a classic, introduced the science of human caring and quickly became one of the most widely used and respected sources of conceptual models for nursing. This completely new edition offers a contemporary update and the most current perspectives on the evolution of the original philosophy and science of caring from the field's founding scholar. A core concept for nurses and the professional and non-professional people they interact with, "care" is

one of the field's least understood terms, enshrouded in conflicting expectations and meanings. Although its usages vary among cultures, caring is universal and timeless at the human level, transcending societies, religions, belief systems, and geographic boundaries, moving from Self to Other to community and beyond, affecting all of life. This new edition reflects on the universal effects of caring and connects caring with love as the primordial moral basis both for the philosophy and science of caring practices and for healing itself. It introduces Caritas Processes, offers centering and mediation exercises on an included audio CD, and provides other energetic and reflective models to assist students and practitioners in cultivating a new level of Caritas Nursing in their work and world.

The Wartegg Drawing Completion Test (WDCT) is a semi-structured, graphic, performance-based personality test, created by Ehrig Wartegg (1939). With a foundation in Gestalt and Psychodynamic theory, the WDCT has been used widely throughout Europe, South America, and Japan, but only recently has become available in the United States. Initial scoring systems for the WDCT were considered cumbersome and lacked research-driven validation. In response to these factors, Alessandro Crisi, following years of clinical practice and research, developed the Crisi Wartegg System (CWS; 1998, 2007), a normed and standardized administration, scoring, and interpretation system for the WDCT. Over the

past three decades, Dr. Crisi has refined and expanded the CWS through research, broadening the scope of the measure, and increasing the accessibility of the system to clinicians. This manual provides a comprehensive guide to the CWS, made available to English-speaking clinicians for the first time.

National Early Warning Score (NEWS)

The Well-being of the Elderly in Asia

A Practical Guide for Health Care Professionals

Designing Autonomy at Home. The ADA Project.

An Interdisciplinary Strategy for Adaptation of the Homes of Disabled Persons

Patient Engagement

The Crisi Wartegg System (CWS)

The Loss of Sensitivity in Liquid Modernity

Primary nursing. Un modello

applicato Primary Nursing Maggioli Editore

Print+CourseSmart

"This classic book discusses the balance between science and caring that is the basis of the nursing profession. Watson's Theory of Human Care draws from the works of Western and Eastern philosophers, approaching the human care relationship as a moral idea that includes concepts such as phenomenal field, actual caring occasion, and transpersonal caring. Inherent in this theory are concepts of health and illness, the environment, and the universe."--Back cover.

With a new focus on evidence-based practice, the 3rd edition of this authoritative reference covers every aspect of infusion therapy and can be applied to any clinical setting.

Completely updated content brings you the latest advances in equipment, technology, best practices, guidelines, and patient safety. Other key topics include quality management, ethical and legal issues, patient education, and financial considerations. Ideal as a practical clinical reference, this essential guide is also a perfect review tool for the CRNI examination. Authored by the Infusion Nurses Society, this highly respected reference sets the standard for infusion nursing practice. Coverage of all 9 core areas of INS certification makes this a valuable review resource for the examination. Material progresses from basic to advanced to help new practitioners build a solid foundation of knowledge before moving on to more advanced topics. Each chapter focuses on a single topic and can serve as a stand-alone reference for busy nursing professionals. Expanded coverage of infusion therapy equipment, product selection, and evaluation help you provide safe, effective care. A separate chapter

on infusion therapy across the continuum offers valuable guidance for treating patients with infusion therapy needs in outpatient, long-term, and home-care, as well as hospice and ambulatory care centers. Extensive information on specialties addresses key areas such as oncology, pain management, blood components, and parenteral nutrition. An evidence-based approach and new Focus on Evidence boxes throughout the book emphasize the importance of research in achieving the best possible patient outcomes. The user-friendly design highlights essential information in handy boxes, tables, and lists for quick access. Completely updated coverage ensures you are using the most current infusion therapy guidelines available.

*The Philosophy and Science of Caring,
Revised Edition*

Cancer-Related Breakthrough Pain

*Critical CALL – Proceedings of the 2015
EUROCALL Conference, Padova, Italy*

*Standardising the Assessment of Acute-
Illness Severity in the NHS*

*Gender, Erudition, and Republican Thought
Mental Health Economics*

Parental Alienation, DSM-5, and ICD-11

*On January 6, 1537, Lorenzino de' Medici
murdered Alessandro de' Medici, the duke of*

Florence. This episode is significant in literature and drama, in Florentine history, and in the history of republican thought, because Lorenzino, a classical scholar, fashioned himself after Brutus as a republican tyrant-slayer. Wings for Our Courage offers an epistemological critique of this republican politics, its invisible oppressions, and its power by reorganizing the meaning of Lorenzino's assassination around issues of gender, the body, and political subjectivity. Stephanie H. Jed brings into brilliant conversation figures including the Venetian nun and political theorist Archangela Tarabotti, the French feminist writer Hortense Allart, and others in a study that closely examines the material bases—manuscripts, letters, books, archives, and bodies—of writing as generators of social relations that organize and conserve knowledge in particular political arrangements. In her highly original study Jed reorganizes republicanism in history, providing a new theoretical framework for understanding the work of the scholar and the social structures of archives, libraries, and erudition in which she is inscribed.

This comprehensive review of scientific research supporting evidence of the relationship between cardiac disease and psychological condition offers practical suggestions for developing a clinical practice, and proposes directions for future research in the new field of "cardiac psychology". Every chapter is written by world-renowned researchers in the field. A

theoretical and practical guide, it will interest physicians, clinical and health psychologists, and all professionals who seek to understand the mind-health link.

The evidence-based medicine movement has been one of the most important influences on medicine in the latter half of the 1990s. This textbook on evidence-based decision-making--basing clinical decisions on the best available evidence from systematic research--is ideal for healthcare, medical, and nurse managers. It explains how evidence-based decision making can be applied to health policy and management decisions about groups of patients and populations, rather than decisions about the treatment of individuals. Its first edition was well reviewed and highly successful, and this new edition builds upon the success of the first.

The theme of the conference this year was Critical CALL, drawing inspiration from the work carried out in the broader field of Critical Applied Linguistics. The term 'critical' has many possible interpretations, and as Pennycook (2001) outlines, has many concerns. It was from these that we decided on the conference theme, in particular the notion that we should question the assumptions that lie at the basis of our praxis, ideas that have become 'naturalized' and are not called into question. Over 200 presentations were delivered in 68 different sessions, both in English and Italian, on topics related specifically to the theme and also more general CALL topics. 94 of these were

submitted as extended papers and appear in this volume of proceedings.

***Clinical Psychology and Heart Disease
Developments in the Bologna Process
Nursing***

Nursing Process and Critical Thinking

Spiritual Well-Being of Chinese Older Adults

La professionalità del care infermieristico

To be a Nurse

"Today, school is becoming a rapidly changing learning environment. Thinking about students as a homogeneous population is no longer allowed, as diversity – in terms of culture, language, gender, family organisation, learning styles and so on – has emerged as a key challenge for education today. The debate on Special Educational Needs largely reflects this challenge, as working in school implies careful reconsideration of what we mean by “ normal ” and “ special ” . Current educational intervention is generally based on a deficit and “ within-child ” model of facing SEN, whereas very little attention is given to the role of learning environments. The focus is on the child more than on the whole class, and on cognition and technical provisions more than on affective, sociocultural and community dimensions of learning. Conversely, regarding students and their needs as “ hidden voices ” allows us to adopt a transformative approach which sees diversity as a stimulus for the development of educational practices that might benefit all children and help school to become an inclusive and “ moving ” organisation. The aim of the book is twofold: on the one hand, it offers a systematic overview of the inclusive

education state-of-the-art in six countries (Germany, Italy, Norway, Sweden, UK, and USA) based on the contributions by well-known scholars such as Christy Ashby, Barbara Brokamp, Fabio Dovigo, Kari Nes, Mara Westling Allodi, Tony Booth, and Beth Ferri; on the other hand, the book analyses five cases of good practices of inclusion related to different subjects and school levels." Argues that applied bioethics should embrace utilitarian decision analysis, thus avoiding recommendations expected to do more harm than good.

The Practice of Primary Nursing: Relationship-Based, Resource-Driven Care Delivery updates on where Primary Nursing fits in today's health care climate. Originally started at the University of Minnesota Hospitals in 1968, Primary Nursing has been used by many hospitals in the U.S., Canada, and the World. This new edition thoroughly explains the four important operating elements of Primary Nursing and outlines the actual steps taken at the unit level for successful implementation. Today's hospital needs the type of relationship-based care delivery that Primary Nursing provides. Winner of the 2002 American Journal of Nursing Book of the Year Award!

There are several unique features of this book on the spiritual well-being of Chinese older adults. First, based on qualitative methodology, a conceptual model of spiritual well-being was proposed. Besides, through a Delphi study, different dimensions of spiritual well-being were identified. Conceptually, such effort is important because there is a general lack of well-articulated models of spiritual well-being for Chinese people.

Although Western models can be “transplanted” to Chinese contexts, indigenous concepts are needed. As such, this is a pioneer conceptual contribution. Second, the author developed and validated the Spiritual Scale for Chinese Elders. In view of the lack of related measurement tools in the field, this is a pioneer attempt which is important for social work education, research and practice. Third, a Spiritual Enhancement Group for Chinese Elders was developed and its effectiveness was evaluated. In contrast to ordinary elderly programs, this program was based on solid theoretical grounds. In addition, process evaluation and outcome evaluation were conducted. The intervention program is a beautiful link between theory and practice whereas the evaluation is a good outgrowth of practice. The present project is especially valuable because evidence-based practice is at its infancy in different Chinese communities.

A Practical Approach, Pageburst E-book on Knowledge-Based Real-World Decision Support Systems

Primary Nursing

Critical Thinking, Clinical Reasoning and Clinical Judgment

Primary nursing. Un modello applicato

Handbook of Communication in Oncology and Palliative Care

The Costs and Benefits of Psychiatric Care

An essential reference for nursing students in developing and implementing the competencies necessary in caring for critically ill patients. Includes sample test questions relevant to the

model that will assist nursing students in preparing for certification through AACN.

Parental alienation is an important phenomenon that mental health professionals should know about and thoroughly understand, especially those who work with children, adolescents, divorced adults, and adults whose parents divorced when they were children. In this book, the authors define parental alienation as a mental condition in which a child - usually one whose parents are engaged in a high- conflict divorce - allies himself or herself strongly with one parent (the preferred parent) and rejects a relationship with the other parent (the alienated parent) without legitimate justification. This process leads to a tragic outcome when the child and the alienated parent, who previously had a loving and mutually satisfying relationship, lose the nurture and joy of that relationship for many years and perhaps for their lifetimes. We estimate that 1 percent of children and adolescents in the U.S. experience parental alienation. When the

phenomenon is properly recognized, this condition is preventable and treatable in many instances. The authors of this book believe that parental alienation is not simply a minor aberration in the life of a family, but a serious mental condition. Because of the false belief that the alienated parent is a dangerous or unworthy person, the child loses one of the most important relationships in his or her life. This book contains much information about the validity, reliability, and prevalence of parental alienation. It also includes a comprehensive international bibliography regarding parental alienation with more than 600 citations. In order to bring life to the definitions and the technical writing, several short clinical vignettes have been included. These vignettes are based on actual families and real events, but have been modified to protect the privacy of both the parents and children.

Adherence to Long-term Therapies

Evidence-based Healthcare

Evidence for Action

Wings for Our Courage

**From Novice to Expert
A Consumer-Centered Model to Innovate
Healthcare**