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Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Part I: Snapshot from the Field -- Introduction: Definitions, Scope, and Impact of Nonadherence -- Conceptualizing Adherence -- Barriers and Facilitators -- Interventions to Promote Adherence -- The Importance of Development: Early and Middle Childhood -- Adherence in Adolescence -- The Role of Parents -- Poverty, Stress, and Chronic Illness Management -- Racial/Ethnic Disparities and Adherence -- Part II: Implications for Policy and Practice -- Rethinking Self-Management -- Healthcare Partnerships -- Part III: Looking Ahead -- Screening for Nonadherence in Pediatric Patients -- A Comprehensive Behavioral Health System for Identifying and Treating Nonadherence -- Pulling it All Together: Clinical Conclusions.

Sommario/riassunto

This timely professional reference and educational resource applies current concepts of pediatric adherence to medical treatment to create a model for a family-centered, collaborative approach to managing chronic illness. At its core are the latest findings on adherence: the factors that encourage it, the barriers that derail it, and the most effective interventions for its improvement. The book's developmental lens highlights how adherence waxes and wanes across different stages of childhood and adolescence, and specialized chapters analyze social realities exacerbating adherence problems. And its end product is a framework for how patients, parents/caregivers, and providers can work together effectively for improved adherence and optimum outcomes. Included in the coverage: The scope and impact of nonadherence. Poverty, stress, and chronic illness management. Racial/ethnic health disparities and adherence. Reconsidering the idea of self-management. . . . Screening for nonadherence in pediatric patients. . . . A comprehensive behavioral health system for identifying and treating nonadherence. Healthcare Partnerships for Pediatric Adherence offers relevant contemporary perspective for pediatricians looking for new ways to reduce treatment failure, improve support to patients and their families, and promote patient involvement in their own care. . . .
