In 2005, *Meeting Children's Psychosocial Needs Across the Health-Care Continuum* was introduced as a text for both students and professionals with an interest in providing care for children and their families in the health care environment. Since the book’s inception, it has steadily gained popularity as a foundational work. In its second edition, *Meeting Children's Psychosocial Needs Across the Health-Care Continuum* (2018) persists as a staple for child life students and professionals seeking to enhance their knowledge of issues faced by children and families within an ever-evolving health care climate. The beauty of this text lies in its ability to appeal to emerging professionals and seasoned practitioners alike, while its efficacy is attributed to a straightforward yet comprehensive approach. Though chapters can be studied individually, they are intended as part of the overall collective of core competencies essential to the psychosocial clinician.

In the book’s preface, Rollins and colleagues (2018) establish “a renewed interest in ‘healing’ health care to complement ‘curing’ health care” as an impetus behind the volume’s re-issue (p. xxi). This theme is apparent throughout the work, amply supported by theory, updated research, and applicable strategies guided by evidence-based practice. For example, Chapter 3, “Play in Children's Health-Care Settings,” opens with an extensive review of theory-based fundamentals of play, considers research spanning the last seven decades, provides practical information for facilitation guided and supported by literature, and ends with a segment called “Playing Into the 21st Century.” This section discusses a “renewed interest in play” (p. 105) that is boosted by research on brain development, and is projected to remain of interest in the coming years. Bolig closes out the chapter with a thought-provoking look at how advances in society have shaped children’s health care experiences thus far, and presents prospective challenges for those who will provide play experiences for future generations in this setting—namely child life specialists. Though the idea of play theory is longstanding, this text delivers information in a manner that feels relevant to current times, while piquing the reader’s interest in an inevitable evolution to meet the ever-changing needs of children.

The main text is composed of 13 chapters authored by nine contributors, each bringing expertise from varying disciplines, all with the overarching goal of promoting the well-being of children and families. The authors’ professional diversity provides a well-rounded platform for this practical guide. Focused on a specific aspect of children’s health care, each chapter begins with a list of learning objectives and ends with a study guide aimed at “testing” the reader’s comprehension of the presented material. Chapter appendices offer accessible resources and references complementary to the subject matter.

New to this edition is Chapter 13, “Promoting Children's Well-Being in the Community.” This section explores environmental factors impacting the physical, social, and mental well-being of children within the framework of the bioecological systems model. Chapter authors Rollins and Mahan examine family stressors, violence, substance use, media, mental illness, and disasters as influences on psychosocial health and further discuss agents of change on both individual and system levels. Topics such as unaccompanied children of refugee and migrant families and cyberbullying are addressed, speaking to the authors’ efforts to incorporate current issues and their impact on children and families.

Of note throughout the text is the collection of inset figures, tables, text boxes, and case studies; all are clearly marked in chronological order by chapter and indexed by type in the “Illustrations” page for ease of lo-
cation. These illustrations complement each chapter’s content by equipping readers with straightforward information that moves seamlessly from the page to practical application and are translatable across a wide variety of settings as well as level of child life practitioner experience. For instance, Chapter 6, “The Child Who is Dying,” features illustrations that range from a simple list of adolescent behaviors separated into “normal” and “red flag” categories to an in-depth two-page outline that walks through how to prepare a child for a sibling’s death in the intensive care unit. Most of these illustrations can be used in more than one way depending on individual child and family needs. For instance, a child life specialist could use the adolescent grief list in directly assessing for positive coping, and also as a guide for assisting caregivers in understanding what behaviors are considered concerning.

The table “Children’s Understanding of Death by Age” goes a step beyond delineating common perceptions and reactions to death and imparts suggestions for appropriate intervention. This table, reprinted from *Core Curriculum for the Nursing Care of Children and Their Families* (Pearson, 1999), adds a brief case scenario to each developmental age range that offers a window into a child’s thoughts and feelings through descriptions of conversations and observed behaviors. For child life specialists new to the concepts of supporting children dealing with death, these true-to-life scenarios are a non-threatening introduction to the reality that lies ahead. For experienced child life practitioners, these scenarios stand as a prompt for critical thinking in assessing the “why” behind the presented behavior. Moving through the remainder of the information provided in the table allows beginners to inform their practice, while more skilled readers can gauge their assessments against the recommended approaches and interventions.

This “something for everybody” style is a consistent feature from chapter to chapter, which enhances the book’s overall value in both the classroom and professional setting. For example, Chapter 7’s text box, “Brief Guidelines for Working with Same-Sex-Parented Families in Health-Care Settings,” provides frontline practitioners with concrete tools for working with these families, while the “Family Life-Cycle Stages” text box is a resource targeted for readers who are in the early stages of studying family theories.

As a means to promote forward thinking, the book’s epilogue reinforces the importance of adjusting our clinical lens in order to adapt to the continuously changing model of children’s health care. Rollins provides a glimpse into the hypothetical future and posits potential issues impacting providers of psychosocial services to children and families. These predictions are foreshadowed by current trends encompassing factors such as research, mental health, staffing, and the movement toward health care systems and preventive medicine. The impact that each of these elements has on the child life profession is evident, none more so than the cited effect that the United States’ current shortage of pediatric sub-specialists has on the psychosocial welfare of children. Despite recognition from the American Academy of Pediatrics in their Child Life Policy Statement (American Academy of Pediatrics Committee on Hospital Care & Child Life Council, 2014), without further buy-in from families, implementation of child life as a standard of care cannot be integrated into health care budgets. This is a clear call to action for child life specialists to increase efforts to educate the public on the benefits of child life intervention for children, families, and the health care system as a whole. *Meeting Children’s Psychosocial Needs Across the Health-Care Continuum* provides theories, evidence, and resources vital to equipping both current and future child life specialists with the knowledge needed to continue the push toward child life services as an established standard of care for all children and families.

The book carries a hefty price tag which could serve as a barrier, especially for students; however, the wealth of information contained in its chapters justifies the purchase. While the second edition is successful in keeping the book current through inclusion of more recent research and the additional chapter, “Promoting Children’s Well-Being in the Community,” those who already own the first edition do not necessarily need to own the second. An exception to this would be individuals who are using this text as a resource in a setting requiring the most up-to-date research. Though briefly mentioned within the context of other topics, the text would have benefited from a dedicated chapter on complementary therapies, such as healing touch and pet therapy, as child life specialists often make these interventions available on their units.
Regardless of experience level or setting, this book serves as a valuable resource to individuals involved in the care of children and families impacted by healthcare. Similar to the earlier edition, this updated text succeeds in offering practical evidence-based knowledge presented in a clear and easy-to-access format. The integration of current research and thoughtful consideration of projected future implications further secure this book’s position as a relevant, vital resource for child life specialists for years to come.

References
