Mental Health

A person-centred approach

Second edition

The second edition of *Mental Health: A person-centred approach* adopts an all-encompassing approach to engaging with, responding to and supporting people with mental illness and substance abuse. This substantially updated edition incorporates the latest mental health research, including a new chapter focusing on psychotropic medicines, while retaining the strong narrative approach of the first edition. Readers are encouraged to connect theory, practice and the lived experiences of consumers and carers.

Each chapter includes learning objectives, reflective questions, critical thinking questions, learning activities and further reading. 'Translation to practice' boxes consolidate key concepts and help to equip students with the requisite knowledge to become mental health practitioners. The diverse range of consumer and carer perspectives enhances readers' understanding of the process of recovery from mental illness, the use of mental health services and the provision of mental health support, by encouraging them to make human connections as they read.

Written by an expert author team, *Mental Health* remains an essential resource for students, supporting the development of safe, high-quality, person-centred care in both the Australian and New Zealand contexts.

Nicholas Procter is Professor in the School of Nursing and Midwifery and the Inaugural Chair: Mental Health Nursing at the University of South Australia.

Helen P. Hamer is an independent consultant with many years of experience in mental health nursing, and holds honorary lecturer positions at the University of Auckland and Yale University.

Denise McGarry is lecturer in mental health nursing in the School of Nursing, Midwifery and Paramedicine at Australian Catholic University.

Rhonda L. Wilson is Associate Professor of e Mental Health in the Faculty of Health Services at the University of Southern Denmark. She is an adjunct Associate Professor mental health nurse at the University of New England and at the Torrens Resilience Institute.

Terry Froggatt is Head of Health and Social Wellbeing at the Nan Tien Institute and Senior Honorary Fellow at the University of Wollongong.

Mental Health

A person-centred approach

Second edition

Edited by
Nicholas Procter
Helen P. Hamer
Denise McGarry
Rhonda L. Wilson
Terry Froggatt

CAMBRIDGE
UNIVERSITY PRESS

CAMBRIDGE
UNIVERSITY PRESS

University Printing House, Cambridge CB2 8BS, United Kingdom

One Liberty Plaza, 20th Floor, New York, NY 10006, USA

477 Williamstown Road, Port Melbourne, VIC 3207, Australia

314–321, 3rd Floor, Plot 3, Splendor Forum, Jasola District Centre, New Delhi – 110025, India

103 Penang Road, #05–06/07, Visioncrest Commercial, Singapore 238467

Cambridge University Press is part of the University of Cambridge.

It furthers the University's mission by disseminating knowledge in the pursuit of education, learning and research at the highest international levels of excellence.

www.cambridge.org
Information on this title: www.cambridge.org/9781316620205

First published 2014
Second edition 2017 (version 3, October 2021)

Cover designed by eggplant communications
Typeset by Integra Software Services Pvt. Ltd
Printed in Singapore by Markono Print Media Pte Ltd, August 2021

A catalogue record for this publication is available from the British Library

A catalogue record for this book is available from the National Library of Australia

ISBN 978-1-316-62020-5 Paperback

Please be aware that this publication may contain several variations of Aboriginal and Torres Strait Islander terms and spellings; no disrespect is intended. The terms 'Indigenous Australian' and 'Aboriginal and Torres Strait Islander peoples' may be used interchangeably in this publication.

Foreword: Carer

In 2013, I was waiting to turn right at the traffic lights when I suddenly became aware of a young man standing at the pedestrian crossing on the opposite side of the road. I looked again at the handsome face. The blonde hair cut in a style I remember so well. He was wearing blue jeans and a denim jacket. My heart skipped a beat. Once again, the universe had found a way to bring him back to me for a few moments. My son, Nicholas. My son who, in November 2000, had died in the psychiatric ward of a public hospital in Adelaide. He was 26 years old.

I'd visited Nicholas in hospital shortly before he died. We went for a walk in the grounds of the hospital that day, and I noticed one of the other patients, an elderly woman, was following us. We sat down on a bench and the woman came and stood close by. After a while Nicholas got up and walked over to the woman. He put his hand on her arm very gently and in a quiet voice I heard him say, 'My mother and I are having some time together, would you mind very much moving further away?' The woman nodded and without speaking moved away a little. We started to talk but we were interrupted again; this time the woman had started to sing. Looking over at Nicholas she sang to him. The words of the song were: 'A certain smile, a certain place can lead an unsuspecting heart on a merry chase.' It was an unlikely serenade but he listened attentively to her until she finished singing, then he turned back to me, and we continued our conversation.

At that moment I knew that despite the illness, his essential kindness hadn't left him. That despite the illness, the essence of Nicholas had not changed. I knew, too, that he'd let her know that she mattered. Was valued. He did it by listening to her story. A story that she had sung to him with the words of an old love story.

In this book you will meet courageous men and women who live with mental illness, and also the people who love and care for them. You will come to know their experiences through reading their stories. It has taken trust for them to share their stories; a trust in you, that as you read them it will be with an open as well as an inquiring mind.

Are stories important? My children when they were little seemed to think so. 'Tell me a story,' was a favourite way for them to push back the night, to delay the lights being put out, or to chase away a bad dream with a happy-ever-after ending.

As a young wife and mother of newly born twins and a little one-year-old daughter, Sarah, one of my favourite times was when an invitation would come from my kindly neighbour, Vivian, to 'put the kettle on'. I'd bundle the children into the big old pram and set off to her house across the road.

Sarah had been born with a major heart abnormality and was often in need of urgent medical attention. I was often anxious in those days, and the chance to talk it over with my neighbour, to 'tell her my story' was a great release. 'Tell me about it,' Vivian would say and sitting in the sunny family room, drinking cups of tea, I'd tell her about the worries of the day.

Often, it concerned me not being able to coax Sarah to eat or even drink very much. The medication that was prescribed to help regulate her little heart also had the unfortunate side-effect of being an appetite suppressant.

'Is her colour too pale? Do her little fingers look blue to you?' I'd want to know. Sometimes, all I needed was simply reassurance that all was well. At other times we would decide that maybe it was best to call in the local doctor to have a look at Sarah. But always it was that listening ear – as well as wise counsel that my friend gave me – that was important to me.

The founders of Alcoholics Anonymous believed stories were important. The remarkable program of recovery from addiction devised by them includes the regular attendance of members at meetings, where they are encouraged to tell their stories and to listen to the stories of others. Along with the 12 steps or suggestions it is in the listening and in the telling of stories that Bill Wilson and Dr Bob believed a transformation could occur.

'Is it real or is it pretend?' my children would ask me sometimes as I'd start the bedtime story. The day that Nicholas arrived at my apartment and, looking wildly around, produced a notepad and pen and wrote 'Don't talk. We are being monitored by agents … ' I knew that the pretend story he was writing was very real to him. I tried to reassure him that he was safe, but the words I wrote on the notepad that he gave me didn't help him. I knew that he was very ill, that something was terribly wrong. Eventually, I phoned a friend and together we managed to get Nicholas into my car and drove to the hospital. He was admitted immediately. A few hours later I was told that he'd been transferred to a psychiatric ward and that the diagnosis was drug-induced psychosis.

Nicholas was 22 years old when this first admission occurred. He'd been studying at university and had an ambition to become a writer. But after this time his life changed; there were more hospital admissions and he was diagnosed with mental illness and drug dependency – comorbidity.

Over the following four years there were some periods of relative well-being. Nicholas spent a number of times at a Buddhist retreat in New South Wales and learned the practice of meditation. He travelled to India and Nepal. He fell in love and told me that one day they would have an amazing child together. He tried to get back to studying again.

But drugs came back into his life, and this time the anti-psychotic medication he'd been prescribed was not effective. Nicholas rang me to tell me that he'd decided to go into hospital as a voluntary patient, to be introduced to a drug his doctor advised might help him. 'Clonazepam does have risks of major side-effects and would need to be carefully monitored', I was advised by his doctor. 'It's worth a try, Mum', he told me as I drove with him to the hospital. He was admitted and commenced the process of coming off one anti-psychotic medication and being introduced to another.

Sometime later Nicholas rang me from the hospital. 'I've decided to quit drugs, Mum, and I'm going to start a methadone treatment tomorrow.' He went on to explain that it was all arranged. The hospital would organise a taxi to take him to the nearby clinic, and then after he'd been given the methadone a taxi would be called to return him back to the hospital. He'd decided to turn his life around. A new medication for the mental illness and a new treatment to come off heroin. He rang me the night before he died and we talked about the new treatments. We ended the call as we always did: 'I love you, Mum', he told me. 'And I love you too, Nicholas … '

Three days after starting the methadone treatment combination with Clonazepam Nicholas was found dead on the floor near his hospital bed. The autopsy result was death due to mixed drug toxicity. A coroner's report two years later resulted in a verdict of 'accidental death by drug toxicity', with strong recommendations of changes to procedures by hospital administration in relation to treatment of drug withdrawal combined with certain anti-psychotic drugs.

A week after Nicholas died I had a call from the hospital's social worker, who offered to deliver his possessions that were left at the hospital. They were given to me in a green plastic bin-liner. His doona with a large blood stain. Although I'd read in the autopsy report of the internal haemorrhage he'd had moments before he died, I had not understood that reality until I saw the blood-stained doona. His Doc Martens. Blue jeans. A denim jacket. A tee shirt with 'Champion' written across the front. A portable chess set. A transistor radio. A writing pad and biro. The book he'd been

reading, with a piece of paper folded as a bookmark, Gore Vidal's *Judgement of Paris*. There was also a black wallet I'd given him a few years earlier. Neatly tucked into one of the folds was a receipt. It was dated two days before he died. It was a receipt for a layby; a $5 deposit on a black leather jacket at St Vincent de Paul's Opportunity Shop. The shop was near the clinic where Nicholas had gone to receive the methadone treatment.

In those last days he'd been creating a new life for himself –

A new medication to take away the psychosis

A way out of dependency on drugs

And a new-to-him black leather jacket to wear.

He'd been creating a happy-ever-after ending to his story.

To all the students reading this book, I wish you every success with your studies. It's my belief that mental illness is one of the great challenges of our time. To find a cure for schizophrenia. A medication without major side-effects. To care for people with mental illness in times of crisis with insight and compassion … these are my hopes for you.

Margaret O'Donnell

Foreword: Consumer

The best nurse I ever had walked beside me and never got in my way. She would appear unobtrusively by my side and gently encourage me to get off my bed and go for walks with her. She hardly said a thing to me, but I could feel her calmness and acceptance through all the static of my distress. Other nurses got in my way; they tore off my blankets, threatened me, berated me for being inappropriate or for not facing the world, or gave me strange looks when I expressed my pain.

In their training and professional development, nurses learn many things – much of it is irrelevant to the experience of the person using the service. I do not remember any of the nurses I encountered for their professional skills. But I do remember them for their human qualities. Above all, I remember the nurses who were kind and compassionate.

Compassion is hard to teach and impossible to enforce, but it is the single most important attribute any mental health professional needs to develop. Compassion means being able to stand in the shoes of the other and be with the person in her or his distress. It allows the helper to stand on the ledge between deflecting the other person's pain and losing herself or himself in it. Compassion takes a strong sense of self, patience and an acceptance of difference.

Unfortunately, compassion cannot thrive in services that control people and pathologise their experience. A recovery based, trauma-informed service promotes people's autonomy, respects their subjectivity and does not tolerate iatrogenic harm; this is the best setting for compassion to grow. Wherever we work in the mental health system we have a responsibility to foster compassion, not only in our one-to-one relationships with the people who use the service and our colleagues, but in creating a service environment that encourages empowering and respectful relationships at all levels. A person-centred service is meaningless without compassion.

Mental Health: A person-centred approach is a recovery based text for undergraduate nurses in Australia and New Zealand. This book is a compass on your journey to becoming a mental health nurse whose compassion service users will remember.

Mary O'Hagan

Contents

About the authors

Editors

Nicholas Procter PhD MBA GradDip Adult Ed BA CertAdvClinNsg RN CMHN. Nicholas is the University of South Australia's Inaugural Chair: Mental Health Nursing and convenor of the Mental Health and Substance Use Research Group, located within the Sansom Institute for Health Research. He is also an adjunct professor at the University of Tasmania.

Helen P. Hamer is an independent consultant with many years of experience in mental health nursing, and Fellow of *Te Ao Maramatanga*: New Zealand College of Mental Health Nurses. Helen's research focuses on citizenship, social justice and social inclusion for people with mental health problems. Helen is recognised internationally as a leader in the development of consumers as co-researchers and academics, and the facilitation of recovery-focused and trauma-informed practice. Helen holds honorary lecturer positions at the University of Auckland, School of Nursing and at Yale University, Programme for Recovery and Community Health, Department of Psychiatry.

Denise McGarry is a credentialled mental health nurse and a fellow of the Australian College of Mental Health Nurses. She teaches at the Australian Catholic University in the School of Nursing, Midwifery and Paramedicine as a lecturer in mental health nursing. In this capacity she enjoys working with nursing and paramedic students.

Rhonda L. Wilson RN BNSc NM(Hons) PhD. Rhonda is Associate Professor of e Mental Health at the Institute of Clinical Research, Unit of Telepsychiatry e Mental Health, Faculty of Health Services, University of Southern Denmark, in Odense, Denmark. She is an adjunct academic mental health nurse at the University of New England, in Armidale New South Wales, and at the Torrens Resilience Institute, Flinders University, in Adelaide. Rhonda has a wide experience in clinical mental health nursing in rural and regional Australia, and in teaching nursing and mental health curricula to undergraduate and postgraduate students. Her focus in mental health research is to develop and conduct clinical trials of innovative digital interventions to promote mental health, well-being and recovery to diverse and hard-to-reach populations across the world.

Terry Froggatt PhD MSc BHA FAIM RN MHN FACMHN JP. Terry is Head of Health and Social Wellbeing at the Nan Tien Institute, overseeing postgraduate degree courses and research. He is also Senior Honorary Fellow at the University of Wollongong. Terry has extensive clinical and managerial experience in mental health. He is a credentialled mental health nurse, vice-president and fellow of the Australian College of Mental Health Nurses and a facilitator of the Australian government's Mental Health Professionals Network. Terry has international experience in assisting organisations in the professional growth and development of their staff. Terry has worked collaboratively with academics and practitioners in Australia and overseas, in the fields of organisational leadership, culture and climate, environmental sustainability and mental health.

Contributors

Amy Baker PhD BHSc(Hons)(OccTh) BAppSc(OccTh). Amy is a lecturer in the Occupational Therapy Program at the University of South Australia. She has undertaken research and projects in a range of areas, including autism, palliative care, loss, grief and human flourishing in the context of mental illness. Amy's current research and teaching focuses on mental health and suicide prevention, including the psychosocial effects of community gardens and healing environments, and the effects of severe mental illness on work. She also has strong interests in engaging people from culturally and linguistically diverse backgrounds in this field and in research approaches that are qualitative and participatory in nature.

Kirsty Baker is a lecturer in mental health nursing at the University of South Australia. She teaches within the Bachelor of Nursing and Graduate Diploma of Mental Health Nursing courses. She has a special interest in psychosis and consumer preference of care. She continues to work as a clinical mental health nurse at the Royal Adelaide Hospital Emergency Department Mental Health Team, where she provides psychiatric assessment and supportive nursing care for consumers and their families in times of crisis.

Jane Barrington is a mental health nurse with a particular interest in curriculum development in mental health nursing education. She has a background in working with service users who have experienced significant trauma and mental distress subsequent to interpersonal abuse. Jane is interested in social justice and social change as strategies for reducing mental distress in New Zealand.

Simon Bell is Associate Professor in the Centre for Medicine Use and Safety, Monash University, and Adjunct Professor of Geriatric Pharmacotherapy, Faculty of Health Sciences at the University of Eastern Finland. His research interests primarily relate to the use of medicines among older people, particularly psychotropic and analgesic medicines. He is an editorial or advisory board member for *Therapeutic Advances in Drug Safety, International Journal of Clinical Pharmacy, Research in Social and Administrative Pharmacy* and *Pharmacy Practice*.

Kerri Butler is *tangata whai ite ora* and has worked in the field of mental health in varying consumer and quality roles. She is from the Ngapuhi iwi in the Hokianga as well as having Ngati Porou affiliations from the east coast of New Zealand.

Monika Ferguson PhD. Monika is a research associate in the Mental Health and Substance Use Research Group at the University of South Australia. She obtained her PhD in psychology at the same university, and has recently completed the Graduate Certificate in Suicide Prevention Studies at Griffith University. Her current program of research focuses on educational interventions to reduce stigma and improve support for people at risk of suicide, both in the health sector and in the community. Monika is also a qualified trainer in Connecting with People, a UK-developed, evidence-based approach to responding compassionately to suicide. She is supported through funding from the Sansom Institute for Health Research, University of South Australia.

Debra Hocking is a lecturer at the University of Wollongong in New South Wales. She coordinates postgraduate Indigenous health subjects. A Palawa (Tasmanian Aboriginal) who descends from the Mouheneenner people from south-east Tasmania, Debra is a Stolen Generations survivor.

Lisa Hodge PhD. Lisa is a lecturer in social work in the College of Health and Biomedicine at Victoria University and an adjunct research fellow in the School of Nursing and Midwifery at the University of South Australia. Her primary research interests include eating disorders and child sexual abuse, in particular, and mental health more broadly, as well as the sociology of emotions and incorporating artistic expression in research methods. She has published most recently in *The Arts in Psychotherapy*.

Mary Anne Kenny BJuris LLB LLM. Mary is an associate professor in the School of Law at Murdoch University. She researches and publishes in the areas of refugee law and human rights. She is a registered migration agent and a legal practitioner.

Jacquie Kidd PhD MN RN. Jacquie is a mental health nurse of Māori (Nga Puhi) descent. She is also a researcher at the University of Auckland with a focus on co-design with *tangata whaiora* and Māori communities.

Debra Lampshire is an expert by experience and a professional teaching fellow with the University of Auckland and has an extensive background as a mental health educator. She is employed by Auckland District Health Board as a project manager for the psychological interventions for an enduring mental illness project. In this unique and innovative position Debra works in the clinical setting, leading the development of psychological strategies for positive symptoms of psychosis, and she is the first non-clinician to do so. She is New Zealand chairperson of the International Society for Psychological and Social Interventions for Psychoses (ISPS) and a member of the international executive committee for ISPS. Debra received both the 'Making a Difference' award and the Supreme award from Attitude ACC for her leadership in mental health in New Zealand and internationally.

Mark Loughhead is the inaugural lecturer of lived experience in mental health within the School of Nursing and Midwifery at the University of South Australia. His work aims to promote the values of consumer experience, personal recovery and person-centred care within nursing practice. Mark blends lived experience perspectives within a framework of contemporary policy, research and practice topics. These include peer work and recovery orientated practice, shared decision-making, culturally safe health care, health literacy, consumer-centred care and trauma-informed practice. Mark's background includes 20 years' social work experience in community mental health, consumer advocacy and transcultural mental health.

Joe Macdonald works as Rainbow Liaison and Trainer at Affinity Services, a not-for-profit mental health service in Auckland, New Zealand. Joe has an MA in gender studies, sociology and social work from Otago University. They are particularly interested in depathologising sex, gender and sexuality, and advocating for clearer pathways of care for transgender and non-binary gender people.

Serena Riley RN BN (UNE). Serena recently completed a Bachelor of Nursing degree and in 2017 commenced the new Graduate Transition to Professional Practice program at Armidale Hospital, Hunter New England Health in New South Wales. Through personal experience as a consumer, she has acquired a unique understanding of the therapeutic care provided for mental illness within the Australian health care system. Her extensive humanitarian work in countries such as India, South Africa, Uganda and Greece has also provided Serena with a lived experience of the way in which mental health is addressed cross-culturally.

Anne Storey is a credentialled mental health nurse and works for Sydney Local Health District as a clinical nurse educator in community mental health. She is in the final stages of completing a Master of Nursing (Nurse Practitioner) degree.

Susan Sumskis BN(Hons) PhD. Sue is a credentialled mental health nurse, nurse academic and resilience researcher. Her interests are in building resilience with people who experience mental distress while engaged in tertiary studies, and building resilience within recovery through therapeutic recreation at The University of Wollongong Recovery Camp. Sue is also vice-president of Psychs on Bikes, and rides thousands of kilometres each year with other motorcycle-riding mental health professionals to educate on resilience and to assess men's mental health in rural and remote Australia.

Sue Thomson is a registered psychiatric and comprehensive nurse. She has worked for the past 36 years in mental health services for older adults as a nurse specialist, community mental health nurse and charge nurse, and in facility management in aged residential care. Her present role is as Northern Regional Dementia Behavioural Support and Advisory Coordinator for all of Auckland and Northland – New Zealand. Her specialist areas are dementia – in particular, early onset, traumatic brain injury, and within culturally and linguistically diverse communities, the effects of dementia on carers, advocacy and education, as well as the long and enduring presentations of bipolar affective disorder and schizophrenia in older adults.

Personal narrative contributors

Michael Barton PhD MEd (Counselling and Guidance) BEd. Michael is Director of Teaching and Learning at a New South Wales independent school.

Angie Bulic is a graduate intern paramedic in regional New South Wales.

Edwina Casey RN. Edwina completed her nursing degree at the University of New England in 2012. Throughout that time, she found her mental health placement one of the most eye-opening clinical placements she had experienced. Not only did she find mental health a completely different aspect of nursing, but she found it a demanding, yet a very rewarding area of nursing to be a part of – one that many nurses and other health professionals underestimate. Edwina is in her new graduate year and is working in Hobart, Tasmania, in a cardiothoracic ward. Edwina encourages nursing students to make the most of their mental health unit and clinical placement, and to rise to the challenge of promoting a greater awareness of mental health in rural and remote areas in Australia.

Sally Drummond is a registered nurse and credentialled mental health nurse at Charles Sturt University, in New South Wales.

Kristen Ella is an Aboriginal woman whose family originated from the Yuin nation, in southern New South Wales. She is the Aboriginal Mental Health Clinician on the Aboriginal Infant Maternal Health Service team, based on the central coast of New South Wales.

Matthew Halpin is an established leader in the peer work movement in South Australia. He currently is the Coordinator – Lived Experience Workforce, Central Adelaide Local Health Network, SA Health.

James Robert Hindman MBA MBusMan BN. James has worked in a variety of roles in emergency mental health care in regional and rural New South Wales. He has an interest in education and teaching, and has worked in paramedic programs at Charles Sturt University.

Cindi McCormick has 15 years experience in public mental health. She has worked in community mental health as a clinical nurse specialist and as nurse unit manager, as a district nurse educator working with nurses transitioning into mental health nursing, with undergraduate nursing students and with trainee Aboriginal mental health workers. She now works in patient safety and quality services.

Paul McNamara RGN RPN BN MMHN Cert IMH CMHN FACMHN. Paul is a credentialled mental health nurse working Cairns. Paul has established an extensive professional social media portfolio using the homophone 'meta4RN' (read as either 'metaphor RN' or 'meta for RN'). For more information about Paul see his website meta4RN.com and/or follow @meta4RN on Twitter, Facebook, YouTube or Instagram.

Sandra Murphy is a Gadigal woman of the Eora nation.

Leigh Murray is Co-Chair, National District Health Board, Family Whānau Advisors and Family Advisor for mental health services in Auckland District Health Board.

Barbara O'Neill is a Gadigal woman of the Eora nation.

John C. Wade DipNurs GradDipEd. John is a registered nurse, lectures and tutors at several New South Wales universities and has facilitated nursing students on clinical placement. John is Secretary of Illawarra Local Aboriginal Land Council and has held positions on the board of the Illawarrra Aboriginal Medical Service, including as chair.

Stephanie Webster is a consumer educator who has delivered mental health education from a lived experience perspective since 2006.

Limor Weingarten is a registered nurse with extensive experience working in residential rehabilitation services for people experiencing serious mental illness. Her passion is to enhance the status, knowledge and skills of nurses working in mental health, and to improve the quality of life for people in residential and hospital settings.

Acknowledgements

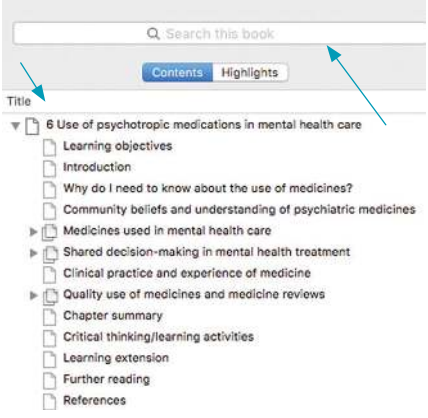
The authors are extremely grateful to Nina Sharpe, Olivia Tolich and other staff at Cambridge University Press for their thoughtful guidance and support, and to Renée Otmar of Otmar Miller Consultancy, for her expertise and patience during the development of the book. We thank Carmel Haggerty for her contribution to the book proposal. We also gratefully acknowledge the consumers, carers and practitioners who have contributed their stories and wisdom. In addition, we express our appreciation to Heather Eaton and Melissa Gibson for their research and administrative assistance, respectively.

How to use this book

Once you have registered your VitalSource access code (see the inside front cover for instructions), you will have access to the interactive e-book via your VitalSource Bookshelf. The below navigation instructions provide a general overview of the main features used within the interactive e-book.

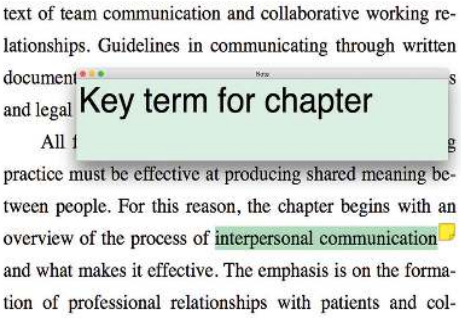
Icons

This icon is used throughout the textbook to indicate the presence of an interactive component in the e-book. A descriptor below indicates the type of content available.



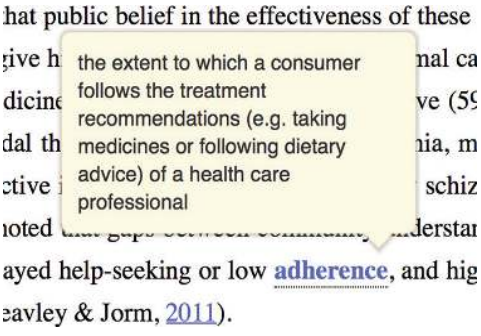
Navigation and search

Move between pages and sections in multiple ways, including via the linked table of contents and the search tool.



Highlight

Highlight text in your choice of colours with one click. Add notes to highlighted passages.

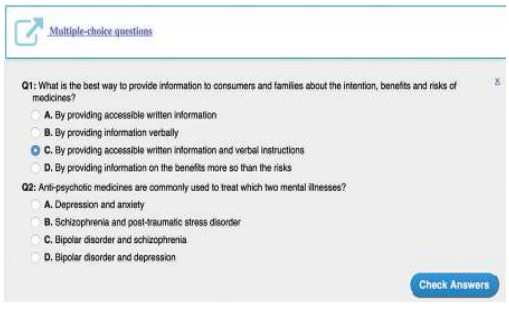


Key terms

Hover over bolded terms to display pop-up definitions of key concepts.

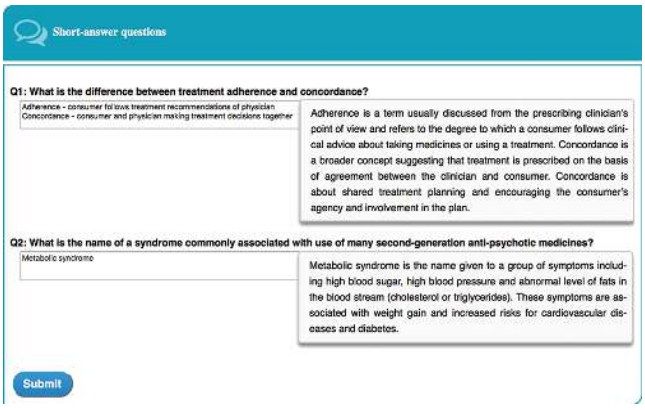
Multiple-choice questions

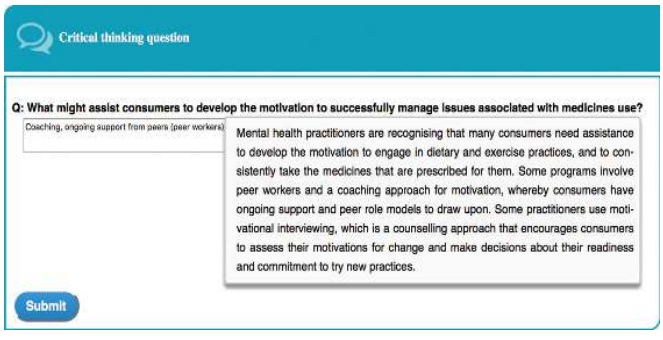
Open the multiple-choice questions pop-up box, select your choice of correct answers and click 'check answers' to assess your results. Note that this box can be moved about the page in order for you to read text while choosing your responses.



Short-answer questions

Read the question and type your answer in the box. Submit your answers to view the guided solutions and assess your results. Note that the solution pop-ups can be moved about the page.



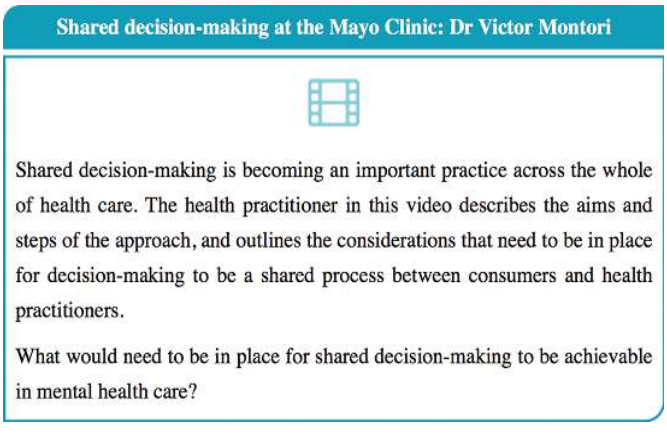


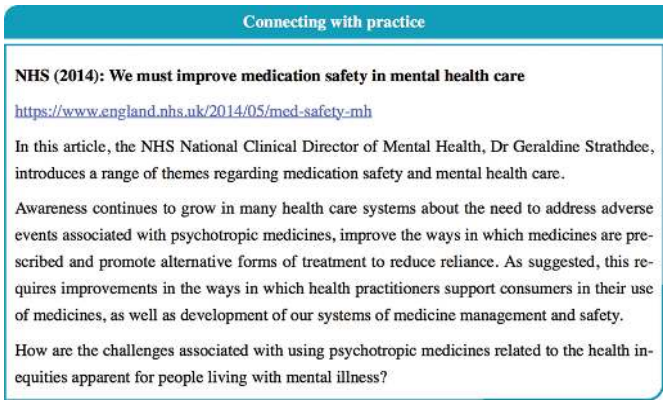
Critical thinking questions

Throughout and at the end of chapters, respond to the critical thinking questions and use the guided solutions to assess your response. Note that the solution pop-ups can be moved about the page.

Videos

View relevant video content to extend your knowledge on the topics presented in the book. Click the icon, which links to the video.





Connecting with practice

Visit industry-related websites to understand real-world examples of the theories and concepts covered in the text.