

Determination of Fathers' Effects on Breastfeeding and Their Levels of Attachment to the Baby

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Abstract

Background: Although father-infant attachment has become a subject of interest for researchers in recent years, studies on father-infant attachment and breastfeeding are still limited. Therefore, it is necessary to examine father-infant attachment and its effect on breastfeeding in the postpartum period. **Objectives:** The aim of this study was to examine the effect of fathers on infant attachment level and breastfeeding. **Methodology:** The study was carried out in Konya City Hospital Pediatrics outpatient clinics between April-August 2022. The descriptive study was conducted with 306 fathers who brought their babies for control and examination purposes. The data were collected by the researchers with the Information Form, Paternal-Infant Attachment Questionnaire and Partner Breastfeeding Influence Scale. Descriptive statistics, Mann-Whitney U test, Wallis analysis of variance were used in the analysis of the data. Data were evaluated at 95% confidence interval, $p \leq 0.05$ significance level. Ethical principles were adhered to at every stage of the study. **Results:** It was found that the mean age of the fathers was 27.77 ± 3.36 , they had a university or higher education (79.4%), they had a nuclear family structure (92.2%), and the pregnancy was planned (71.9%). A statistically significant difference was found between the status of coming to the follow-ups of their babies with their spouses and the sub-dimensions of Paternal-Infant Attachment Questionnaire (except Patience and Tolerance) and total attachment scores ($p < 0.05$). No statistically significant difference was observed between the mean scores of the Paternal-Infant Attachment Questionnaire and its sub-dimensions according to age, education level, working order, co-educational status, place of residence and family type ($p > 0.05$). It was determined that there was a statistically significant difference between the income level of the fathers and the total score of the Partner Breastfeeding Influence Scale ($p < 0.05$). Family type and pregnancy planning status did not differ significantly in the Partner Breastfeeding Influence Scale and its sub-dimensions ($p > 0.05$). **Conclusions:** The results of this study showed that fathers'; follow-up with their spouses during pregnancy had an effect on paternal attachment, and economic support of families during the postpartum period increased the effect of fathers on breastfeeding. It was recommended to increase the cohabitation of spouses starting from the prenatal period and to support families with low socioeconomic status with appropriate resources.

Biography

Prof. Dr. Sibel KÜÇÜKOĞLU graduated from Atatürk University School of Nursing in 2004. She completed her MA in 2007 and her PhD in 2011 at Atatürk University, Institute of Health Sciences, Department of Child Health and Diseases Nursing. She worked as an Emergency Nurse at Erzurum Palandöken State Hospital between 2004-2006, as a Research Assistant at Atatürk University Faculty of Nursing between 2006-2011, and as a lecturer in the same unit between 2011-2018. She received the title of Associate Professor in 2017 and Professor in 2022 in the field of Child Health and Diseases Nursing. She has been working at Selcuk University Faculty of Nursing since 2018. He has many international and national publications, books and book chapters and projects. He has mentored many graduate students. She is married and mother of a daughter.

The Use of Slimpod™ as a Primary Care Weight Management Tool within the NHS

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Abstract

Obesity threatens population health and strains publicly funded healthcare. This RCT addresses gaps in the literature surrounding unconscious persuasion's uses in weight-loss and weight management. Slimpod – a nine-minute audio listened to daily for a minimum of 12 weeks – is unique. Unlike many traditional prescribed weightloss interventions, it is not a conscious diet and does not require willpower. Using research in “nudge”; thinking, Slimpod retrains an adult's habitual and emotional responses to foodstuffs. This therapeutic model allows unconscious thought to shape instinctive behaviour in a sustainable manner consistent with a healthy lifestyle. Participants have control of their eating behaviours to induce holistic wellbeing. Background: Obesity threatens health and strains publicly funded healthcare, increasingly putting pressure on primary care time and resources. It links to many life-limiting conditions including COVID-19 (Caussy et al., 2020), type 2 diabetes (Mokdad et al., 2003), Alzheimer's disease (Harvey, 2010; Kanoski and Davidson, 2011), cancer (Pan et al. 2004, Renehan et al., 2008) and heart disease (Lu et al., 2014). Primary care is ideal for weight management services, as doctors can use patients' visits to opportunistically screen and encourage them to manage their weight. With Public Health England estimating 63% of the population to be overweight (NHS Digital, 2021) and recent studies showing huge economic impact (NHS Digital, 2021; Okunogbe et al., 2021) , there is a need for weight loss management tool development that can easily be brought into the primary care system. Aims and Methods: To assess the effectiveness of an audio unconscious persuasion weight loss/weight management intervention (Slimpod) compared to an audio relaxation recording (control). 82 overweight adults were randomised to intervention (n=41) and control groups (n=41). Participants' weight was measured at trial commencement, mid-trial (12weeks) and trial end (24weeks) periods. Secondary outcomes used the Eating Self-Efficacy Scale (ESES), Exercise Confidence Scale (ECS) and Quality of Life Index Generic Version III (QLI-G3) at the start and end of the trial. Results: A statistically significant difference in mean weight loss was found between the intervention group (1.7kg at 12weeks and 4.3kg at 24weeks) versus control (0.6kg and 1.2kg respectively) at p<0.001. ESES scores showed higher self-efficacy (p=0.008) in intervention at 24weeks. No observed significant differences in ESES negative affect sub-scale score or ECS. Conclusion: limpod was effective at reducing weight and increasing eating self-efficacy in overweight adults. Current findings suggest an advantage over currently prescribed treatments within the NHS; Slimpod should therefore be included as part of the suite of interventions offered by healthcare professionals to those seeking to lose weight.

Biography

Sandra Roycroft-Davis, from Harley Street, London, is a behavioural change expert specialising in obesity. Using breakthrough research in “nudge” thinking, Sandra commissioned the world's first clinical trials into how the mind can influence weight loss through unconscious persuasion. The results were first presented to the Royal College of General Practitioners in London in 2020. Sandra works with the UK National Health Service, is a member of the UK Parliamentary Group for Obesity and her online Slimpod weight loss programme has changed the lives of over 100,000 people in more than 40 countries.

A Systematic Approach to Enabling Nurses to Thrive at Work

Stephen Jacobs

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Abstract

Background/Problem: In response to the global nursing shortage, healthcare organisations are exploring new ways to better support and retain their nurses. The predicted nursing shortage has been exacerbated by increased stress and the negative mental impact of the COVID-19 pandemic. There is a need to prepare for the improved attraction and retention of nurses as the COVID-19 crisis ends. **Aim:** To provide a systematic quality improvement approach to the creation of workplaces that support nurses to thrive at work. **Principles:** The employing organisation is responsible for creating and sustaining a workplace culture that supports work engagement and thus enables thriving. This requires a systems approach so that thriving at work is a shared responsibility at all levels of the organisation. Implementing an improvement science approach will ensure quality improvement based on evidence and innovation. Positive organisational scholarship and the IHI Joy in Work model suggest that the following elements are necessary:

- Staff at all levels are asked: “What matters to you?”
- Co-design approaches are used to enable all parties to share their voices and co-create constructive approaches.
- Developing a Report Card or Balanced Scorecard that is developed with the input of all parties and then reviewed annually provides a systematic quality improvement approach.

Key Messages: 1) Nurses thrive because they are engaged in their work 2) The voices of nurses and nurse leaders and managers at all levels are heard. 3) The health service organisation takes responsibility for leading and managing a culture that supports nurses to thrive 4) The organisation is committed to a systems approach so that thriving at work is a shared responsibility at all levels of the organisation. **Methodology:** There are three components to the research:

1. Engagement with nurses via surveys and focus groups to determine from their perspective what impacts on their enjoyment of work (“What matters to you” – Step one of the IHI Joy in Work Framework (Perlo et al., 2017));
2. Co-design by nurses, nurse educators, nurse managers and health service managers of both management and educational approaches that support thriving;
3. Implementation of an ongoing quality improvement system to support thriving.

Results: Six countries are partnering with health service providers to follow this research process which is underpinned by positive organisational scholarship, appreciative inquiry, the four implementation steps outlined in the Joy at Work model, the Thriving at Work model, co-design principles and benchmarking. The main focus at the moment is following early career nurses for five years, with annual feedback and redesign meetings. Research on mental health nurses is also starting. **Policy Implications/Conclusions:** This long-term action research is a partnership between nurse leaders in organisations and researchers. It will ensure that the voices of nurses at all levels are heard and then followed in designing organisational approaches that support nurses to thrive. The long-term quality improvement approach means that organisations will be accountable for their actions after the co-design meetings. There will also be learnings from sharing information between countries.

Biography

Stephen Jacobs (PhD, Dip Tchg, BA) is a senior lecturer in the School of Nursing, the Faculty of Medical and Health Sciences, The University of Auckland. He began work in the School of Nursing in 2007. He leads the Nurses Thriving at Work Research Programme, which uses the Thriving at Work model, Appreciative Inquiry and principles of co-design to work with nurses and managers to develop and implement new ways to manage and support the workforce. Stephen coordinated and taught on the Bachelor of Nursing (Honours) programme from 2013 to 2021. He has been a coordinator and teacher on the post-graduate Leadership and Management for Quality Health Care programme since 2012. He teaches on the Research Methods paper. He has supervised over 55 PhD, Masters and BNurs(Honours) students in their research. His PhD in Medicine developed a process to assist planners and funders design, implement, performance manage, and evaluate health services for older people. His previous history includes 6 years from 2000 till November 2006 at the Ministry of Health as a Senior Advisor in the Health of Older People Team in the Sector Policy Directorate.

The Effect of a Written Document in Preoperative Information for Pediatric Ambulatory Surgery: A Randomized Controlled Trial

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Abstract

Introduction and Aim: In order to reduce the anxiety of parents and to support family-centered care, the education and information given by nurses, including the perioperative period, should be started as early as the preoperative period. The aim of study is to examine the effects of the preoperative education given to the parents of pediatric patients who had ambulatory surgery on their family-centered care and anxiety levels. **Methods:** This was a prospective, single-centered, single-blind, 2-arm, parallel-group randomized controlled trial conducted. The data of the study were collected in Konya/Turkey Medical Faculty Hospital between December 2022 and February 2023. Participants were randomly assigned to one of two groups: intervention groups (n = 30) and control groups (n = 30). Parents in the intervention group were given an educational brochure and verbal information was given in the preoperative period. The educational brochure consists of 3 main parts: “preoperatif”, “day of surgery” and “postoperatif”. Only verbal information was given to the control group. “Child and Family Information Form”, “State Anxiety Inventory (SAI)” and “Family-Centered Care Assessment Scale (FCCAS)” were used to collect data. Parents’ SAI and FCCAS scores were measured before and after the educational. **Results:** The intervention group compared to the control group; SAI score was lower ($p < 0.001$) and FCCAS score found to be higher ($p < 0.001$). When the group \times time interaction was evaluated, it was determined that the SAI ($p < 0.001$; $\eta^2 = 0.543$), FCCAS total score ($p < 0.001$; $\eta^2 = 0.494$), FCCAS subscale: support score ($p < 0.001$; $\eta^2 = 0.466$), and the FCCAS subscale: collaboration ($p < 0.001$; $\eta^2 = 0.364$) had a large effect size. **Conclusion:** Our results show that education given to parents in the preoperative period reduces parental anxiety and increases FCCAS.

The trial was registered in ClinicalTrials.gov (identifier: NCT05668416).

Biography

Dr Sevinc AKKOYUN is working as an Assistant Professor at Selcuk University Vocational School of Health Services, Medical Services and Techniques (Anesthesia Pr.), Turkey. She has received her Ph.D from Selcuk University Health Sciences Institute Nursing in 2022.

Role of Case Reports in Modern Medical Education

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Abstract

Case reports play an important role in advancing public health education and practice. They provide a dynamic platform for clinicians to share novel insights through medical and public health journals, facilitating rapid access to diverse clinical scenarios, fostering the exchange of ideas among peers, and contributing to evidence-based approaches in public health. With modern higher education focusing on active learning, case reports effectively promote critical thinking and problem-solving skills in pre-clinical and clinical training pertinent to public health. Integrating case reports into active learning methods and simulation labs empowers students to interpret laboratory findings, radiological images, population data, and statistical analyses, enhancing their ability to address complex public health challenges. Our session explores the strategic use of case reports throughout our medical school curriculum, emphasizing their vital role in advancing public health education and practice. By aligning a comprehensive medical education curriculum with active learning methods and a focus on public health in diverse communities, we aim to prepare a future generation of healthcare professionals equipped to tackle complex health issues.

Biography

Dr. Chastain's academic journey encompasses a PhD in biochemistry and biophysics from Texas A&M in 1997, followed by two post-doctoral positions at the University of North Carolina at Chapel Hill in 2007. His diverse background includes roles in academia and industry before his tenure as an assistant professor of biomedical sciences at the William Carey University College of Osteopathic Medicine from 2013 to 2016. Joining UICOMR in 2016, he emerged as a pivotal educator during the institution's curriculum transition, initially focusing on biochemistry but rapidly expanding his teaching contributions across all curriculum phases. His impact extends beyond teaching to encompass active engagement in administrative and research domains, including his role as the Associate Director of Simulation Events and Development. Recognition for his remarkable efforts includes five Faculty and Staff Aureus Awards, the prestigious 2022 Golden Apple Award, and his extensive pre-UICOMR record of numerous peer-reviewed publications. In testament to his enduring commitment to medical education and exemplary student rapport, he was bestowed the 2023 UICOMR Distinguished Teaching Award. As the honored recipient of the 2023 Distinguished Teaching Award, Paul Chastain, PhD, continues to excel as a clinical associate professor in the Department of Health Sciences Education, embodying profound dedication to medical pedagogy and academic excellence.

The Effect of Two Different Methods on Reducing the Pain and Fear During Phlebotomy to Children: A Randomized Controlled Trial

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Abstract

Background/Problem: Reducing pain and fear during painful medical procedures in children is important since mismanagement of pain causes the child and parent to feel anxious, which can have negative long-term consequences. **Objectives:** This study aimed to evaluate the effects of two different distraction methods in reducing pain and fear during the phlebotomy procedure in children. **Methodology:** The study, which has a randomized controlled experimental design was conducted between July and October 2020 with 111 children aged 6-12 years who underwent phlebotomy in the emergency department of a public hospital and their parents. The children were randomly assigned to soap bubble blowing (n:37), ball squeezing (n:37) and control (n:37) groups. During the phlebotomy, soap bubble blowing, and ball squeezing methods were used as active distraction methods. Data were collected using the Wong Baker Faces Pain Rating Scale, and the Children's Fear Scale. **Results:** The pain scores of the soap bubble blowing group and the ball squeezing group during the phlebotomy procedure were found to be lower than the control group ($p<0.001$). In addition, the soap bubble blowing group had lower fear scores than the ball squeezing and control groups ($p<0.001$). **Policy Implications/Conclusions:** The active distraction methods used in the study reduced pain and fear during the phlebotomy procedure. In addition, the method of soap bubble blowing was found to be a more effective method in reducing fear. Distraction methods should be used as a nursing intervention to reduce pain and fear during the phlebotomy procedure in children.

ClinicalTrials.gov (identifier: NCT05064657)

Biography

Dr Fatma Tas Arslan is a Professor at Selcuk University, Faculty of Nursing, Konya, Türkiye

Knowledge Management Technology Implementation for Supporting Evidence Based Decision Making in Ethiopian Health Sectors

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Abstract

Knowledge management technology is a key tool for facilitating and improving the quality of health care delivery in hospitals. However, the use and implementation of this technology is not an easy task. This study aims to investigate knowledge management technology implementation and use in Ethiopian hospitals, with a particular reference to Jimma University Specialized Hospital. Information about challenges of knowledge management technology implementation was gathered using qualitative research methods, through conducting semi-structured interviews. The purposive sampling method was applied to select fifty-four participants from a well-defined population. Findings were first validated, according to published literature and research works, and then sorted into three main areas, such as current usage of KM technology to enhance and improve decision-making, factors affecting the implementation of KM technology. This study revealed that the overall level of technology implementation in Jimma University Specialized hospital is still low. Implementation and use of KM technology to improve the quality of hospital health services are needed. Thus, it suggested that hospital managers should make much more effort to develop a strategy and policy on the implementation and use of ICT so that the hospital could improve the quality of healthcare services.

Biography

Dr Mniyichel Belay Zeru is an Assistant Professor, Jimma University, Jimma, Ethiopia. He is a full time employee with a responsibility of teaching, research, professional service to different parts of community, and undertake research mentoring and Master's students. Currently he is working as a primary advisor to seven Master's students in the field of information Science and related. During this period a number of Masters Students in the field of information science students were mentored by him.

The effects of positions on the gastric residual volume of premature infants in the neonatal intensive care unit: Systematic Review and Meta-analysis

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2. Selcuk University Faculty of Nursing, Konya, Turkey

Abstract

Background and Aim: Positioning premature infants is one of the practices performed by nurses in neonatal intensive care units (NICU). It is thought that different positions given to premature infants after feeding may help prevent the increase in GRV. This study aimed to make a systematic review and meta-analysis of the randomized controlled studies on the effects of the positions given to premature infants after feeding on their GRV measured before the next feeding. **Methods:** This systematic review and meta-analysis were done by the Preferred Reporting Items and Meta-Analyses for Systematic Reviews (PRISMA) statement, and the methodological quality of the included studies was evaluated with the JBI-Mastarm. WOS, Pubmed, Science Direct, CINAHL, Scopus, Cochrane, ProQuest, Ulakbim, Medline Türk, and YÖKTEZ databases were extensively searched. The inclusion criteria were determined according to the PICOS format. Two independent researchers evaluated the data. Stata 16 program was used in the analysis of the data. Hedge's *g* effect size, *I*² statistics, random effects model, and fixed effects model was used during the study process. The random effects model performed with the DerSimonian Laird method was considered in the meta-analysis. Publication bias was determined using Funnel Plots and the Begg and Egger tests. **Results:** A total of 791 articles met the inclusion criteria. After methodological quality assessment, four studies were included in the meta-analysis. As a result of this meta-analysis revealed that the supine, prone, right, and left lateral positions given after feeding did not affect the GRV measured before the next feeding. **Conclusion:** In our meta-analysis study, GRV was evaluated before feeding. Also, some studies had reported significant results when GRV was considered after providing. More randomized controlled studies are needed in this field.

Biography

Dr Sevil Özkan is working as an Assistant Professor, Selcuk University Faculty of Health Sciences/ Nursing, Department (Children Health and Diseases Nursing Division), Konya, Turkey. She has received here PhD from Selcuk University Graduate School of Health Sciences (Nursing Division) in 2020. She is interested in Charity works for children and students; individual activities to continue sustainable environment.

Time to Kidneys Failure Modeling in the Patients at Adama Hospital Medical College: Application of Copula Model

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Abstract

Background: Kidney failure is a common public health problem around the world. The vast majority of kidney failure cases in Sub-Saharan African nations, including Ethiopia, go undetected and untreated, resulting in practically certain mortality cases. This study was aimed primarily to model the time to (right and left) kidneys failure in the patients at Adama Hospital Medical College using the copula model. **Study design:** A retrospective cohort study. **Methods:** The copula model was used to examine joint time to the right and left kidneys failure in the patients by specifying the dependence between the failure times. We employed Weibull, Gompertz, and Log-logistic marginal baseline distributions with Clayton, Gumbel, and Joe Archimedean copula families. **Results:** This research comprised a total of 431 patients, out of which, 170 (39.4%) of the total patients failed at least one kidney during the follow-up period. Factors such as sex, age, family history of kidney disease, diabetes mellitus, hypertension, and obesity were found to be the most predictive variables for kidney failure in the patients. There was a 41 percent correlation between the patients' time to the right and left kidneys failure. **Conclusion:** The patients' kidney failure risk factors included being a male, older adult, obese, hypertensive, diabetic and also having a family history of kidney disease. The dependence between the patient's time to the right and left kidneys failure was strong. The best statistical model for describing the kidney failure datasets was the log-logistic-Clayton Archimedean copula model.

Biography

Dr Firomsa Shewa Gari has Studied Statistics at Wolaita Soda University. Now he is Lecturer and Researcher at Assosa University, Ethiopia

Universal Access to Health Care in the Age of Litigation: Impacts and Trends of the Litigation in Health Policies

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Abstract

The study of healthcare systems is not a subject only for scholars of political philosophy but above all for physicians as they might be (as the majority of them are) the first victims of those who exercise political power in modern states while witnessing the multi-dimensional crisis in the last 40 years or so to unfold. This is the main aim of this study: to show the causes of the multidimensional crisis in healthcare systems around the world. To realize such a goal, I will research and examine first the principles of the Father of modern medicine, Hippocrates, and then, the systemic principles on healthcare of the Athenian Democracy. Afterwards I will examine the modern healthcare systems in light of Hippocrates`s and Athenian Democracy`s principles. As I will show here, modern physicians have not acquired complete knowledge about those principles. This is the main reason why healthcare systems around the world suffer a multidimensional crisis and with them the people and the life of our planet. Another reason, is political power, as has been established in different countries: either with socialist principles or capitalist. Another goal of this study is to show the best healthcare system not only in the sense of being actually applied in some countries but to go beyond them. Such goal is part of the World Health Organization,[1] but it does not proceed from Hippocrates`s and Athenian`s principles and from the premises I will examine here.

Linguistic Difficulties of Adolescents' Health Educational Materials and Implications for Health Literacy in Ghana: Looking Beyond National Statistics

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Abstract

Background: In Ghana, national-level statistics suggest that 50% - 80% of people aged six or older are literate in English or one Ghanaian language. While these statistics may provide a sound basis for deciding on the reading grade levels of written health educational materials, overreliance on these data may adversely affect reading and comprehension. Unfortunately, much is unknown about the readability and comprehensibility of health educational materials in Ghana and Sub-Saharan Africa. Reading and comprehension are fundamental to health literacy, irrespective of content, context, and level. Therefore, understanding the linguistic difficulties inherent in health educational material for the Ghanaian adolescent is essential feedforward for future materials design and improvement in knowledge. This study assesses the inherent literacy challenges of sexual and reproductive health educational materials reachable to young adolescents in Ghana. **Methods:** The study used a mixed-method sequential explanatory design. Thirty-four (34) sexual and reproductive health educational materials were retrieved from 15 sources, mostly online, and were assessed for readability. Two hundred and seventy (270) in-school adolescents were recruited for the comprehension assessment. Data were collected using a cloze test and analyzed using a text readability consensus calculator and Microsoft Excel, 2013. **Results:** Most of the materials will be meaningful for average students in grade 8 or more (Flesch- Kincaid Reading Grade Level = 58%, SMOG = 72%, and Coleman-Liau index = 92%). Fifty percent (50%) of participants could not cope with the language of the materials, and it was too difficult for 21%. **Conclusion:** Most young adolescents at the sub-national level in Ghana may read lower than their years of education. They will have challenges understanding sexual and reproductive educational materials likely within their reach. Future health educational materials design in Ghana should adjust the linguistic characteristics of educational materials to the literacy skills of target adolescents.

Biography

Jacqueline Nkrumah is a woman of many parts. She has a broad range of experience in industry and academia. Jacqueline lectures at the University of Education, Winneba, Department of Health Administration and Education. Jacqueline believes that research into the determinants of health is fundamental to creating valid and reliable knowledge for improving the social and economic well-being of people, particularly vulnerable groups in society. She believes in knowledge dissemination and grooming the young generation for the future and prosperity of society. Jacqueline has ten publications in credible peer-reviewed journals for her credit, some of which she solely or co-authored with other scholars. She contributes to scholarship as a researcher and peer-reviews for other Journals. Other areas of impact include curriculum development and mentorship of students. Her areas of research interest include adolescent health literacy, health service, maternal health, and infant nutrition. Jacqueline Nkrumah holds BA in Accounting and Sociology and M-Phil, in Health Administration, all from the University of Ghana. She also holds a postgraduate Diploma in Teaching and Learning in Higher Institutions from the University of Education, Winneba. She is a Ph.D. candidate at the University of Ghana., Department of Public Administration And Health Services Management, pursuing Health Policy and Management.

Sleep as a Familial and Communal Matter: A Qualitative Study of Social Norms around Sleep Health in Israel

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Abstract

Background: A growing body of research has clarified that sleep is influenced not only by biological factors but also by social factors. While studies have shown that social norms can affect sleep behavior and sleeping arrangements including when, where, how, and with whom people sleep, researchers still know relatively little about how social norms affect sleep health, especially among adults. Objective: The current study explores the association between social norms and sleep health in the Israeli context. Methodology: Data were drawn from semi-structured, in-depth interviews with 66 Israelis—including women and men, Arabs and Jews, and religious and non-religious persons—conducted between February 2020 and February 2022. This article focuses on responses to a set of questions about the comments people make or hear from others about their sleep. Exploring how people comment on the sleep of others highlights prevalent social norms around sleep. Results: Findings indicate that how sleep is “done” is policed by family and community members who react to norm violations by commenting on what is perceived as “inappropriate” sleep behavior. Comments were made in jest or earnest in response to breaches of social norms regarding sleep timing, duration, continuity, and alertness/sleepiness, indicating that social norms and expectations shape each of these dimensions of sleep health. Conclusions and Policy Implications: This article expands the scholarly understanding of the social determinants of sleep health. The study concludes that since individuals may opt to conform to current social norms, which are enforced by members of the family and community, interventions aimed at promoting sleep health should target not only individuals but also the family and community.

Biography

Dr Dana Zarhin is a Senior Lecturer in the Sociology Department at the University of Haifa. My main research and teaching interests include the sociology of health and illness and the sociology of sleep, but I also have an interest in the sociology of the body, gender studies, and Science and Technology Studies. My articles were published in prestigious journals such as *Sociology*, *British Journal of Sociology*, *Social Science & Medicine*, *Sociology of Health & Illness*, *Science, Technology & Human Values*, *Qualitative Health Research* and more.

Developing Culturally Relevant Community Mental Health Mobile Apps for non-English speaking Populations: Learnings and Recommendations

June Lee

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Abstract

Background: In 2020, the Korean Community Center of the East Bay (KCCEB) developed two community mental health mobile apps specifically designed for limited-English proficient (LEP) communities experiencing high stress: Chinese caregivers and Korean small business owners. The goal was to create culturally relevant apps to reduce caregiver burnout and address acute stress experienced by small businesses impacted by community violence.

Objective/Purpose: KCCEB's mobile app development aimed to center community voices and create: 1) Mobile apps that are useful and easy-to-use for individuals with high stress and limited time-capacity (caregivers, small businesses owners); 2) A platform that offers a centralized hub for in-language information, relevant community services and programs; and 3) Space where community members share their experiences and challenges in navigating local systems and resources. **Methods:** The apps were developed using human-centered design and community participatory processes that center user and community feedback, including semi-structured interviews with users and key stakeholders and a beta-testing phase measuring user behavior on the app. This methodology created content, design, and communication strategies that integrate Asian cultural perspectives and motivations. **Results and Conclusions:** KCCEB developed two mobile apps using a human centered design and community participatory process. Ensuring community members have the largest voice and influence in the app development was critical for setting the foundation for the content and functions of apps. We discuss what such apps look like that have been created within such frameworks as well as their impacts on improving LEP individuals' capacity to deal with stressful situations.

Biography

June Lee is CEO of The Korean Community Center of the East Bay (KCCEB), a leading non-profit organization in the San Francisco Bay Area. KCCEB is dedicated to improving the living conditions and social environment of our Limited English Proficient immigrant/refugee communities by increasing cultural and linguistic access to essential services, and addressing issues of racism, classism, xenophobia, and violence on a community and systems level. Trained in Communications Research and Advertising at the University of Illinois at Urbana-Champaign (MS), and with 15 years experience in transcultural research, June utilizes data to drive innovations and influence policy changes in the NGO sector. Under June's leadership, KCCEB utilizes a data-driven decision-making framework. This framework is informed by the only disaggregated study of Bay Area Koreans, KoNA Bay Area 2016 (<https://kcceb.org/impact/>), conducted by KCCEB in partnership with UC Berkeley School of Public Health. KoNA Bay Area is the most highly-utilized reference for health data on Bay Area Koreans and is a go-to resource for the Korean population for grant makers and researchers (Health and Healthcare Needs of Koreans in San Francisco Bay Area: The Korean Needs Assessment (KoNA) Project – *Journal of Immigrant and Minority Health* (2019) 21:1043–1051). In 2016 and 2017, in collaboration with Dr. Janice Tsoh at UCSF, June conducted two Community-Based Participatory Research (CBPR) studies using a family-based intervention approach in Empowering Korean Families to Eliminate Tobacco Use and Smoke Exposure. Most recently, KCCEB has been working with the Alameda County Public Health Dept. to design a robust and culturally responsive public health safety mechanism based on our community research during pandemic. Concurrently, we are collecting data on the state of public health in the light of an anti-Asian climate, to be published in 2024. These data will drive partnerships and strategies between community-based organizations and local public health departments.

The Effect of Knowledge and Practices Towards Breast Milk Expression and Storage on Perception Insufficient Milk, Breastfeeding Self-Efficacy and Mother-Infant Attachment

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Selcuk University, Faculty of Nursing, Konya, Türkiye

Abstract

Background and aims: It is aimed to examine the effects of knowledge and practices of mothers with premature infants on breast milk expression and storage on inadequate milk perception, breastfeeding self-efficacy, and mother-infant attachment level in the Neonatal Intensive Care Unit. **Methodology:** This is a cross-sectional study conducted from February 2021 to March 2022 in two large hospitals in Konya Turkey. We recruited 232 mothers who had a term or preterm baby in the neonatal intensive care unit and expressed breast milk. A structured questionnaire consisting of closed-ended questions was used to evaluate knowledge and practices regarding breast milk expression and storage. In addition, data were collected using the Mother-Infant Attachment Scale, Perception of Insufficient Milk Supply Questionnaire, and Breastfeeding Self-Efficacy Scale-Short Form. **Results:** The majority (81.9%) of mothers do not know the safe storage time of expressed breast milk at room temperature or in the refrigerator. The created structural equation model reveal that perception of insufficient milk had a significant effect on attachment and breastfeeding self-efficacy ($p < 0.05$), and the gestational week and breast milk receiving status of the infants had a significant effect on the perception of insufficient milk ($p < 0.05$). **Conclusions:** It concluded that mothers of infants who were hospitalized in the neonatal intensive care unit, the increased levels perception of insufficient milk in an important variable that increased breastfeeding self-efficacy and maternal attachment levels.

Biography

She graduated from Aksaray University, Department of Nursing in 2009. She completed master programme in 2013 and her PhD in 2019 at Selçuk University, in Nursing. She worked as a Neonatal Intensive Care Nurse at Farabi Hospital between 2009-2011 and at Beyhekim State Hospital between 2011-2013. She worked as a Research Assistant at Selçuk University, Faculty of Nursing between 2013-2022. She received the title of Assistant Professor in 2022 in the field of Child Health and Diseases Nursing. She has been working at Selcuk University, Faculty of Nursing as an Assistant Professor since 2013. She has many international and national publications, and book chapters and projects.

Emergency department visits: non-trauma related dental conditions during the COVID-19 lockdowns in Israel

Leon Bilder¹

1. Department of Periodontology, School of Graduate Dentistry, Rambam Health Care Campus, Haifa, Israel

Abstract

Background/Problem: Data on non-traumatic dental conditions (NTDCs) in emergency department (ED) visits were initially studied in Israel just before the COVID-19 pandemic. The current retrospective study reports the first results on the frequency and distribution of NTDCs in ED visits at Rambam Health Care Campus (Rambam), in Haifa, during three COVID-19 lockdowns in Israel. **Objectives:** The aim of the current study is to report on the frequency and distribution of ED visits for NTDCs at Rambam during the COVID-19 lockdowns in Israel. **Materials and methods:** The data regarding ED visits at Rambam between March 25, 2020, and February 11, 2021, were obtained retrospectively from Rambam's computerized clinical and personal database of adult patients (≥ 18 years) visiting the ED for NTDCs. **Results:** During the COVID-19 pandemic in Israel, there were three full or partial lockdowns:

- The first full lockdown was from March 25, 2020, to May 3, 2020 (6 weeks),
- The second lockdown was from September 18, 2020 to October 18, 2020 (4 weeks),
- The third lockdown was from December 27, 2020 to February 11, 2021 (2 weeks).

The number of NTDC admissions was different between the lockdowns. The number of NTDC visits in ED increased by 56.6% during the first lockdown compared to average number of visits before and after the lockdown. The average waiting time for maxillofacial consultations for patients with NTDCs increased to 180 minutes during the first lockdown, compared 130 minutes before and after that. The busiest hours in the ED for NTDCs were during the morning shifts (47% of daily visits). **Policy Implications/Conclusions:** These initial results describe a national public health system that was partially unprepared for system crises during the first lockdown in Israel, with relative adaptation during second and third lockdowns. The study suggests that systemic and conceptual changes are necessary in the national public health system to be prepared for global or national catastrophic changes. As part of these changes, efforts should be made to reduce the number of non-trauma related applications to ED. These changes can be by increasing the number of personnel or by introducing recent advances such as tele-medicine for prescreening of patients. This change calls for a greater involvement of the health policy leaders to provide alternative solutions for emergency dental care.

Biography

Dr Leon Bilder is a senior doctor in Rambam Medical Center, School of Dental Medicine, Israel. He had completed his Dental Public Health from the Hebrew University of Jerusalem. His major expertise and interests are Dentistry enthalhygiene Dental Caries Public Health Oral Hygiene Periodontics Dental Public Health Preventive Dentistry Orthodontics

The synergistic Effect of Sensory Stimulation during Snoezelen Room Therapy and Therapist's Support on Pain and the Physical and Mental Health of the Older Adults Living in Nursing Homes

Sewar Khatib

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Abstract

Background. Life expectancy is extending, and accordingly, there is a high demand for hospitalization in nursing homes. Older adults living in nursing homes may face chronic physical and mental health conditions, chronic pain, or reduced well-being. In addition to the medical treatments that patients receive to maintain their health, there is a great need for non-pharmacological approaches for managing physical and emotional health, pain, and discomfort. Recently, sensory stimulation (SS) and especially multi-sensory stimulation during Snoezelen room therapy which is a white room usually equipped with lighting, sound, smell, and touch systems (Figure.1), has shown a promising ability to improve physical and mental conditions. In addition, interventions focusing on social support and the relationship between the therapist and the patient also have favorable therapeutic effects. Indeed, therapist support (TS) is a well-established common factor in psychotherapy and can be easily triggered even in groups with reduced cognitive abilities. However, the synergistic therapeutic interrelations of sensory stimulation during Snoezelen room therapy and the therapist's support have never been tested. The current randomized control trial with four therapeutic sessions investigated the solo and synergistic effect of sensory stimulation during Snoezelen room therapy and the therapist's support on the physical and mental health and pain levels of older adults living in nursing homes. **Methods.** Ninety-six patients, age range between 65-99, living in the Ahuzat Hazafon nursing home, located in northern Israel, were randomly assigned to one of three groups: (1) sensory stimulation - SS, (2) therapist's support - TS, and (3) combined SS +TS interventions. SS was implemented using a multi- sensory Snoezelen room controlled by trained instructors. Pain levels, blood pressure, heart rate, blood oxygen saturation, and hand grip strength were evaluated before and after each of the four weekly 20-minute sessions by the nurse. In addition, life satisfaction and anxiety were evaluated before and after the whole intervention. Mixed model analysis was used to test the relative efficacy of the three interventions, applying simple slope analysis with Tuckey correction. Study rational and analytical plans were preregistered. **Results.** The combined intervention of sensory stimulation and therapist support (SS+TS) resulted in reduced pain levels over four sessions compared to SS ($B=0.209$, $p=0.006$) and TS ($B=0.23$, $p=0.002$) separately ($F(6,266) = 2.62$, $p= 0.017$, $R^2 = 0.23$). Also, combined SS+TS intervention resulted in reduced systolic blood pressure vs. SS ($B=0.09$, $p=0.01$) and TS alone ($B=0.016$, $p<0.0001$) over four sessions ($F(6,272) = 5.42$, $p= 0.0003$, $R^2 = 0.29$). In addition, synergic SS+TS intervention resulted in an increased grip strength vs. SS. ($B=-0.35$, $p=0.003$) and TS ($B=-0.032$, $p=0.008$) alone, over four sessions ($F(6,273) = 2.25$, $p= 0.04$, $R^2 = 0.19$). Moreover, combined SS+TS resulted in an improvement in life satisfaction compared to SS ($B=-2.38$, $p=0.0042$) and TS alone ($B=-1.20$, $p=0.13$) groups ($F(2,39)=3.47$, $p=0.04$). Finally, SS+TS demonstrated greater improvement in symptoms of general anxiety disorder compared to SS ($B=3.30$, $p=0.0154$) and TS ($B=1.13$, $p=0.375$) alone ($F(2,38)= 13.5$, $p<0.0001$). No differences between the interventions were shown for blood oxygen saturation ($F(6,273)= 2.06$, $p=0.06$), diastolic blood pressure ($F(6,272)= 1.12$, $p= 0.35$), and heart pulse ($F(6,273)= 1.33$, $p=0.23$). **Conclusion.** A combined intervention of sensory stimulation and therapist's support demonstrated promising therapeutic ability for pain management and maintenance of the physical and mental health of elderly patients, providing a base for understanding the mechanism of the intervention. The proposed intervention can be easily scaled and used to boost older adult patients'; well-being and optimize nursing home therapeutic sources.

Biography

I am an occupational therapist (pediatric and geriatric OT) and a researcher at integrative pain laboratory, I work as a director of occupational therapy services and I run private paediatric OT clinic. I am a master of public health - health administration tract at Haifa university. My master's research focuses on investigating the effect of the multisensory stimulation and the social support, through Snoezelen room therapy on the pain, general physical and emotional health, among the older adults. I am interested in investigating the effect of cognitive and sensory functions on pain among children and adults.

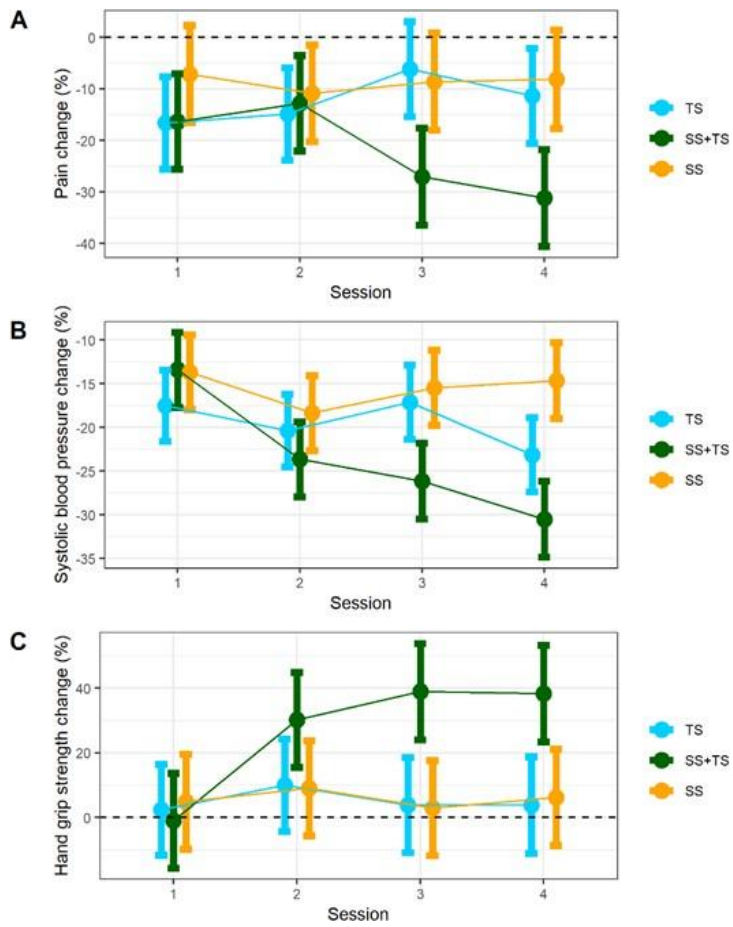


Figure 1. Combined SS+TS intervention demonstrates reduced (A) pain levels and (B) Systolic blood pressure and improved (C) Hand grip strength compared to SS and TS alone

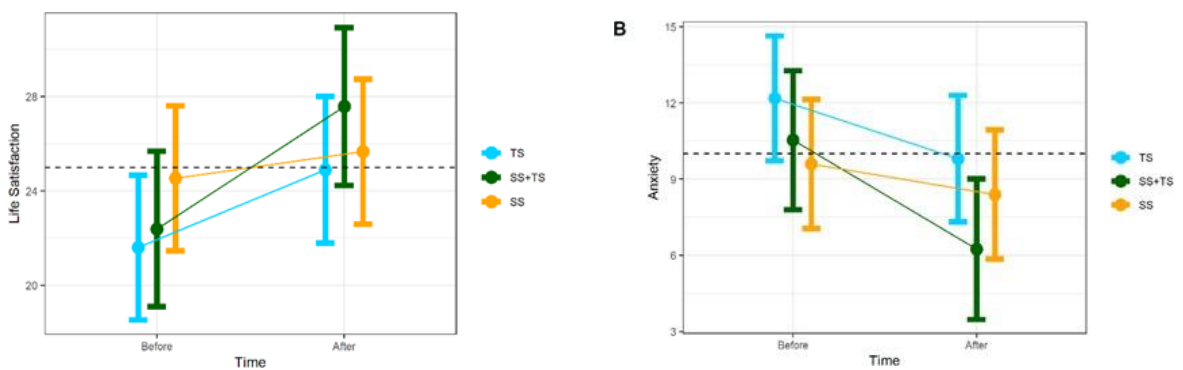


Figure 2. SS+TS intervention demonstrated stronger improvement in life satisfaction and anxiety symptoms compared to the SS and TS alone

Alcoholism: differences in men and women

Juan Llor Baños

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Abstract

Introduction: Alcoholism is a pathology with a high incidence rate in society. Alcoholism is the third leading cause of death in Spain, contributes to 60 chronic and acute diseases, reduces life expectancy by 15 years, is the cause of 30% of traffic accidents, and the cause of 80% of family conflicts. In the Internal Medicine consultation we have applied the diagnostic-prognostic method in order to reduce or eliminate excessive chronic alcohol intake, and we have also paid attention to the different behavior of said method that it can have in men or women. **Material and Methods:** 116 patients with an excessive alcoholic intake (more than 5 drinks/day) and with proven signs of alcoholic liver disease have been followed up, ruling out another type of underlying liver disease. The diagnostic-prognostic method was applied to all of them, consisting of: informing, from the first consultation, of their hepatic alteration and their prognosis, in the medium and long term, in the case of persisting with their alcoholic intake; and follow up with an approximate cadence of 3 months. **Results:** Of the 116 patients, 97 were men and 19 women. Of the 97 patients, 65 (67%) stopped drinking, 32 (32.9%) continued to drink alcohol, although 13 of them significantly reduced their intake. Among the 19 women, 17 (89.4%) stopped drinking, and 2 (10.5%) continued to drink. The diagnostic-prognostic method in women presents favorable indices compared to men, with a difference close to significance ($p < 0.056$). **Discussion:** It is known that the same amount of intake affects women more than men. However, the fact that women are more likely to give up excessive alcoholic beverages according to the follow-up of the diagnostic-prognostic method suggests that women present different conditioning factors in the induction of chronic alcoholic pathology. It is possible that alcohol in women is used to overcome states of personal anxiety, without the need to use it for goals of personal fulfillment. However, in men, alcohol intake may be used more to achieve social goals or behavior models. Thus, the diagnostic-prognostic method probably facilitates a higher rate of alcohol release in women when her state of anxiety is reduced. **Conclusions:** 1) the diagnostic-prognostic method applied as a treatment in patients with chronic alcoholic liver disease favors women more than men, 2) women probably show different conditioning factors than men in the induction of chronic alcoholism.

Clinical significance of serum miR-21, CA153 and CEA in breast cancer

Bezal Bezal

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Abstract

Objective: one of the essential regulators of carcinogenesis is MicroRNA-21 (miR-21). Yet little light has been shed on its effectiveness as a tumor marker compared to the conventional ones. Comparing the diagnostic value of established tumor markers in breast cancer (BC) such as carcinoembryonic antigen (CEA) and CA153 with circulating level of miR-21 is the aim of this study. Methods: The study included 89 BC patients. Amplification of the circulating levels of miR-21 and miR-16 done using real-time PCR qualitative detection, while electrochemiluminescence assays was used to detect circulating levels of CEA and CA153. The diagnostic sensitivity for BC was compared between the three. Results: the serum miR-21 levels were high significantly BC patients, as the latter had much higher levels ($P < 0.001$). the CA153 and CEA sensitivities were 15.73% and 22.47% respectively, while miR-21 Sensitivity and specificity were 87.6% and 87.3%. Conclusion: in BC patients miR-21 exhibits far higher sensitivity for diagnoses than both CEA and CA153. Thus especially in the early stages of BC, miR-21 can become a potential indicator for diagnosis, albeit the clinical stage, PR and ER statuses were not correlated in this study.

A New Approach to Develop a Vaccine against *Mannheimia Haemolytica* Infectious in Sheep and Goat With Different Types of Adjuvant and Nano-Adjuvants

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Abstract

Background: *Mannheimia (M) haemolytica* is one of the major gram-negative bacteria which create lung infection and respiratory diseases in different wild and domestic animals. *M. haemolytica* is nasopharyngeal commensals of cattle, sheep and goats which proliferate in the upper respiratory tract and then transfer to colonize the lungs due to different risk factors. Different studies indicated that *M. haemolytica* biotype A, specially serotypes A1, A2 and A6, are by far the most important and commonly isolated bacterial pathogen in development of pneumonic pasteurellosis or shipping fever. Although serotypes A1 and A2 are present in the upper respiratory tract of healthy ruminants, serotype A1 is the main cause of bovine pneumonia, whereas serotype A2 is the primary cause of pneumonia in domestic sheep pasteurellosis. Vaccination and antibiotics are the most effective management practices employed to reduce lung infections. Indiscriminate antimicrobial usage not only intensely increases the risk of the bacterial resistance but also enables the distribution and transportation of transposons resistance genes. In spite of the presence of various commercial vaccines for *M. haemolytica*, pneumonia remains a major health problem, so the imperative of *M. haemolytica* vaccines are necessary. In this case, nano vaccines are more efficient than conventional vaccines in that they induce both humoral and cell-mediated immune response. Nano vaccines have the potential to harness the body's immune system to kill infections and to prevent infections and diseases from spreading. Chitosan based nanoparticles have good biodegradability and biocompatibility. Many studies reported that chitosan effectively stimulates a local immune response, performs adjuvant activity in vaccines and increases the ability of antigenic delivery systems.

Objectives: There are no suitable vaccine strategies to prevent pneumonic manheimiosis in sheep and goats in Iran. So, in this study after the investigation of the frequency of *M. haemolytica* serotypes and examination of their pathogenicity, we evaluate the immunogenicity of *M. haemolytica* vaccine with different chitosan nanoparticles and aluminum hydroxide as adjuvants.

Methodology: Different lung and nasal samples from sick domestic animal were detected by culture and PCR methods. Subsequently, *M. haemolytica* vaccinal strain was developed and then this formalin-killed immunogen was mixed with different nano chitosan and aluminum hydroxide as adjuvant.

Results and Discussion: *M. haemolytica* isolates were identified in three main serotypes (A1, A2, and A6). Serotypes A2 and A1 were the most frequently detected, whereas the A6 serotype was the lower frequency. Also, the ELISA results showed higher antibody titer in the nano adjuvant groups compared to the alum adjuvant and the control groups. Also, the challenge test revealed that all synthesized nano vaccines have significant protection against live *M. haemolytica*.

Conclusion: The findings showed that antigens formulated with nano chitosan as adjuvant are candidates for new immunogen against *M. haemolytica* infections.

Improving Awareness of Blood Culture Indication, Procedure and Resource Utilization at Armed Forces Hospital Jazan, Saudi Arabia

Manal Aldiba

Microbiologist, AFH Jizan, KSA

Abstract

Introduction: Blood culture contamination (BCC) is a significant quality and safety issue in hospitals, as it leads to increase in unnecessary testing, admissions, antibiotic exposure and cost. This study is the first study on the BCC rates in the Armed Forces Hospital Jazan (AFHJ), Saudi Arabia. **Objectives:** The main goal of our quality improvement (QI) project was to reduce BCC rate in AFHJ from 7.5% to international benchmark (< 3%) after January 2021 as well as reducing the negativity rate. **Methods:** This study was conducted in AFHJ, Kingdom of Saudi Arabia (KSA) including two major steps: first, development and implementation of QI interventions to reduce BCC and negativity rate in the AFHJ. Second, Evaluation of the effectiveness of these interventions. The intervention was developed through QI methodologies, including fishbone diagramming, and plan-do-check-act (PDCA) cycle. Intervention effectiveness was evaluated using an interrupted time series analysis. **Interventions:** Clear survey questionnaires were made and distributed on participants to get pre-audit results .Then we start education program depending on the pre-audit results .Soft copy of written steps of blood collection procedure and indication was done and sent to nurses and physicians. After that direct observations of nurses involved in the process. Finally, post training assessment using previous survey questionnaires to get post-audit results. **Results:** During the baseline period (pre-audit or pre-intervention period),7.5% were contaminated, compared to 1.8% during intervention period (post-audit period). Rate of negative blood culture was reduced from 96% to 91%. Overall improvement of knowledge and awareness of the nurses and physicians clearly noted after intervention implementation. Fortunately, we have noted that the budget of microbiology would be reduced by 10-12% as a result of our interventions. **Conclusions:** By standardizing blood culture collection methods, optimizing blood volume and nurse’s education, we were able to develop a best practice for blood culture collection and reduce BCC and negativity rate to a sustainable low rate at our hospital.

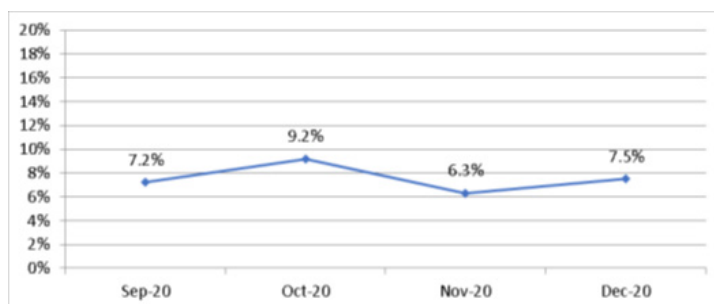


Figure: Blood Culture Contamination Rate Before Intervention (Mean=7.5%).

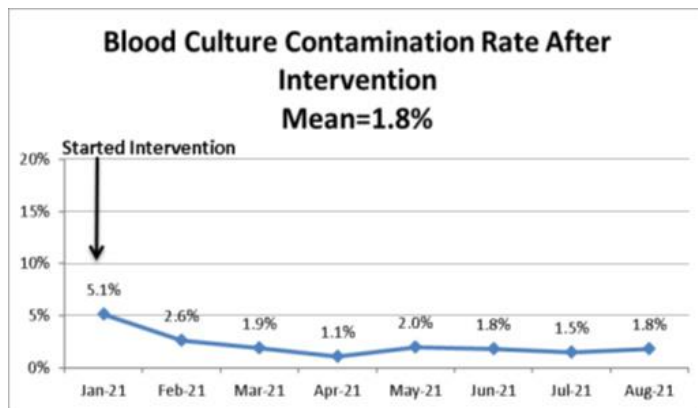


Figure: Blood Culture Contamination Rate Per Month After Intervention (Mean=1.8%).

Panel Discussion: Reimagining Healthcare with Technology

Monday/ September 11, 2023// 12.15 AM- 1.00 PM

Key insight

The pandemic undoubtedly accelerated technological advancement and adoption in healthcare. It's now easier and faster for patients to procure medical services outside of the traditional four walls of the medical establishment, enhancing convenience and accessibility for all. Telehealth has made it possible for patients to receive care without an in-person office visit. In addition, remote patient monitoring is becoming more widely accepted. Having exponentially grown in popularity throughout the pandemic, this now includes wearable technology with impressive capabilities, from remote monitoring of vitals to remote echocardiograms. If not for the pandemic, it probably would have taken the healthcare industry another decade to reach where it is today.

For the acceleration that we had during COVID-19 to be sustainable, we need better infrastructure, better digital penetration, and a greater use of the ecosystem of products and applications of devices that are connected up, combined with clinical pathway design that's designed around a digital workflow, not just a physical workflow that's been transferred.

The challenge of telehealth in the future would be figuring out how to deliver quality signal from the provider to the user before the transaction happens, and how to convert the behavior of telehealth from single purchase to repeat interaction so that the whole ecosystem can be sustainable.

In the near future, more devices and systems will be connected with the goal of improving patient care and delivering better healthcare outcomes.

2nd International Conference on Public Health, Health Education, and Healthcare Services (PHH-2023) will be held in Milan, Italy from September 11–12, 2023.

All accepted abstracts for International Conference on Public Health, Health Education, and Healthcare Services (PHH-2023) will be published in the Journal of Health Education and Public Health- HEPH (Online ISSN-2631-8377) with a DOI number. Prof. Tetsuji Yamada, Ph.D. is the Editor in Chief for the journal.

Health Education and Public Health- HEPH promote healthy behaviours, healthy communities, and healthy environments for the changes in the health of the public. Journal aimed to provide in-depth public health information to enhance the health of people and to contribute to a healthier and more equitable world.

A new special issue has been created and titled “Coronavirus Pandemic before and after: Public Health, Community and Strategic Policy” to facilitate the rapid publication and dissemination of research. The Novel coronavirus (COVID-19) outbreak that occurred in Wuhan in January 2020 and reached pandemic proportions in March 2020. COVID-19 has revealed the depth and breadth of health inequities, both within and across countries. Our objective is to discuss the most recent research and develop new ideas and directions for research on covid 19. We accept original papers including rapid surveillance reports, field reports, case studies, and raw datasets related to Covid-19. Special Issues are led by Guest Editors who are experts in the subject and oversee the editorial process for papers. Papers published in a Special Issue will be collected on a dedicated page of the journal website. The issue will be composed of eight articles that explore a diverse range of topics and domains related to COVID19 and its effects.

For any inquiries related to a Special Issue, please contact the Editorial Office.

Introducing New Article Type in HEPH journal

We are pleased to announce our new article type: Methods/Protocols. We have launched this new section particularly to the young scientists, who often are the hands in the laboratory repeating published methods. Always adopting existing methods is laborious but often unrewarded. By sharing your methods/protocols in our journal, you make sure that knowledge stays with the scientific community, even if the scientist leaves the project. We hope to see more being published in Methods, Protocols. All published Methods /protocols, which are assigned a DOI for citation purposes and published under a CC-BY license.