

VIRTUAL EVENT

# **3<sup>RD</sup> GLOBAL NURSING CONGRESS**

**March 24-25,  
2022**

**GLOBAL NURSING 2022**

<https://globalnursing.peersalleyconferences.com/>



# **A CONFLUENCE OF ERUDITE AND KNOWLEDGE-SEEKER**

## **PROGRAM-AT-A-GLANCE**

**GLOBAL NURSING  
2022**

# DAY 1

MARCH 24, 2022

# Scientific Program

GMT- Greenwich Mean Time

09:45-10:00 Opening Ceremony

Keynote Forum

10:00-10:30

**Title: Virtual patient simulation in the training of advanced practice providers: How adding a smart technology boosts learning efficacy and shortens time to competency**

**Igal lancu**, Edocate Ltd., Israel

10:30-11:00

**Title: Covid-19: What it teaches us about the nature of illness and of society**

**Keekok Lee**, University of Manchester, UK

Refreshment Break 11:00-11:10

Distinguished Speaker Talks

11:10-11:30

**Title: Peripherally inserted central venous catheter in upper extremities leads to an increase in D-dimer and deep vein thrombosis in lower extremities**

**Wanli Liu**, Central South University, China

11:30-11:50

**Title: Testing the efficacy of an HIV stigma reduction intervention on nurses in China: The AWWI project**

**Lianxiang He**, Xiangya Changde Hospital, China

11:50-12:10

**Title: Violence in hospitals and burnout among nursing staff**

**Keren Grinberg**, Ruppin Academic Center, Israel

12:10-12:30

**Title: Challenges in the use of a computerised training tool at selected nursing campuses: A South African perspective**

**Udesvari Naidoo**, KwaZulu-Natal College of Nursing, South Africa

12:30-12:50	<b>Title: Clinical learning environment, supervision and nurse teacher (CLES+T) scale: Translation and validation of the Arabic version</b> <b>Khadija Guejdad</b> , <i>Higher Institute of Nursing Professions and Health Techniques, Morocco</i>
12:50-13:10	<b>Title: The impact of nurses' perceptions of systems thinking on occurrence and reporting of adverse events: A cross-sectional study</b> <b>Ahmed Hassan Albelbeisi</b> , <i>Tehran University of Medical Sciences, Iran</i>
Lunch Break 13:10-13:40	
Keynote Forum	
13:40-14:10	<b>Title: Neuropsychological impact on patients with cancer</b> <b>Kalliopi Megari</b> , <i>Aristotle University of Thessaloniki, Greece</i>
14:10-14:40	<b>Title: The future of nursing homes: Changes in consumer preferences for long-term care facilities after COVID-19 pandemic</b> <b>Jia Yu</b> , <i>Southern Connecticut State University, USA</i>
Distinguished Speaker Talks	
14:40-15:00	<b>Title: Unveiling beauty: Insight into being tattooed post mastectomy</b> <b>Victoria Reid-de Jong</b> , <i>Trent University, Canada</i>
15:00-15:20	<b>Title: Virtual support in dementia: A possible viable strategy for caregivers</b> <b>Ceres Ferretti</b> , <i>University of Sao Paulo, Brazil</i>
15:20-15:40	<b>Title: Nursing practice on post-operative wound care in surgical wards at Muhimbili National Hospital, Dar-es-salaam, Tanzania</b> <b>Elizabeth Z. Mika</b> , <i>Hubert Kairuki Memorial University, Tanzania</i>
15:40-16:00	<b>Title: Reflections of nurses who were hospitalized by COVID-19: Life and profession</b> <b>Janet Mercedes Arevalo Ipanaque</b> , <i>Universidad Peruana Union, Peru</i>
16:00-16:20	<b>Title: Benefits of Zu Chang Fa as a relaxation technique on the holistic health of undergraduate nursing students during COVID-19</b> <b>Reyna Isabel Hernández Pedroza</b> , <i>University of Guanajuato, Mexico</i>

16:20-16:40	<p><b>Title: MerleauPontal reflection: The perception of women with breast cancer regarding the impact on their children</b></p> <p><b>Eliane Cristina da Silva Pinto Carneiro</b>, <i>Universidade Federal Fluminense, Brazil</i></p>
16:40-17:00	<p><b>Title: Abandonment at the transition from hospital to home: Family caregivers' experiences</b></p> <p><b>Leila Mardanian Dehkordi</b>, <i>Isfahan University of Medical sciences, Iran</i></p>
Poster Session	
E-Poster	<p><b>Title: Perception of the preceptor in the training of the health professional: A merleau-pontian perspective</b></p> <p><b>Monica Moura da Silveira Lima</b>, <i>Universidade Federal Fluminense, Brazil</i></p>
E-Poster	<p><b>Title: The role of nursing in man's health: Challenges in the training of nursing graduates</b></p> <p><b>Vilza Aparecida Handan de Deus</b>, <i>Universidade Federal Fluminense, Brazil</i></p>
E-Poster	<p><b>Title: Healthcare professionals: Supporting victims of intimate partner violence</b></p> <p><b>Stephen Cooper</b>, <i>Excelsior College, USA</i></p>
E-Poster	<p><b>Title: Effect of cancer treatment on sleep quality in cancer patients: A systematic review and meta-analysis of Pittsburgh sleep quality index</b></p> <p><b>Anahita Divani</b>, <i>Tehran University of Medical Sciences, Iran</i></p>
E-Poster	<p><b>Title: Awareness and perceptions of elder abuse among the nurses working in general hospital wards in the Kanto region, Japan</b></p> <p><b>Yuki Ohtsuyama</b>, <i>Tokyo Junshin University, Japan</i></p>
E-Poster	<p><b>Title: Toe clearance rehabilitative slippers for older adults with fall risk: A randomized controlled trial</b></p> <p><b>Atsuko Satoh</b>, <i>Hirosaki Gakuin University, Japan</i></p>
Panel Discussion	
End of Day 1	



# DAY 2

MARCH 25, 2022

# Scientific Program

## GMT- Greenwich Mean Time

09:45-10:00 Opening Ceremony

### Keynote Forum

10:00-10:30 Title: The paradox of political accountability and deficits in the preconditions for service delivery in elderly care: A qualitative study of Swedish politicians  
**Susann Porter**, Malmö University, Sweden

10:30-11:00 Title: A specific Large-Scale-Assessment for practical nursing competency  
**Simone Ries**, Protestant University of Applied Sciences, Germany

### Refreshment Break 11:00-11:10

### Distinguished Speaker Talks

11:10-11:30 Title: Hypertension and its related factors among patients with type 2 diabetes mellitus: A multi-hospital study in Bangladesh  
**Hiba Alsaadon**, Monash University, Australia

11:30-11:50 Title: Learning the impact of culture mediated by online international collaboration in nursing education  
**Kirsten Nielsen**, VIA University College, Denmark

11:50-12:10 Title: Entrepreneurship is the Future of Nursing  
**Eman Salman Taie**, Helwan University, Egypt

12:10-12:30 Title: Application of novel psychoactive substances (NPS): Chemsex and HIV/AIDS policies among men who have sex with men (MSM) in Hong Kong  
**Alex Siu Wing Chan**, The Hong Kong Polytechnic University, Hong Kong

12:30-12:50 Title: The effect of corona quarantine on the self-concept dimensions of medical sciences students  
**Parand Pourghane & Fatemeh Mansouri**, Guilan University of Medical Sciences, Iran

12:50-13:10

**Title: Human care by nursing in the face of healthcare judicialization in COVID-19: From the perspective of merleau-ponty**  
**Veronica Bessa de Paulo de Moura**, *Universidade Federal Fluminense. Brazil*

Lunch Break 13:10-13:40

Distinguished Speaker Talks

13:40-14:00

**Title: Can You PACE Yourself? Using PACE in the Clinical Setting**  
**Allen Walter Siegel**, *University of Maryland Upper Chesapeake Health System, USA*

14:00-14:20

**Title: A critical race perspective on the mental health characteristics of nursing, psychology and social work students**  
**Val Livingston**, *Norfolk State University, USA*

14:20-14:40

**Title: An assessment of direct and indirect costs of dementia in Brazil**  
**Ceres Ferretti**, *University of Sao Paulo, Brazil*

14:40-15:00

**Title: Rehabilitation Nursing**  
**K. Sesha Kumar**, *Mid-Level Health Provider (MLHP), Health and Wellness Centre, Primary Health Centre, India*

15:00-15:20

**Title: Unsuccessful diabetes management: A qualitative study**  
**Leila Mardanian Dehkordi**, *Isfahan University of Medical sciences, Iran*

15:20-15:40

**Title: The role of the nurse administrator in healthcare services and healthcare built environment in Southern Nigeria**  
**Gloria Tonye Dikibo**, *Texila American University, India*

Panel Discussion

End of Day 2



A photograph of a large conference hall with a green tint. In the center, there is a large, illuminated pyramid structure made of scaffolding. A large audience is seated in the foreground, and people are standing near a service area on the right. The ceiling is high with visible lighting rigs and spotlights.

**BOOKMARK  
YOUR DATES**

# **5<sup>th</sup> International Conference on The Future of Nursing and Nursing Education**

**October 25-26, 2022 | Dubai, UAE**

<https://worldnursing.peersalleyconferences.com/>

**&**

# **6<sup>th</sup> Global Nursing Congress**

**March 2023**

<https://globalnursing.peersalleyconferences.com/>

# **KEYNOTE PRESENTATIONS**

## **DAY 1**



**Virtual Event**

---

# **3<sup>rd</sup> Global Nursing Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Igal Iancu, MD - In over 35 years of experience in the computing industry, Dr. Iancu has held various leadership positions at Intel Corporation, Philips Healthcare, and RealView Imaging, spanning microprocessor design, information technology,

and advanced imaging. These have been applied in vision and strategy forming, engineering and product management, marketing, clinical clients, as well as user experience design. He co-founded Edocate 4 years ago.

## I. Iancu

Edocate Ltd., Israel

## Virtual patient simulation in the training of advanced practice providers: How adding a smart technology boosts learning efficacy and shortens time to competency

**Background:** Continuing education (CE) for advanced practice providers (APP) is essential for keeping their knowledge/skills up to date. The established field of CE undergoes a “digital” transformation. The new approach represents an interactive way of learning that identifies gaps in knowledge and improves competence. We developed a smartphone-based Virtual Patient Simulation (VPS) application and the web-based Virtual Clinic.

**Aim:** To determine whether a novel VPS solution improves knowledge of APP, increases their level of competency, reduces the variation of care, and improves adherence to national guidelines.

**Methods:** 649 APP used several VPS cases during diabetes and metabolic syndrome

training programs. In each case, the learners went through several encounters, each including a patient interview, physical exam, lab and imaging, referral to specialists, and ordered lifestyle modifications and medications. At the end of each case, the learners received immediate detailed feedback. Achievements of the goals were tracked across cases to observe improvement in knowledge and competency.

**Results:** Significant improvements in patient outcome were observed with each subsequent virtual patient: Glycemic control ( $HbA1c < 7\%$ ) achievement rate improved from 49% to 67%; systolic blood pressure has reduced an average of 4.5mmHg (in the 2nd case) and referral to lifestyle modification increased from 87% to 95%. The APP group and the course directors expressed great satisfaction in this



# 3<sup>rd</sup> Global Nursing Congress

type of learning, which fits their busy and mobile lifestyle, enabling better information retention via learning by doing.

**Conclusion:** The Edocate VPS platform provides modern, cost-effective, and easy-to-use theory-to-practice learning tools. Interaction with virtual patients improves

APP's level of competency and allows to track progress and outcomes in real time. VPS is a key technological component in facilitating nursing CE. This method fills the gap between lectures and real patient interactions by providing a fun and effective learning modality with immediate, objective feedback.

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Keekok Lee is a graduate in philosophy of the University of Singapore, the University of Oxford and the University of Manchester. She taught briefly at the University of Singapore before joining the University of Manchester where she remained till taking early retirement in 1999. Since then, she has continued to be active in research and publication. She is now Honorary Research Fellow, Faculty of Humanities at

the University of Manchester. Her domains of research and publication include philosophy of law, moral/social/environmental philosophy, philosophy of genetics and medicine, philosophy of technology as well as comparative philosophy and comparative philosophy of medicine (in the main between the Modern Western Tradition and the Classical Chinese Tradition of doing philosophy and medicine).

## Keekok Lee

Honorary Research Fellow, Faculty of Humanities, University of Manchester, UK

## COVID-19: What it teaches us about the nature of illness and of society

This is a sequel to "Epidemiology is Ecosystem Science" published in Synthese 2019, but written well before the emergence of the epidemic/pandemic called COVID-19 today. Since its "Patient zero" was identified in Wuhan-China on 08/12/2019, numerous variants have emerged with Omicron/B.1.1.529 dominating the scene. Barely a month later, its genome was sequenced which enabled vaccines to be developed and made available in record time in the history of medicine. Unfortunately, in spite of such unprecedented advances, the data on 11/03/2022, at the Johns Hopkins Coronavirus Resource Center show that COVID-19 prevails on all the continents, with a daily 28-day infection figure at 47, 181,305 and a 28-day deaths figure at 238,018. What started off as an epidemic turned into a pandemic which has persisted for nearly two years in spite of medical knowledge and medical interventions. People as individuals and groups of individuals in different demographics in different parts of

the world are infected at different rates and affected to different degrees of severity when infected. To account for such differences, one needs to look at their genetics, their psychology, their economic status and employment, where they live and how they live and so on. In other words, the aim of this paper is to demonstrate in outline how these conditions and variables fit together within the analytical framework of Epidemiology as Ecosystem Science originally proposed in 2019. Furthermore, very importantly, it will go one step further to argue that the data appear to show that COVID-19 as phenomena falling whether under the domain of Clinical Medicine or Epidemiology can only be adequately and fruitfully analysed within the framework of Ecosystem Thinking which includes all aspects of human existence: economically, morally, geopolitically, politically, psychologically, socially as well as medically – these factors and variable are intimately entwined and mutually affect/reinforce one.

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Dr. Kalliopi Megari is an experienced psychologist working in the hospital & health care industry. She is a lecturer at University of Western Macedonia in Greece. Skilled in Clinical Neuropsychology, Clinical Research and Learning Disabilities. Graduated from Aristotle University of Thessaloniki and attended further education from University of Macedonia, in people with special needs and disabilities. She holds undergraduate degrees in Nursing and Psychology, as well as a Master's and a PhD in Neuropsychology from Aristotle University of Thessaloniki. She has many

years of experience working with chronic disease patients as well with people with disabilities. Her work has earned her many prestigious international awards. She has given lectures at Aristotle University of Thessaloniki and University of Warsaw. She is postdoctoral researcher and has published more than 10 research articles in journals. She is the Global Engagement Representative of International Neuropsychological Society, General Secretary of the board of directors and member of the Ethics Committee of Hellenic Neuropsychological Society.

## Kalliopi Megari

Aristotle University of Thessaloniki, Greece

## Neuropsychological impact on patients with cancer

**P**ost chemotherapy cognitive impairment (PCCI), is characterized by decreased neuropsychological performance of neurocognitive measures after chemotherapy for the treatment of cancer. Chemotherapeutic drugs are often affecting both normal and cancer cells and the cause of cognitive impairment observed in some individuals following chemotherapy treatment. Breast cancer patients complain about cognitive difficulties during and after cancer treatment. We investigated the manifestation of cognitive impairment related to chemotherapy, before chemotherapy (T1), immediately after chemotherapy-1 day (T2) and 6 months later (T3), among 187 adult patients with different types of cancer (breast, colorectal, prostate and thyroid cancer). Cognitive functions were assessed, such as attention and working memory, visuospatial perception, executive functions, complex scanning and visual tracking, as well as short and long-term memory using a battery of neuropsychological tests. We had an assessment of emotions, such

as anxiety, depression, positive and negative mood to investigate the emotional functioning of cancer patients. Results revealed a statistical significance in performance, immediately and 6 months post-chemotherapy (T3), although no statistically significant differences were found between the groups in any of the neuropsychological test, before chemotherapy. Patients showed lower performance immediately post-chemotherapy (T2) that remained stable 6 months post-chemotherapy (T3), compared to T2 in all cognitive domains ( $p < 0,001$ ). Patients with breast cancer showed significantly lower performance on all cognitive domains compared to other patients. In addition, all patients had a lower performance at T2, which means low emotional functioning with no statistical significant changes. At T3 all patients, had an increased performance with increased emotional functional 6 months post-chemotherapy. Cognitive change that can be detected with repeated testing is essential for an accurate interpretation of neuropsychological performance in studies with cancer patients.

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Jia Yu is an Associate Professor of Economics at School of Business from Southern Connecticut State University (SCSU). Her research interests are health economics, social economics, and applied microeconomics. She was an invited affiliated scholar at the Wason Center for Public Policy to conduct retirement cost research for AARP

Virginia. Her researches have been published and recognized in several peer-reviewed journals and conferences. Prior joining SCSU, she worked as a Lecturer of Economics at Christopher Newport University. Dr. Yu received her Ph.D. in economics from Suffolk University, and her M.A. in economics from SUNY Albany.

## Jia Yu

Southern Connecticut State University, USA

## The future of nursing homes: Changes in consumer preferences for long-term care facilities after COVID-19 pandemic

Since the first COVID-19 case was discovered in December 2019, over 12.1 million cases have been reported in more than 188 countries and territories. In the USA, the Centers for Disease Control and Prevention has confirmed almost 3.05 million COVID-19 cases, with more than 132 000 deaths. The COVID-19 pandemic has had a particularly dramatic impact on the elderly and those with chronic underlying medical disorders. Before the second outbreak in July 2020, long-term care facilities were the most severely affected in terms of case numbers, especially nursing homes. COVID-19 has been shown to affect the elderly severely, with this demographic

having the highest COVID-19-associated hospitalization rate in the US. In several European countries, long-term care facilities have also been severely affected by the outbreak, with deaths among their residents accounting for 37-66% of all COVID-19 related death. This presentation provides information and insight about the current structure and performance of the nursing homes in the UK and US. The presentation will also discuss about the potential changes in consumer preferences toward long-term care facility selection and the possible structural change of the long-term care industry in the future.

# **SCIENTIFIC ABSTRACTS**

## **DAY 1**



**Virtual Event**

---

# **3<sup>rd</sup> Global Nursing Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress

## Peripherally inserted central venous catheter in upper extremities leads to an increase in D-dimer and deep vein thrombosis in lower extremities

**Wanli Liu**

*Xiangya Hospital, Central South University, China*

**Statement of the Problem:** Peripherally inserted central venous catheter (PICC)-related venous thrombosis is mainly mural thrombus and limited to the venous route where the catheter is located. Increasing evidence has suggested that PICC-related venous thrombosis can even exceed the range of infusion route. However, there is no explanation for this clinical phenomenon. The purpose of this study is to elucidate the association between peripherally inserted central venous catheter (PICC) in upper extremities and lower extremity deep venous thrombosis (LEDVT) by observing the changes in D-dimer. This was a retrospective cohort study with 3452 patients (104 inserted with PICCs and 3348 without PICC) enrolled

at the neurology department from April 1, 2017 to April 1, 2020. The patients underwent color Doppler ultrasound (CDU) and D-dimer examinations. LEDVT-related factors and D-dimer value were analyzed before and after PICC insertion. The predictive value of D-dimer for LEDVT was also evaluated. Results: Univariate logistic regression analysis showed that PICC insertion increased the risk of LEDVT by 9 times and promoted the increase of D-dimer by 5 times. After risk adjustment, multivariate logistic regression analysis showed that PICC insertion increased the risk of LEDVT by 4 times and tripled the risk of D-dimer increase. The concentration of D-dimer was significantly increased after PICC

**Table 1** Logistic regression analysis of LEDVT-related factors

Factors	LEDVT n = 270	NO LEDVT n = 3182	Univariate		Multivariate	
			OR (95 % CI)	P	OR (95 % CI)	P
PICC	43	61	9.692 (6.414–14.646)	0.000	4.268 (2.501–7.282)	0.000
Age (year, mean ± standard deviation)	61.27 ± 12.63	61.57 ± 13.71	0.998 (0.989–1.007)	0.724	1.005 (0.995–1.015)	0.325
Male	156	1941	0.875 (0.680–1.125)	0.298	1.036 (0.788–1.360)	0.802
Malignant tumor	48	79	8.493 (5.787–12.464)	0.000	1.856 (1.038–3.321)	0.037
Recent surgery	80	160	7.593 (5.857–10.797)	0.000	4.056 (2.503–6.571)	0.000
Cerebral hemorrhage	26	210	1.508 (0.983–2.313)	0.060	0.699 (0.421–1.161)	0.167
Ischemic stroke	74	1539	0.403 (0.306–0.531)	0.000	0.562 (0.411–0.768)	0.000
Parkinson's disease	8	222	0.407 (0.199–0.834)	0.014	0.511 (0.245–1.067)	0.074
Infection	26	311	0.984 (0.646–1.499)	0.939	1.597 (1.016–2.508)	0.042
BMI ≥ 25	29	209	1.712 (1.136–2.579)	0.010	1.325 (0.838–2.096)	0.229
Unconsciousness	78	549	1.948 (1.474–2.575)	0.000	1.007 (0.691–1.467)	0.972
Critical illness	57	117	7.010 (4.961–9.906)	0.000	5.179 (3.390–7.911)	0.000

Note: PICC refers to peripherally inserted central venous catheter; BMI refers to body mass index; malignant tumor refers to cases treated within the prior six months; recent surgery refers to neurosurgery (over two hours) performed within six months; critical illness refers to the circumstance where patients have a high risk of disease variation or death



# 3<sup>rd</sup> Global Nursing Congress

insertion. D-dimer was unsuitable for excluding venous thrombosis in patients inserted with PICCs. Conclusions: PICC insertion increases the level of D-dimer and the risk of LEDVT. The

risks of venous thrombosis need to be assessed in patients inserted with PICCs to ensure the expected clinical outcomes.

## Biography

Dr. Liu Wanli has professional knowledge in nursing and pharmacy, and has been committed to the construction of safe infusion system. She is an important member of the intravenous therapy group on both sides of the Taiwan Strait and has won many awards related to intravenous therapy in China. In the prevention and treatment of complications related to infusion tools, Dr. Liu is good at transforming clinical problems into scientific research topics, and combining basic experiments with clinical trials to ensure the infusion safety of patients.

# 3<sup>rd</sup> Global Nursing Congress

## Testing the efficacy of an HIV stigma reduction intervention on nurses in China: The AWWI project

Lianxiang He<sup>1</sup>, Ming Yang<sup>2</sup>, Li Li<sup>3</sup>, Xiaoxia Ca<sup>2</sup>, Sue Yuan<sup>2</sup>, Li Lin<sup>2</sup>, Yifang Yi<sup>2</sup>, Hui Tang<sup>2</sup>, Wanli Liu<sup>2</sup>, Dan Mo<sup>2</sup> and Peng Liu<sup>2</sup>

<sup>1</sup>Xiangya Changde Hospital, China

<sup>2</sup>Xiangya Hospital of Central South University, China

<sup>3</sup>UCLA Semel Institute for Neuroscience and Behavior, Center for Community Health, USA

**Introduction:** To explore the short-term and long-term intervention effect of an adapted White-coat and Warm-heart intervention on nurses' HIV-related knowledge, general stigmatizing attitudes and work avoidance behaviors, and provide insight into the development of the suitable intervention model for reducing the stigma of tertiary hospital's nurses toward people living with HIV/AIDS in China.

**Methods:** The study was conducted in 40 nursing units in a tertiary hospital of China between March 2017 and March 2018. The purposive sampling method was used in the study, 40 units were first matched as pairs according to comparable conditions including service scope, number of beds and HIV infection patients, the 20 pairs units were randomized into either the intervention group or the control group. 790 participants were recruited. The 15% popular opinion leader (POL) nurses of the nurse staff in the 20 units were selected from the intervention group according to Diffusion of Innovations Theory

and received Adapted White-coat and Warm-heart intervention (AWWI) training completely. After training, POL nurse are required to disseminate stigma reduction message and demonstrate anti-discrimination behavior to their peer in their daily work. The HIV-related knowledge, attitudes and behaviors of participants were assessed at baseline, 1-, 3-, and 6-months follow-up assessments.

**Results:** The results showed statistically significant differences between the intervention and control groups, participants had higher HIV-related knowledge and lower stigmatizing attitudes and work avoidance behaviors levels in the intervention group than participants in the control group after the intervention as well as the intervention effects were sustained for a 6-month period.

**Conclusion:** The AWWI can effectively improve the level of nurses' HIV-related knowledge, general stigmatizing attitudes and work avoidance behaviors and this effect lasted longer in the tertiary hospital in China.



# 3<sup>rd</sup> Global Nursing Congress

## Biography

Prof. He Lianxiang, Ph.D., Mentor, has worked in Xiangya Hospital of Central South University for 35 years, including 8 years as head nurse and 8 years as deputy director of nursing Department. I was good at r in-service nurse training, nursing research and the construction of national clinical key specialty nursing project. Now I am a director of nursing department of Xiangya Changde Hospital and a member of the Venous Therapy Committee of the Chinese Nursing Association, chairman of the Vascular Access Research and Management Committee of the Hunan Health Management Association , presided over 13 projects involving provincial level, WHO and USA NIH cooperative sub-projects , published nearly 60 papers, and translated the American INS Policies and Procedures for infusion Therapy (2016 version). I studied in Nursing School of UCLA , USA for 9 months and Wiser simulation Lab, University of Pittsburgh , USA for 2 months.

# 3<sup>rd</sup> Global Nursing Congress



## Violence in hospitals and burnout among nursing staff

**Keren Grinberg**

*Faculty of Social and Community Science, Ruppin Academic Center, Israel*

**Background:** Nursing staff, especially in violence-prone emergency departments, are at high risk of burnout. Frequently experienced violence is expected to have a strong impact on the medical staff's welfare and nursing staff's burnout. This study aimed to examine the differences in burnout between nursing staff in emergency departments and nursing staff in other inpatient departments, and its relationship with violence in various hospitals in Israel.

**Method:** A cross-sectional study that utilized a three-part questionnaire: demographic data, degree of burnout, and frequency/occurrence of violence events against nurses.

**Results:** 150 nurses in emergency medicine (N=75) and inpatient (N=75) departments were sampled. Significant differences were found: Nurses in emergency departments experienced a stronger sense of burnout than nurses in other hospital departments, and the degree of burnout was found to have a positive relationship with exposure to both verbal and physical workplace violence.

**Conclusions:** Nursing staff in emergency medicine could develop a high degree of burnout, and exposure to workplace violence could exacerbate it. The physical and emotional safety of the medical staff is an important aspect in preventing burnout, and creating a secure work environment.

### Biography

Dr. Keren Grinberg is the Head of the Department of Nursing Sciences in Ruppin Academic Center. Lecturer and researcher in the field of health promoting of the general population and inequalities in health services. Other interest areas are; chronic pain and women's health, nursing education and nursing practice.

# 3<sup>rd</sup> Global Nursing Congress

## Challenges in the use of a computerised training tool at selected nursing campuses: A South African perspective

**Udesvari Naidoo<sup>1</sup>, Janetta Roos<sup>2</sup> and Peter T. Sandy<sup>3</sup>**

<sup>1</sup>KwaZulu-Natal College of Nursing, South Africa

<sup>2,3</sup>Department of Health Studies, University of South Africa, South Africa

A ground-breaking training tool known as ICATT was developed to optimize the Integrated Management of Childhood Illness (IMCI) case management training utilised for in-service or pre-service settings for nurses. The scope of the study was limited to 10 nursing campuses from KwaZulu-Natal, South Africa. The qualitative objectives were to explore the campus principals, nurse educators and learners understanding of ICATT with regards to the enablers and barriers to ICATT use in the nursing campuses and, to explore the campus principals, nurse educators and learners understanding of ICATT with regards to the readiness of the nursing campuses for ICATT use. A qualitative, exploratory, descriptive design was used to gather in depth, first-hand information from purposively sampled campus principals, nurse educators and learners. A semi-structured interview schedule guided in-depth interviews with seven campus principals, while eight

focus group discussions each were held with nurse educators and learners. The interviews were audio-taped and transcribed verbatim. A manual analysis of the data was done. Trustworthiness was ensured to strengthen the scientific rigour of the study. Positive attitudes, enablers supporting ICATT implementation and barriers opposing ICATT use were identified as determinants. The existence of barriers could be an impediment for the adoption of an electronic tool for IMCI case management training. Recommendations emanating from the study include infrastructural development at nursing campuses, support and training for nurse educators on ICATT use and developing the computer skills of learners. It was concluded that ICATT may be a cost-effective and efficient way for nurse educators to teach IMCI case management, whilst for learners it provided the stimulus for independent and self-directed learning.

### Biography

Udesvari Naidoo graduated with a Diploma in Nursing (General, Psychiatric, Community) and Midwifery in 1990. In 1994, she passed the prescribed short course for nurses with honors and was awarded a certificate in health assessment and treatment for nurses. This equipped her with the necessary skills to practice as a primary health care nurse. In 1998, she graduated with a B Cur degree from UNISA, majoring in nursing education and nursing administration. She completed her Master's Degree in Public Health at UNISA in 2012. In 2018 she completed her PhD also at UNISA. She has been in the employ of the KwaZulu-Natal College of Nursing as a Senior Lecturer since 2003. She is an active member of the Umgungundlovu Health Ethics Research Board (UHERB), a member of the Research sub-committee and a member of Marketing and Branding sub-committee of the KwaZulu-Natal College of Nursing.

# 3<sup>rd</sup> Global Nursing Congress

## Clinical learning environment, supervision and nurse teacher (CLES+T) scale: Translation and validation of the Arabic version

**K.Guejda<sup>1</sup>, A.Ikrou<sup>2</sup>, C.Strandell-Laine<sup>3</sup>, R.Abouqal<sup>4</sup> and J.Belayachi<sup>4</sup>**

<sup>1</sup>Higher Institute of Nursing Professions and Health Techniques, Morocco

<sup>2</sup>Administrative and Economic Department of Health Delegation of Tiznit, Morocco

<sup>3</sup>Novia University of Applied Sciences, Finland

<sup>4</sup>Laboratory of Biostatistics, Clinical and Epidemiological Research, Faculty of Medicine and Pharmacy of Rabat, Mohammed V University of Rabat, Morocco

The Clinical Learning Environment, Supervision and Nurse Teacher (CLES + T) scale is internationally valid and reliable tool used to evaluate the quality of the clinical learning environment for students in the health professions. The leading idea behind the linguistic conception of CLES+T items was to be able to elucidate the optimal level of a learning environment, the supervisory relationship and the role of nurse teacher. There is no valid Arabic version of CLES + T scale for use in Arabic-speaking countries. This validation study aimed to translate the CLES + T scale into Arabic and to evaluate its psychometric properties.

The present study was carried out at two public nursing education institutions in Morocco. The sample included 1550 nursing students enrolled in the first, second and third year of the nursing, midwifery and health-techniques degree program,

and who have just completed a course of clinical practicum in hospital ward or primary healthcare settings. The CLES + T scale was translated into Arabic and back-translated. Internal consistency reliability and construct validity using exploratory and confirmatory factor analysis were conducted.

The CLES+T scale showed alpha coefficients ranging from 0.71 to 0.92 and the 5 factors identified explained 55 % of the variance, with "Role of nurse teacher" and "Supervisory relationship" as the two main factors explaining 41% of the variance. Confirmatory factor analysis approved the factor structure of the Arabic version of the instrument

In Conclusion, the Arabic version of CLES+T displayed a suitable psychometric properties for using it in evaluating the quality of clinical learning environment of nursing students in Morocco and other Arabic speaking countries.

### Biography

Khadija Guejda is Ph.D student at Laboratory of Biostatistics, Clinical and Epidemiological Research, Mohammed V University of Rabat, Morocco. She is a nurse teacher at the Higher Institute of Nursing Professions and Health Techniques, Agadir, Morocco.

# 3<sup>rd</sup> Global Nursing Congress



## The impact of nurses' perceptions of systems thinking on occurrence and reporting of adverse events: A cross-sectional study

Ahmed Hassan Albelbeisi<sup>2</sup>, Edris Kakemam<sup>1</sup>,  
Samane Davoodabadi<sup>3</sup>, Mina Azarmi<sup>4</sup>,  
Fatemeh Zolghadr<sup>5</sup> and Mehdi Mamene<sup>6</sup>

<sup>1</sup>Tabriz Health Services Management Research Center, Tabriz University of Medical Sciences, Iran

<sup>2</sup>Department of Health Management and Economics, School of Public Health, Tehran University of Medical Sciences, International Campus (TUMS-IC), Iran

<sup>3</sup>Department of Health Management and Economics, School of Public Health, Tehran University of Medical Sciences, Iran

<sup>4</sup>Department of Health Services Management, School of Health Management and Information Sciences, Iran University of Medical Sciences, Iran

<sup>5</sup>Department of Medical-Surgical Nursing, School of Nursing and Midwifery, Tabriz University of Medical Sciences, Iran

<sup>6</sup>Department of Nursing, Faculty of Nursing and Midwifery, Ilam University of Medical sciences, Iran

**Aims:** To assess systems thinking level and its relationship with occurrence and reporting of adverse events in Iranian nurses.

**Background:** Systems thinking has recently emerged important element of patient safety and quality improvement in health care systems. It helps healthcare professionals to understand the different elements of healthcare systems, the interrelatedness, and interdependencies of these elements in the healthcare systems.

**Methods:** This cross-sectional survey was carried out in ten teaching hospitals in Tehran, Iran. A total of 511 nurses were selected using simple random sampling. Systems thinking was measured using the validated Systems Thinking Scale. Data analysis was performed by descriptive analyses, independent t-test, and

logistic regression analysis.

**Results:** The average score for total systems thinking was a mean of 49.45 (SD = 12.10; range 0–80). In total, 67.5% of participants reported the experience of the occurrence of adverse events leading to harm to patients and 65.2% of them responded as having appropriate adverse events reporting behaviors. Nurses who had higher scores in systems thinking were found to be more likely to report adverse events (Odds ratio = 1.07; 95% CI = 1.05 – 1.09), whereas they were less prone to experience adverse events (Odds ratio = 0.97; 95% CI = 0.95 – 0.98).

**Conclusion:** Our results indicated that the nurses' systems thinking level was moderate. Systems thinking had a significant role in



# 3<sup>rd</sup> Global Nursing Congress

preventing the occurrence of adverse events as well as improving the reporting of adverse events. Therefore, it is recommended to enhance the competency of nurses' thinking systems to prevent the occurrence of adverse events and to improve the reporting of adverse events.

## **Implications for Nursing Management:**

Nursing managers need to focus on the systems thinking weaknesses and the occurrence and

the reporting of adverse events in policymaking, practice, and research. Also, systems thinking should be integrated with the health care system for preventing the occurrence of adverse events and improving reporting of adverse events. They should support, lead, and allocate the essential pragmatic strategies and resources for the involvement of all health care members in policymaking.

## **Biography**

Ahmed Hassan Albelbeisi, Bachelor degree in Nursing, Master's degree in Public Health (Epidemiology), Ph.D. in Healthcare Services Management. Experienced Ph.D. with a demonstrated history of working in the hospital & health care industry. Skilled in Microsoft Excel, Microsoft Word, Microsoft Office, SPSS, Training, and Research. Strong research professional graduated from Islamic University - Gaza. Al-Quds University, and TUMS.

# 3<sup>rd</sup> Global Nursing Congress



## Unveiling beauty: Insight into being tattooed post mastectomy

**Victoria Reid-de Jong**

*Trent University, Canada*

Thousands of women continue to be diagnosed every year with breast cancer, many undergoing surgical mastectomy as part of their treatment to eradicate or control the spread of disease. At present, the recommendation for breast conserving surgery (BCS) and breast reconstruction dominates discourse in oncological settings, limiting conversations about alternative options for women to consider following the removal of their breast(s). Recent discourses within breast cancer and gendered studies literature however suggest some women are challenging post mastectomy bodies as abject bodies and are making the decision to be inscribed where breasts once occupied space. To gain insight into the experience of being tattooed where breasts once occupied space, several women were

interviewed and the teachings of Gadamer's philosophical hermeneutics engaged to better understand what it means to be tattooed post mastectomy. Discoveries include feeling sad and damaged post mastectomy, embodying the tattoo as a novel representation of self for women living without breast(s), and reclaiming power, control and confidence in a way that is symbolically meaningful. Health care providers working with women diagnosed with breast cancer are invited to learn from women who shared their experiences of being tattooed post mastectomy and consider expanding discourse to include options beyond breast reconstruction. Tattooing is an emerging body project in contemporary society that can offer women who live disembodied from their post-mastectomized body an alternative.





# 3<sup>rd</sup> Global Nursing Congress

## Biography

Victoria Reid-de Jong is a Registered Nurse and Professor in the Trent-Fleming School of Nursing at Trent University in Ontario, Canada. Victoria is known as a passionate educator, who has received provincial and national awards recognizing her excellence in teaching. Victoria was the recipient of a generous donation from the Canadian Imperial Bank of Commerce (CIBC) to support her continued her work with women diagnosed with breast cancer, focusing on mastectomy tattoos, and developing a community of practice for patients and families experiencing a cancer diagnosis. Diagnosed with breast cancer herself in 2015, Victoria brings a unique perspective to living in the world without breasts, often challenging normative ideologies for what it is 'to be' a woman in contemporary society.

# 3<sup>rd</sup> Global Nursing Congress



## Virtual support in dementia: A possible viable strategy for caregivers

**Ceres Ferretti, Ricardo Nitrini and Sonia M. D. Brucki**

*Cognitive and Behavioral Neurology Group, Faculty of Medicine, Hospital das Clínicas, University of São Paulo, Brazil*

**Background:** In the last 10 months, amid the COVID-19 pandemic, several studies have demonstrated the viability of health education and virtual support strategies for caregivers of dementia patients to provide home care. Low and middle-income countries in particular, have sought to use these approaches to reduce the daily burden of caregivers, through virtual meetings providing education and support.

**Objectives:** To present the feasibility of a pilot study on the use of a care support action under the CAAD Project - indirect costs of dementia – run by the HC-FMUSP.

**Methods:** An observational study of 93 caregivers invited to participate in virtual 1-hour meetings three times a week was conducted.

BEFORE	Values			AFTER	Values	
	*0	#1			0*	1#
Q.2B	42		0	Q.2	6	36
Q.3B	42		0	Q.3	6	36
Q.1B	42		0	Q.1	12	30
Q.4B	42		0	Q.4	6	36
Q.5B	42		0	Q.5	0	42
Q.6B	42		0	Q.6	0	42
Q.7B	42		0	Q.7	0	42
Q.8B	42		0	Q.8	0	42

\*Q = Question; \*0 = difficulties of managements;  
\*\*B= Before; #1 is considered as without  
Difficulties

Q=Question; \*\*0=with difficulties; 1# = without  
difficulties

**Table 1.** Frequencies of caregivers difficulties before and after virtual support program

# 3<sup>rd</sup> Global Nursing Congress

**Results:** Of the 93 family members who took part, 42 answered the eight questions about the effectiveness of the action after 3 months. The rate of positive responses for program satisfaction was high, ranging from 86% to 100%. The tables 1 and 2 show these results.

**Conclusion:** The study results of this

simple intervention suggest the utility of the program for caregivers of dementia patients in primary care. The intervention can provide a better understanding of difficulties faced by caregivers in their daily care of dementia patients and daily management guidance on a case-by-case basis.

Test Statistics			
N	<sup>a</sup> Cochran's	df	<i>p</i>
42	56,609	7	<sup>#</sup> ,000
<sup>#</sup> = <i>p</i> = < 0.001			
<sup>a</sup> Cochran Test			

**Table 2.** Cochran model for global Improvement of difficulties after virtual support 2021

# 3<sup>rd</sup> Global Nursing Congress

## Nursing practice on post-operative wound care in surgical wards at Muhimbili National Hospital, Dar-es-salaam, Tanzania

Elizabeth Z. Mika<sup>2</sup>, Adela A. Mwakanyamale<sup>1</sup>, Anna Mary A. Mukaja<sup>1</sup>, Mathew D. Ndomondo<sup>1</sup>, Joan P. Zenas<sup>2</sup> and Ambroce M. Stephen<sup>2</sup>

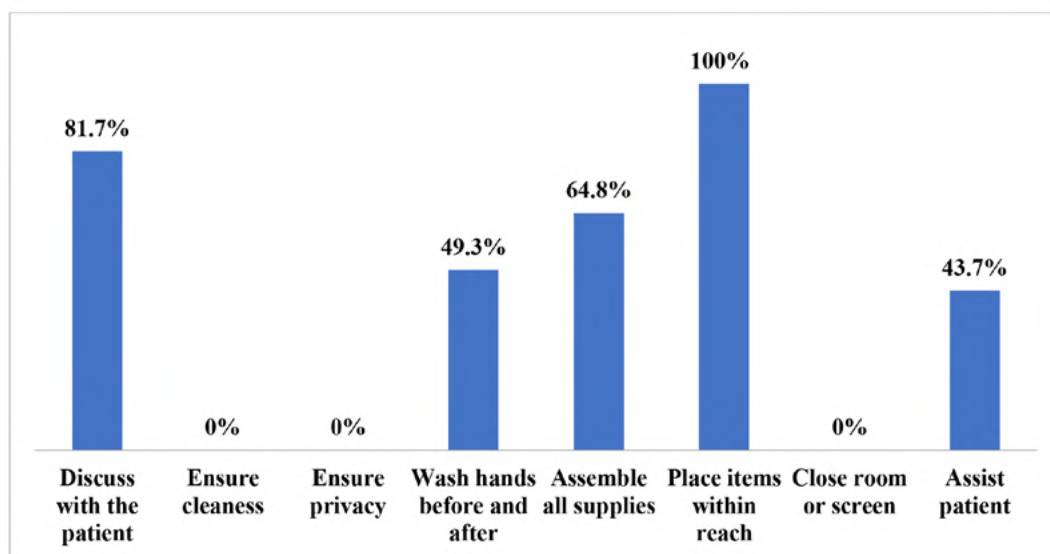
<sup>1</sup>Department of Medical and Surgical Nursing, Faculty of Nursing, Hubert Kairuki Memorial University, Tanzania

<sup>2</sup>Department of Fundamentals of Nursing and Basic Sciences, Hubert Kairuki Memorial University, Tanzania

**Background:** Postoperative wound healing has been a problem which causes high mortality in the developing world; postoperative wound has been reported to cause devastating consequences and a measurable mortality. There is a lack of published studies in Tanzania regarding Nursing practice on post-operative wound care in surgical wards at Muhimbili National Hospital, Dar-es-Salaam, Tanzania. This study assesses nursing practice

on postoperative wound care by nurses at Muhimbili Hospital.

**Methods:** A cross-sectional study of nurses was conducted using a random selection of wards at Muhimbili Hospital. A multistage cluster sampling technique was employed to obtain the required number of the study participants. Data was collected using a checklist from convenient sample of 71 nurses.



**Figure 1:** Assessment of nurses on post-operative wound care procedure in percentage



# 3<sup>rd</sup> Global Nursing Congress

**Results:** The result shows that the majority of the participants were female (76.5%) and those of the age group 25 to 34 years were 40.8%.

More than half of the participants reported to have poor post-operative wound care practice (57.7%). Male participants scored higher, and had better practice compared to female participants, however, there was no significant difference between the scores ( $P=0.803$ ).

**Conclusion:** Majority of the nurses in surgical wards do not follow the postoperative wound care checklist provided by Muhimbili National Hospital in Tanzania although they know its importance. Assessment of the wound and documentation continues to be a problem in the nursing profession in Tanzania.

Nurses are reasonably knowledgeable about the principal of wound dressing; however lack of knowledge on some of the key principles of wound dressing is worth noting.

## Biography

Elizabeth Zakariah Mika holds a Master degree in Women's Health Nursing from Boston College - William F. Connell School of Nursing (USA) under IFP Ford Foundation scholarship and a Bachelor of Science in Nursing from Hubert Kairuki Memorial University, Dar es Salaam – Tanzania. Elizabeth works as a professional Nurse and lecturer at Hubert Kairuki Memorial University in Dar es Salaam, Tanzania. She is currently teaching Professionalism in Nursing, Nutrition, Educational Psychology including Principles of Teaching, and Trends of Issues in Nursing. Elizabeth advocates in women empowerment to take charge of their health by providing health education at various scheduled settings. Elizabeth volunteers in community activities for development and social justice such as participating in fund raising activities. She climbed Kilimanjaro Mountain for this purpose to raise funds to build a multipurpose development trust centre which is intended to alleviate poverty to the community members.

# 3<sup>rd</sup> Global Nursing Congress

## Reflections of nurses who were hospitalized by COVID-19: Life and profession

**Arévalo-Ipanaqué J.M.**

*Peruvian University Union, Peru*

**Objective:** To interpret the reflections of the nurses who were hospitalized by COVID-19, regarding life and profession. **Methods:** a phenomenal qualitative study was conducted with interviews with 6 Peruvian professionals. **Results:** 4 emerging categories of reflections on life, professional exercise, humanized care and emotional appearance were obtained as results.

**Conclusion:** It is concluded that coexistence with suffering and having suffered the disease in their own flesh, has meant for nursing professionals to value the life and nature of their profession, without having yet overcome the emotional damage and that, nevertheless, there are always heroic gestures.

### Biography

Degree in Nursing with 22 years of professional experience. Peruvian researcher registered with CTI-Concytec. Master in Higher Education Sciences. Master's degree in Public Health and Doctor's degree in Health Sciences. Specialist in Scientific Research and University Teaching with national and international diplomas in quantitative and qualitative research. Postgraduate University Teacher in Scientific Research. Past-president of the research committee of the Regional Council III Lima Metropolitana of the College of Nurses from Peru in charge of the Scientific Journal Science and Nursing Art. Executive Editor of the Scientific Journal of Nursing "Research and Innovation", Tacna – Peru. President of the Scientific Board of Commission in Scientific Journal Health Unit XXI, La Pampa – Argentina. Editorial Board Member of American Journal of Nursing Science (AJNS). Author of 14 articles published in scientific journals and 2 Chapters of Books in Spain and Brazil. Expert reviewer of scientific journals in Peru, Mexico, Cuba and India. Peruvian representative of the Ibero-American Nursing Research Team in the COVID-19 context.

# 3<sup>rd</sup> Global Nursing Congress

## Benefits of Zu Chang Fa as a relaxation technique on the holistic health of undergraduate nursing students during COVID-19

Reyna Isabel<sup>1,4</sup>, Hernandez Pedroza, Castillo Arcos, Lubia del Carmen<sup>2</sup>, Valazza, Jose Heriberto<sup>3</sup> Vargas, and María Rubí<sup>4</sup>

<sup>1</sup>University of Guanajuato, México

<sup>2</sup>University of Carmen, México

<sup>3</sup>Laoshi School, Argentina

<sup>4</sup>University of Sonora, México

**Introduction:** There are some studies on the benefits of meditation, but still very few in the context of the pandemic due to COVID-19 and related to holistic nursing. Objective: To describe the benefits of Zu Chang Fa as a relaxation technique on the health of undergraduate nursing students during COVID-19.

**Method:** Qualitative descriptive exploratory research. The sample was non-probabilistic by convenience, achieved by the technique of saturation and redundancy of data, 38 students who were studying the fifth semester of the bachelor's degree in nursing, from a public university in the state of Sonora, Mexico,

participated with prior informed consent. The information was collected by online interview and processed according to content analysis.

**Results:** The results show that three categories emerged: i) decreases academic stress, ii) improves interpersonal relationships and iii) physical and emotional health.

**Conclusions:** All students practicing the Zu Chan Fa technique experienced positive benefits in their physical, psychological and social health, therefore, it is important to contemplate these complementary therapies based on the connection of mind and body, as part of healthy practices in academic contexts.

### Biography

M.C. Reyna Isabel Hernández Pedroza. Originally from Hermosillo, Sonora. She studied her Bachelor's Degree in Nursing at the Nursing Department of the Central Unit of the University of Sonora, Generation 2005-2009. She completed her Master's Degree in Nursing Sciences at the University of Guanajuato, generation 2010-2012. Currently a student of the Doctorate in Nursing Sciences at the University of Guanajuato, Campus Celaya - Salvatierra. He has carried out nursing functions in the clinical area of public and private hospitals, participated in national and international presentations, as well as teaching experience in a private university and is currently a research professor in the Department of Nursing, University of Sonora, Mexico.

# 3<sup>rd</sup> Global Nursing Congress



## MerleauPontal reflection: The perception of women with breast cancer regarding the impact on their children

Eliane Cristina da Silva Pinto Carneiro, Rose Mary Costa Rosa Andrade Silva, Eliane Ramos Pereira, Maria Paula Jahara Lobosco, Alessandra Cerqueira dos Santos Andrade and Sandra Conceição Ribeiro Chicharro

*Faculdade de Enfermagem Aurora Afonso Costa, Núcleo de Pesquisa em Saúde, Filosofia e Educação Humanizada, Universidade Federal Fluminense, Brazil*

**Introduction:** Despite advances in the diagnosis of breast cancer, the stigma of death still imposes itself. Clear communication with family is required, which is a challenge in the care of health team. The diagnosis of neoplasia changes the patient's routine and family structure, reflecting negatively in the family and patient herself; as a consequence, there is a negative repercussion for women with breast cancer, depending on how they perceive the influence of their disease and possible damage to their children's lives.

**Objective:** To reflect upon experiences of women with breast cancer in relation to the impact of their disease on children's lives.

**Methods:** Reflection based on Merleau-Ponty, after theoretical review of the psychological impact of female breast cancer on offspring and its perception by this woman.

**Results:** Children whose mothers have breast cancer cope with stressful situations related to the diagnosis of maternal disease. The woman perceives such an impact, which affects the experience of the pathology, resulting in guilt and worsening psychological suffering in relation to the disease. For Merleau-Ponty, all consciousness is perceptive and the perceived world is the presumed basis of all rationality and existence.

**Conclusion:** The imminence of death of mothers with breast cancer may provide anticipatory grief in their children; the absence of these mothers, when dedicating themselves to cancer treatments, imposes itself as a stressing factor to the offspring, bringing greater anguish to women in facing the pathology.

# 3<sup>rd</sup> Global Nursing Congress



## Abandonment at the transition from hospital to home: Family caregivers' experiences

Mardanian Dehkordi L<sup>1</sup>, Nikbakht Nasrabadi A<sup>2</sup> and Taleghani F<sup>1</sup>

<sup>1</sup>Isfahan University of Medical sciences, Iran

<sup>2</sup>Tehran University of Medical sciences, Iran

**Background:** People with concurrent chronic conditions face different situations that lead to frequent transferring between the hospital and home. Despite the use of different strategies for improving transitional care, these transferring are associated with different challenges. This article aims to explore family caregivers' experiences of transitional care in diabetes with concurrent chronic conditions.

**Methods:** This descriptive explorative study was done at university hospitals in two big cities (Isfahan and Tehran) of Iran. The data collection was conducted from November 2018 to February 2020 using deep, semi-structured, and face-to-face interviews which are focused on family caregivers' experiences of transitional care. The researchers continued the sampling until the data saturation. Finally, 15 family caregivers were selected through purposive sampling. Data collection and data analysis were performed concurrently. Data

were analyzed through the conventional content analysis method.

**Results:** Two main themes were identified: unsafe transition (unplanned discharge, inappropriate communication, lack of patient center care, and unavailable healthcare team) and erosive effort (financial burden, psychological stress, physical exhaustion, and lack of supportive sources).

**Conclusion:** The findings point to the importance of designing a discharge plan and preparing family caregivers before being discharged by healthcare providers. It appears to be essential for health managers and policymakers to pay attention to safe transitional care planning. The establishment of transitional care centers will help to ensure continuity of care. Future research focusing on the design and implementation of an appropriate transitional care model is recommended.

### Biography

Dr Leila Mardanian Dehkordi is an academic member of Isfahan University of Medical Sciences. Dr. Mardanian's research interest has focused on diabetes. Dr Mardanian is actively engaged in diabetes professional and local communities to develop team science and improve diabetes care, patient outcomes and quality of life of those living with diabetes.

# **KEYNOTE PRESENTATIONS**

## **DAY 2**



**Virtual Event**

---

# **3<sup>rd</sup> Global Nursing Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Susann Porter holds a post-doctoral position at Malmö University and belongs to the Research Centre for Work Life and Evaluation Studies (CTA). Her research interests include elderly care in Sweden and the return-to-work process for people with mental health problems. Alongside research work, Susann also teaches research methods on the nursing program at Malmö University. Prior

to starting at Malmö University, she worked for 6 years at Lund University, Sweden where in 2019 she received her PhD in Health Science with focus on mental health. Susann is an Occupational Therapist and graduated from Karolinska Institute in Stockholm, Sweden in 2001. She has worked clinically both in hospital and municipality settings in Sweden and the UK.

## S. Porter

Malmö University, Sweden

## The paradox of political accountability and deficits in the preconditions for service delivery in elderly care: A qualitative study of Swedish politicians

The objective of this study was to explore how politicians accountable for Swedish elderly care viewed their assignment, their beliefs and knowledge regarding the psychosocial work environment for elderly care employees, the factors affecting their work environment, and how these politicians regarded elderly care during the COVID-19 pandemic.

**Scope:** The study consisted of 41 interviews with politicians in municipalities across Sweden. The results showed three categories: (1) interpretation of the assignment directs the focus; (2) recognizing shortfalls in the employees' work environment; and (3) exposing deficiencies due to the COVID-19 pandemic. The strongest category was identified as interpretation of the assignment directs the focus and was described as the delivery of good and quality care. Nevertheless, this study highlights shortfalls in the delivery of care services where the employees' work environment, especially in the home care

sector, was frequently described as stressful. The COVID-19 pandemic adversely affected the work situation for staff in elderly care. In that setting, staff shortages and lack of competency were common. Nurses were particularly affected by high workload and responsibility.

**Methods Used:** This study was a qualitative grounded theory study.

**Conclusion:** There are well known and inadequate prerequisites in the work environment in the Swedish elderly care, but the link between this unsatisfactory work environment, high sick leave rates, and the quality of elderly care has not always been acknowledged by accountable politicians. This coexistence of accountability for delivering good and quality elderly care and awareness of fundamental deficiencies that impact the delivery of care highlights a fundamental paradox where the staff and the elderly are caught in the middle.

# 3<sup>rd</sup> Global Nursing Congress



## BIOGRAPHY

Simone Ries is an academic employee at the Protestant University of Applied Sciences of Ludwigsburg for the areas of teaching, skills lab, public relations and organization. She has academic degrees in health and social management and nursing science including doctorate. Two of your scientific focal points are complementary healing methods and the development of nursing

competence profiles in acute and psychiatry care. She is a trained nurse and has worked in the hospital on surgery, gynecology and the guard room. Last but not least, she is a teacher for nursing professions and has taught at various nursing schools, including the implementation of competence-oriented practical support in a wide variety of practice settings.

## S. Ries

Protestant University of Applied Sciences, Germany

## A specific "Large-Scale-Assessment" for practical nursing competency

**Background:** Rapid, paradigmatic change, increased staff needs and more demanding requirements claim a clear, transparent form of quality assurance and the determining of practicable minimum standards in the area of occupational education, especially in the sector of nursing care. The "TEMA" sub-project, part of the large-scale "ASCOT" study, was a first in geriatric nursing education. A technology-based, computer-supported measuring instrument was developed for a potential, standardised estimate of practical nursing competency pertaining to the third year of study.

**Methods:** Overall, 408 nursing students and trainees from 20 educational institutions in Southern Germany participated in the video-supported competency assessment, based on the "TEMA" criteria. The statistical data analyses took place as a personalised and competency-based diagnostic report. Numerical frequency of test items and participants were calculated. Two specified forms of the item-response theory

were used to check the Rasch validity, among other things.

**Results:** After evaluating the scoring, more than 2/3 of the participants (= 267 participants) passed the nursing-based competency test. The average number of points achieved on aforementioned basis was 43.75 points out of 96.

**Summary and Conclusion:** The technology based, computer-supported measuring instrument appears to be suitable and valid for the estimate of practical nursing competency in healthcare and nursing. However, it proves to be demanding and challenging for the individual participants. The final results from "TEMA" were confirmed. Taking into account the new nursing occupation law and the generalistic approach behind it, the researcher suggests among other things an expansion of the nursing setting to include "acute care", "paediatric care" etc. and a revision of individual questions pertaining to the overall interdisciplinary context.

# **SCIENTIFIC ABSTRACTS**

**DAY 2**



**Virtual Event**

## **3<sup>rd</sup> Global Nursing Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress

## Hypertension and its related factors among patients with type 2 diabetes mellitus: A multi-hospital study in Bangladesh

**Hiba Alsaadon**

*Department of Epidemiology and Preventive Medicine, School of Public Health and Preventive Medicine, Faculty of Medicine, Nursing and Health Sciences, Monash University, Australia*

**H**ypertension and type 2 diabetes are associated with each other, and their coexistence is linked to diabetes-related complications such as stroke, coronary artery disease, kidney disease, retinopathy and diabetic foot. This study aimed to determine the prevalence, awareness and control of hypertension and factors associated with hypertension among people with type 2 diabetes mellitus (T2DM) in Bangladesh. A cross-sectional and retrospective study was conducted in 2017, and data from 1252 adults with T2DM were collected from six hospitals that specialise in diabetes care. These hospitals provide primary, secondary and tertiary healthcare and cover the rural and urban populations of Bangladesh. Cross-sectional data were collected from patients via face-to-face interviews, and retrospective data were collected from patients' past medical records (medical passport), locally known as the patients' guidebook or record book. The

associations between hypertension and its related factors were examined using the bootstrapping method with multiple logistic regression to adjust for potential confounders. The mean age of participants was 55.14 ( $\pm$  12.51) years. Hypertension was found to be present among 67.2% of participants, and 95.8% were aware that they had it. Of these, 79.5% attained the blood pressure control. The mean duration of diabetes was 10.86 ( $\pm$  7.73) years. The variables that were found to be related to hypertension include an age of above 60 years, physical inactivity, being overweight or obese, a longer duration of diabetes and chronic kidney disease. The prevalence of hypertension as well as its awareness and control were very high among people with known type 2 diabetes. As there is a strong relationship between hypertension and diabetes, patients with diabetes should have their blood pressure regularly monitored to prevent major diabetes-related complications.

### Biography

Hiba has completed her Masters degree in Biotechnology at the age of 27 years from RMIT University School of Applied Science in Melbourne. Also, she has completed her Honours degree in Biomedicine at the age of 29 years from Western CHRE, Victoria University, Department of Biomedical Science in Melbourne. During her Masters studies, she worked on a research project to investigate the antimicrobial effect of RRM-MV designed peptides on bacterial biofilm. However, during her Honours studies, she worked on different projects to investigate a novel treatment to reduce the risk of cardiovascular disease, atherosclerosis in special. The first project was to demonstrate whether or not the activation of the Mas receptor causes a change in eNOS phosphorylation at the Serine635 site in rabbit model. The second project was to investigate whether the MasR could be involved in the progression of the next step in atherosclerosis, neo-intimal formation. In addition, she assisted others Honour students and staff members to determine the vasoactivity role of angiotensin A and alamandine in rabbit model of atherosclerosis. Also, she helped supervise 3rd year students enrolled in Project. She also appointed as an academic research assistant at the Monash University School of Public Health and Prevention Medicine in Melbourne. She was involved in literature review and writing paper on type 2 diabetes, and assisted others in writing paper.

# 3<sup>rd</sup> Global Nursing Congress

## Learning the impact of culture mediated by online international collaboration in nursing education

**K. Nielsen and R. Kontni**

*VIA University College, Denmark*

**Background:** As a large group of nursing students are precluded to study culture and nursing abroad, at University Colleges in Canada and Denmark we have created an online international course facilitating collaboration between the students. The course focused on assisting Canadian and Danish students to understand the impact of culture on living with a chronic illness, on development of health systems, and on nursing in the two countries.

The objectives were to facilitate students' understanding of the impact culture has in different countries on health, health systems and nursing, and to investigate the short-term and long-term impact of the international collaboration.

**Design:** A qualitative study was conducted to investigate the impact and learning outcome of the course as experienced by the students. The data were generated by semi-structured interviews shortly after the course and at the end of the Nursing Programme.

**Participants:** Six Canadian and nine Danish BScN nursing students were interviewed shortly after the course and eight of the nine Danish BScN nursing students were interviewed again at the end of the Nursing Programme.

**Findings:** In the first part of the study both Canadian and Danish students responded to have learned about culture, health, health systems, and the global reach of nursing. In the second part of the study, the Danish students experienced that the course had started a learning process, which still had an impact on their approach to the patients and their way of nursing. The course gave rise to a critical view on the health system and nursing and promoted their English language skills, which again encouraged half of the Danish students to study abroad.

**Conclusion:** The study suggests that online international courses has both a short-term and a long-term impact on the learning process, and it is a promising practice in nursing education.

### Biography

Kirsten Nielsen is a PhD., MSc. Nursing and senior lecturer at the Baccalaureate Nursing Programme at VIA University College, Campus Holstebro, Denmark. She is also affiliated with the Research Centre for Health and Welfare Technology. Her PhD thesis was about learning in clinical placements mediated by ePortfolio, and since 2015, her research focus has been learning, nursing education, online international collaboration courses and elderly care. She has participated in research projects about Nursing students' learning experiences in clinical placements and simulation, the first part of the study about Globally Networked Learning, and research about nursing students learning elderly care mediated by narrative interviews. Besides, she has been project leader on research about when nursing students are ready to expand their learning repertoire, and the second part of the study about Globally Networked Learning. Currently she is project leader on research about nursing students' strategies to take responsibility on their own learning process through the 3½ year Baccalaureate Nursing Programme.

# 3<sup>rd</sup> Global Nursing Congress

## Entrepreneurship is the Future of Nursing

**Eman Salman Taie**

*Helwan University, Egypt*

The healthcare sector has made tremendous advancements over the past decade. These advances are primarily related to improved diagnosis and treatment, system cost-efficiency, and information technology integration. These advances have increased the need for competent professionals. Healthcare facilities across the world are inclined towards handing over unique roles to entrepreneurs. Nurse entrepreneurs use their professional nursing experience and education to start their own business in the healthcare industry. Nurse Entrepreneurs combine healthcare knowledge with business sensibility to create successful

business ventures focused on optimal healthcare delivery. Entrepreneurial nurses are changing the field of healthcare; nursing entrepreneurship provides nurses with self-employment opportunities which allow them to pursue their personal vision and passion to improve health outcomes using innovative approaches. Becoming a nurse entrepreneur can give a nursing professional a significant measure of freedom to build their healthcare career on their own terms. However, this freedom is carefully shaped and earned by a specific step-by-step process.

### Biography

Eman Salman Mohamed Salman Taie is professor of Nursing Administration - Faculty of Nursing- Helwan University- Cairo- Egypt. She is International Certified Trainer & Human Resource Development Consultant in International Board for Certified Trainer (IBCT). She has 20 international published researches & three international published books. She is reviewer & membership in the editorial board in many of the international journals.

# 3<sup>rd</sup> Global Nursing Congress

## Application of novel psychoactive substances (NPS): Chemsex and HIV/AIDS policies among men who have sex with men (MSM) in Hong Kong

Alex Siu Wing Chan<sup>1</sup> and Patrick Ming Kuen Tang<sup>2</sup>

<sup>1</sup>Department of Applied Social Sciences, The Hong Kong Polytechnic University, Hong Kong

<sup>2</sup>Department of Anatomical and Cellular Pathology, State Key Laboratory of Translational Oncology, The Chinese University of Hong Kong

Chemsex is defined as the use of several drugs to stimulate, extend and/or enhance sexual encounters, particularly for those who have sex with men (MSM) (Giorgetti, et al, 2017). It is observed that the frequency of chemsex among one research group, MSM attending Dutch STI centers in Limburg, reached 35 percent. Chemsex is already implicated in the development of sexually transmitted infections (STIs) as well as a higher likelihood of addiction, anxiety and depression (Evers & Ymke, 2020; Brow & Teneille, 2020). Chemsex has been recognized as a worldwide phenomenon, and there has been a rise in overall medical and academic concerns over chemsex, whereby substance use is linked to boosting sexual satisfaction, typical in a group setting, especially among homosexuals. It is reassuring to learn that lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals have transformed into an increasingly committed, valued and visible group in society (Chan, 2021). However, the issue of chemsex continues to be one that must be addressed expeditiously. A strategy based on ultra-performance liquid chromatography–tandem mass spectrometry was created to measure the most frequently abused substances,

synthetic cannabinoids, synthetic cathinones, and GHB, in the nails of people suspected of taking such drugs in music and intercourse contexts (Busard, 2020). Prescription drug abuse and its associated hazards, including co-ingestion with recreational substances, have lately come to prominence as a global general wellbeing issue. These could have a number of healthcare and societal effects, necessitating strong community healthcare strategies to combat the practice, along with ongoing education and training for health professionals to enhance awareness and harm minimization (di Giannantonio, 2020). As a result, casual encounters are being rendered extremely convenient via mobile devices. These are a shared means of relief that improves the welfare of homosexuals in an environment that discriminates against them. The substances seen in such events are primarily  $\gamma$ -hydroxybutyrate (GHB) and  $\gamma$ -butyrolactone (GBL), or G, crystallised methamphetamine, and mephedrone (Glyde, 2015). This study indicates that chemsex trend will ultimately become a significant concern, harming homosexual men who employ chem to fulfill their sexual needs as well as causing HIV/AIDS in Hong Kong.



# 3<sup>rd</sup> Global Nursing Congress

## Biography

Dr Chan is a Chartered Psychologist (CPsychol) of the British Psychological Society in addition to having acquired full membership of American Psychological Association. Moreover, Dr Chan is a local Registered Social Worker (RSW), having acquired a Master's degree in Social Work from The University of Hong Kong (HKU). He is also competent at intensive short-term dynamic psychotherapy as he received training in this field at Oxford University. His current research focuses include older adults, homosexuality and psychological well-being.

# 3<sup>rd</sup> Global Nursing Congress

## The effect of corona quarantine on the self-concept dimensions of medical sciences students

**Parand Pourghane, Fatemeh Mansouri and Mahdi Faravani Saran**

*Zeynab(P.B.U.H) School of Nursing and Midwifery, Guilan University of Medical Sciences, Iran*

**Introduction:** Self-concept is defined as a set of perceptions of self (physical, intelligence, emotional, social, etc.) that shapes each person's image of himself / herself. Considering the rapid prevalence of Covid 19 and its obvious impact on the physical and mental health of the people in the community, especially the sensitive student body, this study was conducted to exploring the effect of corona quarantine on students' self-concept.

**Methods:** This study was performed by qualitative research method and content analysis approach in 2021 among medical students in Guilan province (In North of Iran). To collect information, 14 medical students were selected by purposeful sampling method and interviews were semi-structured. The interviews were studied several times and then analyzed by Lundman and Graneheim

methods. Linclon and Gouba criteria were used to ensure the accuracy and reliability of the data

**Findings:** Information were classified in three main categories and seven subcategories including: enhanced self-confidence (with subcategories of individual positivity, the better self-concept), in search of peace (with subcategories of mystery and constant need with God, judgment based on justice), Pursued for a bright future (with subcategories of hope for a better tomorrow, in search of excellence, tolerance of transient stresses).

**Conclusion:** Despite the quarantine period and the resulting frustration in some students, most were hopeful about the future and have a positive outlook on life, which in itself can depict a good future for them.

# 3<sup>rd</sup> Global Nursing Congress

## Human care by nursing in the face of healthcare judicialization in COVID-19: From the perspective of Merleau-Ponty

Veronica Bessa de Paulo de Moura, Rose Mary Costa Rosa Andrade Silva, Eliane Ramos Pereira, Monica Moura da Silveira Lima, Vilza Aparecida Handan de Deus and Laís Silva Sales do Amaral

*Universidade Federal Fluminense, Brazil*

**Introduction:** To reflect on the care is to recognize it in the ontological perspective of its existence, so that the professionals of law and health, especially of Nursing, can develop a human and empathic practice, beyond the technique.

The COVID-19 served to expose to all society the importance of nursing as a profession that values human care.

We must not forget the importance of caring for those who care, giving visibility to Nursing with all the respect that this profession needs, because All Life Is Worth!

**Objective:** Reflect on human care by Nursing in the face of healthcare judicialization in the current scenario of COVID-19, from the thinking Merleau-Pontyano.

**Methods:** This is a theoretical-reflective analysis, carried out in May 2021, constructed from readings on nursing care from the perspective of judicialization of health during the COVID-period19, available in scientific articles in the electronic databases LILACS,

MEDLINE, IBECs and BDEF, and based on the concept of care proposed by the philosopher Merleau-Ponty in his phenomenological literary works.

**Results:** It is expected to strengthen the interdisciplinarity of public health with the legal field, through the reflection on the notion of intersubjectivity of Merleau-Ponty, as a reference for research and actions aimed at human care, broadening the look beyond technicality and in order to mobilize the feeling of human dignity.

**Conclusion:** In times of pandemic, the effective solution to the current problem is the attentive listening of individuals on the care and attention received both in nursing care and in the judicial sphere, in order to meet their expectations and remedy much of the problems arising from poor public service provision, and thus contribute to the reduction of the demand for judicialization and to the well-being of the human being, through dignified treatment and care.



# 3<sup>rd</sup> Global Nursing Congress

## Biography

Municipal Legal Attorney (Public Lawyer) in Paty do Alferes/RJ (2018 to the present time) and Itatiaia/RJ (2015-2018), with expertise in Public Health Law, Tax Law, Public Administration, Constitutional, Aeronautics, Public and Private International Law, and Consumer Law.

Master's degree in Health Care Sciences, in an integral research activity of the research center "Philosophy, Health and Humanized Education" of the Universidade Federal Fluminense (UFF), under the coordination of Dra. Rose Mary Costa Rosa Andrade Silva, and vice-leadership of Dra. Eliane Ramos Pereira (2021).

Bachelor of Law from the Faculdade Nacional De Direito (FND) of the Universidade Federal Do Rio De Janeiro - UFRJ (2005).

Holder of the title "Cum Laude" by UFRJ (2005).

Post-graduate by Universidade Cândido Mendes (2015).

Graduate of the Course of Letters - Portuguese / Bachelor's Degree at UNOPAR Faculty (2021).

# 3<sup>rd</sup> Global Nursing Congress



## Can you PACE yourself? Using PACE in the clinical setting

**Allen Walter Siegel**

*University of Maryland Upper Chesapeake Health System, USA*

Communication is a key aspect of inter-personal relationships in the clinical setting. Presence, active listening, compassion and empathy have been understood as separate components of communication. Based on years of research and application, these components, are not separate, but intimately connected within a therapeutic or relationship based conversation

and interaction. They are connected in a linear fashion.

Using relationship-based care theory, Dr. Siegel presents PACE as a person-centric, relational mind-set, and communication model that has profound positive implications in the clinical setting.



### Biography

Rev. Dr. Allen Siegel is the Chaplain and Director of Spiritual Care Services for the UM Upper Chesapeake Health System in Maryland, United States. He is also a Registered Nurse, a United States Health and Human Services DMORT Chaplain and American Red Cross Disaster Spiritual Care Chaplain. He is a national Board Certified Chaplain and ordained Inter-faith Minister with certificates in Health Ministry, Palliative Care, Ethics and Critical Incident Stress Management. Rev. Siegel facilitates resilience talks with staff and coordinates the health system's RISE Peer Responder and CISM teams. He recently authored, *Can You PACE Yourself? Using PACE in the Clinical Setting*, at End of Life and in Grief Work in the *Journal of Radiology Nursing* and presented this paper at the Future of Nursing 2022 international Conference.

# 3<sup>rd</sup> Global Nursing Congress



## A critical race perspective on the mental health characteristics of nursing, psychology and social work students

**Val Livingston and Breshell Jackson Nevels**

*Norfolk State University, USA*

**Purpose:** This descriptive study examined the mental health characteristics of 428 African American students at an urban HBCU representing 43 different fields of academic study to determine if there was a relationship between help-seeking behaviors, students' mental health concerns, and their selected major.

**Methodology:** Secondary data representing the demographic and mental health characteristics of all students seeking university-based mental health services between fall 2018 and fall 2019 was utilized for this query.

**Theoretical Basis:** Holland's theory on career choice was examined as an explanation for career choice decisions and critical race theory was explored as the reason Black collegians might experience certain mental and physical health concerns that could impact career choice decisions.

**Findings:** The extant literature proffers a

consideration of the impact of racialized stress on the development of African American collegians' physical and mental health concerns. Students from the professions of nursing, social work, and psychology represented 33% of the students seeking mental health counseling, suggesting common experiences and interests as factors in career choice decisions. Table 1 depicts the presenting mental health concerns of the top ten fields of academic study represented in the sample. Nursing, social work and psychology students shared many of the same presenting mental health concerns. Discussion: There is a need for students in the helping professions to address their mental health issues prior to entering the workforce. Study results suggest the need for faculty to be cognizant of the prodromal signs of mental health concerns and refer students early for mental health intervention. Implications for nursing education are discussed.

# 3<sup>rd</sup> Global Nursing Congress

**Table 1.** Presenting Mental Health Concerns by Field of Academic Study

Field of Academic Study	N	Academic Difficulties	Anxiety	Anger Control	Couples Problems	Depression	Family Problems	Peer Interpersonal	Situational Adjustment	Stress	Suicide
Biology	20	7	6	2	7	7	11	11	3	2	2
Business	18	2	6	6	6	9	6	5	2	3	1
Computer Science	18	5	4	0	5	6	7	5	1	4	2
Exercise Science	15	3	6	1	5	7	6	6	6	4	3
<b>Nursing</b>	<b>46</b>	<b>14</b>	<b>14</b>	<b>6</b>	<b>12</b>	<b>21</b>	<b>17</b>	<b>21</b>	<b>3</b>	<b>11</b>	<b>6</b>
Mass Comm	24	6	6	4	9	3	7	12	7	5	1
<b>Psychology</b>	<b>52</b>	<b>8</b>	<b>15</b>	<b>6</b>	<b>25</b>	<b>16</b>	<b>22</b>	<b>19</b>	<b>2</b>	<b>18</b>	<b>4</b>
Political Science	23	7	8	1	5	8	10	10	4	8	4
<b>Social Work</b>	<b>46</b>	<b>9</b>	<b>18</b>	<b>4</b>	<b>17</b>	<b>23</b>	<b>22</b>	<b>20</b>	<b>3</b>	<b>14</b>	<b>5</b>
Sociology	21	3	7	2	7	8	8	7	3	5	2

## Biography

Dr. Livingston has a PhD and MSW in social work from Norfolk State University. She is an assistant professor and the MSW Admissions Director for The Ethelyn R. Strong School of Social Work. Her fields of interest include student mental health, poverty, racial oppression, single female-headed families, and professional well-being. Dr. Livingston has more than thirty years' experience in the field of social work and has worked with a variety of populations including substance abusers, survivors of domestic violence, at-risk, pregnant, and parenting teens, and SNAP recipients. Dr. Livingston has published in several professional journals and presented at regional and national conferences.

# 3<sup>rd</sup> Global Nursing Congress



## An assessment of direct and indirect costs of dementia in Brazil

Ceres Ferretti<sup>1</sup>, Flavia M. Sarti<sup>2</sup>, Ricardo Nitrini<sup>1</sup>,  
 Fernando F. Ferreira<sup>2</sup> and Sonia M.D. Brucki<sup>1,3</sup>

<sup>1</sup>Department of Neurology, Cognitive and Behavioral Neurology Unit, School of Medicine, Universidade de São Paulo, Brazil

<sup>2</sup>Universidade de São Paulo, USP Leste, Escola de Artes, Ciências e Humanidades, São Paulo, Brazil

<sup>3</sup>Hospital Santa Marcelina, São Paulo, Brazil

**Background:** To analyze costs associated with dementia based on a cross-sectional study in the Brazilian health system.

**Methods:** Direct and indirect costs were estimated by conducting comprehensive interviews on the use of resources in a sample of 156 patients with dementia treated at an outpatient memory clinic of a tertiary hospital. A regression model was used to determine the main determinants of costs associated with dementia.

**Results:** Global costs of dementia were US\$1,012.35; US\$1,683.18 and US\$1,372.30 per patient/month for mild, moderate and

severe stages, respectively. Indirect costs ranged from US\$536.62 to US\$545.17 according to severity. Dementia costs were influenced by medication, FAST score, and educational level of caregiver.

**Discussion:** The study represents an original contribution toward establishing direct and indirect costs of dementia in Brazil. Results indicate significant economic impacts, including projection of annual costs of US\$16,548.24 per patient.

# 3<sup>rd</sup> Global Nursing Congress



## Rehabilitation Nursing

### K. Sesha Kumar

*Mid-Level Health Provider (MLHP), Health and Wellness Centre,  
Primary Health Centre, India*

**R**ehabilitation is the process of helping a person to reach the fullest physical, psychological, social, vocational, and educational potential consistent with his or her physiologic or anatomical impairment, environmental limitations, and desires and life plans. Rehabilitation nurses are like staff nurses or advanced practice nurses (clinical nurse specialists or nurse practitioners), who sub-specialize in rehabilitative care under a primary patient population focus. Advanced practice rehabilitation nurses often hold multiple specializations in areas such as gerontological care, pain management, cardiac care, or paediatrics. Advanced practice rehab nurses can take on additional responsibilities, as permitted by their advanced practice nursing license, which allows them to perform comprehensive assessments, diagnosis, and treatment with more autonomy. The goal of rehabilitation nursing is to assist individuals

with disability and/or chronic illness to attain and maintain maximum function. The rehabilitation staff nurse assists clients in adapting to an altered lifestyle, while providing a therapeutic environment for client's and their family's development. Also designs and implements treatment strategies that are based on scientific nursing theory related to self-care and that promote physical, psychosocial, and spiritual health. The nurse who is dedicated to the care of the patient with a disability must possess: An adequate understanding of rehabilitation/ restorative concepts, Knowledge of the multitude of resources that exist to help the patient and their family transition to the next level of care, A belief that the utmost goal is the return of the individual with a disabling condition back to their home and community as a productive member of society.

### Biography

I have 3.5 years of both teaching and clinical experience after my graduation and post-graduation. I participated in thirty continuing nursing education, six continuing medical education programmes and attended seven Nursing Workshops at state, and national, international levels. I have Presented Oral Papers and Posters in Live and Virtual conferences. I have been trained in BLS & ACLS. I received five awards for the academic performance. I am a Life time member in thirteen nursing & health care organizations. I have participated more than ninety Webinars. Learning and gaining knowledge is my passion and encouraging and teaching others is my dream to develop self and society.

# 3<sup>rd</sup> Global Nursing Congress



## Unsuccessful diabetes management: A qualitative study

Mardanian Dehkordi L<sup>1</sup> and Nikbakht Nasrabadi A<sup>2</sup>

<sup>1</sup>Isfahan University of Medical sciences, Iran

<sup>2</sup>Tehran University of Medical sciences, Iran

**Introduction:** Understanding the experiences of diabetes of unsuccessful management will help the treatment team to plan appropriate interventions to solve the problems they face. The aim of this study was to explore the experiences of unsuccessful diabetes management in people with diabetes

**Methods:** A hermeneutic phenomenological method was used to gain the experience of subjects. Participants were selected through purposive sampling. The data were collected through in-depth interviews and analyzed based on Dickman's method.

**Results:** Data analysis revealed the following three categories: Missed care, extreme poverty, and showing diabetes again.

**Conclusion:** Findings indicated the missed care due to laziness in care, inadequate knowledge, negligence in prevention and not giving up the pleasure, and the scary nightmare that was associated with grief and insolvency. This phenomenon is a recurrent manifestation of the disease and may result in incurable illness and cripple. This in-depth understanding demonstrates the importance of patients' emotional and informational support depending on their inadequate knowledge and altered mental status, which should be considered by health care providers in designing appropriate programs to improve diabetes management.

### Biography

Dr Leila Mardanian Dehkordi is an academic member of Isfahan University of Medical Sciences. Dr. Mardanian's research interest has focused on diabetes. Dr Mardanian is actively engaged in diabetes professional and local communities to develop team science and improve diabetes care, patient outcomes and quality of life of those living with diabetes.

# 3<sup>rd</sup> Global Nursing Congress

## The role of the nurse administrator in healthcare services and healthcare built environment in Southern Nigeria

**Gloria Tonye Dikibo<sup>1,2</sup>**

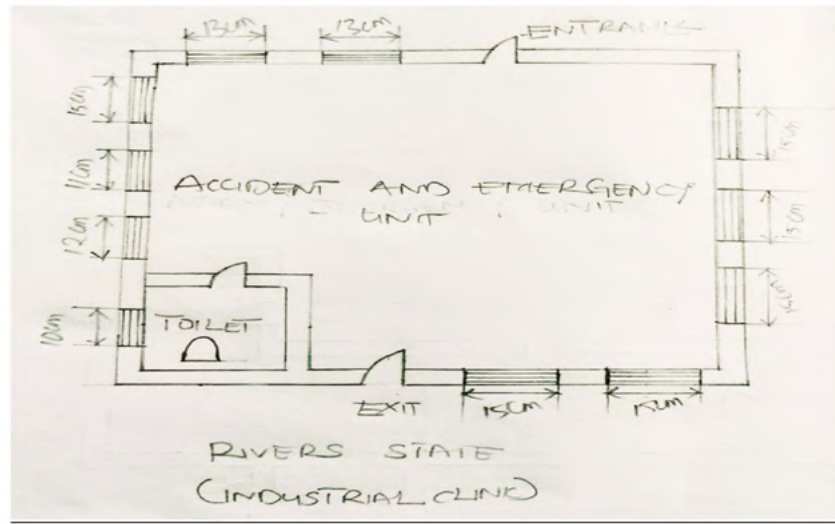
<sup>1</sup>Texila American University (Distance and Blended Learning) Tamilnadu India

<sup>2</sup>Nursing Manager Rubber Estates Nigeria Limited Edo state Nigeria  
(Member SIFCA Group)

The concept of healthcare built environment has been underrated which is responsible for deplorable design of most healthcare facilities in Southern Nigeria. The Role of the Nurse Administrator in Healthcare Services and Healthcare Built Environment in Southern Nigeria is a descriptive and observational capstone project, a study conducted using telephone interview method with self-structured open ended questions for a cross-section of nurses in the clinical, educational and administrative areas in the three states (Bayelsa, Edo and Rivers state) of Southern Nigeria. The study aimed to create awareness of this role among nurses, influence the decision in evidence base healthcare built environment to improve the safety of patients and healthcare providers, clinical outcome for patients and job satisfaction of nursing staff. Total respondents were thirty five (35), nurses 30 (85.7%) (28 (93%) females and 2 (6.7%) males); medical doctors 3 (8.6%), civil engineer 1 (2.9%) and architect 1 (2.9%) all males. Data collated for healthcare built environment used by nurses revealed: 46.4%

are without specific built nurses' toilet, 39.2% are without cloak room, 21.4% use patients' toilet, 28.6 % are without nurses' station, and only 10.7% nurses stated they are comfortable with the purpose built and ideal healthcare environment and how it has affected them positively. For Nurse Administrators' role (Table 2), 7.1% represent the nurses and attend meetings, 10.7% are involved in decision making, 3.6% contributed in healthcare built environment design and only 16.7% of the nurses have actually influenced built environment planning design. Research has also shown a strong link between the design of healthcare settings and outcomes experienced by patients, staff, and families. Hence the need to create the awareness and include nurse administrators and clinical nurses as frontlines to ensure their voices are heard in influencing decision among other professionals in creating innovative design in healthcare built environment to enhance workflow processes, work environment outcome, patient and provider safety and outcome.

# 3<sup>rd</sup> Global Nursing Congress



**Fig 2.** The ER nurses do not have cloak room, common room, for nurses ...no rest room for nurses as they share with patients. (Respondent 6)

S/N	NURSE ADMINISTRATOR'S ROLES	RESPONDENTS
1	Manage and supervise nurses	1,3,4,6,7,8, 9,12,13,14,16, 20,
2	Plan and ensure patients treatment/care	1, 3,6,8,20,34
3	Manage staff schedule/roster	1,3, 4,6, 8, 9,13, 14 ,16,20,34
4	Training of staff/Renewal of license	3,6,7,12,
5	Policy making, update and communication	3,7,9,
6	Represent nurses and attending meeting	3,6
7	Ensure medical supply and consumables	1,3,4,6,7,8,9,11,12,14,16, 20,34
8	Staff appraisal	3
9	Recruitment	3,6,
10	Assist in patient care and emergency response	1,3, 8,9,12,13,20,34
11	Delegation	3,6,12,14,
12	Welfare for nurses	3,6,13.
13	Disciplines staff	3,6,16,
14	Mediate between nurses and patients and other healthcare professionals	3,20,
15	Decision making	3,6,7.
16	Contribute in decision making of healthcare built environment	18.
17	Supervise nursing students	9

**Table-2** Nurse administrator's roles in healthcare services



# 3<sup>rd</sup> Global Nursing Congress

## Biography

Gloria Tonye Dikibo is a Registered Nurse, Registered Midwife with BSN and a family planning provider. She is currently the Nursing Manager Rubber Estates Nigeria Limited (RENL) Edo state Nigeria, member of SIPH.

She is passionate and self – motivated, emphatic on best practices, for delivery of quality healthcare, and evidence base nursing, to ensure patient safety. She is poised to make phenomenal impact in her career.

With well – rounded experience of over 20 years, Gloria introduced the use of nursing process tool in the delivery of nursing care to her new team; Documentation of all nursing procedures; family planning clinic; Occupational health nursing approach in prevention of occupational illness and accidents; and celebration of International nurses week.. Driven by quality, she was nominated as a member of the quality improvement audit team and the only nurse to participate in the ISO 9001:2015 quality management system training.

Gloria was nominated the best Nurse by patients, best team player by colleagues, and best academic participant in the Mandatory continuous Professional development programme. She has published two articles in international journals in 2020, and a co- author of the book "Issues and Development in Health Research 2021)

She resides in Port Harcourt, Rivers state with her family.

***E-POSTERS***



**Virtual Event**

---

**3<sup>rd</sup> Global  
Nursing  
Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress

## Perception of the preceptor in the training of the health professional: A merleau-pontian perspective

Monica Moura da Silveira Lima, Rose Mary Costa Rosa Andrade Silva, Eliane Ramos Pereira, Eliane Cristina Carneiro, Verônica Bessa de Paulo de Moura and Vilza Aparecida Handan de Deus

*Universidade Federal Fluminense, Brazil*

**Introduction:** The Preceptor is a facilitator in the teaching-learning process responsible for inserting the academic in the social reality of SUS. The reality presented in a university environment often does not refer to the reality experienced in practice. The research site was a Public Emergency Room in the Municipality of São Gonçalo, State of Rio de Janeiro.

**Objective:** To unveil the preceptor's perception by evaluating theoretical-practical integration.

**Method:** A qualitative phenomenological study was conducted with the participation of eight preceptors through a phenomenological interview where the data analysis was done using the method suggested by Amedeo Giorgi. Inclusion criteria were professionals belonging to the staff who received at some time academics in the emergency service and exclusion criteria preceptors removed from their duties. By reading the description of the phenomenon based on a phenomenological experiential perspective, the sense of the whole was grasped to then discriminate the significant

units focusing on the phenomenon researched.

**Results:** Reported questions about the difficulties faced in exercising the function, such as lack of adequate equipment, inputs and medicines, in addition to work overload in the care of outpatient resolution issues, penalize the professional. Another issue addressed was the lack of communication with the University formator. We observe, with the speeches, indications of willingness to improve the teaching of the academic in the place of internship.

**Conclusion:** Some difficulties can be overcome by strengthening professional training. Regarding the understanding of the role in the formation of the academic, practically everyone feels responsible and concerned about the professional being formed. **CONTRIBUTIONS:** A better understanding of the importance of preceptory in the education of health professionals will contribute to academic health training and to the care of the population.

### Biography

Doctoral student in Health Care Sciences at Universidade Federal Fluminense. Graduated in Dentistry at Universidade do Grande Rio (2000). Master's degree from the Fluminense Federal University in the Professional Master's Teaching in Health: Interdisciplinary Teacher Training for SUS (2020). Currently part of a research center at the Fluminense Federal University. Dentist at the Municipality of Paty do Alferes and Preceptor of oral surgery. Experience in Public Health, periodontal diseases, oral health and patients with special needs.

# 3<sup>rd</sup> Global Nursing Congress



## The role of nursing in man's health: Challenges in the training of nursing graduates

**Vilza Aparecida Handan de Deus, Rose Mary Costa Rosa Andrade Silva and Eliane Ramos Pereira**

*Universidade Federal Fluminense, Brazil*

**Introduction:** Reflecting on the experienced context: teacher-nurse facing the complexity of professional practice. Professional practice contributes significantly to the promotion and prevention of injuries to men's health, with the university providing skills and abilities to nursing students, future nurses, as provided for in the National Curriculum Guidelines (DCN). The Unified Health System (SUS) throughout its history has developed actions that subsidize health actions for specific groups. From this perspective, in 2008, the National Policy for Integral Attention to Men's Health (PNAISH) was formulated with a reflection on the experienced context: nurses and teaching nurses in the face of the complexity of professional practice with the objective of guiding health actions, stimulating the self-care of these subjects and, above all, in the recognition of health as a basic social right and citizenship of all Brazilian men.

**Objective:** To understand the perception of nursing students about men's health in their pedagogical training, from the phenomenological perspective of Merleau Ponty.

**Type of Study:** This is a phenomenological, descriptive study with a qualitative approach, carried out with thirty-one nursing students. Data were collected and analyzed through semi-structured interviews and treated by Georgio's method in 4 (four) steps.

**Results:** From the data analysis, four categories were established and generated: 1. The body and linguistics as meaning of the whole. 2. The organization of the curriculum and its fragmentation in the world of academic life. 3. Attention to human health: from the perceptive perspective of the student. 4 The subjectivity of the student's life in relation to the experienced body. 6. Represent the perspectives of the phenomenon studied.

### Biography

Graduated and fully licensed in Nursing and Obstetrics from University Gama Filho (1990) and Master's Degree in Health Education from University Federal Fluminense (2017). Doctoral student in Health Care Sciences at University Federal Fluminense. She is currently a researcher at the State University of Rio de Janeiro, a professor at the Estácio de Sá University and a nurse-State Secretary of Health, working mainly on the following topics: education, health, nursing care, therapeutics and applied informatics.

# 3<sup>rd</sup> Global Nursing Congress



## Healthcare professionals: Supporting victims of intimate partner violence

**S. Cooper**

*Excelsior College, USA*

Research supports that Intimate Partner Violence (IPV), also referred to as domestic violence, is a major worldwide social epidemic. The implications extend to a governmental level of action as an international health crisis. Medical professionals are positioned on the frontlines of treatment and hold a unique and vital point of intervention to support the victims of abuse. They recognize that there is a moral obligation to provide service but are often challenged with several barriers that prevent a more compassionate and efficient level of care that is needed. By submitting an educational e-poster to an international conference offers the opportunity to reach many of the experts, influencers, and nursing leaders with the healthcare field. By connecting with this elite group of professionals, we are promoting limitless potentialities for future collaborations for supporting victims of abuse. Research supports that clinicians

want to help but often lack the training or the resources to help. Healthcare staff are driven and exhibit a strong desire to provide support through self-efficacy and a positive attitude toward change. However, they can vary on how best to treat their patients. Healthcare workers must be knowledgeable and confident on the subject matter to provide direct support for those suffering from abuse. This poster design offers best practices for healthcare professionals in supporting victims of abuse. Utilizing the objectives listed above, clinicians will be introduced to the victimized patient's point of view and be offered strategic interventions to reinforce judgement free advocacy that is both current and continued. The poster structure will include IPV facts, supportive measures in intervention, best practices in providing supportive therapy, educational resources, and referral references within a simple, yet colorful format.

### Biography

Stephen Cooper is a registered nurse and graduate student at Excelsior College in Albany, New York, in the United States studying nursing education. He works as a Clinical Nurse Educator for a homecare agency in Pittsburgh, Pennsylvania. When not wearing his stethoscope, he enjoys live storytelling and creative writing with contributions to several literary and educational publications. As a previous community educator for a domestic violence shelter, he continues to advocate for victims of abuse through the lens of a medical professional.

# 3<sup>rd</sup> Global Nursing Congress



## Effect of cancer treatment on sleep quality in cancer patients: A systematic review and meta-analysis of Pittsburgh sleep quality index

**Anahita Divani, Mohammad Eghbal Heidari, Neda Ghavampour, Ali Parouhan, Sajad Ahmadi, Omid Narimani Charan and Hooman Shahsavari**  
*Tehran University of Medical Sciences, Iran*

**Background:** Sleep problems are one of the most common symptoms experienced by cancer patients. The causes of poor sleep quality might be due to treatment and its side effects. Thus, we conducted this systematic review and meta-analysis with the aims of investigating sleep quality during treatment in cancer patients.

**Methods:** Comprehensive search strategy was conducted in the following original databases: PubMed, Web of Science (ISI), Scopus, Embase, PsycINFO, and Ovid, from 1950 to 15th February 2021. Studies that investigated the sleep quality during treatment in cancer patients were included. Two investigators extracted all relevant data, independently. For deriving mean difference, random-effects meta-analyses were used. We assessed quality of studies by Newcastle–Ottawa Scale (NOS).

**Results:** A total of 27 studies (1884 participants) were included in the syntheses on sleep quality. The mean global Pittsburgh

Sleep Quality Index (PSQI) in cancer patients before the initiation of treatment was 7.11 (95% CI: 6.48, 7.74), during 8.31 (95% CI: 6.34, 10.27), after the treatment 7.10 (95% CI: 6.54, 7.66), and finally, the mean global PSQI in the time of follow up was estimated 7.33 (95% CI: 6.27, 8.39); all the results were meaningful ( $P < 0.001$ ). The mean difference showing the quality of sleep was better before the initiation of treatment compared to after the treatment.

**Conclusion:** Cancer patients who underwent cancer treatment face lots of problems and adverse effects caused by treatment. Our results revealed that cancer patients experience poor quality of sleep during the whole trajectory of cancer even after a year from the initiation of treatment. After the end of treatment, sleep quality got better compared to during the treatment and returned to before the treatment level, but it is still poor and needs more sleep-related interventions to improve.

### Biography

My name is Anahita Divani, I am 28 years old. I was born in Tehran and I have spent whole my life in this city. I am single and I live with my parents. I completed my bachelor's degree in 2017 at Tehran university of Medical Sciences. Then in 2018, I succeeded to gain rank 7 at national level in masters entrance exam. So, I continued my education in medical surgical nursing at Tehran University of Medical Sciences. At the same time, I started my job as a clinical nurse in Imam Khomeini hospital. I have been working as an oncology nurse for 4 years and oncology is my favorite field in clinical care and also research. In 2021, I started the PhD degree in nursing at Tehran university of medical sciences. Now I hope to promote my knowledge and also ethical aspects of nursing through this opportunity.

# 3<sup>rd</sup> Global Nursing Congress

## Awareness and perceptions of elder abuse among the nurses working in general hospital wards in the Kanto region, Japan

**Yuki Ohtsuyama**

*Tokyo Junshin University, Japan*

**Purpose:** The purpose of this study was to clarify the awareness and perceptions of nurses working at medical facilities in the Kanto region regarding elder abuse, and to obtain suggestions for future research.

**Methods:** A self-administered questionnaire survey was conducted on 200 nurses working at 50 randomly selected hospitals with general hospital wards in the Kanto region. The items of the questionnaire included the attributes of the respondents, information on the Elder Abuse Prevention Law, experience in dealing with suspected cases of elder abuse, and awareness of acts of elder abuse. After a simple tabulation of the basic attributes of the respondents, a logistic regression analysis was conducted using each of the seven categories of elder abuse behavior as the objective variables, while the experience of learning about the Elder Abuse Prevention Law and the experience of handling cases of suspected elder abuse were explanatory variables. EZR

was used for the analysis, and the significance level was set at less than 5%.

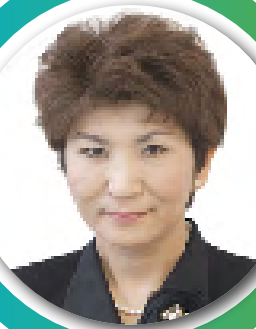
**Results:** The gender breakdown of the participants was 11 males (9%) and 116 females (91%). More than 95% of the nurses responded that the physical abuse item was abusive, but only about half of the nurses responded that the self-neglect item was abusive. Logistic regression analysis showed that only the item "taking away pension", which is economic abuse, showed a significant difference. ( $P=0.0248$ ).

**Conclusion:** The percentage of nurses who responded "I think it's abuse" was higher for sexual abuse, physical abuse, neglect, psychological abuse, and economic abuse, in that order. Only half of the nurses responded that self-neglect, which is not defined in the Elder Abuse Prevention Law was "abuse," and it is inferred that it is difficult to recognize that this is a type of abuse.

### Biography

Yuki Ohtsuyama, an assistant researcher, has worked with the elderly for many years in clinical environments. Her personal experiences lead to her interest in research on elderly abuse and how it can be better identified by nurses. After graduating with a BSN in 2008, Yuki began clinical work with patients as an RN in a surgical ward specializing in respiratory medicine, and orthopedic and gastrointestinal surgery. She continued work as a nurse both in an emergency room and in a nursing home while working to achieve her MSN. She graduated with a specialization in gerontology in 2014.

# 3<sup>rd</sup> Global Nursing Congress



## Toe clearance rehabilitative slippers for older adults with fall risk: A randomized controlled trial

Atsuko Satoh<sup>1</sup>, Yukoh Kudoh<sup>2</sup> and Sangun Lee<sup>3</sup>

<sup>1</sup>Faculty of Nursing, Hirosaki Gakuin University, Japan

<sup>2</sup>Department of Nursing, Hirosaki University of Health and Welfare, Japan

<sup>3</sup>Department of Physical Therapy, Aomori University of Health and Welfare, Japan

**Objectives:** To evaluate fall-prevention rehabilitative slippers for use by self-caring, independent older adults.

**Methods:** This assessor-blinded, randomized, and controlled one-year study included 59 self-caring, independent participants (49 women) who attended day services. The mean age of participants was  $84.0 \pm 5.3$  years. Participants were randomly selected from eight nursing

homes. We tested slippers top-weighted with a lead bead (200, 300, or 400 g). Intervention group participants walked while wearing the slippers for 10–20 min, 1–3 days/week at the day service center. Fall risk was measured using the Berg Balance Scale and the Tinetti Performance-Oriented Mobility Assessment (POMA) before and at 3-month intervals after the intervention/control phase.

**Table 1.** Fall risk score of participants

Variable	1 month before the intervention period (baseline)	3 months after the intervention period		6 months after the intervention period	9 months after the intervention period	12 months after the intervention period	<i>p</i>
	Median (IQR Scores)	Median (IQR Scores)		Median (IQR Scores)	Median (IQR Scores)	Median (IQR Scores)	
Intervention ( <i>n</i> =29)							
Berg Balance	47 (41-52)	51 (44-54)		50 (44-52)	50 (43-53)	50 (47-54)	.001
POMA	26 (25-28)	27 (26-28)		27 (25-28)	27(26-28)	27(26-28)	.005
Control ( <i>n</i> =30)							
Berg Balance	44 (43-47)	46 (40-49)		46 (42-49)	45(39-50)	43 (40-48)	.023
POMA	26 (24-27)	26 (24-28)		26 (23-28)	26 (22-28)	25 (22-26)	.000

*IQR, interquartile range; POMA, Tinetti Performance-Oriented Mobility Assessment*

# 3<sup>rd</sup> Global Nursing Congress

**Results:** After 12 months, the intervention group demonstrated significant improvement. Berg Balance and POMA compared to the control group ( $p < .05$   $p < .01$ , respectively). Mobility scores improved significantly for both measurements in the intervention group before and after ( $p < .01$ ), but the control group had significantly lower scores.

**Discussion:** Overall, falls decreased in the intervention group from 10 to 7, and control group falls increased from 9 to 16 ( $p = .02$ ). No adverse events related to the intervention were reported.

**Conclusions:** Rehabilitation training slippers may reduce falls in older adults.



**Figure 1.** Rehabilitative slippers

**ACCEPTED ABSTRACTS**



**Virtual Event**

---

**3<sup>rd</sup> Global  
Nursing  
Congress**

**March 24-25, 2022**

**GLOBAL NURSING 2022**

# 3<sup>rd</sup> Global Nursing Congress

“

**Choosing to fake your emotions versus doing so without thought: Understanding the relationship between emotional labour and burnout in newly qualified and pre-retirement nurses**

”

**Catherine Theodosius**

*University of Brighton, UK*

**T**his paper identifies autonomy and powerlessness as key reasons why nurses and midwives use surface acting emotional labour strategies in everyday practice despite the link between surface acting and burnout. We present data from five in-depth focus groups with novice and experienced nurses and midwives collected as part of a wider cross-sectional study carried out in two acute care NHS Hospitals in the UK, investigating the relationship between surface and deep acting emotional labour, burnout and retention in nursing and midwifery. We found that when nurses and midwives purposefully or strategically choose to use surface acting emotional labour, exercising professional autonomy in their interpersonal communication skills and nursing or midwifery practice, this was a positive experience. When nurses and midwives carried out surface acting emotional labour as an act of survival, however, this was experienced as an expression of powerlessness. The nurses and midwives

identified negative attitudes, increased patient demand and acuity and increased patient and organisational expectations as collectively creating a hostile working environment, thus surface acting emotional labour became a survival strategy in supporting the delivery of safe, affective and compassionate care. This use of surface acting emotional labour was considered emotionally exhausting and stressful. Further, we found that surface acting emotional labour as an expression of powerlessness impacted on the nurses and midwives' sense of self, their understanding about what it means to be a nurse or midwife and their motivation to continue doing it in the face of stress and burnout. These findings contribute to the wider literature by identifying potential reasons why surface acting emotional labour is used by nurses and midwives and consequently, why it is positively associated with burnout and intention to leave their jobs or profession.

# 3<sup>rd</sup> Global Nursing Congress



## Longitudinal Process Evaluation (using a mixed method design) to assess the implementation of the deemed consent education and training programme in England: Especially designed for Specialist nurses in organ and tissue donation



**Cathy Miller**

*NHS Blood and Transplant, UK*

**Background:** There is a worldwide shortage for donor organs for transplantation. To help overcome this shortage several countries have introduced an opt-out consent system for organ donation. The system also known as deemed consent, was introduced in Wales in December 2015 and England and subsequently Scotland, followed suit with similar legislation. England's deemed consent legislation went live on May 20th, 2020. Scotland's system of deemed authorisation went live on March 26th, 2021.

The new deemed consent system in England, means that all adults dying in England are considered willing to be organ donors, unless they have recorded or expressed a decision not to donate or are in one of the excluded groups. This study was designed to evaluate the implementation process for the education and training programme for Specialist Nurses in Organ and Tissue Donation.

**Methods:** This study proposes a longitudinal process evaluation. The mixed-methods

approach offers triangulation and cross validation beginning with a desk-based approach began by reviewing the available world-wide literature on opt-out legislation, undertaking a training needs analysis, operational temperature checks, developing a training approach and finally analysed electronically completed post course evaluations from each of the three face to face modules.

The field-based part of the research study incorporates a period of shadowing the Specialist Nurses in the real world, Intensive Care environment and completion of a structured observation form. Concluding with the opportunity of a debrief and semi-structured interview. The opportunity of a semi-structured interview was offered to all Specialist Nurses working within the same Organ Donation Services Team under study, who wished to participate.

**Results:** The results will help understand how the education and training program



# 3<sup>rd</sup> Global Nursing Congress

(comprising of multiple components) work in synergy to produce change. The results will illuminate to what extent the planned activities for the education and training program were completed and to what extent the objectives were achieved. The results will also indicate how well the program was managed, in terms of staff and resource required to meet the objectives and provide assurance for replicating the program and sustainability.

**Conclusion:** The findings will highlight the importance of a process evaluation as part of any education and training program. These findings could help inform the development of other opt-out system education training programs being introduced into the remaining UK Country to implement deemed legislation in Northern Ireland and other countries worldwide.

# 3<sup>rd</sup> Global Nursing Congress

## Attrition to completion progression theory in an associate degree nursing program

**Carmela Theresa T. De Leon**

*Department of Nursing, Pima Medical Institute, USA*

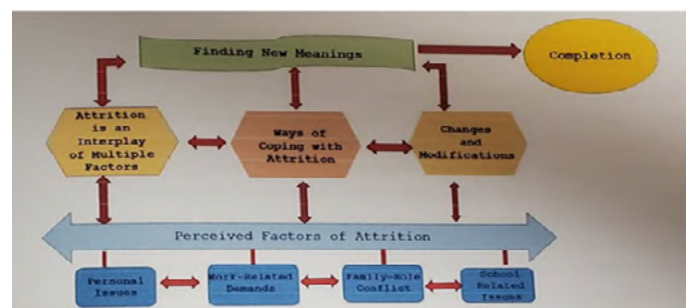
**Objective:** This study aimed to develop a substantive theory on the process of overcoming attrition among returning students in an Associate Degree Nursing program in a private school in Arizona.

**Methods:** A qualitative design was utilized for this study. The Classical Grounded Theory approach provided a systematic process of data collection, analysis and synthesis that led to the emergence of the Attrition to Completion Progression Theory. Theoretical sampling through in-depth interviews of ten participants who experienced temporary attrition and was successfully able to come back to succeed within the program provided a rich source of data and unique perspective of the phenomenon.

**Results:** Four themes emerged from the grounded theory approach. The themes that emerged are: Attrition as an interplay of multiple factors; Ways of coping with attrition; Changes and modifications; and Finding new meanings as the core category. The emergent theory provided an insight into the process

that the participants went through and the perceived contributory factors leading to the attrition.

**Conclusions:** Understanding the interplay of these factors paved for a better understanding on how current and future students, faculty, and administrators can prevent attrition and assist returning students to become successful in the program towards completion.



**Figure 1.** Attrition to Completion Progression Theory

# 3<sup>rd</sup> Global Nursing Congress



## **Chronic pulmonary and chronic cardiac rehabilitation: Staff perspectives and patient experiences**



**Joan van Rotterdam, Michael J. Hensley and Michael Hazelton**

*University of Newcastle, Australia*

**C**ardiac (CR) and Pulmonary Rehabilitation (PR) programs have been shown to enhance self-management, improve quality of life and decrease dependence on healthcare services. Patient Outcome Measures (POMs) such as Quality of Life (QoL) questionnaires are essential to evaluate these programs' ability to measure treatment effectiveness. However, many of the present QoL instruments either underestimate or overestimate the response to the change in health status in these programs. This qualitative descriptive study sets out to analyse discussions by patients and staff engaged in CR and PR. These discussions occurred both pre and post program to compare and contrast what changes for these patients. The data for this study was collected both pre and post program, from those patients and staff participating in

outpatient CR and PR programs. Focus groups and individual interviews were audio-taped and transcribed verbatim. Transcripts were analysed, tabulated and coded for common themes, then a cohesive story was formulated to explain the concepts put forward. Patients and staff discussed some common themes however terminology was different between the two groups. There is also a change in patient's perspective from pre to post rehabilitation, patient's expectations change from wanting to get back to a "normal" state of health to accepting living within "certain limits". This qualitative study clearly shows a "Response Shift" in patient perceptions pre to post CR and PR program and that language used by patients is very different to that of health staff and often is different to present POMs used in these programs.

# 3<sup>rd</sup> Global Nursing Congress



**The post  
COVID-19  
era requires  
maximum  
urban resilience**



**Abdol Aziz Shahraki**

*Department of Geography and Urban Planning, University of Sistan and Baluchistan, Iran*

This paper reviews the low-resilience and health protection problems in many cities, poor designs of cities to cope with disasters, and the need for tolerance of urban constructions. It explores answers concerning the question of how shall we build cities resiliently to assist people well-being? The method of this applied research is a multiphase process that considers all physical and socioeconomic elements of a city, including health protection system. It introduces six indicator groups of urban management (M), economy (E), built environments (U), Infrastructures (I), natural environments (N), and health protection (H). The groups include 55 indicators as variables in the mathematical calculations in this paper. This paper builds a mathematical model to maximize the profitability of resilient buildings

by optimizing investments in the required projects. The projects will upgrade the firmness and tolerance of cities against pandemic diseases and nature-based and human-made dangers. There is a linear programming in 55 variables to select optimal solutions from fifty-five factorial alternatives. Then, the programming will develop into non-linear programming. The unique innovation of this paper is its linear programming interpretation by non-linear to give optimal solutions for the problem. Applying the Lagrange function in the Kuhn-Tucker conditions proves the accuracy of the hypothesis that post-COVID urbanization requires maximum resilience. Only in this way, urban economies and health protection system will be free of risks.

# 3<sup>rd</sup> Global Nursing Congress



## The psychometric evaluation of the sense of belonging instrument (SOBI) with Iranian older adults



**A.Yaghoobzadeh<sup>1</sup> and K. Allen<sup>2</sup>**

<sup>1</sup>*School of Nursing, Arak University of Medical Sciences, Iran*

<sup>2</sup>*Educational Psychology and Inclusion, Faculty of Education, Monash University, Australia*

A sense of belonging is a significant predictor of mental health and well-being in later life. A sense of belonging in childhood and adolescence contributes to a number of adult behavioural and psychological outcomes. A high sense of belonging has been associated with better health, longevity, psychological well-being, and disease recovery. In this study, the Persian version of the Sense of Belonging Instrument (SOBI) for older adults in Iran was evaluated psychometrically to develop an accurate measure for belonging. Participants in the study were 302 older adults, 60 years old and above, living independently in Iran and chosen through convenience sampling. An exploratory factor analysis

indicated that the four-factor structure, which included 16 items, accounted for 54.12% of the total variance, and was characterized by strong factor loadings, with values ranging from .50 to .87. Thereafter, a confirmatory factor analysis confirmed the four-factor latent structure of the SOBI, providing adequate data-model fit statistics. All latent structures were characterized by adequate-to-strong latent construct (H) internal reliability ( $\alpha$ ) coefficients. The Persian version of the SOBI is a useful tool in understanding older adult patients' sense of belonging when living independently within the community. The implications for practice and research are discussed.

# 3<sup>rd</sup> Global Nursing Congress

“

## Nutrition in COVID-19 survivors: What to eat and how to recover from complications?

”

**Amir Reza Moravejolahkami and Seyedeh Zahra Hejazi Taghanaki**

*Department of Clinical Nutrition, School of Nutrition & Food Science, Isfahan University of Medical Sciences, Iran*

The novel coronavirus, Severe Acute Respiratory Syndrome CoronaVirus 2 (SARS-CoV-2), has spread to many countries since 30 January 2020 and claimed as an emergency global health condition. Ages more than 50 years old, type 2 diabetes, smoking, underlying respiratory disease, cancer, and cardiovascular disease are of the most important risk factors for COVID-19 (caused by SARS-CoV-2). Nutritional interventions, through boosting the immune function, may act a bilateral positive role, either during the treatment process or during the recovery

phase of the disease. Furthermore, long-term complications of COVID-19 may affected by dietary modifications. Inflammation-induced COVID-19 can also exacerbate the relevant complications. Now, more than ever, conducting a healthy diet enriched by specific vitamins, minerals, and antioxidants reduces the severity of signs and symptoms, during illness and after survival. Therefore, this study aims to review the pros and cons of essential micronutrients and dietary interventions in COVID-19 survivors.



## Outlining the challenges of COVID-19 pandemic on africa's maritime industry: The case of marine and seafaring professionals



**A.D. Sackey<sup>1</sup>, R.O. Lee-Dua<sup>2</sup>, B. TcHouangeup<sup>3</sup>, J.E. Segbefia<sup>4</sup>, A.D. Sackey<sup>5</sup>, B.L. Lamptey<sup>6</sup>, B. Lometey<sup>7</sup> and A.A. Teye<sup>8</sup>**

<sup>1</sup>Ant Marine W. A Consulting Services, Ghana

<sup>1</sup>Sinotech Marine Hong Kong Representative, Hong Kong.

<sup>1,2,3</sup>RROC Industrial Limited, Accra, Ghana

<sup>1,2,3</sup>DNV GL Oil and Gas/Grassfield Maritime Consultants Lagos, Nigeria.

<sup>4</sup>GISMA Business School, Germany.

<sup>5</sup>German Institute of Technology, Ghana

<sup>6</sup>National Center for Atmospheric Science School of Earth and Environment, University of Leads, UK.

<sup>7</sup>Ben Marine Services, Ghana.

<sup>8</sup>Ghana Navy, Ghana

Failure to accord seafarers a 'Key Worker' status amid COVID-19 pandemic before the December 1, 2020, resolution, during moments of demonstrated selflessness (in food, medicines, consumables like PPEs and energy supply), is evidence of the lack of genuine interest in their concerns despite the calls from major stakeholders thus, United Nations and International Maritime Organization. The calls associates with various COVID-19-related policies and regulations resulting in crew change crises, maroon and overstay of contracts, poor mental health, COVID-19 infections and other unrelated illnesses. To what extent are non-traditional

seafaring nations of Africa being impacted?

The study examines these concerns with the aim, a resolution per objectives will assist counter future crises and consequential fallouts for mariners. The objective is to identify and investigate implemented COVID-19 policies and regulations to develop the understanding of key aspects of its impact on maritime operations and crew 'wellbeing'. The study then examines contingency measures and innovations that most appropriately helped in mitigating responses with minimal challenges to seafarers and marine professionals.

The study followed a case study approach focusing on West Africa's maritime corridor

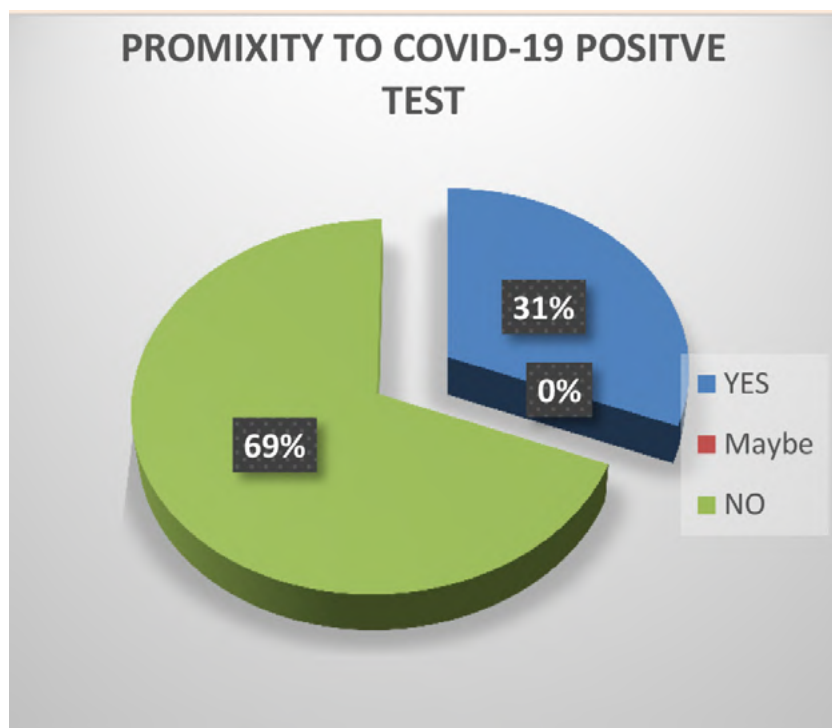
# 3<sup>rd</sup> Global Nursing Congress

(focus on Ghana, Ivory Coast, Nigeria, Liberia and Angola) hosting various ports and offshore installations. The instruments chosen for this research were personal field observations, as well as questionnaires and interviews of expert or 'eye witness' account, deployed via phone calls, online social media and emails

The study finds embarkation quarantine implement for offshore Ghana after the outbreak was effective in identifying cases. Stigma concerning positive test cases amongst the crew was prevalent in the first six months of pandemic declaration. The survey of 71 vessel crew showed 32.14% were certain of COVID-19 positive cases on Jobsite, 91.06% support for IMO-led interventions, 30% complained of uncertainty fueling poor mental health. Only 19% addressed issues

of proximity to COVID-19 as shown in Fig 1. They however shared with researchers that the situation led to delays, further isolation and cancellation of embarkation of vessels for identified individuals.

The study observed crew were not notified of cases detected or suspected—particularly, influencing remorse and agitations onboard. Crew decried having a continuous episode of anxiety and stress. Concerns for families back home fueled anxiety and depression. Vaccine inoculations upon commencing March 2021 remains low in the region. Mitigating measures observed include increased internet and call access, and extensive boarding protocols. The study recommends transparency with information while accelerating recognition for preferential treatment.



**Figure 1:** RESPONDENTS' PROXIMITY TO COVID-19 INFECTION

# 3<sup>rd</sup> Global Nursing Congress



## Patient safety culture in the surgical center: Perspective of nursing professionals



**Aurean D'Eça Junior, Isabelle Diniz Fonseca Sousa, Poliana Pereira Costa Rabêlo, Lísia Divana Carvalho Silva and Flavia Danyelle Oliveira Nunes**

*Universidade Federal do Maranhão, Brazil*

**Objective:** To determine the patient safety culture among nursing professionals of surgical center in a high-complexity hospital in North-eastern Brazil.

**Materials and Method:** Cross-sectional study performed with 56 professionals from the nursing staff, in the period from January to June 2019. The instrument Hospital Survey on Patient Safety Culture was applied. In the data analysis and verification of the results, the Cronbach alpha test was used.

**Results and Discussion:** The Dimensions: "Organizational Learning" (91.67%,  $\alpha=0.72$ ); "Feedback and communication about error" (80.36%,  $\alpha=0.63$ ) and "Supervisor/manager expectations and actions promoting patient

safety" (77.68%,  $\alpha=0.60$ ) constituted strong points. However, the dimensions "Frequency of events reported" (32.59%,  $\alpha=0.57$ ) and "Nonpunitive response to error" 25.60%,  $\alpha=0.41$ ) were more fragile. The study covers, therefore, the extended and multidimensional perspective of safety culture when considering such specificities and cross-sectional characteristics influencing the organization's commitment to health with patient safety.

**Conclusion:** Despite the strong points evidenced, some dimensions presented weaknesses, which requires management/professionals' collaboration to improve patient safety culture in this sector. The limitation was the small sample of the nursing staff.



## Socio demographic characteristics of women who leave their babies to social services after giving birth in Turkey



**A. Dönmez<sup>1</sup>, S. Karabulut Gencay<sup>2</sup> and Z. Karaçam<sup>3</sup>**

<sup>1</sup>Faculty of Health Sciences, Division of Midwifery, İzmir Tınaztepe University, Turkey

<sup>2</sup>Health Sciences University, Tepecik Education and Research Hospital, Turkey

<sup>3</sup>Faculty of Health Sciences, Division of Midwifery, Adnan Menderes University, Turkey

**Aims:** To examine the socio-demographic and life characteristics of mothers who had to leave their newborn babies to social services after giving birth

**Material and Methods:** Using a qualitative research approach, this research was conducted in the qualitative document analysis design. The data were obtained from the Social Review Reports (electronic) of 66 mothers who gave birth and left their newborn babies to social services between 2010-2019 in a hospital in the city center of Izmir, Turkey

**Statistical Analysis Used:** The electronic data (Number: 1-66) in these reports were analyzed by descriptive and content analysis methods.

**Results:** Most of the mothers were had five years of education (n=17), were not officially married (n=31), and worked in an environment open to abuse (n=6). Six themes were obtained from the data analysis including: family status and living with the spouse/partner, pre-and post-pregnancy residence, the process of abandoning the infant, pregnancy process and health problems, sharing pregnancy news and

safety, and the conception of pregnancy and the legal process.

**Discussion:** In the study, important information was gathered about these mother's socio-demographic characteristics, residence characteristics, lifestyles, pregnancy process, family and health status, the process of abandoning their infants, legal procedures, and sexual life. These data were valuable in reflecting on our cultural characteristics and facilitating the improvement of social and health services that can be offered to mothers who need to place their infants under social protection.

**Conclusions:** This study revealed that mothers who leave their infant to social services have several high-risk socio-demographic and life characteristics, predominantly related to lifestyle, residence, pregnancy experience, and sexual violence. Midwives can help improve mother/infant health by considering these risk groups while providing the pre-pregnancy, pregnancy, delivery, and postpartum care services and by providing support to mothers who want to leave their infant to social services.



## The meaning of losing a child in older adults



**A Safa<sup>1</sup>, M.Adib-Hajbaghery<sup>2</sup>, M.Rezaei<sup>1</sup> and M.Araban<sup>1</sup>**

<sup>1</sup>Trauma Nursing Research Center, Kashan University of Medical Sciences, Iran

<sup>2</sup>Department of Health Education and Promotion, School of Public Health, Jundishapur University of Medical Sciences, Iran

**Background:** After losing their child, elderly parents look for a meaning in this phenomenon. This meaning comes out from their experiences, and their responses to and actions in life are shaped based on this meaning.

**Objectives:** This study was conducted with the aim of “understanding the meaning of losing a child in older adults.

**Methods:** This qualitative study was conducted using conventional content analysis method. Using semi-structured face-to-face interviews, data were collected from 15 older adults who had experienced of losing their adult child. Data analysis was performed according to the steps proposed by Graneheim and Lundman, 2004. To prove the trustworthiness of the data, credibility, dependability, confirmability and transferability were used.

**Results:** The age range of participants was

between 61 and 83 years and 73.3% of them were female. The two main categories of “tasting the bitter flavor of life” and “searching for a positive meaning in losing a child” together with the theme of “finding hope in the heart of darkness” were extracted from the participants’ experiences.

**Conclusion:** Despite the grief of losing a child, which had cast a dark shadow over the parents’ lives, the child’s liberation from worldly sufferings, his/her presence in a better world, and being hopeful about the grace of God had caused the elderly parents to find hope in the heart of darkness. After identifying the parents with a deceased child, they should be helped through psychological counseling and care of the healthcare team so that they can adapt to this situation by finding a positive meaning in losing their child.



## Implementing innovative educational approaches in nursing education: A qualitative study



**Alireza Nikbakht Nasrabadi<sup>1</sup>, Nooredin Mohammadi<sup>2</sup>, Zahra Rooddehghan<sup>1</sup>, Enayat A. Shabani<sup>3</sup>, Fatemeh Bakhshi<sup>4</sup> and Azam Ghorbani<sup>1</sup>**

<sup>1</sup>*School of Nursing and Midwifery, Tehran University of Medical Sciences, Iran*

<sup>2</sup>*Nursing Care Research Center, School of Nursing and Midwifery, Iran University of Medical Sciences, Iran*

<sup>3</sup>*Department of Foreign Languages, Tehran University of Medical Sciences, Iran*

<sup>4</sup>*School of Nursing and Midwifery, Shahid Sadoughi University of Medical Sciences, Iran*

**Background:** Improving the competencies of nurses requires improving educational methods through the use of novel methods in teaching and learning. Employing innovative teaching methods consistent with current educational advancements are found to be the requisite for the reforms in the nursing education. We aim to explore the perceptions of stakeholders (including nursing education directors, faculty members and nursing students) of the requirements of implementing innovative educational approaches in nursing.

**Methods:** In this qualitative descriptive study, 19 participants, including educational directors, faculty members, and undergraduate and graduate nursing students, were selected through the purposeful sampling method. Achieving the theoretical saturation in extracted categories was considered as a

criterion for determining the sample size and the completion of sampling. The data were collected from December 2019 to May 2020 in nursing schools of Tehran, Iran, through in-depth semi-structured individual face-to-face interviews and were then analyzed based on the Graneheim and Lundman method.

**Results:** Using qualitative content analysis, eight sub-themes and three themes were extracted. The extracted themes were 'novel educational policymaking', 'Innovative education-oriented platform', and 'managing barriers of innovative educational approaches'.

**Conclusions:** The execution of innovative educational approaches opens the opportunity to improve and promote the educational programs. For the effective implementation of the innovative educational approaches, reforming the policymaking structures is a



# 3<sup>rd</sup> Global Nursing Congress

substantial requirement. This policymaking reform calls for the positive attitude of the legislators and the directors. Developing and implementing innovative educational approaches entail providing appropriate context, structure, and required facilities by the policymaking system and educational

authorities. In addition, developing capacity and related competencies of faculty members and students as the major stakeholders in employing these approaches is crucial. Also, the educational system should try to eliminate some barriers, such as, Poor policymaking, resistance to change, less organized structure.

# 3<sup>rd</sup> Global Nursing Congress

“

## My work as a pain nurse

”

**Colette Schulz***Freelancer and Hospital employee, Germany*

**I**n my lecture, the main topic will be the work and monitoring of patients with chronic pain after failed surgeries or other interventions. I will divide this talk into 5 parts. Let's move on to the first part of my talk, which is about convincing the patient that themselves are the most important part of their therapy. Demonstrated with a life meditation. In the second part I will tell you about the overload at the patient's past and the early loss of pain relief after overloading in everyday life. In the third part, I will show you some examples of

tools that the patient can use when the pain gets worse. In the fourth part, I also show some advices on how to restore quality of life. Finally, I inform you about working as a pain nurse as a freelancer. With your experience and expert, you can also work independently in terms of counselling, accompanying and educating. Also work in social networks like Facebook and Instagram. Build your own patient group. There is so much need out there.

# 3<sup>rd</sup> Global Nursing Congress



## A qualitative study of factors across the health care system influencing primary healthcare worker's engagement in Australia's national cancer screening programs



**Ebony Verbunt<sup>1</sup>, Lucy Boyd<sup>2</sup>, Nicola Creagh<sup>1</sup>, Kristi Milley<sup>2</sup>, Jon Emery<sup>2</sup>, Claire Nightingale<sup>1</sup> and Margaret Kelahe<sup>1</sup>**

<sup>1</sup>Centre for Health Policy, Melbourne School of Population and Global Health, The University of Melbourne

<sup>2</sup>Centre for Cancer Research, Department of General Practice, Faculty of Medicine, Dentistry and Health Sciences, The University of Melbourne

**Objective:** To explore factors across the environment, organisation, and care team levels of the health care system that influence the engagement of primary healthcare workers in Australia's national cancer screening programs. Current screening participation rates are sub-optimal, with primary healthcare workers having a recognised and vital role in the screening programs.

**Methods:** Semi-structured interviews with 30 primary healthcare workers (general practitioners, practice nurses and practice managers), from primary care settings across Australia. Transcripts were analysed using the Framework Method.

**Results:** Factors stemmed from two environment-level factors: financial structure of primary care and structure of screening

programs. Associated with each were organisation and care team level factors - time; practice culture; screening information; and opportunistic conversations and recall and reminder systems; access to patient screening records; and sense of program ownership.

**Conclusions:** Initiatives which aim to increase engagement of primary healthcare workers in the cancer screening programs need to consider their limited time and multiple competing priorities and should consider financing solutions to allow a primary healthcare worker time to take on a lead role within the practice.

**Implications for Public Health:** This study will assist program developers and policy makers to make more evidence-informed decisions when it comes to designing practice-targeted initiatives.

# 3<sup>rd</sup> Global Nursing Congress



## Emerging of servant leadership in healthcare



**Eman Salman Taie**

*Faculty of Nursing, Helwan University, Egypt*

The world & healthcare had become more complicated, and dynamic. Servant leadership can manifest positive change in organizations, contrasting traditional autonomous leadership methods. When followers recognize leaders place value on individuals, followers are more likely to perform at a higher level. Servant leadership, a model first articulated by Greenleaf, focuses on serving the highest needs of others in an effort to help others achieve their goals. Servant leadership is a philosophy and set of practices that enriches the lives of individuals, builds better organizations. This leadership seeks to achieve a vision by providing strong support to employees, allowing them to learn and grow while bringing their own expertise and vision to

the table. He/she practices improve employee retention, increase productivity and elevate the organization's market value. This hinges on building authority and influence rather than control and intimidation. Employees in a servant leadership environment are more likely to feel that their voice is heard, which in turn makes them times more likely to work to the best of their abilities. This leads to improved employee engagement. Also, they feel appreciated, recognized, and valued when a leader sees them as individuals and emphasizes the importance of their contribution to the work success. Servant leadership will enable healthcare providers to create positive patient outcomes by promoting change in patient health behavior.

# 3<sup>rd</sup> Global Nursing Congress



## The role of management in the functioning of the general hospital in Prizren



**Esat Qovanaj<sup>1,2</sup>**

<sup>1</sup>Department of Surgery, General Hospital, Kosovo

<sup>2</sup>Kosovo Nursing Chambers, Kosovo

As in Prizren, but also in other parts of Kosovo there is a great dissatisfaction with health services. All the problems are usually within access to service, hospitalisation, patient safety, patient satisfaction level, confidence in our health systems. The main purpose of this research is the review, identification, detailed approach of the management system and leadership in the health sector of the Prizren Hospital and their role in the proper functioning of this health institution. Methods that have used during this study have been selected in accordance with the nature, problem, subject, purpose and research tasks. The methods use in this research are analytical – descriptive, analytical – synthetic and inductive – deductive. The data are processed with quantitative and statistical methods, while their interpretation means qualitative processing. As a technique of this

research is selected survey, as an instrument is the questionnaire. Three questionnaires were prepared, and for patients, medical staff and management structures of the hospital. While processing data informations and comparing them based on information obtained from various questionnaires, it has been shown that some problems exist as common issues for all groups and respondents in the Prizren General Hospital. Based on the finding of this study and all the facts highlighted during the research and during the survey analysis and focusing on the main results, the following are the recommendations in this study. The General Hospital and the Hospital Management together with the Heads of Department should consider the possibilities to improve the Hospital's technical aspects to create good conditions for the staff and the patients who come to the treatment.



## Binge eating after bariatric surgery in patients assisted by the reference service in a Brazilian hospital and the correlation with weight loss



**Fabiana Salatino Fangueiro and Patricia Colombo-Souza**

*Santo Amaro University, Brazil*

**Introduction:** Obesity is a complex multifactorial disorder that combines psychological, social, biological aspects and requires a multidisciplinary approach for proper understanding, diagnosis and treatment. Bariatric surgery, for some patients, is the most effective tool for obesity treatment and control, however, some patients doesn't achieve the desired weight or regain part of the lost weight. Since some change in eating behaviour may negatively influence weight losses, recognizing this condition is essential in order to proceed with an early reintervention and guarantee to the patient the expected outcome.

**Purpose:** Identify, 18 months after bariatric surgery, the binge eating variation and its relation with weight regain or loss.

**Materials and Methods:** Cross-sectional, retrospective study with 108 patients, assisted by an obesity walk-in clinic of a specialized hospital in São Paulo (Brazil), who had

undergone bariatric surgery a minimum of 18 months previously. The anthropometric and clinic data were collected from medical records, and binge eating symptoms were evaluated with the application of the Binge Eating Scale (BES). Scale outcomes were related to weight regain and loss at the application moment.

**Results:** The average age (standard error) of the sample was 47 years ( $\pm 0.91$ ) and 93% were female. Patients had lost 52.2% of their body weight and regained 4.7% of their weight 18 months after the surgery. The elapsed surgical time ( $> 50$  months) was associated with a higher gross weight ( $p < 0.0001$ ).

**Conclusions:** Bariatric surgery has been shown to be effective for improving diabetes mellitus as well as for controlling obesity. The variation in binge eating intensity 18 months after bariatric surgery is a factor that interferes in the amount of weight regained. The presence of binge eating symptoms negatively affects the % total weight loss (%TWL).

# 3<sup>rd</sup> Global Nursing Congress



## Addressing priorities for surgical research in Africa: Implementation of a multicentre cloud- based peri-operative registry in Ethiopia



**Fitsum Kifle**

*Debre Berhan University, Ethiopia*

**Background:** Improving global surgical capacity and quality requires data-driven, evidence-based interventions and collaborations. Low-resource settings, where disparities in access to and quality of surgical treatment led to excess mortality, have few surgical data, and most of the available data comes from developed nations with little involvement from the data owner countries. The purpose of this study was to implement in Ethiopia a perioperative registry to generate continuous surgical data and examine whether this would help address African perioperative research priorities (Biccard, 2020). Ethiopia is the second-most populous country in Sub-Saharan Africa and the headquarters of the African Union.

**Method:** A south-south collaboration supported the implementation of a context-specific, clinician-led, multicentre real-time peri-operative registry in Ethiopia. Data from perioperative care, including the Ethiopian Ministry of Health's national "Saving Lives Through Safe Surgery initiative", was linked to real-time dashboards, which provided clinicians and administrators with reports

on service utilisation, surgical access, and national surgical performance indicators. 285 beds were sourced from four hospitals in the Amhara, Southern Nations Nationalities and Peoples regions, and Addis Ababa.

**Results:** A total of 1748 consecutive surgical cases were recorded from April 2019 to April 2020, and compliance with the World Health Organization's Surgical Safety Checklist was 1595 (92.1%). 33 patients (3.1%) experienced adverse events during anesthesia, and 21 (2.0%) developed surgical site infections.

**Conclusion:** This collaboration has successfully implemented a multicentre digital surgical registry that can measure key performance indicators for surgery and evaluate peri-operative outcomes. The peri-operative registry is currently being rolled out across the Amhara region and Addis Ababa city administration. It will provide continuous granular healthcare information necessary to empower clinicians to drive context-specific priorities for service improvement and research in collaboration with national stakeholders and international research consortiums.

# 3<sup>rd</sup> Global Nursing Congress



## Exploring the impacts of migration on Iranian students wellbeing



**Forouzan Rostami<sup>1</sup>, Parsa Rostami<sup>2</sup> and Mohammad Mobin Rostami<sup>3</sup>**

<sup>1</sup>Department of Nursing, Faculty of Nursing and Midwifery, Islamic Azad University, Iran

<sup>2</sup>Diploma in Experimental Sciences, Iran

<sup>3</sup>Tehran Medical University, Iran

**M**igration is the movement of people across a specified boundary for the purpose of establishing a new or semi-permanent residence. With up to 2% of the world's population living outside of their country of birth, the potential impact of population mobility on health and on use of health services of migrant host nations is increasing in its importance. Historically this movement was nomadic, often causing significant

conflict with the indigenous population and their displacement or cultural assimilation. Qualitative method was used to this research. Present study draws on interviews, with 7 interviews with UPM student's emigrants. Results illustrate immigrant status may impact family stress and uncertainty, health outcomes, and educational attainment and may result in increased social isolation for students in immigrant families.

# 3<sup>rd</sup> Global Nursing Congress



## **Educating in nursing and contract cheating: An increasing challenge for integrity of the nursing education arising from COVID-19**



**Jon Mason, Guzyal Hill and Sarah Mills**

*Charles Darwin University, Australia*

**S**timulated by COVID-19, the rapid transition into digitally enabled education experienced by colleges and universities worldwide has brought with it unintended consequences. Among these is the growth in scale of operation of contract cheating services. This is concerning for nursing education due to the connection between cheating in assessments and dishonesty in clinical practice. This can lead to patient safety concerns and registered nurses breaching the code of ethics underpinning their professional registration. Due to COVID-19, universities with limited expertise with the digital environment had to rapidly transition to online teaching and assessment. This transition did not create a new problem but has offered more opportunities for contract cheating and diversified the types of such services. While universities and lecturers were adjusting to the new teaching styles and developing new assessment methods, opportunistic contract cheating providers have been offering COVID-19 incentives and broadening their scope of service to include

commercial online tutors to take their online exams, or to take advantage of real-time assistance from qualified nurses while sitting examinations. This presentation contributes to the discourse on contract cheating by reporting on an investigation of the scope and scale of the growing problems related to academic integrity exacerbated by an urgent transition to online assessments during the COVID-19 pandemic. The dark reality is the illegal services are developing at a faster pace than the systems required to curb them, as demonstrated by the results. The all-penetrating issues indicate systemic failures on a global scale that cannot be addressed by an individual academic or university acting alone. Multi-level solutions including academics, universities and the global community are essential. The presentation offers a model of collaboration to address this problem on several levels, taking into account (1) individual academics; (2) universities; (3) countries (4) international communities (5) code of ethics for nurses and (6) patient safety outcomes.

# 3<sup>rd</sup> Global Nursing Congress



## The role of nursing and physiotherapy teams in the success of day case arthroplasty programme



**Gyorgy Lovasz, Candace Boyd, Ruth Crofts and Andrew Hogg and Marco La Malfa**

*Plus Group Hospital, UK*

**Aims:** Day case hip and knee replacement is becoming more common in Europe 1,2. It is daily practice at our elective orthopaedic ward. We have assessed the outcomes of the first 200 patients scheduled to undergo arthroplasty with discharge on the day of surgery. The purpose of this review is to present our experience with day case arthroplasties and discuss the role of nursing and physiotherapy teams in the success of the programme.

**Methods:** 200 patients were booked for primary hip or knee arthroplasty with planned same day discharge (SDD). With 6 weeks follow up, we assessed SDD rate, readmissions, complications, patient satisfaction and also reviewed length of stay (LOS) changes of our inpatient arthroplasties treated at the same ward, in the same time period.

**Results:** 166 patients were discharged on the day of surgery (SDD rate 83%). Most common reason for overnight stay was lack of confidence. 5 readmissions (3%) occurred

within 6 weeks, none of them related to early discharge. Patient satisfaction was 98%. LOS of traditional inpatient arthroplasties was 25% shorter than prior to launching the day case programme 3.

**Discussion:** Day case hip and knee replacement is a successful and safe operation for selected patient population. The key to success is proper patient selection and coordinated team work. Nursing and physiotherapy staff play key role in the success of the programme. From preoperative assessment, patient selection, postoperative observation, mobilization and discharge, nursing and physiotherapy teams have a crucial role in the care. In each phase of the pathway teams have to act professionally and responsibly to make sure patient safety is not compromised. Our experience proved that with proper training and support nursing and physiotherapy teams can manage the pathway with great professionalism contributing immensely to success of same day discharge of arthroplasty programme.



## The predicting role of the safety climate in the professional behavior of nurses: A cross-sectional study



**R. Bagherzadeh<sup>1</sup>, Y.Salemipoor<sup>2</sup>, F.Hajinejad<sup>3</sup>, F.Heidari<sup>3</sup> and H.Vahedparast<sup>4</sup>**

<sup>1</sup>Department of Midwifery, Bushehr University of Medical Sciences, Iran

<sup>2</sup>Faculty of nursing and midwifery Bushehr University of Medical Sciences, Iran

<sup>3</sup>Nursing and Midwifery Faculty. Bushehr University of Medical Sciences, Iran

<sup>4</sup>Department of Nursing and Midwifery Faculty. Bushehr University of Medical Sciences, Iran

**Background:** Safety climate which is a subset of organizational climate in the field of safety mirrors the attitude of people in care centers towards safety. In addition to being in connection with diverse parts of the organization's function, safety climate can also affect the nurse's performance. The present study aimed at determining the predicting role of the safety climate in the professional behavior of nurses working in hospitals affiliated to Bushehr University of Medical Sciences.

**Methods:** In this cross sectional study, which is of descriptive analytical type, 595 expert nurses currently working with more than 6 months of working experience in the medical wards of hospitals affiliated to Bushehr University of Medical Sciences entered the study. Data was gathered from the viewpoint of the nurse and professional behavior through a demographic information form and two safety climate questionnaires. Then the data were analyzed

by V.19 SPSS which is statistical software. The data analysis was conducted using univariate regression and multivariate linear regression at the significance level of 0.05.

**Results:** Among the diverse domains of the safety climate, the field of nursing education ( $P=0.027$ ,  $\beta=0.104$ ), communicating with other nurses ( $P=0.027$ ,  $\beta=0.101$ ) and error reporting ( $P<0.001$ ,  $\beta=0.191$ ) were the direct prediction of professional nursing behavior. Also, apart from safety climate, satisfaction of the nursing job had a direct, statistic and significant relationship with professional behavior ( $P<0.001$ ,  $\beta=0.142$ ).

**Conclusion:** Attempts to create a ward, in which the nurses receive the necessary education in an appropriate time and ameliorate their expertise, as well as a climate in which nurses have such a good relationship with their colleagues that they can easily talk about the possible mistakes and errors, can upgrade nurse's professional behavior.



## The outcomes of pregnancy with congenital heart disease: An integrative literature review



**Hanan Al Obieat<sup>1</sup>, Inaam Khalaf<sup>1</sup> and Maan Sh. Al Momani<sup>3</sup>**

<sup>1</sup>Royal Medical Services, Royal Medical Services College, Jordan

<sup>2</sup>School of Nursing, The University of Jordan, Jordan

<sup>3</sup>Royal Medical Services, Queen Alia Heart Institute, Jordan

**Purpose:** The purpose of this review was to identify the short-term and long-term outcomes of pregnancy in women suffering from congenital heart disease (CHD).

**Methods:** An integrative review is used to identify the pregnancy outcomes in women with CHD. Data search was between 2010 and 2020 using Google Scholar, Scopus, Web of Science, Science Direct, Pub Med, Medline, CINAHL, EBSCO, Cochrane, and EBSCO host. Sixteen articles met the eligibility criteria.

**Results:** The sixteen reviewed articles utilized descriptive retrospective and prospective design. Themes were short-term outcomes that include; cardiac maternal and obstetric

outcomes, and long-term outcomes.

**Conclusion:** Previous uncertainty about the ability of CHD patients to successfully become pregnant and deliver safely has replaced by the recognition that a large number can have excellent outcomes. However, these patients do continue to have higher cardiac, obstetric, and fetal risks than the general population. This illuminates the importance of preconception counseling and risk assessment for women suffering from CHD regarding the expected maternal and fetal outcomes. Moreover, there is a need for providing accurate and appropriate education about pregnancy and delivery options.



## Do nurses have barriers to quality oral care practice at a generalized hospital care in Asmara, Eritrea? A cross-sectional study



**Zewdi Amanuel Dagnew<sup>1</sup>, Isayas Afewerki Abraham<sup>2</sup>, Ghirmay Ghebreigziabher Beraki<sup>3</sup>, Sibyl Mittler<sup>4</sup>, Oliver Okoth Achila<sup>5</sup> and Eyasu H. Tesfamariam<sup>6</sup>**

<sup>1</sup>*Emergency and Critical Care Unit, Department of Nursing, Orotta College of Medicine and Health Sciences, Eritrea*

<sup>2</sup>*Epidemiology and Biostatistics Unit, Department of Community Medicine and Primary Health Care, Orotta College of Medicine and Health Sciences, Eritrea*

<sup>3</sup>*Midwifery Unit, Department of Nursing, Orotta College of Medicine and Health Sciences, Eritrea*

<sup>4</sup>*Emergency, Critical Care and Anesthesia Unit, Department of Nursing, Orotta College of Medicine and Health Sciences, Eritrea*

<sup>5</sup>*Clinical Laboratory Sciences Unit, Department of Allied Health, Orotta College of Medicine and Health Sciences, Eritrea*

<sup>6</sup>*Epidemiology and Biostatistics Unit, Department of Statistics, College of Sciences, Eritrean Institute of Technology, Eritrea*

**Background:** Oral care is a fundamental nursing practice that has a great impact on patient well-being and general health during hospitalization. Nurses are responsible for providing oral care in the hospital; however, they usually implement it unsatisfactorily due to inadequate resources, lack of standard protocol, time shortage and ineffective training. The aim of the study was, therefore, to assess nurses' barriers to quality oral care practice at a generalized hospital. The information obtained

will help in highlighting the magnitude of the problem and in the promotion of oral health, prevention and control of oral diseases, reduction of hospital stays and diseases, and in strengthening healthcare systems.

**Methods:** A cross-sectional design using mixed (quant-qual) method was applied at a generalized hospital. Data for the quantitative study were collected from all (N = 73) diploma and associate nurses through face to face

# 3<sup>rd</sup> Global Nursing Congress

interview with a structured questionnaire. On the other hand, in the qualitative part, head nurses (n = 6) and staff nurses (n = 7) discretely participated in the focus group discussions (FGDs), whereas matron (n = 1), assistant matrons (n = 2), and supervisor (n = 1) in total 4, participated in the key informant interview (KII). The quantitative and qualitative data were analyzed, respectively, using descriptive statistics and thematic framework analysis.

**Results:** The majority (93.2%) of participants had barriers performing oral care. The barriers mentioned by the participants were; lack of oral care equipment (91.2%), absence of guidelines (73.5%), shortage of staff (67.6%), time constraints (66.2%), inadequate knowledge

(54.4%), poor supervision (47.1%), high work load (44.1%), and not being a priority (33.8%). Moreover, through FGD and KII, four main barriers to oral care were identified namely; inadequacy of resources, knowledge gap in oral care practice, nurse related barriers (perception of nurses and initiative of nurses) and gaps in management.

**Conclusions:** The study concluded that nurses faced barriers at individual, organizational and ministry level that hindered them from performing standard and effective oral care. Therefore, there is a need for further training, motivation, standardized protocol and provision of equipment and supplies to promote oral health of patients.

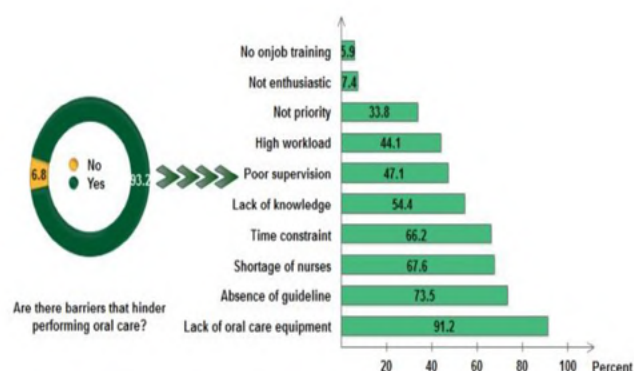


Fig. 1 Barriers to oral care among the nurses

Themes	Sub themes
Inadequacy of resources	Guideline Equipment and Supply Nurses work load
Knowledge gap in oral care practice	Awareness and knowledge of the nurses in oral care Knowledge of supervisors in oral care In-service training/update
Nurse's related barriers	Perception of nurses Initiative of nurses
Management gaps	Absence of oral care in nursing care plan Lack of team work Poor supervision

Table 1. Themes and sub-themes developed for investigating the barriers to oral care practice

# 3<sup>rd</sup> Global Nursing Congress



## Nursing care of a newborn with epidermolysis bullosa: A case report



**Izabela Linha Secco<sup>1</sup>, Mitzy T. Reichembach Danski<sup>1</sup>, Márcia H. De Souza Freire<sup>1</sup>, Higor Pacheco Pereira<sup>1</sup>, Taine Costa<sup>2</sup>, Etienne Leone de Moraes<sup>2</sup> and Daniele A. de Siqueira Oliveira<sup>2</sup>**

<sup>1</sup>Federal University of Parana, Curitiba, Brasil

<sup>2</sup>Waldemar Monastier Children Hospital, Brasil

**Objective:** To describe a case of epidermolysis bullosa occurring in a children's hospital in the South of Brazil, evidencing the nursing care provided to this newborn diagnosed with this pathology.

**Method:** A case study with data collection from medical records, approved by the Institution and by the Research Ethics Committee with Human Beings.

**Results:** After the diagnostic confirmation, a specific care plan was established for the newborn, encompassing basic human needs to the clinical treatment of the disease. Conclusion: The neonate was discharged with shorter hospitalization time and with total epithelization of the lesions, despite the severity. The family actively participated in the care process, demonstrating the ability to perform the dressings at home.

# 3<sup>rd</sup> Global Nursing Congress



## The merits and availability of modern technology in relation to melanoma



**J. Kabbani and J. Kabbani**

*Imperial College London, UK*

**Background:** Modern technology has allowed for the emergence of novel resources across healthcare specialities. Smartphone applications, particularly, have been a resourceful tool for clinicians, patients, and institutions. Especially in dermatology, whereby related applications are widely accessible on mainstream application stores. This study reviewed published literature on melanoma-related applications, as well as relevant applications available for download.

**Objectives:** This study had 3 primary aims: to assess melanoma-related applications available on the Apple's "App Store" and Google's "Google Play", the two biggest application stores; to analyse selected applications for purpose, pricing and ratings;

and to review published literature to assess the use of melanoma-related applications.

**Methods:** A literature search of "dermatology", "smartphone" and "melanoma" was conducted to identify relevant publications. "Melanoma" was searched in Apple's (iOS) "App Store" and Google's "Google Play", and applications were analysed.

**Results:** 54 of the 63 literature search results explored smartphone use in relation to melanoma, describing benefits including quicker patient access to care, reduced referrals and hence unnecessary consultations, and improved accessibility to information. However, concerns include insufficient image quality, privacy issues related to encryption,

	Google Play (n=249)	App Store(n=51)
Clinical Tools	25%	92%
Educational App	17%	6%
Recreational	58%	8%

**Table 1:** Breakdown of search results of "melanoma" on the App Store(n=51) and Google Play(n=249).

# 3<sup>rd</sup> Global Nursing Congress

and diagnostic inaccuracy. Searches on the Google Play and iOS stores identified 249 and 51 apps respectively. Table 1 shows the breakdown of search results.

81% of the educational apps and 92% of the clinical management apps related to dermatology and melanoma on Google Play, whereas all of the clinical management apps and 67% of the education apps on the App store were of relevance.

**Conclusion:** The results illustrate the widespread availability, and accessibility, of applications related to melanoma, particularly for educational and clinical purposes. Standardising photographing techniques, improving diagnostic accuracy, and privacy issues are important aspects to consider and warrant further investigation.

# 3<sup>rd</sup> Global Nursing Congress



## Custom-made devices to prevent self- inflicted oral trauma following a buccinator myomucosal flap



**James I. J. Green<sup>1,2</sup>**

<sup>1</sup>Great Ormond Street Hospital for Children NHS Foundation Trust, United Kingdom

<sup>2</sup>Broomfield Hospital, Mid and South Essex NHS Foundation Trust, United Kingdom

In plastic and reconstructive surgery, a flap is a procedure where tissue is transferred from one part of the body (the donor site) to another (the recipient site). A flap is similar to a graft but differs in that a flap maintains a blood supply whereas a graft from does not and instead relies upon the growth of new blood vessels. There are numerous flap techniques, which vary depending upon the location of the flap and the type of structure that is being reconstructed. A buccinator myomucosal flap provides mucosal cover rather than skin cover and is used to reconstruct soft tissue defects of the oral cavity, oropharynx and nasal septum. In cases where the procedure is used to lengthen the soft palate, the soft palate is separated from the hard palate and pushed back. The flap (that comprises of the buccal mucosa, submucosa and buccinator muscle with feeding vessels and vascular plexus) is

raised and laid into the space between the soft palate and the hard palate and held in place using dissolvable stitches. The base of the flap (the pedicle) remains attached to the inside of the cheek to maintain the blood supply. In some cases the pedicles will pass between the maxillary and mandibular molar teeth and a custom-made medical device (commonly referred to as "bite blocks") may be used to prevent the pedicles from being traumatised by the teeth. Two or three weeks later, once the blood supply has been established, a second procedure may take place where the pedicle is divided and inset and the device is removed. This presentation will examine the design and fabrication methods of various custom-made devices that can be used to prevent self-inflicted oral trauma in patients who have undergone a buccinator myomucosal flap.



## Stress and anxiety in nursing simulation



**K. Takhdad<sup>1,3</sup>, A.R Eladib<sup>2</sup> and S. Lamtali<sup>3</sup>**

<sup>1</sup>Cadi Ayyad University, Faculty of sciences Semlalia. Morocco

<sup>2</sup>Marrakesh simulation and innovation in health sciences center, faculty of medicine and pharmacy, Cadi Ayyad University, Morocco

<sup>3</sup>Higher Institute of Nursing Professions and Health Techniques. Morocco

The nursing curriculum is demanding in nature. Whereas simulation-based learning (SBL) is well established in nursing curricula as a valued learning tool, nursing students experience stress and anxiety during SBL. That psychological distress may impair their physical, mental health as well as their SBL outcomes. So, assessment of stress and anxiety among students will allow educators to intervene adequately or initiate any early referral to appropriate services. Stress and anxiety levels among nursing students can be determined by using stress or anxiety assessments' instruments such as the Perceived Stress Scale (Cohen et al., 1983) and the State Trait Anxiety Inventory (Spielberger, 1983). In addition, nurse educators should recognize some psychological symptoms. Those symptoms reflect students' psychological and behavioral responses to stress and anxiety. This can be expressed by a lack of engagement; class lateness, clinical setting absenteeism, and difficulty in respecting examinations' deadlines. In simulation-based learning, nurse educators should also

recognize fixation error. It's a cognitive error characterized by more attention, focus on a single element of a situation while neglecting more pertinent environmental elements. During the debriefing, instructors should encourage learners to express their emotions and ensure psychological safety in order to develop effective reflective practice. To ensure nursing students' psychological safety and to improve their SBL experience, nurse educators should be aware of stress and anxiety confusion when providing emotion regulation interventions. The evidence suggests that students' stress may be reduced by different faculty-led interventions such as peer mentoring. Likewise, in SBL, anxiety may be lowered by relaxation techniques integrated in pre-briefing phase. To conclude, nurse educators should be aware of psychological distress among their students. Effective psychological interventions are crucial to managing stress and anxiety of nursing students. This may improve the quality of academic and clinical learning experiences, students' mental health as well as their well-being.



## Association of *cdh13* gene polymorphism and metabolic syndrome in Gambian population



**Kebba S. Bojang<sup>1, 2, 3</sup>, Diana Lyrawati<sup>1, 4</sup>, Hidayat Sujuti<sup>1, 5</sup>, Djoko Wahono<sup>1, 6</sup>**

<sup>1</sup>Faculty of Medicine, Brawijaya University, Indonesia

<sup>2</sup>School of Medicine and Allied Health Sciences, University of The Gambia, The Gambia

<sup>3</sup>Department of Internal Medicine, Kanifing General Hospital, The Gambia

<sup>4</sup>Department of Pharmacy, Faculty of Medicine, Brawijaya University, Indonesia

<sup>5</sup>Department of Ophthalmology, Faculty of Medicine, Brawijaya University, Indonesia

<sup>6</sup>Department of Internal Medicine, Faculty of Medical, Brawijaya University, Indonesia

**Background:** Metabolic syndrome is a complex syndrome with clustering of interrelated risk factors for cardiovascular disease and diabetes. Its rising worldwide prevalence has been largely related to the increasing obesity. As a result, metabolic syndrome is now both a clinical and public health problem. Polymorphism in *CDH13* gene, which encodes for the adiponectin receptor, T-cadherin, is a genetic risk factor associated with metabolic syndrome. *CDH13* rs3865188, which is found in the promoter region of the *CDH13* gene, has been found to be associated with metabolic syndrome and its traits in Asian and European Caucasian populations. However, to the best of our knowledge, it was yet to be assessed in a Black African population.

**Aim:** The aim of this study was to investigate the association of *CHD13* rs3865188 and metabolic syndrome in a Gambian population.

**Methods:** It was a genetic association study in a cross-sectional design in 136 Gambian participants. *CDH13* rs3865188 was genotyped using PCR master mix and sequencing. Blood sugar, triglyceride and high-density lipoprotein levels were determined by standard clinical laboratory methods.

**Results:** *CDH13* rs3865188 was found to be significantly associated metabolic syndrome ( $p=0.034$ ). Genotype AT appeared to be risk factor for metabolic syndrome ( $OR=2.41$ , 95% CI, 1.20–4.84,  $p=0.014$ ). We found genotypes CC and CA in *CHD13* rs3865188 for the first time.

**Conclusion:** Our study demonstrated significant association between *CDH13* rs385618 and metabolic syndrome in a Gambian population (Black African population for the first time). Individuals with genotype AT are at higher risk of developing metabolic syndrome.

# 3<sup>rd</sup> Global Nursing Congress



## An investigation of the impact of gender on nursing fatigue in Jordan: A primary qualitative study



**Mahmoud Al-Masaeed<sup>1</sup>, Anthony Paul O'Brien<sup>5</sup>, Muhammad Alqudah<sup>3</sup>,  
Michelle Guilhermino<sup>4</sup> and Irniza Binti Rasdi<sup>5</sup>**

<sup>1,2,3,4</sup>College of Health, Medicine and Wellbeing, University of Newcastle, Callaghan, Australia

<sup>5</sup>Faculty of Medicine and Health Sciences, Universiti Putra Malaysia, Malaysia

**Significance and Aim:** This study is developed as an investigation of the impact of nursing fatigue on gender. The study was informed by the existing literature gap on the effect of fatigue on gender in the Middle East, particularly in Jordan. The study findings provide information to guide policy and to develop coping strategies approaches in relation to addressing fatigue for gender as an antecedent factor.

**Methods:** The study was conducted by collecting data from 27 respondents using semi-structured audio recorded in-depth interviews. A purposive sampling strategy was used until data saturation occurred. In response to the COVID-19 pandemic spread control measures, the data collection process was executed virtually.

**Findings:** The study findings were analysed thematically. The key analysis themes included (i) Nurses Fatigue Coping Strategies,

(ii) Gender and Nursing Fatigue in Jordan, and (iii) Fatigue Prevalence among Jordan Nurses, respectively. Overall, the study established that fatigue can have detrimental effects for both male and female nurses and that recovery is different for both genders. Women were found to experience more fatigue in the workplace complicated by domestic responsibilities in between shifts.

**Conclusion:** There is a high fatigue prevalence among Jordanian nurses which is significantly skewed against women. This means that women have a higher fatigue index than their male peers in Jordan. Culture and religious beliefs are listed as the key contributing factors for gender fatigue levels variances. Some of the suggestions include nurses undertaking exercise and relaxation regimes, while the management should offer shorter working shifts, reduce the number of working hours to average 40 hours, and allow for better inter-shift rest periods.

# 3<sup>rd</sup> Global Nursing Congress



## Impacts of English language proficiency on healthcare access, use, and outcomes among immigrants and refugees: A qualitative study



**Mamata Pandey<sup>1</sup>, R. Geoffrey Maina<sup>2</sup>, Jonathan Amoyaw<sup>3</sup>, Yiyan Yi<sup>2</sup>,  
Rejina Kamrul<sup>4</sup>, C. Rocha Michaels<sup>4</sup> and Razawa Maroof<sup>4</sup>**

<sup>1</sup>Research Department, Saskatchewan Health Authority, Canada

<sup>2</sup>University of Saskatchewan, College of Nursing, Canada

<sup>3</sup>Dalhousie University, Department of Sociology, Canada

<sup>4</sup>Department of Academic Family Medicine, University of Saskatchewan, Canada

**Background:** Immigrants from culturally, ethnically, and linguistically diverse countries face many challenges during the resettlement phase, which influences their access to healthcare services and health outcomes. The “Healthy Immigrant Effect” or the health advantage that immigrants arrive with is observed to deteriorate with increased length of stay in the host country.

**Methods:** An exploratory qualitative design, following a community-based research approach, was followed. The research team consisted of health researchers, clinicians, and community members. The objective was to explore the barriers to healthcare access among immigrants with limited English language proficiency. Three focus groups were carried

out with 29 women and nine men attending English language classes at a settlement agency in a mid-sized city. Additionally, 17 individual interviews were carried out with healthcare providers and administrative staff caring for immigrants and refugees.

**Results:** A thematic analysis was carried out with transcribed focus groups and healthcare provider interview data. Both the healthcare providers and immigrants indicated that limited language proficiency often delayed access to available healthcare services and interfered with the development of a therapeutic relationship between the client and the healthcare provider. Language barriers also impeded effective communication between healthcare providers and clients, leading to

# 3<sup>rd</sup> Global Nursing Congress

suboptimal care and dissatisfaction with the care received. Language barriers interfered with treatment adherence and the use of preventative and screening services, further delaying access to timely care, causing poor chronic disease management, and ultimately resulting in poor health outcomes. Involving untrained interpreters, family members, or others from the ethnic community was problematic due to misinterpretation and confidentiality issues.

**Conclusions:** The study emphasizes the need to provide language assistance during medical consultations to address language barriers among immigrants. The development of guidelines for recruitment, training, and effective engagement of language interpreters during medical consultation is recommended to ensure high quality, equitable and client-centered care.



**De winter's pattern:  
An uncommon but  
very important  
electrocardiographic sign  
in the prompt recognition  
of spontaneous occlusive  
coronary artery  
dissection in young  
patients with chest pain**



**Marjan Farzad<sup>3</sup>, Nahid Azdaki<sup>1,2</sup>, Seyedali Moezi<sup>1</sup>, Neda Partovi<sup>1</sup> and Reza Ashabyamin<sup>4</sup>**

<sup>1</sup>Cardiovascular Diseases Research Center, Department of Cardiology, School of Medicine, Birjand University of Medical Sciences, Iran

<sup>2</sup>Clinical Research Development of Razi Hospital, Birjand University of Medical Sciences, Iran,

<sup>3</sup>Cardiovascular Diseases Research Center, School of Nursing and Midwifery, Birjand University of Medical Sciences, Iran

<sup>4</sup>Pathologist, Forensic Medicine Research Center, Iran

**C**hest pain is a clinical symptom for immediate consultation, and electrocardiogram (ECG) is a valuable diagnostic tool for use in the emergency room. Although the ST-elevation myocardial infarction (STEMI) requires urgent management, there are other ECG high-risk findings which are associated with adverse outcomes or imminent acute myocardial infarction (AMI). This is a case of STEMI equivalent pattern such as de winter. As this ECG pattern is uncommon, it may be misinterpreted in the emergency department. We report a misinterpretation of de Winter's

pattern (dWp) in a young woman referred to the emergency department for chest pain, feeling of suffocation and hemodynamic instability who undergone reteplase treatment with the suspicion of acute massive pulmonary embolism but developed cardiogenic shock as a result of extensive myocardial infarction due to spontaneous dissection of the left anterior descending coronary artery. A prompt diagnosis of de Winter's pattern and early angiography to detect the underlying cause of clinical manifestation can be lifesaving.



## Social innovation based on collaboration between government and non-governmental organizations in COVID-19 crisis: Evidence from Iran



**Mehrnaz Moeenian<sup>1</sup>, Abbas Khamseh<sup>2</sup> and Mazyar Ghazavi<sup>3</sup>**

<sup>1</sup>Department of Technology Management, Science and Research Branch, Islamic Azad University, Iran

<sup>2</sup>Department of Industrial Management, Islamic Azad University, Iran

<sup>3</sup>Department of Industrial Engineering, Islamic Azad University, Iran

**Background:** One of the effective ways to attract social collaboration to provide effective, prompt, and coordinated interventions in emergencies is through social innovation. The present study seeks to identify the factors affecting the implementation of the social innovation plan based on the collaboration between government and non-governmental organizations (NGOs) for saving people's lives in crises. The initial idea of this research was obtained from the best practice "Every Home Is a Health Base" which was implemented in Iran.

**Methods:** The Grounded Theory strategy has been used in this study. The statistical population of the study is health experts from the Ministry of Health and Medical Education of Iran. The study time span is during the first half of 2020. Exploratory analysis was used to identify the factors of social innovation. By selecting and reviewing 68 research in-depth, the initial framework was prepared.

Then, through a semi-structured interview with experts, the framework was adapted and reviewed. Based on the analysis of the collected data, 39 open codes were extracted and the factors affecting the implementation of the social innovation were identified.

**Results:** The eight axis codes as the factors affecting the implementation of the social innovation plan based on the collaboration between government and NGOs are as follows: Paying attention to the components of the NGOs collaboration effectiveness, investment to attract NGOs collaboration, the ability to manage the implementation, the ability of networking, the ability of policymaking, providing the necessary cultural and educational infrastructure; Existence of capable legal organizations to solve the executive problems of the plan and facilitate coordination, and controlling, containing and reducing the effects of the crisis, as consequences.



# 3<sup>rd</sup> Global Nursing Congress

**Conclusions:** Lessons learned from the COVID-19 pandemic have shown the world that the current governmental and social structures are not efficient enough to respond quickly to the emergence of global challenges. Social innovation is a solution to this problem. The findings of this study also confirm this and identify the factors affecting the

implementation of the social innovation plan based on collaboration between governments and NGOs in crises. The results of this research give governments and policymakers an efficient solution by involving NGOs, especially in times of widespread crises. Also, they can be used in planning for social development.

# 3<sup>rd</sup> Global Nursing Congress



## Family caregiver of the elderly at the end of life as a Subject of nursing care



**Michel Oria Saavedra**

*Faculty of Nursing, University of Medical Sciences of Havana, Cuba*

**Introduction:** The family caregiver of the elderly at the end of life is a subject that should be conceived as a focus of care, as it is not identified as theoretically supported from the nursing approach, and scientific texts on the subject are scarce.

**Objective:** To systematize the term care for the family caregiver of the elderly at the end of life as a subject of nursing care.

**Methods:** Systematic review, between March and May 2019, for a reflexive critical analysis of the content of documents from 12 years (2006-2018), published in Spanish in SciELO and Google academic. For the search strategy, the flowchart (PRISMA) was used, with the following keywords and Boolean operators:

"anciano" OR "envejecimiento" AND "cuidado de enfermería" OR "enfermería" AND "cuidador" [in English, "elderly" OR "aging" AND "nursing care" OR "nursing" AND "caregiver"]. Critical evaluation of the included studies was carried out through content analysis.

**Conclusions:** Care for the family caregiver of the elderly at the end of life was defined operationally as: A complex process in which the identification of human needs in the psycho-spiritual order, physical health, the environment and the social setting influences the relationship between the family caregiver and the elderly at the end of life, in which the individual and personal experience is recognized and that contributes to the person's quality of life.



## Comparative study of occupational burnout and job stress of frontline and non- frontline healthcare workers in hospital wards during COVID-19 pandemic



**Farnaz Etesam<sup>1,2</sup>, Mitra Akhlaghi<sup>3,4</sup>, Zahra Vahabi<sup>5,6</sup>, Samaneh Akbarpour<sup>7</sup>  
and Mohammad Hossein Sadeghian<sup>3,8</sup>**

<sup>1</sup>Psychosomatic Research Center, Department of Psychiatry, Imam Khomeini Hospital Complex, Tehran University of Medical Sciences, Iran

<sup>2</sup>Baharloo Hospital, Tehran University of Medical Sciences, Iran

<sup>3</sup>Department of Forensic Medicine, School of Medicine, Tehran University of Medical Sciences, Iran

<sup>4</sup>Legal Medicine Research Center, Legal Medicine Organization, Iran

<sup>5</sup>Department of Geriatric Medicine, Ziaieian Hospital, Tehran University of Medical Sciences, Iran

<sup>6</sup>Memory and Behavioral Neurology Division, Roozbeh Hospital, Tehran University of Medical Sciences, Iran

<sup>7</sup>Occupational Sleep Research Center, Baharloo Hospital, Tehran University of Medical Sciences, Iran

<sup>8</sup>Department of Spiritual Health, Cultural Department, Tehran University of Medical Sciences, Iran

**Background:** One of the main impacts of COVID-19 pandemic is its psychological effects on the healthcare workers and patients suffering from COVID-19 along with their family members and relatives. Paying attention to the issue of mental health in the workplace, especially with current pandemic conditions of COVID-19 is of significant importance. Therefore, this study aimed to determine the factors affecting occupational burnout among

health care center staff during the pandemic of coronavirus infection.

**Methods:** The present study was a case-control study carried out in the first half of the year 2020 on medical staff working in hospitals in Tehran. The sample size was 324 individuals, including 175 employees working in general (non-COVID) wards and 149 people working in COVID-19 wards. Demographic characteristics questionnaire and two standard

# 3<sup>rd</sup> Global Nursing Congress

questionnaires of Maslach Burnout Inventory and Parker and DeCotiis Job Stress Scale were distributed.

**Results:** Total score of job stress and its two dimensions (time and pressure) had a significant relationship with different levels of occupational burnout. Logistic regression analyses showed significant relations between job stress with emotional exhaustion (95% CI, 1.11-1.19, OR=1.15) and depersonalization. Participants in both wards experienced statistically significant increasing trends given

the different components of occupational burnout concurrently by increasing their total stress score.

**Conclusion:** Hospital staff's levels of stress and occupational burnout regardless of where they worked (COVID-19 wards or general wards) were not significantly different and existed among the members of both groups. On the other hand, job stress and its dimensions (time pressure and anxiety) had a significant relationship with the main dimensions of occupational burnout.



## Laparoscopic cholecystectomy: Review of 1430 cases in Cure International hospital, Kabul, Afghanistan



**Wais Farda<sup>1</sup>, Mohammad Kamal Tani FACS<sup>2</sup>, Richard G. Manning<sup>2</sup>,  
Mohammad Samim Fahmi<sup>2</sup> and Nasratullah Barai<sup>2</sup>**

<sup>1</sup>General surgery department, Isteqlal Hospital, Afghanistan

<sup>2</sup>CURE International Hospital, Afghanistan

**Background:** LC is the gold standard for the treatment of cholelithiasis in most countries of the world. The objective of this study was to evaluate the outcomes of LC in the surgery department of Cure International hospital- Kabul, Afghanistan.

**Methods:** A retrospective study was conducted on LC cases in the general surgery department of Cure International hospital. Data were collected from 1430 patient files and operation theatre registry for whom LC was performed during Jan 2008-Dec 2019 period.

**Results:** Mean age was  $45.77 \pm 13.45$  years (14-90 years), with male/female ratio of 1:4.7. One third (33%) had comorbidities and most of patients (~97%) were classified as ASA grade I and II. Of the LC patients, 26.8% of males and 13.2% of females had gallbladder inflammation (OR=2.203, 95%CI 1.56 – 2.61,

$P=0.000$ ). Overall mean duration of anesthesia was  $75 \pm 25.6$  minutes. the conversion rate to OC was 4.6% (N=66), the most common indication of conversion was dense adhesions at Callot's triangle (3.8%). The intraoperative complication rate was 17.5% (N=249), where bile/stone spillage was the most common (N=235, 16.4%). Immediate postoperative complication rate was 2.4% (N=35). ALOS after LC was  $2.23 \pm 1.43$  days (1-19 days).

**Conclusion:** This study shows that elective LC can be performed safely in Afghanistan with comparable outcomes in terms of complication and conversion rates as well as ALOS to other countries of the region and the world. Proper case selection and careful preoperative evaluation and management can decrease further conversion, intra- and postoperative complications.



## The social and mental effect of cognitive rehabilitation on patients with cancer



**Mohammadamin Jandaghian Bidgoli**

*School of Nursing and Midwifery, Shahid Beheshti University of Medical Sciences, Iran*

**Introduction:** Individuals suffering from cancer are definitely at risk of cancer and its treatment negative impacts. The main focus of cancer rehabilitation (CR) is focused on optimizing and improvement of patient status. Meanwhile, CR is often underestimated. Besides, cognitive impairments due to the cancer can have devastating effects on the quality of life, job and social performance of the patients. The aim of this study was to determine the effectiveness of cognitive rehabilitation on cancer patients.

**Methods:** The databases of Web of Science, PubMed, EMBASE, Scopus, ProQuest, and Google Scholar were systematically searched for relevant studies published between 2011 and 2021. In addition, we searched according to Mesh keywords. Eventually, 25 articles were included in the study. The keywords registered were: cognitive rehabilitation, cancer, social

effect, mental effect and patient.

**Results:** The findings indicated that most of the patients in the study were women. Several studies have shown that pre-test and post-test results were significantly different. On the other hand, it was proved that cognitive rehabilitation of memory and attention had an effect on memory of patients undergoing chemotherapy. Furthermore, it was shown that cognitive rehabilitation can lead to improved body image and self-esteem status in patients with cancer. Also, the effect of cognitive rehabilitation of executive functions on life expectancy of adolescents treated for cancer is significant.

**Conclusion:** It is concluded that cognitive rehabilitation can positively affect the social and mental condition of patients with cancer. It is recommended to consider cognitive rehabilitation for cancer patients.

# 3<sup>rd</sup> Global Nursing Congress



## Telepsychiatry during the COVID-19 outbreak



**Moria Malka and David E. Katz**

*Shaare Zedek Medical Center, Israel*

**Background:** The novel coronavirus, SARS-CoV-2, emerged from Wuhan, China, and caused a pandemic. As a result, access to out-patient psychiatric care was extremely limited. To care for our patients, we conducted a pilot study of telepsychiatry during a national shutdown period.

**Methods:** Adult patients with chronic post-traumatic stress disorder (PTSD) known to their local mental health service participated in the study via Zoom. Severity of depression was assessed using the Patient Health Questionnaire (PHQ-9). Patient preference comparing televisits to face-to-face visits was assessed using a questionnaire.

**Results:** Twenty (90% male) patients with

PTSD participated in the study. Most (90 %) were moderately to severely depressed, and 50% used medical cannabis and increased their dosage during the study period. Patients preferred face-to-face meetings for its ease of use ( $p < .01$ ), and their general satisfaction from therapy using this modality ( $p < .01$ ). However, given continued outbreak-limiting access to care, most patients stated they would continue with telepsychiatry.

**Conclusion:** While most patients preferred face-to-face visits, telepsychiatry can be used during at time of outbreak-limiting access to care. Future research and development should be directed at improving technological ease-of-use.



## Quality of nocturnal sleep in hospitalized patients: The roles of hospital-related interruptions and patient self-efficacy



**Talia Soror<sup>1</sup> and Muhammad Abu Tailakh<sup>2</sup>**

<sup>1</sup>Soroka University Medical Center, Beer-Sheva, Israel

<sup>2</sup>Ben-Gurion University of the Negev, Israel and Soroka University Medical Center, Israel

**Aim:** To identify the factors that disturb nocturnal sleep in hospitalized patients.

**Design and Methods:** A cross-sectional study enrolled consecutive patients, hospitalized between January to July 2019.

**Results:** We enrolled 391 patients, of who 167 (42.7%) were female, and 200 (51.2%) were admitted for urgent hospitalization. The differences between the three groups of the study (good sleep, mild-moderate sleep, and severe sleep difficulties) mainly were seen in gender and patients who do physical activity. The hospital-related interruptions in nighttime sleep that were found to most strongly promote severe sleep difficulties included turning on the room lighting (median 4 (1, 6)) and the execution of early-morning measurements of vital signs by the nursing staff (median 4 (1, 5)). The adjusted final model of the study highlights the predictors of severe

sleep difficulties. Insofar as staff interruptions in patient nighttime sleep, incompatible hospitalization conditions, and patient anxiety level, ultimately they can cause patients to suffer severe sleep difficulties. However, patients with high levels of self-efficacy were more likely to report good or mild-moderate quality of sleep while in hospital.

**Conclusions:** Disturbances to sleep involved hospital-related environmental factors, many of which seem easily modifiable. Among the most important hospital-related sleep-disturbing factors, we identified noises and awakenings by medical staff. Other factors identified as leading to impaired sleep included interruptions due to nursing care, room lighting, room temperature, and uncomfortable beds. Health professionals must be educated about the importance of sleep and must intervene when needed.



## Factors influencing nurse's decision to activate critical care response team (CCRT): The nursing perspective



**Mustafa Aldhoon<sup>1</sup>, Diana S. Lalithabai<sup>2</sup> and Nizar AbuSahyoun<sup>3</sup>**

<sup>1</sup>Nursing Education and Practice Improvement Administration, King Fahad Medical City, KSA

<sup>2</sup>Nursing Evidence-Based Section, King Fahad Medical City, KSA

<sup>3</sup>Critical Care Units, King Fahad Medical City, KSA

**Background:** The critical care response team (CCRT) assists in reducing adverse outcomes and promoting safety by intervening quickly in life-threatening situations. Nurses have an important role in CCRT activation. They can save lives by recognizing and responding to patient deterioration. Despite clear satisfied criteria, there have been instances where nurses have failed to activate CCRT.

**Objective:** The factors that influence CCRT activation among nurses were investigated in this study.

**Methods:** The proposed study was done in an acute health care setting and used a cross-sectional survey approach. The study enlisted the participation of 206 nurses who worked in inpatient care units. Nurses working in intensive care units, paediatric intensive care units, operating rooms, outpatient departments, and main emergency rooms were excluded from the study. The data from the individuals was collected using a tool from a previous study.

**Results:** More over half of the 206 responders (54.4 percent) have sufficient knowledge of CCRT activation. When a patient is sick, almost half of the participants (101%) agreed to call the covering doctor before calling a CCRT. For fear of being chastised, nearly 83 percent (40.3%) chose not to activate CCRT. This revealed that nurses were more reliant on the physician to trigger CCRT. The activation score had a significant relationship with the nurse participants' job title and working unit. In comparison to other nurses, head nurses and those working in specialty units were more activated.

**Conclusions:** Despite having a favourable impression of the CCRT, nurses avoided using it for fear of being blamed. They are primarily reliant on clinicians to initiate CCRT. To reduce barriers and improve CCRT activation, nurses should be empowered in addition to education and training engaging all health care workers.



## How to improve patient experience of compassion through nursing: Development of an on-job mentorship program in a tertiary care hospital, Pakistan



**Naureen Amin**

*The Aga Khan University Hospital, Pakistan*

**Background:** Evidence suggests improvement in nursing staff satisfaction, competence, and retention after implementation of evidence-based mentorship programmes. When guided by a framework of compassion, mentoring as a caring action can build healthy, transformative relationships and energize the workplace environments. However, examples of on-job mentorship programs for nurses in low- and middle-income countries (LMIC) are limited owing to human and financial constraints.

**Objective:** The current study describes the development of a feasible an on-job nursing mentorship program using a compassionate framework aimed at improving nurses' experience and thus enhancing patient experience from a tertiary care hospital in Pakistan.

**Methods:** The intervention package was built by a team composed of service and nursing

leadership, director patient experience of care and a compassion specialist using a theory of change model. The package followed a series of steps that were based on the principles of implementation science.

**Results:** The intermediate outcome was to have nurses demonstrate skills of compassion with the eventual outcome of improving the patient's experience of compassion. The pre-conditions were identified as: recruitment of staff with appropriate skills for pediatric care, precision of compassionate experience definition, creation of a compassionate culture and development of competent head nurses as supervisor.

**Conclusion:** The approach helped to delineate feasible pathways for an on-job compassionate mentorship programme through strengthening routine supervision leading to improved patient experience of care in the pediatric service.

# 3<sup>rd</sup> Global Nursing Congress



## The role of academic stress in determining the risk of hikikomori among Indian adolescents



**Naveli Sharma**

*University of Delhi, India*

Since the 1990s, social withdrawal has unfolded as a severe psychosocial issue in Japan and various places in Asia. Hikikomori is a Japanese terminology for extreme social withdrawal, ranging from avoidance of the outdoor world to home isolation. The prevalence rate of Hikikomori in Japan is high, and is also rising among the Indian population especially adolescents. Academic Stress refers to the interconnection between environmental stressors, student's appraisal, and responses for the same (Lee and Larson, 2000). Studies have shown that the academic pressure exerted upon students to achieve has been overwhelming and it directly affects the quality of their life (Bossy, 2000). Till now, no such research has particularly depicted Academic stress as a determinant affecting the quality of adolescent's life and

leading to Hikikomori which makes this study significant to be conducted. The present study is an experimental study with an experimental group (Academic Stress) and control group (No Academic Stress). The sample includes Indian adolescents under the age of 12-18 years with both genders (male and female). The sample size is of 100 adolescents. The tools for this research are Academic Stress: Academic Stress Scale by Kim (1970) and Hikikomori/ Social withdrawal: Hikikomori Questionnaire (HQ-25). The statistical analysis will be done through descriptive statistics, Independent Samples t-test and Pearson's Correlation using SPSS Software. Through this research project, we hope to be able to make constructive recommendations for the improvement of education system in India and also create awareness of Hikikomori in the Indian setting.



## The relation between diarrhea in pregnancy and preterm birth



**Negar Shaterian<sup>1</sup> and Negin Shaterian<sup>2</sup>**

<sup>1</sup>*Student Research Committee, Jahrom University of Medical Sciences, Iran*

<sup>2</sup>*School of Nursing & Midwifery, Shahid Beheshti University of Medical Sciences, Iran*

**Objective:** Gastrointestinal problems are very common during pregnancy, that one of these problems is diarrhea and others are pica, gastroesophageal reflux disease, constipation, and hemorrhoids. Therefore, it can be effect the outcome of pregnancy.

**Scope:** The scope of this article is the effect of diarrhea in pregnancy and preterm birth.

**Methods:** We searched related Mesh keywords in Google Scholar, Scopus and Science direct databases. 41 articles were selected according to the titles and abstracts. Finally, 20 articles were included in this review according to their full texts.

**Results:** Pregnancy causes physiologic and dramatic anatomic changes in women. These conditions have enough potential that leads to gastrointestinal discomforts such as diarrhea in pregnant women. The general definition of diarrhea is: if the volume of stool is more than 200 ml per day, or the frequency of defecation more than three times a day. Diarrhea can be divided into two types: acute and chronic. The

causes of acute diarrhea mostly are bacterial, viral, or parasitic infections. Most sequence of acute diarrhea are mild and self-limited. Nevertheless, the patient with uncomplicated self-limited acute diarrhea should be treated with supportive treatment such as maintaining hydration, symptomatic relief, restoration of fluid losses, correction of electrolyte abnormalities, and dietary changes. Many antidiarrheal drugs are safe during pregnancy. If the patient is extremely ill or the symptoms of diarrhea are last for more than 7 days, or the patient has significant rectal bleeding, the cause of infectious diarrhea need to be pursued.

**Conclusion:** Evidence shows that maternal infection and inflammation are major causes of spontaneous preterm birth. Because diarrhea occurs due to infection, it can be said that if diarrhea occurs in pregnant women, it can lead to preterm birth. However, it is recommended that clinical trial studies be performed in this area to confirm or refute this hypothesis.

# 3<sup>rd</sup> Global Nursing Congress

“

## Public health nursing model for interdisciplinary practice of caring

”

**Nelcy Martínez Trujillo**

*National School of Public Health, Cuba*

**T**he realization of health policy and system research by nursing personnel required the definition of capacities at three levels of actions. This article describes the capacities to develop in order to fulfil health policy and system research by nursing. A descriptive study was done during 2017-2019. To collect the information a questionnaire was done and validated. Also a consultation to 22 national and international experts linked to the development of health policy and system research was done. The variables studied were individual capacities, institutional capacities and national capacities. Quantitative information summary methods were used (absolute frequencies and

percentage). 27 capacities were identified: 12 individuals, nine institutional and six nationals. The individual's capacities include the understanding of theoretical backgrounds and the use of skills to negotiate the applications of results. The institutional capacities include the identification of priorities and also the designation of a professional to make the managements of results. The national level of capacities emphasize in the strategic use of the results. The defined capacities contribute to the integration of actions in the three levels and also to the sustainability in a professional group which practical and theoretical references are not linked with this kind of research.

# 3<sup>rd</sup> Global Nursing Congress



## **Pilot study of a nurse-led adult lacrimal clinic at a tertiary ophthalmic centre**



**Nicola Dunlop**

*Moorfields Eye Hospital, UK*

**T**his presentation outlines of the anatomy and physiology of the lacrimal system and illustrates how a variety of pathology within this system can result in the development of a watery eye. It describes the role of the nurse consultant in the diagnosis and management of patients with watery eye in the lacrimal clinic, and how the training programme for the development of such skills was implemented. Following training, within the realms of an established pilot study, the nurse consultant began to implement her skills in a newly established nurse-led lacrimal clinic. Patients

seen in the lacrimal clinic would previously have been assessed and managed by a doctor. To confirm the accuracy of this approach, an audit was undertaken comparing the nurse-led diagnosis and management plans to that of an oculoplastic doctor. In addition, patient waiting times in the clinic and patient satisfaction were assessed, as important indicators of quality of care. The presentation also looks at the digital innovation and changes introduced to meet the needs of patients during COVID-19 lock-down period.



## Salutogenesis- based home care in peritoneal dialysis patients



**Uzdil N, Ceyhan O and Şimşek N**

*Faculty of Health Sciences, Erciyes University, Turkey*

This research is conducted to determine the effect of salutogenesis based home care on the sense of coherence in patients with peritoneal dialysis. Recent studies on the salutogenesis model have shown that the model is effective in promoting and improving health. It was observed that studies based on the salutogenesis model were carried out in the form of a training program, and there was no study that shows its effectiveness on patient care by integrating it into the nursing process. The research is conducted as a pretest-posttest control group experimental study. The study included 73 patients, including 36 in intervention and 37 in control group. The research data are collected using the Patient Identifier Information Form, Dialysis Symptom Index (DSI), General Self-Efficacy Scale (GSES) and the Sense of Coherence Scale (SIS). The intervention group is provided care based on the salutogenesis model by making home visits 1 time per week for 8 weeks. No intervention is applied to the control group.

In the study, the pre-test DSI, GSES and SIS (meaningfulness, comprehensibility, and manageability sub-dimension) mean scores of the individuals in the intervention and control groups are similar. The third month and sixth month intervention group SIS total and sub-dimension scores and GSES scores are found to be statistically significantly higher than the scores of control group. Furthermore, it is determined that DSI scores of the third month and sixth month for intervention group are statistically and significantly lower than the control group. As a result of the study, it is determined that the care based on the salutogenesis model provided to peritoneal dialysis patients increases the sense of coherence and self-efficacy and provides symptom control and decreases the dialysis symptoms. It has been observed that the salutogenesis model can be used as a step of nursing care in providing symptom control by strengthening the self-efficacy of patients in clinical and home care.



## Pain pharmacotherapy in a large cohort of patients with osteoarthritis: A real-world data analysis



**Omri Lubovsky<sup>5</sup>, Noga Fallach<sup>1</sup>, Gabriel Chodick<sup>2</sup>, Matanya Tirosh<sup>3</sup> and Elon Eisenberg<sup>4</sup>**

<sup>1</sup>N. Fallach G. Chodick Kahn-Sagol-Maccabi Research and Innovation Institute, Maccabi Healthcare Services, Israel

<sup>2</sup>Sackler School of Medicine, Tel Aviv University, Israel

<sup>3</sup>Medical Affairs Pfizer Israel, Israel

<sup>4</sup>Rambam Health Care Campus, Haifa, Israel Rappaport Faculty of Medicine, Technion-Israel Institute of Technology, Israel

<sup>5</sup>Barzilai Medical Centre Ashkelon Israel, Faculty of Health Sciences, Ben-Gurion University of the Negev, Israel

**Introduction:** There is limited evidence on the consumption of analgesics in real-world large cohorts of patients with osteoarthritis (OA), especially in those with comorbidities. We aimed to characterize the use of pharmacological analgesic treatments, evaluate standardized comorbidity rates, and assess treatment trends. Our hypotheses were: (1) OA patients generally consume low and inconsistent pharmacological analgesic treatments; (2) analgesic treatment is often non-congruent with comorbidity-related safety concerns.

**Methods:** The study was carried out at the second largest health maintenance

organization in Israel (MHS). Members aged 18 years or above who were diagnosed with OA before December 31, 2018, were included. Information was obtained from the members' electronic medical record (EMR) including data on dispensed prescriptions, which were used to estimate analgesic consumption

**Results:** A total of 180,126 OA patients were included in our analyses; analgesics were dispensed to 64.2% of the patients, with oral NSAIDs and opioids dispensed to 34.1 and 22.9% of the OA population, respectively. Analgesic use increased with time lapsed from OA diagnosis ( $p < 0.001$ ), up to a median of 59 days covered (IQR, 20–175) after 21



# 3<sup>rd</sup> Global Nursing Congress

years. Rates of most comorbidities in the OA population were higher compared to the MHS general population. Patients with comorbidities used more NSAIDs and opioids compared to those without them.

**Conclusions:** Most OA patients use analgesics, usually oral NSAIDs. Analgesic use remains

relatively low throughout the years, indicating that many OA patients are not being treated pharmacologically for pain on a regular basis. Despite having higher rates of several comorbidities compared to MHS general population, many OA patients are still treated with analgesics that can be associated with a worsening in comorbidity.



# 3<sup>rd</sup> Global Nursing Congress



## Screening people experiencing homelessness for Adverse Childhood Events (ACE'S)



**P. Vishwanath**

*University of San Diego, USA*

**Objective:** The purpose of this study was to identify patients with high Adverse Childhood Events scores (ACE's) at Father Joe's Village, a medical clinic that serves the homeless population of San Diego.

**Methods:** Patient who utilized Father Joe's Village as their primary provider and were over the age of 18 were screened for ACE's. Those who had scores of 4 or higher were then connected to internal resources at the facility such as psychiatry, behavior health counselors, alcohol and drug counselors, case managers, or social work.

**Results:** Pending. The results of the study

will be complete in December 2021. The study sample is expected to be approximately 200 patients.

**Conclusion:** ACEs screening tool is proven to help identify those at risk for chronic toxic stress syndrome. As patients for FJV already have access to essential resources such as social workers, psychiatrists, alcohol and drug counselors, case managers, etc., ACE's is a good tool to improve the efficiency at which patients are connected to these resources. Additionally, there is a monetary benefit for clinics due to Medicare providing incentives for using ACEs for patient.



## Survey of nursing students' views on the status of clinical education in management course in Islamic Azad University



**Reza Besharati**

*Department of Nursing, Islamic Azad University, Iran*

**Objectives:** Nurses are one of the most important categories of management in hospitals and therefore the lack of proper management training in the clinic will be irreparable damage to the body of health and treatment, The aim of this study was to investigate the views of nursing students on the status of clinical education in management at the Islamic Azad University of Kashmar.

**Methods:** In this descriptive cross-sectional study, 126 nursing students of Islamic Azad University, Kashmar Branch, who had passed the theory and internship courses in nursing services management, were selected by census method. Data were collected by a researcher-made questionnaire including 5 questions about demographic characteristics and 53 questions in the fields of: management internship curriculum and content, performance and characteristics of clinical instructors, internship facilities and equipment, and hospital staff performance with software. spss-21 and descriptive statistics and Mann-Whitney test were analyzed.

**Results:** The students studied the domain of "Nursing Services Management Internship Curriculum and Content" with mean and standard deviation ( $8.05 \pm 2.02$ ) and the

domain of "Performance and characteristics of clinical instructors" ( $7.48 \pm 2.87$ ) And evaluated "performance and cooperation of hospital staff" ( $7.56 \pm 2.52$ ) as good and "facilities and equipment of internship environment" ( $5.33 \pm 3.16$ ) as moderate. Also, students interested in nursing gave a higher score to each of the areas of management training than those who were not interested and rated "performance and cooperation of hospital staff" more ( $P < 0.05$ ).

**Conclusion:** Strengthening the positive aspects and correcting the shortcomings can be an effective step towards improving the quality of nursing services management internship training. Therefore, according to the results of the present study, establishing constructive interactions between university officials and health network officials and city hospitals can Provide adequate facilities for internships and cooperation and constructive mutual performance and respect for students to be effective and continuous supervision of the University Vice Chancellor and Director of Nursing Department on the performance of clinical instructors, holding briefings for tutors and further training of students in interpersonal interactions with patients And personnel are recommended.



## Designing an operational planning model for hospitals affiliated to the ministry of health and medical education of Iran



**Reza Besharati**

*Department of Nursing, Islamic Azad University, Iran*

**Objectives:** The operational planning is a process that by it managers regular the actions for receiving to goals. One of The problems in management of Iranian hospitals is the lack of native model for operational planning. This study has been conducted to designing a model for operational planning in Hospitals affiliated to the Ministry of Health and Medical Education of Iran

**Methods:** In this functional study, the theoretical models of operational planning were examined through Library Studies and after determining the variables of different models of operational planning a questionnaire was developed and a survey from 176 experts from academic and administrates of hospitals, the data was collected and Exploratory and confirmatory factor analysis was performed. In order to identify the factors influencing planning, the method of analyzing special values and rotation using the method of varimax and also the cumulative percentage of variance has been used. In order to verify the accuracy of the factor analysis performed on the data and also the adequacy of the sample

size from the Kaiser-Meyer-Alkin Index and the Bartlett Spread Test, and for validating and verifying the final model of the Amos22 software, and to examine the model obtained from the fitting model Used.

**Results:** Results of exploratory analysis indicated that effective factors on operational planning in Iranian hospitals were 8 factors. These factors to the effect arrangement in model consist of: guidance of planning operational and coordinating formation (0/916), goals management (0/912), policy and organizational procedures (0/878), planning rules (0/846), statistical reports and evaluation (0/837), problems management (0/830), providing of resources for plan performing (0/829), organizing of planning team (0/761)

**Conclusion:** Guidance of planning operationals and coordinating formation and goals management are most effective factors in operational planning in iranian hospitals and use of them and other factors of model can improve the performance of operational planning in hospital.

# 3<sup>rd</sup> Global Nursing Congress



## Gender disparity in telehealth usage in Bangladesh during COVID-19



**Saanjaana Rahman<sup>1,2</sup>, Sajid Amit<sup>2</sup> and Abdullah-Al Kafy<sup>3,4</sup>**

<sup>1</sup>Population Health Sciences, Cornell University, USA

<sup>2</sup>Center for Enterprise and Society (CES), University of Liberal Arts Bangladesh (ULAB), Bangladesh

<sup>3</sup>Department of Urban & Regional Planning, Rajshahi University of Engineering & Technology, Bangladesh

<sup>4</sup>ICLEI South Asia, Rajshahi City Corporation, Bangladesh

**Background and Aims:** Telehealth allows healthcare workers to see patients virtually in locations that were not accessible previously, which has reduced cost and time and saved lives. The research aims to examine gender disparity among telehealth usage during the pandemic in 2020. This study will leverage a timely national experiment to evaluate the users of telehealth across the Bangladeshi population. **Methods:** We obtained de-identified data for 200 patients among outpatient telehealth visits from Global Health Data Exchange as it captured telehealth use throughout Bangladesh. **Results:** The analysis showed that male patients had a higher dependency on telehealth than female patients. 14% of the

female patients opted for telehealth visits only with 57% cases of missed doses of medication, compared to males with 20% of them choosing telehealth visits and 29% missing their doses of medication. We found that the youngest age group, 16–25, had the highest dependence on telehealth compared to any other age group, and the lowest dependence was among the oldest age group of 45 years and above. **Conclusions:** There was a strong association between telehealth use and gender disparity with  $p$  value  $\frac{1}{4}$   $0.02 < 0.05$ . Longitudinal and geographical data are needed to understand more about the gender disparities and impact in telehealth utilizations.



## Comparison of nurses' and nursing students' attitudes toward Caren provision to opposite gender patients



**S. Vatandost**

*Kurdistan University of Medical sciences, Iran*

**Background:** Nurses often have to care for the patients of the opposite gender. This can be challenging for both nurses and patients in Iran due to the Iranians' cultural and religious beliefs.

**Objectives:** The aim of this study was to compare nurses' and nursing students' attitudes toward care provision to opposite-gender patients.

**Methods:** This cross-sectional study was conducted in 2018 on a random sample of 107 nurses who worked in four teaching hospitals, and 95 bachelor's and master's nursing students from the Hamadan University of Medical Sciences, Hamadan, Iran. A 21-item researcher-made self-report questionnaire was used for data collection. The data were analysed through the independent samples t-test and the linear regression analysis.

**Results:** The mean scores of nurses' and nursing students' attitudes were  $72.54 \pm 15.47$  and  $66.87 \pm 14.80$ , respectively ( $P = 0.02$ ). The significant predictors of nurses' and nursing students' attitudes were their educational degree, history of care provision to opposite-gender patients, and clinical work experience.

**Conclusion:** Many nurses and nursing students have moderate attitudes toward care provision to opposite-gender patients. Nursing students' poorer attitudes compared with nurses highlight the need for revisions to the nursing academic curriculum to prepare them for quality care provision to the patients of both genders.



## Knowledge, attitude and practice on pressure injury prevention: A cross-sectional study among family caregivers of community-dwelling older adults in Bandung, Indonesia



**Sheizi Prista Sari<sup>1,2</sup>, Irma HJ Everink<sup>2</sup>, Christa Lohrmann<sup>3</sup>, Yufitriana Amir<sup>4</sup>, Eka Afrima Sari<sup>1</sup>, Ruud JG Halfens and Jos MGA Schols<sup>2,5</sup>**

<sup>1</sup>*Faculty of Nursing, Universitas Padjadjaran, Indonesia*

<sup>2</sup>*Department of Health Services Research, Care and Public Health Research Institute (CAPHRI), Maastricht University, The Netherlands*

<sup>3</sup>*Department of Nursing Science, Medical University of Graz, Austria*

<sup>4</sup>*Faculty of Nursing, Universitas Riau, Indonesia*

<sup>5</sup>*Department of Family Medicine, Care and Public Health Research Institute (CAPHRI), Maastricht University, The Netherlands*

The objectives of this study were to examine the knowledge, attitude and practice of family caregivers in Indonesia regarding Pressure Injury (PI) prevention among community-dwelling older adults. A cross-sectional design was conducted and included family caregivers randomly selected in Bandung, West Java, Indonesia. The KAP-PI instrument was used which consists of twelve multiple-choice questions on the knowledge domain, nine statements on a four point Likert scale on attitude domain and twelve self-reported statements in practice domain. All data were collected using paper-based questionnaires. The response rate was

100% (n=267). Regarding knowledge, the percentage of correct answers in the total group of family caregivers on the KAP-PI was 52.8%. The item 'Pressure injury prevention in older adults related to prevent prolonged pressure on the skin' had the lowest percentage of correct answers (24.0%).

The mean attitude score was 30.2 (from the maximum score of 36), demonstrating that participants in general had a positive attitude toward PI prevention for their older relatives. Regarding practice, the mean score was 37.9 (from the maximum score of 48), demonstrating that participants generally performed the right activities on PI prevention



# 3<sup>rd</sup> Global Nursing Congress

among their older relatives. Family caregivers who lived in the same house with older adults had a higher practice score compared to family caregivers who were not living in the same house with older adults (38.3 vs. 33.2;  $t = 2.5$ ;  $p = 0.01$ ). No other differences of knowledge, attitude and practice scores were found between subgroups based on the participant's characteristics.

The findings of this study are the first step to understand family caregivers' knowledge, attitude and practice regarding pressure injury prevention and the initial diagnosis to guide educational strategies. Research should be performed to explore effective educational materials and an education program to strengthen family caregiver's role in PI prevention.



## Assessment of health-related quality of life (H-RQOL) of patients on maintenance hemodialysis in selected dialysis units, in Addis Ababa, Ethiopia, 2019: A facility-based cross-sectional study



Sujin Kim<sup>1</sup>, Yemisrach Nigatu<sup>2</sup>, Tekebash Araya<sup>2</sup>, Zewdu Assefa<sup>3</sup> and Nebiyu Dereje<sup>2</sup>

<sup>1</sup>Department of Medicine, Myungsung Medical College, Myungsung Christian Medical Center, Ethiopia

<sup>2</sup>Department of Public Health, Myungsung Medical College, Myungsung Christian Medical Center, Ethiopia

<sup>3</sup>Department of Nephrology, Myungsung Medical College, Myungsung Christian Medical Center, Ethiopia

**Background:** Patients with End-Stage Renal Disease (ESRD), the most severe form of Chronic Kidney Disease is fatal if not treated by renal replacement therapy (RRT). Thus, patients with ESRD will depend on dialysis as a lifesaving treatment for the remainder of their lives. Dialysis is, mostly, time-intensive, expensive and requires fluid and dietary restrictions. However, the quality of life of patients with maintenance hemodialysis as essential treatment to survive is much more underappreciated in resource limited countries, since the hemodialysis is, mostly, unaffordable and unavailable to get hemodialysis.

**Objectives:** To assess Health-Related Quality of Life (HRQOL) among adult patients on maintenance hemodialysis and associated factors towards HRQOL among adult patients

on maintenance hemodialysis in selected dialysis units in Addis Ababa, Ethiopia, August – October of 2019.

**Methods:** A Facility based cross-sectional study conducted in Addis Ababa, Ethiopia, from August to October, 2019. All patients (125 patients) who match with inclusion criteria with convenient sampling, in those selected five hospitals were recruited. The data was collected using an interview-based questionnaire analyzed using SPSS software version 25. Variables having P-value < 0.025 in bivariate analysis were considered for multi-variable logistic regression analysis. P- Value < 0.05 with 95% confidence interval was considered as cut off point to ascertain the presence or absences of association.

# 3<sup>rd</sup> Global Nursing Congress

**Results:** Out of the 125 patients, 68.8% of patients were male, 64.8% were married and 76% were not in occupation. 84% of patients have income lesser than 5000 and 72% were under the hemodialysis in private hospital. The mean score of HRQOL was  $49.08 \pm 11.09$ , with the magnitude of high QOL in the patients with chronic dialysis is 65 patients with 54.6%. Regarding the association, the patients between 31 - 50 years old and between 51-70 years old has low Burden of Kidney disease scale in around 87% (CI: 95%, AOR: 0.135, p-value: 0.013) and 95% (CI: 95%, AOR: 0.052, p-value: 0.010) less likely, respectively, than patients who are more than 70 years old. 2 times of hemodialysis weekly was associated

with lower score in Burden of Kidney Disease scale and SF-12 MCS than patients with 3 times weekly schedule.

**Conclusion:** This study showed that the overall HRQOL in the patients on maintenance dialysis was not lower than general population, showing average score. Among subscales, in Symptom/problem list and EKD, the patients scored high HRQOL; lower HRQOL was from BKD, SF-12 PCS and SF-12 MCS. The physical quality of life is more affected than the mental quality of life. Elderly patients were likely to feel more burden from kidney disease and 2 times weekly dialysis showed lower score on BKD and SF-12 MCS.

# 3<sup>rd</sup> Global Nursing Congress



## **Realigning health systems strategies and approaches; what should African countries do to strengthen health systems for the sustainable development goals?**



**S. Ibeneme<sup>1</sup> and J. Okeibuno<sup>2</sup>**

<sup>1</sup>Unicef East Asia and Pacific Regional Office, Thailand

<sup>2</sup>WHO Afro, Congo

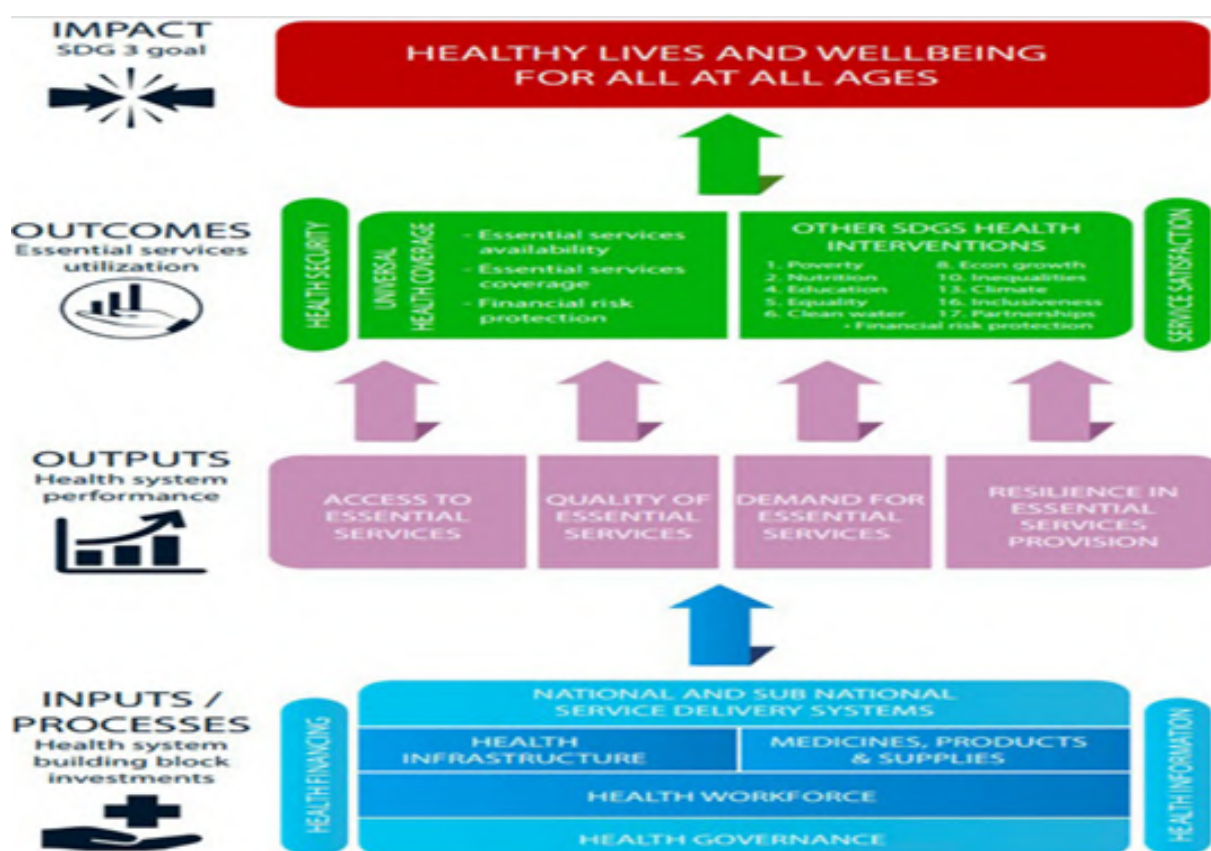
The African region is experiencing peculiar demographic, economic, social and environmental challenges that place pressures on the health systems. While the need to explore ways to address identified health systems challenges is far from easy, there are substantial evidence that having robust frameworks and metrics to direct efforts and priorities of countries could be rewarding. In view of persisting regional health systems' challenges the World Health Organization African regional office (WHOAFRO) proposed the adoption of a comprehensive health system strengthening action framework that provides an opportunity to translate global health policy into operational strategies for Africa health systems. This paper highlights peculiar challenges prevalent among African health systems, including policy responses to identified challenges using the WHOAFRO

action framework. It explores approaches for operationalizing the WHOAFRO action framework, while highlighting policy recommendations to address identified challenges. The adoption of the framework provides an opportunity to translate global health policy into operational strategies, and guide movement toward sustainable developments in countries. The question pertinent is whether African governments are living up to their responsibilities and commitments to strengthen national health systems, and whether that is having any impact or not. The metric for measuring progress is the rate of progress, and not the likelihood of achieving set targets. Thus, the important question for implementation is to understand where and why there is notable acceleration of progress in some countries and not others. These are critical issues the

# 3<sup>rd</sup> Global Nursing Congress

action framework has opportunities to address through robust planning, implementation, and review mechanisms. The framework presents a holistic approach to strengthen health systems that removes program-specific approaches of the MDG era. It empowers countries to

ensure that health sector planning aligns with government development agenda and priorities; and fosters the alignment of national health policies with operational strategies that improves health systems at scale.





## Adaptation and validation of the Chinese version of Dyspnoea-12 scale in individuals with chronic obstructive pulmonary disease



**Tiffany Ching Man Choi<sup>1</sup>, Lloyd Long Yu Chan<sup>2</sup>, Hin Cheung Tsang<sup>3</sup>, Yee Ping Vong<sup>3</sup>, Yui Kwan Cheng<sup>3</sup>, Yuk Ling To<sup>3</sup>, Kah Lin Choo<sup>4</sup> and Janelle Yorke<sup>5</sup>**

<sup>1</sup>*School of Health Sciences, Caritas Institute of Higher Education, Hong Kong*

<sup>2</sup>*Neuroscience Research Australia, School of Population Health, The University of New South Wales, Australia*

<sup>3</sup>*Department of Physiotherapy, North District Hospital, Hong Kong*

<sup>4</sup>*Department of Medicine, North District Hospital, Hong Kong*

<sup>5</sup>*Division of Nursing, Midwifery and Social Work, School of Health Sciences, The University of Manchester, UK*

**Introduction:** Dyspnoea-12 scale is a validated assessment tool, capturing the perception of dyspnoea and its physical and affective effects in individuals with chronic obstructive pulmonary disease (COPD). A validated version for the Chinese-speaking population has been unavailable.

**Objective:** To develop a Chinese version of D-12 (D-12-C) scale and evaluate its validity and reliability.

**Methods:** D-12 was translated from English to traditional Chinese in collaboration with a physician and a linguist. Back translation was adopted to ensure accuracy of the translation. A total of 155 COPD patients were recruited to test the reliability and validity of the D-12-C scale. Internal reliability and test-retest reliability were measured with Cronbach's alpha coefficient and intra-class correlation coefficient, respectively. Construct validity was assessed through exploratory factor analysis (EFA). Concurrent validity was assessed

by the correlation of D-12-C total score and sub-scores and the Chinese version of Saint George's Respiratory Questionnaire (SGRQ), 36-Item Short Form Health Survey (SF-36), COPD Assessment Test (CAT) and Hospital Anxiety and Depression Scale (HADS) total score and sub-scores.

**Results:** The two-factor structure of D-12-C was confirmed by EFA. D-12-C and its sub-scores demonstrated high level of internal reliability (Cronbach's alpha = 0.88) and moderate level of test-retest reliability. D-12-C total score, physical and affective sub-scores were significantly correlated to SGRQ total score ( $r_s = 0.59$ ,  $p < 0.001$ ) and activity sub-score ( $r_s = 0.38$ ,  $p = 0.006$ ), SF-36 mental health sub-score ( $r_s = -0.36$ ,  $p < 0.001$ ), CAT ( $r_s = 0.56$ ,  $p < 0.001$ ), HADS anxiety ( $r_s = 0.51$ ,  $p < 0.001$ ) and depression sub-scores ( $r_s = 0.44$ ,  $p < 0.001$ ).

**Conclusion:** D-12-C scale was developed, which demonstrated satisfactory reliability and validity in measuring dyspnoea among COPD patients.



## Knowledge, attitude and practice regarding diabetic retinopathy among outpatient elderly persons attending eye specialist hospitals



**J. I. Ofuebe<sup>1</sup>, N. F. Ugwu<sup>2</sup> and U.C. Ugwu<sup>2</sup>**

<sup>1</sup>Department of Human Kinetics and Health Education, Faculty of Education, University of Nigeria, Nigeria

<sup>2</sup>Department of Human Kinetics and Health Education, Faculty of Education, Federal University Oye-Ekiti, Nigeria

**Objective:** To determine the knowledge, attitude and practice (KAP) regarding diabetic retinopathy (DR) among outpatient elderly persons attending eye specialist hospitals in Nigeria and further report the significant correlation between knowledge of DR and socio-demographics.

**Methods:** The cross-sectional survey design was adopted. The study was conducted in 36 eye specialist hospitals in Nigeria from February to June, 2021. A total of 360 persons, aged 50 years and above, were purposively sampled and surveyed. A self-administered questionnaire was adopted for data collection. All the statistical analysis was completed using frequency, percentage, and odds ratio. Statistical results were deemed significant at  $P \leq 0.05$ .

**Results:** There were 326(91%) valid copies of the questionnaire out of the 360 copies that were returned. A good number of the respondents were 65 years and above 184(56%), had high

qualification 199(61%), lived above 50,000 (in NGN) monthly 211(65%) and urban residents 195(60%). Overall, the respondents had adequate knowledge 201(87%), positive attitude 214(76%) and desirable practice 224(82%) of DR respectively. There was strong correlation between age ( $OR \geq 1$ ) and knowledge of DR while weak correlation was observed among residence, gender, monthly income and educational qualification ( $OR \leq 1$ ) and knowledge of DR. Furthermore, there was a significant difference on residence and monthly income (in NGN) ( $p < 0.05$ ) while none existed on age, gender and education qualification ( $p > 0.05$ ) respectively.

**Conclusion:** The respondents had adequate knowledge, positive attitude and desirable practice of DR. These outcomes would form the bases for designing a sustainable population-based-education programme on DR for outpatient elderly persons in particular.

# 3<sup>rd</sup> Global Nursing Congress



## Prevalence of selected learning disabilities among primary school children through primary school teachers: A descriptive survey



**Urvashi Goel**

*Dr. Baba Saheb Amedkar Hospital, India*

**Background:** The incidence of dyslexia in Indian primary school children has been reported to be 2-18%, dysgraphia 14%, and dyscalculia 5.5%. India is thought to have approximately 90 million people with varying degrees of Learning Disabilities and an average class in school has about five students with Learning Disabilities. A recent news article in Times of India states that dyslexia is the most common learning disability with nearly 35 million children suffering from it.

**Aim:** The aim of the study was to assess the prevalence of Selected Learning Disabilities among Primary School Children through Primary School Teachers.

**Methodology:** Quantitative, exploratory research approach with survey design was used to assess the prevalence of selected learning disabilities among primary school children

through 100 primary school teachers as samples in selected primary schools students of Delhi using socio-demographic datasheet and structured Questionnaire tool.

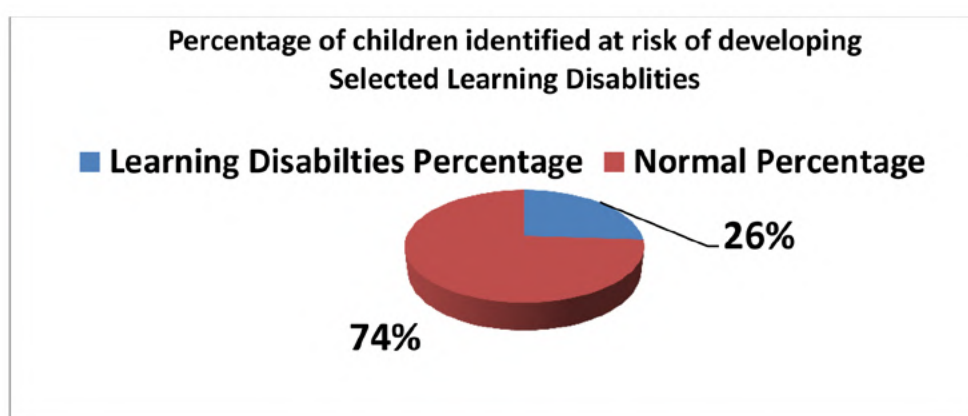
**Result:** Evaluation of the questionnaire from 100 teachers identified 784 (26%) students were at risk of developing Learning Disabilities among 2934 children. The study shows that out of 784 primary school children identified at risk, 54.9% were identified having Dyslexia while 23.9% were identified having Dysgraphia and 21.1% were identified having Dyscalculia.

**Conclusion:** It is concluded that 26% of the primary school students are at risk of developing selected learning disabilities. Teachers whose class students were found to be at risk of developing learning disabilities were asked to see further medical help.

# 3<sup>rd</sup> Global Nursing Congress

**Table 1:** Frequency and percentage distribution in terms of children identified at risk of developing Selected Learning Disabilities.

<b>Total Number of students taken by 100 teachers from 8 schools</b>	<b>2934</b>
<b>Frequency of Students identified at risk of developing Selected Learning Disabilities by 100 teachers</b>	<b>784</b>
<b>Percentage</b>	<b>26%</b>



**Figure 1:** Pie Diagram showing percentage distribution of children identified at risk of developing Selected Learning Disabilities.



## Exploring the barriers to pulmonary rehabilitation for patients with chronic obstructive pulmonary disease: A qualitative study



**Ramin Sami<sup>1</sup>, Kobra salehi<sup>2</sup>, Marzieh Hashemi<sup>3</sup> and Vajihe Atashi<sup>4</sup>**

<sup>1</sup>Department of Internal Medicine, School of Medicine, Isfahan University of Medical Science, Iran

<sup>2</sup>Department of midwifery and reproductive health, Nursing and Midwifery Care Research Center, School of Nursing and Midwifery, Isfahan University of Medical Science, Iran

<sup>3</sup>Department of Internal Medicine, School of Medicine, Isfahan University of Medical Science, Iran

<sup>4</sup>Nursing and Midwifery Care Research Center, School of Nursing and Midwifery, Isfahan University of Medical Science, Iran

**Background:** The complexity of chronic obstructive pulmonary disease (COPD) and its different physical, mental, familial, occupational, and social complications highlight the necessity of pulmonary rehabilitation (PR) for afflicted patients. However, PR for patients with COPD usually faces some barriers. The aim of this study was to explore the barriers to PR for patients with COPD.

**Methods:** This qualitative descriptive study was conducted in January 2019 to October 2020. Participants were nineteen patients with COPD, eleven family caregivers of patients with COPD, and twelve healthcare providers, who all were recruited purposively from two teaching hospitals in Isfahan, Iran. Data were collected through semi-structured interviews and were analyzed through conventional content analysis.

**Results:** The barriers to PR for patients with COPD fell into three main categories, namely

barriers related to patients and their families, inefficiency of PR services, and inappropriate organizational context for PR. Each category had four subcategories, namely patients' and families' lack of knowledge, complexity and chronicity of COPD, heavy financial burden of COPD, patients' frustration and discontinuation of PR, lack of patient-centeredness, lack of coordination in PR team, inadequate professional competence of PR staff, lack of a holistic approach to PR, limited access to PR services, inadequate insurance for PR services, ineffective PR planning, and discontinuity of care.

**Conclusion:** PR for patients with COPD is a complex process which faces different personal, familial, social, financial, organizational, and governmental barriers. Strategies for managing these barriers are needed in order to improve the effectiveness and the quality of PR services for patients with COPD.

# 3<sup>rd</sup> Global Nursing Congress

“

## Chemotherapy treatment and mental health

”

**Vitor Marques, Rafael Alves, Rafael Felipe Moraes, Thaynã Guimarães, Weder Silva, Claudio Lira, Mario Hebling, Paulo Gentil, Maria Sebastiana Silva and Carlos Vieira**

*Federal University of Goias, Brazil*

The number of studies involving patients with breast cancer and physical activity has increased in recent years. However, it is still unclear the effects of quality of life during chemotherapy. To compare quality of life between women with breast cancer who are in the third to fourth cycle of chemotherapy treatment with apparently healthy women. Methods: This study is a cross-sectional study. The 37 women included in the study were divided into two groups: breast cancer treatment (TCM,  $n = 19$ ) and apparently healthy (CNT,  $n = 18$ ) and had  $52.2 \pm 13$ , 11 years and  $55.8 \pm 8.37$  years, respectively. Quality of life was evaluated using the SF-36 questionnaire. The final score can vary between 0 (worse general health) and 100 (better health status). The SF-36 questionnaire consists of 8 domains: General Health Status,

Vitality, Pain, Emotional Aspects, Social Aspects, Mental Health, Functional Capacity and Physical Limitations. Data normality was verified by the Shapiro-Wilk test, and the data were compared between groups by Student's t test. For independent samples, the significance level adopted was  $p < 0.05$ . Cohen's d-effect size was calculated from the difference in quality of life between groups to examine the magnitude of the effect of breast cancer treatment on the investigated variables. The results show that women who were undergoing chemotherapy had worse levels of quality of life in the Physical Limitations domains ( $p = 0.002$ ), Social Aspects ( $p = 0.003$ ), Emotional Aspects ( $p = 0.0003$ ). Results show that chemotherapy treatment negatively influences quality of life levels.

# 3<sup>rd</sup> Global Nursing Congress



## Capacities and needs assessment on health emergency management in Biliran Province, Philippines



**Willard N. Rivala<sup>1</sup>, John Anthony D. Romagos<sup>2</sup>, Jeremy B. Ohiman<sup>3</sup> and Marian Madelyn M. Collera<sup>4</sup>**

<sup>1</sup>*Biliran Province State University, Philippines*

<sup>2</sup>*Biliran Province State University, Philippines*

<sup>3</sup>*Makati Medical Center, Philippines*

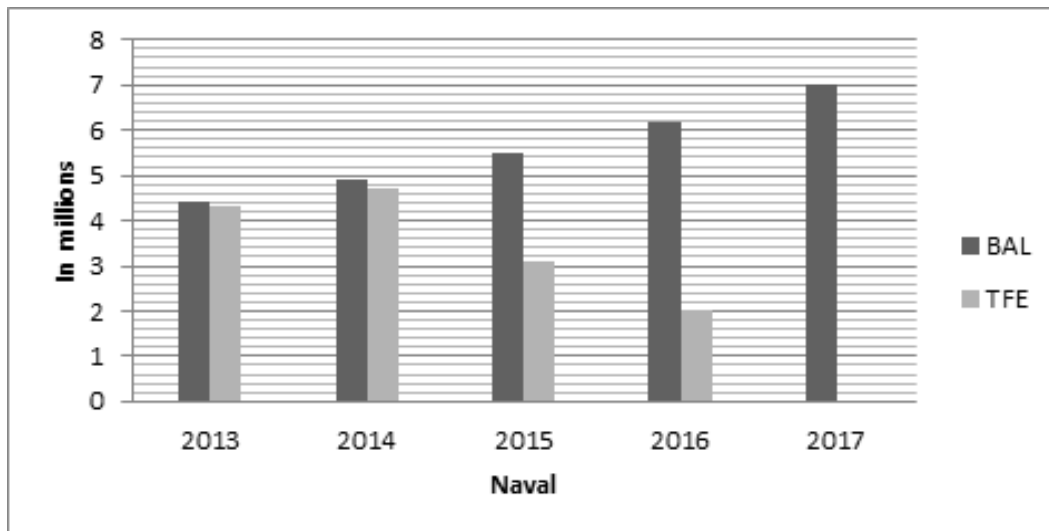
<sup>4</sup>*Naval Night High School, Philippines*

The study aimed to describe the level of preparedness of healthcare facilities and their healthcare professionals on the four components of Health Emergency Management System (HEMS) in the eight municipalities of the Province of Biliran. The four components were health, psychosocial and mental health, nutrition on emergencies, and water sanitation and hygiene. The researchers used sequential explanatory as its research design and utilized two sets of research instruments for the data gathering. For the analysis of quantitative data, a qualified statistician analyzed the raw data transcribed using the SPSS IMB 21 tool, while the qualitative data was analyzed and processed using Mayring and Miles-

Huberman's technique. The study found that the respondents were suitable to provide reliable data and can credibly assess the conditions of the RHUs. They were also capacitated to determine the gaps confronting the RHUs including their corresponding solutions. However, the healthcare facilities of the province were only rated to be average. Their capacity to provide post-traumatic counselling was poor although their referral systems were rated excellent. The study concluded that the healthcare workers of Biliran Province and the HEMS of the eight RHUs in the province are not prepared to manage health emergencies during disasters. This low capacity of HEMS is due to low utilization of budget, resulting to

# 3<sup>rd</sup> Global Nursing Congress

**Figure 1.** Budget Allocation vs. Total Funds Expended for Naval



insufficient supplies and equipment necessary in addressing the people's immediate needs during disasters and health emergencies. Below is the graphical presentation of the budget allocation of Naval, one of the municipalities of

the Province, versus the total funds expended. Therefore, the study recommends a thorough deliberation of the system to stop the gaps and provide rapid equitable health services during emergencies.



## Benefits and barriers: A qualitative study on online social participation among widowed older adults in southwest China



**Yu Luo and Yan Hong**

*School of Nursing, Army Medical University / Third Military Medical University, China*

**Background:** With the development of digital media, online activities are increasingly becoming part of the daily life of older adults. However, a detailed evidence on the experiences of online social participation among widowed older adults is relatively sparse. This study aimed to explore widowed older adults' perceptions regarding online social participation in southwestern China.

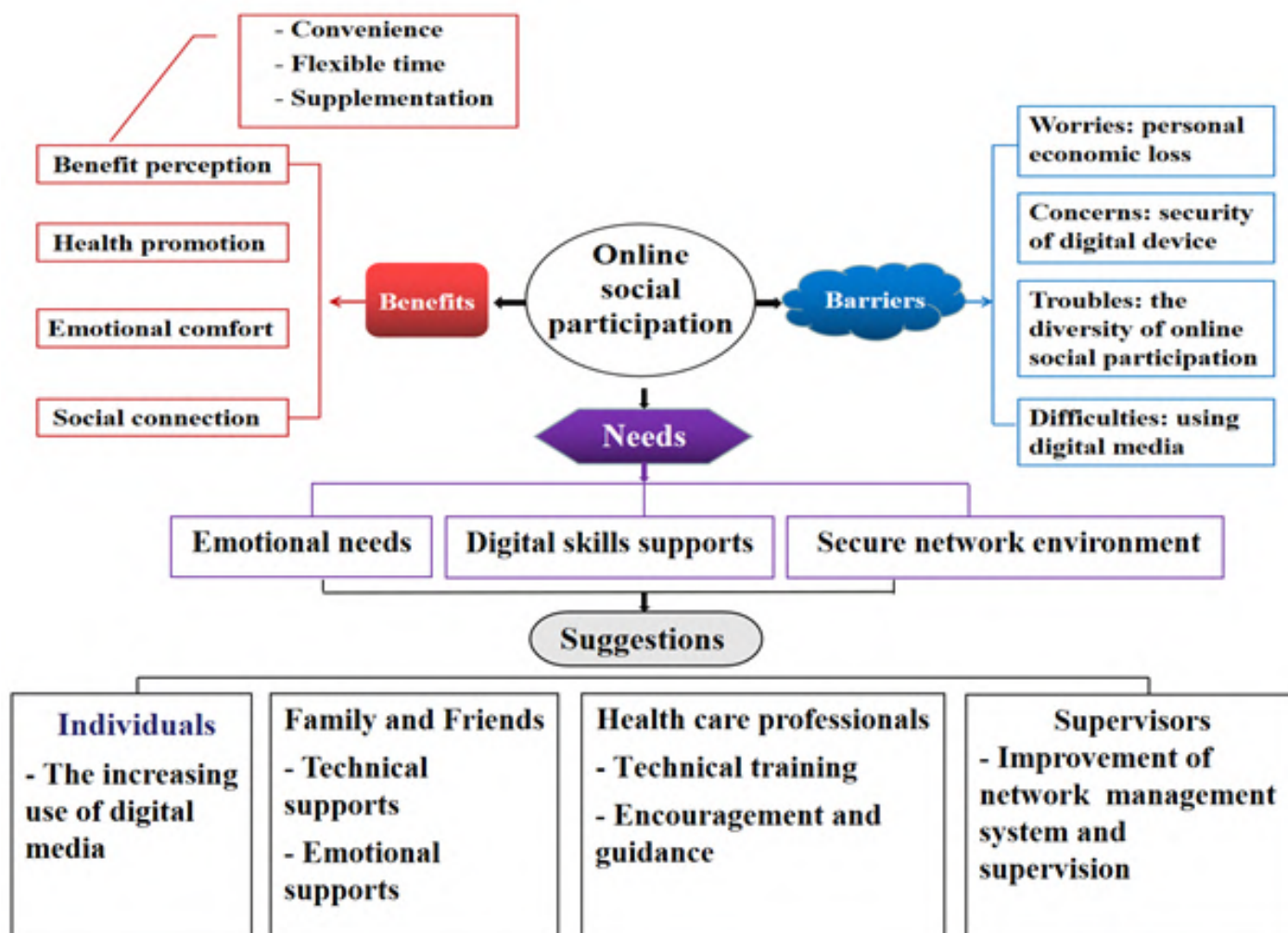
**Methods:** This study adopted a qualitative approach. Semi-structured, in-depth individual interviews were conducted with 19 widowed older adults between September–December 2020. Thematic analysis was applied to analyse the data.

**Results:** Two major themes, "benefits" and "barriers" were identified from the original data analysis. Subcategories concerning the theme "benefits" were "benefit perception (convenience, flexible time, supplementation)", "health promotion", "emotional comfort", and "social connection". Subcategories of "barriers"

were "worries: personal economic loss", "concerns: security of digital device", "troubles: the diversity of online social participation", and "difficulties: using digital media".

**Conclusions:** Social participation of widowed older adults in southwestern China has begun to be integrated into the digital world; however, it remains at an early stage with the simple purpose of engagement. The older adults may face many challenges for online social participation. Although there are barriers and challenges in online social participation, widowed older adults can reap its benefits, which can be used as an important measure to facilitate a fulfilling life and successful ageing. There is no doubt that online social participation will become a trend within the foreseeable future. Family, friends and health care professionals should pay more attention to the needs of online social participation in widowed older adults and provide adequate support for them to achieve a meaningful life.

# 3<sup>rd</sup> Global Nursing Congress





## Experience of mothers of children with disabilities: A qualitative study



**J .Yoosefi lebni<sup>1</sup>, A. Ziapour<sup>1</sup>, B .Khosravi<sup>1</sup> and Z. Rahimi khalifeh kandi<sup>2</sup>**

<sup>1</sup>Kermanshah University of Medical Sciences, Iran

<sup>2</sup>Iran University of Medical Sciences (IUMS), Iran

**Aim:** Disability is a phenomenon that has been prevalent in all societies throughout history .Having a child with disabilities at home poses many problems and tensions for all family members to various degrees. However, mothers are the ones most at risk of issues arising from caring for children with disabilities, due to their stronger emotional relationships. Therefore, the present study aimed to investigate the lived experience of mothers of children with disabilities in Iran.

**Methods:** In this qualitative phenomenological study, the statistical population consisted of mothers of children with disabilities residing in Tehran, the capital city of Iran, from which 17 subjects were selected through targeted sampling and studied using in depth interviewing. Sampling continued to the point of data saturation, and simultaneous with interviews, Colaizzi's method was applied for

data analysis.

**Results:** The results of the present study revealed that the lived experience of mothers of children with disabilities included two main themes, namely inter-personal experiences and social experiences. It was also demonstrated that the lived experience of mothers of children with disabilities had eight sub-themes: feelings of guilt, loss of opportunities, maternal sacrifice, worrying about the future, feelings of guilt about other children, social isolation, lack of socioeconomic support, and stigma.

**Conclusion:** The results of the present study provide a framework for understanding the life problems of mothers with children with disabilities, and could be used for supporting mothers emotionally and socially, and for improving their lifestyles.



## About us

A confluence of Erudite and Knowledge-Seeker

# Peers Alley Media

A global consortium of the scientific fraternity, scholars, educationists, industry leaders and entrepreneurs to collaborate, share ideas and knowledge to resolve challenges across medicine, science, technology and business

## Our Vision

"We aim to bring the research and innovations happening across the parts of the globe to facilitate interaction, knowledge sharing and exchange. We also aim to inspire university professors, students, researchers, clinicians and entrepreneurs from across the disciplines including but not limited to clinical, medical, business, technology, healthcare and pharmaceutical fields. Our dream is to bring advancements in the Science and Technology to the mankind through our scientific gatherings and deliberations. We believe in introducing novel methods and innovative techniques in science, business and technology to provide understanding on the developments".

## Our Mission

How do we serve our target groups in the scientific & business community?

- We bring the untold research accessible for many.
- Our events meet the research needs of the target groups across the academia, industry, corporates, the government, non-government agencies and public bodies.
- We Engage. Enlighten. Empower people deprived of information.
- We connect the international giants towards finding simple solutions to the complex medical and healthcare challenges of the globe.
- We unveil the unlimited research opportunities to the sections of population that is away from the developments in science and technology.
- We encourage Young and emerging researchers and scholars.
- We extend continuous education credits to boost the career and academic progress.
- We encourage start-ups in science, technology and business for the social and economic empowerment of the enthusiastic entrepreneurs.

## Peers Alley Media

1126 59 Ave East, V5X 1Y9, Vancouver BC, Canada

Ph : +1-778-766-2134 / Contact us: [contact@peersalley.com](mailto:contact@peersalley.com)

# INDEX

Speaker	Pg No.
Ahmed Hassan Albelbeisi	23
Alex Siu Wing Chan	42
Allen Walter Siegel	47
Anahita Divani	60
Arévalo-Ipanaqué J.M.	31
Atsuko Satoh	62
Ceres Ferretti	27
Ceres Ferretti	50
Eliane Cristina da Silva Pinto Carneiro	33
Elizabeth Z. Mika	29
Eman Salman Taie	41
Gloria Tonye Dikibo	53
Hiba Alsaadon	39
I. Iancu	10
Jia Yu	14
K. Nielsen	40
K. Sesha Kumar	51
K.Guejedad	22
Kalliopi Megari	13

Speaker	Pg No.
Keekok Lee	12
Keren Grinberg	20
Lianxiang He	18
Mardanian Dehkordi L	34
Mardanian Dehkordi L	52
Monica Moura da Silveira Lima	57
Parand Pourghane	44
Reyna Isabel	32
S. Cooper	59
S. Porter	36
S. Ries	37
Udesvari Naidoo	21
Val Livingston	48
Veronica Bessa de Paulo de Moura	45
Victoria Reid-de Jong	25
Vilza Aparecida Handan de Deus	58
Wanli Liu	16
Yuki Ohtsuyama	61



**GLOBAL NURSING 2022**

**BOOKMARK  
YOUR DATES**

**5<sup>th</sup> International Conference on  
The Future of Nursing and  
Nursing Education**

October 25-26, 2022 | Dubai, UAE

<https://worldnursing.peersalleyconferences.com/>

**&**

**6<sup>th</sup> Global  
Nursing Congress**

March 2023

<https://globalnursing.peersalleyconferences.com/>