



THE ATHENS INSTITUTE FOR EDUCATION AND RESEARCH

Abstract Book:

3rd Annual International Conference
on Nursing
1-4 May 2017, Athens, Greece

Edited by
Gregory T. Papanikos

2017

Abstracts
3rd Annual International
Conference on Nursing
1-4 May 2017, Athens, Greece

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Preface

This book includes the abstracts of all the papers presented at the *3rd Annual International Conference on Nursing, 1-4 May 2017*, organized by the Athens Institute for Education and Research (ATINER). In total, 63 papers were submitted by 74 presenters, coming from 19 different countries (Belgium, Brazil, Canada, Chile, China, Finland, India, Israel, Italy, Japan, the Netherlands, Poland, Russia, Saudi Arabia, Taiwan, Thailand, Turkey, UK and USA). The conference was organized into 15 sessions that included a variety of topic areas including nursing education, diabetes care, pregnancy issues, elderly care, prescriptions and more. A full conference program can be found beginning on the next page. In accordance with ATINER's Publication Policy, the papers presented during this conference will be considered for inclusion in one of ATINER's many publications.

The purpose of this abstract book is to provide members of ATINER and other academics around the world with a resource through which to discover colleagues and additional research relevant to their own work. This purpose is in congruence with the overall mission of the institute. ATINER was established in 1995 as an independent academic organization with the mission to become a forum where academics and researchers from all over the world could meet to exchange ideas on their research and consider the future developments of their fields of study.

It is our hope that through ATINER's conferences and publications, Athens will become a place where academics and researchers from all over the world regularly meet to discuss the developments of their discipline and present their work. Since 1995, ATINER has organized more than 400 international conferences and has published nearly 200 books. Academically, the institute is organized into seven research divisions and forty research units. Each research unit organizes at least one annual conference and undertakes various small and large research projects.

For each of these events, the involvement of multiple parties is crucial. I would like to thank all the participants, the members of the organizing and academic committees, and most importantly the administration staff of ATINER for putting this conference and its subsequent publications together.

Gregory T. Papanikos
President

FINAL CONFERENCE PROGRAM
3rd Annual International Conference on Nursing,
1-4 May 2017 Athens, Greece

PROGRAM

Conference Venue: Titania Hotel, 52 Panepistimiou Avenue, Athens, Greece

C O N F E R E N C E P R O G R A M

Monday 1 May 2017

08:00-09:00 Registration and Refreshments

09:00-09:30 (Room D-Mezzanine Floor) Welcome and Opening Address

Gregory T. Papanikos, President, ATINER.

**09:30-11:00 Session I (Room E-Mezzanine Floor):
Nursing Education I**

Chair: Despoina-Eirini Katzoli,
Researcher, ATINER

1. Fatma Demirkiran, Professor, Adnan Menderes University, Turkey & Melek Sarica, Specialist Nurse, Adnan Menderes University, Turkey. The Possibility of Suicide, Problem Solving Ability and Associated Factors among High School Students.
2. Gulengun Turk, Associate Professor, Adnan Menderes University, Turkey, Serife Karagozoglu, Professor, Cumhuriyet University, Turkey, Filiz Adana, Assistant Professor, Adnan Menderes University, Turkey & Hilal Hatice Gulludere, Research Assistant, Adnan Menderes University, Turkey. Autonomy Levels and Professional Attitudes of Nurse Educators.
3. Mei-Chun Lin, Assistant Professor, Cardinal Tien Junior College of Healthcare and Management, Taiwan. Debriefing Scale Development for Nursing Stimulation Education.
4. Vickie Hughes, Assistant Professor, Johns Hopkins University, USA. What are the Barriers for Developing Nurse Leaders? A Review.
5. *Yvonne ten Hoeve, Researcher / PhD Candidate, University of Groningen / University Medical Center Groningen, The Netherlands, Stynke Castelein, Senior Researcher / Professor, University of Groningen, The Netherlands, Gerard J. Jansen, Senior Lecturer and Researcher, Hanze University of Applied Sciences, The Netherlands, Wiebren S. Jansen, Assistant Professor, Utrecht University, The Netherlands & Petrie Roodbol, Professor, University of Groningen, The Netherlands. Student Nurses' Changing Perceptions of Nursing: A Two Year Longitudinal Study.

**09:30-11:00 Session II (Room F- Mezzanine Floor):
Pregnancy Issues**

Chair: Clare James, Senior Lecturer, Coventry University, UK.

1. Juan Ding, Vice Director of the Quality Control Department, The First Affiliated Hospital of Zhengzhou University, China. Effect of using Mobile Phone Services and Internet to Promote Breastfeeding during Infant Period: An Intervention Study.
2. Hulya Arslantas, Associate Professor, Adnan Menderes University, Turkey, Ayden Coban, Associate Professor, Adnan Menderes University, Turkey, I. Ferhan Dereboy, Professor, Adnan Menderes University, Turkey, Muazzez Şahbaz, Teaching Assistant, Adnan Menderes University, Turkey, Ezgi Sari, Research Assistant, Adnan Menderes University, Turkey & Dondu Kurnaz, Midwife, Ministry of Health, Turkey. Severity of Pregnancy Period Discomforts Does It Predict Postpartum Depression and Maternal Attachment.
3. Kimberley Jackson, Assistant Professor, Western University, Canada. Why does it Hurt so Much? Understanding Women's Experience of Breastfeeding-related Pain.

11:00-12:30 Session III (Room E-Mezzanine Floor): Adult & Elderly Health Care	11:00-12:30 Session IV (Room F- Mezzanine Floor): Technology Issues in Health Care
<p>Chair: Yvonne ten Hoeve, Researcher / PhD Candidate, University of Groningen / University Medical Center Groningen, The Netherlands.</p>	<p>Chair: Hulya Arslantas, Associate Professor, Adnan Menderes University, Turkey.</p>
<ol style="list-style-type: none"> 1. <u>Adelia Dalva Da Silva Oliveira</u>, Teacher, University Center Uninovafapi, Brazil, Inez Sampaio Nery, Teacher, Federal University of Piaui, Brazil, Cristina Maria Miranda De Sousa, Rector, University Center Uninovafapi, Brazil, Carolinne Kilcia Carvalho Sena Damasceno, Teacher, University Center Uninovafapi, Brazil, Maria Eliete Batista Moura, Teacher, Federal University of Piaui, Brazil & Eduardo Cairo Oliveira Cordeiro, Medical Student, University Center Uninovafapi, Brazil. Women who have Sex with Women: Attitudes and Practices on Prevention of HIV/AIDS. 2. <u>Carolinne Kilcia Damasceno</u>, Teacher, University Center Uninovafapi, Brazil, Samara Karine Sena Fernandes Vieira, Teacher, Faculty Estacio CEUT, Brazil, Maria Eliete Batista Moura, Professor, Federal University of Piaui, Brazil, Adelia Dalva Da Silva Oliveira, Teacher, University Center Uninovafapi, Brazil, Cristina Maria Miranda de Sousa, Rector, University Center Uninovafapi, Brazil, Eucário Leite Monteiro Alves, Professor, University Center Uninovafapi, Brazil, Marcia Astres Fernandes, Professor, University Center Uninovafapi, Brazil & Maria do Carmo de Carvalho e Martins, Professor, University Center Uninovafapi, Brazil. Sociodemographic Characteristics and Morbidities among Institutionalized Elderly without Cognitive Decline. 3. <u>Sevil Masat</u>, Research Assistant, Ondokuz Mayis University, Turkey, Zeliha Koc, Associate Professor, Ondokuz Mayis University, Turkey & Zeynep Saglam, Lecturer, Ondokuz Mayis University, Turkey. Determining Factors Affecting the Quality of Life in Elderly Nursing Home Residents. 4. <u>Cristina Maria Miranda De Sousa</u>, Rector, University Center Uninovafapi, Brazil, Anaita De Sousa Rocha Neta, Teacher, Faculty Maurice of Nassau, Brazil, Maria Eliete Batista Moura, Teacher, Federal University of Piaui, Brazil, Luana Kelle Batista Moura, Teacher, University Center Uninovafapi, Brazil & Eucário Leite Monteiro Alves, Professor, University Center Uninovafapi, Brazil. Violence and Abuse against the Elderly. 	<ol style="list-style-type: none"> 1. *Mary Cramer, Professor, University of Nebraska Medical Center, USA. Using Mobile Technology and Community Health Workers to Reduce Preterm Birth. 2. Maj-Helen Nyback, Principal Lecturer, Novia University of Applied Sciences, Finland. Developing Virtual Learning Environments at DP in Nursing, NOVIA UAS. 3. <u>Nicola Parker-Summers</u>, Senior Lecturer, Coventry University, UK & <u>Julia Marjorie Booth</u>, Senior Lecturer, Coventry University, UK. Introducing e-Portfolios to Post-Registration Nursing and Allied Health Professionals. 4. <u>Damla Kizilca Cakaloz</u>, Research Assistant, Adnan Menderes University, Turkey & Ayden Coban, Associate Professor, Adnan Menderes University, Turkey. The Effect of Hyperemesis Gravidarum on Pregnancy Adaptation.

12:30-14:00 Session V (Room E-Mezzanine Floor): A Panel on Nursing Education	12:30-14:00 Session VI (Room F- Mezzanine Floor): Independent Prescribing
Chair: Vickie Hughes, Assistant Professor, Johns Hopkins University, USA.	Chair: Mary Cramer, Professor, University of Nebraska Medical Center, USA.
<ol style="list-style-type: none"> 1. <u>Katuska Reynaldos-Grandon</u>, Associate Professor, Universidad Andrés Bello, Chile, Lissette Aviles-Reinoso, PhD Student, University of Edinburgh, UK & Carolina Henriquez-Galindo, Practitioner Nurse, Universidad Andrés Bello, Chile. Generating Social Responsibility in Nursing through a Service-Learning Experience in Chile. 2. Abeer Orabi, Assistant Professor, King Saud Bin Abdull-Aziz University, Saudi Arabia. Assessing Knowledge Regarding Vulvovaginal Candidiasis among Female University Students. (Monday, noon session) 3. Mona Afifi, Assistant Professor, King Saud Bin Abdul Aziz University for Health Science, Saudi Arabia. Physical Assessment Skills among Nurses: "A Gap between What is Taught and What is Practiced". 4. <u>Pat Colliety</u>, Senior Teaching Fellow, University of Surrey, UK & Amy Dopson, Senior Teaching Fellow, University of Surrey, UK. Exploring Ethical Issues Through Performance Simulation – A Collaboration between Performance and Practice. (NUREDU) 5. Nurcan Ertug, Assistant Professor, Ufuk University, Turkey. The Effect of Research Activity on Nursing Students' Research Anxiety and Attitudes to and Awareness of Research and Development. (Monday) 	<ol style="list-style-type: none"> 1. *<u>Clare James</u>, Senior Lecturer, Coventry University, UK, Alison Bardsley, Senior Lecturer, Coventry University, UK & Neil Kelly, Senior Lecturer, Coventry University, UK. Nurse Independent Prescribing in the United Kingdom. 2. *<u>Alison Bardsley</u>, Senior Lecturer, Coventry University, UK, Clare James, Senior Lecturer, Coventry University, UK & Neil Kelly, Senior Lecturer, Coventry University, UK. The Use of Simulation to Develop Critical Thinking and Decision Making Skills in Student Independent Prescribers. 3. *<u>Neil Kelly</u>, Senior Lecturer, Coventry University, UK, Alison Bardsley, Senior Lecturer, Coventry University, UK & Clare James, Senior Lecturer, Coventry University, UK. Using Twitter to Facilitate the Dissemination of Information and to Provide a Platform for Continued Professional Development for Independent Prescribers.

14:00-15:00 Lunch

15:00-17:00 Session VII (Room E-Mezzanine Floor): Health Care Issues I
Chair: Alison Bardsley, Senior Lecturer, Coventry University, UK.
<ol style="list-style-type: none"> 1. John Gammon, Professor, College of Human and Health Sciences, Swansea University, UK. The Curse of Wet Hands! The Significance of Hand Drying and Efficacy of Different Methods. 2. <u>Serife Karagozolu</u>, Professor, Cumhuriyet University, Turkey & Emine Korkmaz, Specialist Nurse, Health Science University, Turkey. The Efficiency of Sand Bag, Close Pad and Cold Application in Combination with Sand Bag to Prevent Peripheral Vascular Complications Post-Coronary Angiography and Post-Percutaneous Coronary Intervention. 3. <u>Gulay Yildirim</u>, Associate Professor, Cumhuriyet University, Turkey, Sukran Ertekin Pinar, Assistant Professor, Cumhuriyet University, Turkey & Neslihan Sayin, Midwife, Kizilay Hospital, Turkey. The Relationship between the Support Needs and Pain-Fatigue Levels of Women Undergoing Postpartum. 4. Maria Eliete Batista Moura, Teacher, Federal University of Piaui, Brazil. Satisfaction of Family Health Strategy Users in a Capital of the Brazilian Northeast. 5. <u>Alexandra Koumoutsopoulos</u>, Pain Management Coordinator, University of Michigan Hospital and Health Centers, USA & <u>Mary Lynn Parker</u>, Clinical Nurse Specialist, University of Michigan Health System, USA. Improving Orthopedic Patient Outcomes through Implementation of a Multimodal Pain Protocol. 6. <u>Tugba Kavalali Erdogan</u>, Research Assistant, Ondokuz Mayis University, Turkey & Tugba Cinarli, Research Assistant, Ondokuz Mayis University, Turkey. Determination of Prevalence and Etiology of Medical Errors in Healthcare Practices.

17:00-19:00 Session VIII (Room E-Mezzanine Floor): Special Topics in Nursing

Chair: Neil Kelly, Senior Lecturer, Coventry University, UK.

1. Gary Mountain, Associate Professor, University of Leeds, UK & Jane Cahill, Lecturer, University of Leeds, UK. Sensitivity and Attachment Interventions in Early Childhood: A Systematic Review and Meta-Analysis.
2. Ayse Ozkaraman, Assistant Professor, Eskisehir Osmangazi University, Turkey, Evrim Metcalfe, Eskisehir Osmangazi University, Turkey, Ozlem Kersu, Eskisehir Osmangazi University, Turkey, Engin Ozturk, Eskisehir Osmangazi University, Turkey, Nedime Kosgeroglu, Eskisehir Osmangazi University, Turkey Ertugrul Colak, Eskisehir Osmangazi University, Turkey & Guler Balci Alparslan, Eskisehir Osmangazi University, Turkey. Sleep Quality in Breast Cancer Receiving Radiotherapy.
3. Asnat Dor, Senior Lecturer, Max Stern Academic College of Emek Yezreel, Israel & Michal Mashiach Eizenberg, Senior Lecturer, Max Stern Academic College of Emek Yezreel, Israel & Ofra Halperin. Motivation and Empathy among Nurses in Hospitals and Community Clinics: The Mediating Role of Burnout.
4. Giulia Marchetti, Nurse Researcher, Sapienza University of Rome, Italy, Julita Sansoni, Associate Professor, Head of Nursing Research Unit, Department of Public Health, Sapienza University of Rome, Italy, Milena Sorrentino, Nurse Researcher, Sapienza University of Rome, Italy, Anna Rita Marucci, Nurse Researcher, Sapienza University of Rome, Italy, Walter De Caro, Nurse Researcher, Sapienza University of Rome, Italy & Maurizio Marceca, Associate Professor, Sapienza University of Rome, Italy. Functional Health Literacy of Asylum Seekers and Refugees. A Pilot Study in Italy.
5. *Fernando Riegel, PhD Student, Federal University of Rio Grande Do Sul, Brazil & Maria Da Graça De Oliveira Crossetti, PhD Student, Federal University of Rio Grande Do Sul, Brazil. Critical Thinking in Nursing: Reference Theoretical and Instruments for Your Assessment.
6. Dolly Shun, Charge Nurse, UF Heath Shands, USA. Shift Huddle: Culture of Safety and Window of Opportunity.

19:00-20:30 Session IX (Room D-Mezzanine Floor): A Small Symposium on Diabetes I

Chair: Andriana Margariti, Head, Medicine Research Unit, ATINER & Lecturer, Centre for Experimental Medicine, Queen's University Belfast, U.K.

1. *Robert Sindelar, Professor and Former Dean, Faculty of Pharmaceutical Sciences, The University of British Columbia, Canada. Creating a Health and Wellness Paradigm in the "OMICS" Era.
2. Ayten Taspinar, Associate Professor, Adnan Menderes University, Turkey & Selva Ozgul, Midwife, Adnan Menderes University, Turkey. The Effect of Maternal Obesity on Maternal and Neonatal Health. (Monday)
3. Judith Aponte, Associate Professor, Hunter College, The City University of New York, USA, Karen Tejada, Hunter College, The City University of New York, USA & Mariel Acosta-Melo, Hunter College, The City University of New York, USA. Systematic Literature Review: Diabetes Internet-based Spanish Language Health Information.
4. *Andis Klegeris, Associate Professor, University of British Columbia, Canada. Increased risk of Alzheimer's disease in Type 2 Diabetes: Neuroimmune Effects of Dysregulated Peripheral Factors as a Possible Link.
5. Ramona DeJesus, Assistant Professor, Division of Primary Care Internal Medicine, Mayo Clinic, USA, Robert Jacobson, Department of Pediatrics and Adolescent Medicine, Mayo Clinic, USA, Kristin Vickers Douglas, PhD, Department of Psychiatry and Psychology, Mayo Clinic, USA, Debra Jacobson, MS, Division of Biomedical Statistics and Informatics, Mayo Clinic, USA, Patrick Wilson, Department of Health Sciences Research, Mayo Clinic, USA & Jennifer St. Sauver, PhD, Department of Health Sciences Research, Mayo Clinic, USA. Impact of an Intensive 12-Week Wellness Coaching Program on Self-Care Behaviours among Adult Primary Care Patients with Pre-Diabetes.

21:00-23:00 Greek Night and Dinner (Details during registration)

Tuesday 2 May 2017

07:45-11:00 Session X: An Educational Urban Walk in Modern and Ancient Athens

Chair: Gregory Katsas, Head, Sociology Research Unit, ATINER & Associate Professor, The American College of Greece-Deree College, Greece

Group Discussion on Ancient and Modern Athens.

Visit to the Most Important Historical and Cultural Monuments of the City (be prepared to

walk and talk as in the ancient peripatetic school of Aristotle)
(Note: The simple registration fee of the conference does not cover the cost of this session.
More details during registration).

11:30-13:00 Session XI (Room E-Mezzanine Floor): Issues Affecting Nurses in Working Environment: Behavior-Emotions

Chair: Nurten Tasdemir, Assistant Professor, Bulent Ecevit University, Turkey.

1. Maxim Topaz, Associate Professor, University of Haifa, Israel & Brigham Women's Health Hospital, USA. From Established to Emerging Research Trends in Health Information Technology for Nurses.
2. Zeynep Saglam, Lecturer, Ondokuz Mayıs University, Turkey, Zeliha Koc, Associate Professor, Ondokuz Mayıs University, Turkey & Selin Keskin Kiziltepe, PhD Student, Ondokuz Mayıs University, Turkey. Factors Affecting Clinical Decision Making Skills of Nurses.
3. Sacide Yildizeli Topcu, Lecturer, Trakya University, Turkey. My Emotions & My Patients' Care Effect of Nurses' Emotions on Nurses' Caregiving Roles in Surgical Wards.
4. *Peter Vermeir, Head Nurse, Ghent University Hospital, Belgium. Nurses' Well-Being as a Quality Indicator for Improved Care.
5. Victor Contreras Ibacache, Project Manager, Pontificia Universidad Catolica de Chile, Chile. Nursing Work Environment in a Hospital in Santiago, Chile.

13:00-14:00 Lunch

14:00-16:00 Session XII (Room E-Mezzanine Floor): Nursing Education II

Chair: Peter Vermeir, Head Nurse, Ghent University Hospital, Belgium.

1. Sevim Celik, Professor, Bulent Ecevit University, Turkey, Tulin Kurt, Nurse, Zonguldak State Hospital, Turkey, Nurten Tasdemir, Assistant Professor, Bulent Ecevit University, Turkey & Elif Dirimese, Assistant Professor, Bulent Ecevit University, Turkey. Determination of Intensive Care Nurses Knowledge about Spirituality and Spiritual Care.
2. *Nurten Tasdemir, Assistant Professor, Bulent Ecevit University, Turkey, Nigar AK Turkis, MSc Student, Bulent Ecevit University, Turkey, Elif Dirimese, Assistant Professor, Bulent Ecevit University, Turkey & Sevim Celik, Professor, Bulent Ecevit University, Turkey. The Effects of Preoperative Education on Postoperative Compliance: Dental Surgery Patients.
3. Filiz Adana, Assistant Professor, Adnan Menderes University, Turkey, Duygu Yesilfidan, Research Assistant, Adnan Menderes University, Turkey, Belgin Yildirim, Assistant Professor, Adnan Menderes University, Turkey & Güleğün Türk, Associate Professor, Adnan Menderes University, Turkey. The Effect of Health Behaviour Education on Life Style Behaviours: University Example.
4. Fatih Gogus, Research Assistant, Bulent Ecevit University, Turkey, Sevim Celik, Professor, Bulent Ecevit University, Turkey, Nurten Tasdemir, Assistant Professor, Bulent Ecevit University, Turkey & Elif Dirimese, Assistant Professor, Bulent Ecevit University, Turkey. Nursing Students' Knowledge and Practices on the use of Peripheral Venous Catheter.
5. Hilal Hatice Gulludere, Research Assistant, Adnan Menderes University, Turkey, Filiz Adana, Assistant Professor, Adnan Menderes University, Turkey, Gulengun Turk, Associate Professor, Adnan Menderes University, Turkey & Duygu Yesilfidan, Research Assistant, Adnan Menderes University, Turkey. Healthy Lifestyle Behaviour of First Year Students in Nursing School.
6. Ilkin Yilmaz, Research Assistant, Dokuz Eylul University, Turkey, Dilek Ozden, Associate Professor, Dokuz Eylul University, Turkey & Gulsah Gurol Arslan, Assistant Professor, Dokuz Eylul University, Turkey. Investigation of Intensive Care Nurses' Knowledge and Attitudes Regarding Closed Suctioning System. (NUREDU)

16:00-17:00 Session XIII (Room E-Mezzanine Floor): A Panel on Children and Young People's Nursing

Chair: Carol Anne Chamley, Academic Member, ATINER & Associate Professor, School of Health and Social Care, London South Bank University, UK.

1. *Carol Chamley, Associate Professor, London Southbank University, UK, Jason Pritchard, Senior Lecturer, Coventry University, UK & Louise Price, Senior Lecturer, Coventry University, UK. The Great Debate: The Future of Children and Young People's Nursing in the United Kingdom. (NURCYP)
2. *Wafaa Elarousy, Assistant Professor, King Saud Bin Abdulaziz University for Health Sciences, Saudi Arabia. Explore Nurses', Doctors' and Parents' Perceptions on Family Needs in Pediatric Critical Care

Units at King Khaled Hospital in Jeddah. (NURCYP)

17:00-18:30 Session XIV (Room E-Mezzanine Floor): Health Care Issues II

Chair: Wafaa Elarousy, Assistant Professor, King Saud Bin Abdulaziz University for Health Sciences, Saudi Arabia.

1. *Bruno Cotter, Associate Professor, University of California San Diego, USA. HIV and Cardiovascular Disease: The Newest Chronic Disease. (Tuesday)
2. Maria Reinarruth (Reina) Carlos (Imaizumi), Professor, Ryukoku University, Japan. The Stepwise International Migration of Philippine-educated Nurses and Its Policy Implications on Japan's Recruitment and Retention of Foreign Workers in the Elderly Care Sector.
3. Asuman Sener, Lecturer, Ondokuz Mayıs University, Turkey, Zeliha Koc, Associate Professor, Ondokuz Mayıs University, Turkey & Zeynep Saglam, Lecturer, Ondokuz Mayıs University, Turkey. Determining the Use of Herbal Medicine among the Hospitalized Patients of the Physical Therapy and Rehabilitation Unit.
4. Ayfer Acikgoz, Lecturer - Assistant Professor, Eskisehir Osmangazi University, Turkey, Dilek Sayik, Nurse, Eskisehir State Hospital, Turkey, Semra Songut, Lecturer, Gaziosmanpasa University, Turkey, Yeliz Kaya, Assistant professor, Eskisehir Osmangazi University, Turkey & Imdat Koksall, Lecturer, Gaziosmanpasa University, Turkey. The Burdens of Sitter Mothers at Paediatrics Clinics and the Effect of Hospital Stay on Depression, Anxiety and Stress Levels.
5. Malgorzata Stefaniak, Lecturer / Midwife, Medical University of Warsaw, Poland. Caring for a Pregnant Patient with a Diagnosed Cancer - Case Report.

18:30-20:00 Session XV (Room D-Mezzanine Floor): A Small Symposium on Diabetes II

Chair: Andis Klegeris, Associate Professor, University of British Columbia, Canada.

1. Mahua Ghosh, Assistant Professor, University of Calcutta, India & Kankana Das, Senior Research Fellow, University of Calcutta, India. Management of Diabetic Nephropathy using Structured DAG Oils in Murine System: A Comparative Assessment of Redox-Regulated Signaling System.
2. Khemaradee Masingboon, Lecturer, Burapha University, Thailand, Saifone Mounkum, Lecturer, Burapha University, Thailand & Suwannee Mahakayanun, Assistant Professor, Burapha University, Thailand. Risk Perception among Persons with Pre-Diabetes, Thailand.
3. Irina Gette, Senior Researcher, Ural Federal University named after the first President of Russia B. N. Yeltsin, Russia, Victor Emelyanov, Assistant Professor, Ural Federal University named after the first President of Russia B. N. Yeltsin, Russia, Irina Danilova, Head of the Department of Medical Biochemistry and Biophysics, Ural Federal University named after the first President of Russia B. N. Yeltsin, Russia & Tatyana Bulavintceva, Junior Researcher, Institute of Immunology and Physiology, Russia. Impact of 1,3,4-Thiadiazine Derivative on Pancreas Islets in Diabetic Rats.
4. Sophia Kelaini, Research Fellow, Queen's University Belfast, UK. The RNA Binding Protein Quaking is a Key Regulator of Endothelial Cell Differentiation, Neovascularization and Angiogenesis through Direct Binding of the 3'UTR of STAT3.

21:00- 22:30 Dinner (Details during registration)

Wednesday 3 May 2017

Cruise: (Details during registration)

or

Mycenae and Epidaurus Visit: (Details during registration)

Thursday 4 May 2017

Delphi Visit: (Details during registration)

Ayfer Acikgoz

Lecturer – Assistant Professor, Eskisehir Osmangazi University, Turkey

Dilek Sayik

Nurse, Eskisehir State Hospital, Turkey

Semra Songut

Lecturer, Gaziosmanpasa University, Turkey

Yeliz Kaya

Assistant Professor, Eskisehir Osmangazi University, Turkey

&

Imdat Koksak

Lecturer, Gaziosmanpasa University, Turkey

**The Burdens of Sitter Mothers at Paediatrics Clinics and
the Effect of Hospital Stay on Depression, Anxiety and
Stress Levels**

Purpose: The purpose of this study was to determine the burdens of sitter mothers at paediatrics clinics, and the effect of hospital stay on depression, anxiety and stress levels.

Method: The study was conducted with 285 mothers, who stayed at the paediatrics clinics of Eskisehir State Hospital and Medical Faculty Hospital of Eskisehir Osmangazi University between October – December 2014, and who agreed to take part in the study. The requisite permission was granted from the ethics committee and the institution before conducting the study. Descriptive Information Form and a Depression – Anxiety – Stress scale were used as data collection tools. The data was assessed using the IBM SPSS 17.0 statistics package programme. Mean and percentile distributions, the chi square test, independent sample T test and correlation test were used in the assessment of the data.

Outcomes: There was a statistically significant relationship between the Depression – Anxiety – Stress levels of mothers who stayed as sitters and the presence of a chronic illness in the child (Depression $p=0.000$, Anxiety $p=0.006$, Stress $p=0.096$), the period of the illness of the child (Depression $p=0.000$, Anxiety $p=0.000$, Stress $p=0.000$) and the number of days the mothers stayed in hospital as sitters (Depression $p=0.000$, Anxiety $p=0.000$, Stress $p=0.001$).

Conclusion: It was determined that the mothers who stayed as sitters at paediatrics clinics were at risk from the mental perspective.

Filiz Adana

Assistant Professor, Adnan Menderes University, Turkey

Duygu Yesilfidan

Research Assistant, Adnan Menderes University, Turkey

Belgin Yildirim

Assistant Professor, Adnan Menderes University, Turkey

&

Gülengün Türk

Associate Professor, Adnan Menderes University, Turkey

The Effect of Health Behaviour Education on Life Style Behaviours: University Example

This research aimed to determine the effect of education about developing positive health behaviours on lifestyle behavior.

We conducted research with a pre-test/post-test control group and quasi-experimental design at Adnan Menderes University in the 2015-2016 academic year. No sampling calculation was made in this study and students who volunteered were included in the sampling (n=63). 32 students were randomized to the experimental group and 31 students were randomized to the control group. All activities were conducted outside class hours, in the class, and under observation. The students completed a questionnaire form and the Healthy Lifestyle Behaviours Scale before the education and the Healthy Lifestyle Behaviours Scale one more time after the education. The education lasted for six weeks and included the following subjects: healthy eating, hygiene, self-care, exercise and its benefits, stress management, interpersonal relations, and care for chronic diseases.

Data were collected using a "Personal Information Form" and "Healthy Lifestyle Behaviour-II Scale (HLBS)." The alpha reliability coefficient of our study was 0.902.

The data were evaluated with the SPSS statistics package program (Version 15, Chicago, IL, USA). In addition to descriptive statistical methods (percentage calculations, arithmetic means, standard deviations), one sample t-tests were also used to evaluate the study data. The results were reported with 95% confidence interval and the significance level was set at $p < 0.05$.

The mean age of the students was 19.92 ± 2.02 and 65.1% of the students were female, while 34.9% were male in the study. 45.2% of the students were living in the dormitory and 68.3% had a balanced budget. No statistically significant difference was found in the sociodemographics of the experimental group and the control group

($p>0.05$).

No difference was found in the Healthy Lifestyle Behaviours Scale and sub-scale scores of the students between the experimental group and the control group ($p>0.05$) before the education. After the education, the scores for health responsibility, interpersonal relations and stress management of the students in the experimental group were higher than those of the control group ($p<0.05$).

We found that the students in the experimental group had higher health responsibility and stress management sub-dimension scores compared to their scores before the education, and the students in the control group had higher health responsibility and physical activity sub-dimension scores compared to their scores before the education ($p<0.05$).

We concluded that the education provided to the students had a positive effect on the healthy lifestyle behaviors of the students.

Mona Afifi

Assistant Professor, King Saud Bin Abdul Aziz University for Health
Science, Saudi Arabia

**Physical Assessment Skills among Nurses:
“A Gap between What is Taught and what is Practiced”**

BACKGROUND: Physical assessment of the patient's health status is one of the essential components of core competencies in professional nursing education and is fundamental in nursing practice. It has been reported that health assessment courses are not taught in an approach that support their application in nursing practice.

OBJECTIVES: The objective of the current study is to estimate the frequency of physical assessment skills actually practiced in clinical setting. Additionally, to determine reasons for not practicing some of the physical assessment skills taught.

METHODS: The study was done during the academic year of 2014-2015 among undergraduate Saudi nursing students and interns who have already started to practice the taught adult health assessment skills. All nursing students (levels 6 and 8) who were enrolled in the baccalaureate nursing program in KSAU-HS and nursing interns (phases 1 and 2) who had their internship during Fall and Spring 2015 were also included. Level 7 nursing students were excluded as their main focus is maternity and pediatric nursing. A structured study questionnaire was developed by the researcher to collect data on the frequency (defined as daily, weekly, occasionally and never) of practicing 159 basic health assessment skills grouped by body systems. Validity and reliability of the questionnaire were ensured before administration. The skills included were the ones that have been already taught to both groups. Consents were obtained from the participants before starting the questionnaire.

RESULTS: A total of 136 participants completed the study questionnaire (82 students and 54 interns). They were all Saudi females and their age ranged between 20-28 years (mean 22.45 SD± 1.57). Among the 159 skills examined, on average (68 skills) 42.8% were practiced (16.3% on a daily basis, 5.1% on a weekly basis, 21.4% occasionally) and (91 skills) 57.2% were never practiced. The most frequent skills practiced on a daily basis were skill of the following systems; integumentary (35.6%), respiratory (31.2%), and peripheral vascular (24.5%). The most frequent skills never practiced were skill of the following systems; abdomen (72.9%), neuromuscular system (70.5%), ear, nose, throat and mouth (61.6%), eyes (58.7%), breast

(56.9%), heart and neck vessels (56.1%), head and neck (52.4%), peripheral vascular (47.0%), respiratory (39.7%), and integumentary (25.3%).

The most frequent reported reasons for not practicing some of the taught skills included; lack of time (46.3%), done according to patient's condition (36.8%), done for admitted patients only (27.9%), cultural constraints (24.3%), forgot how to do (21.3%), detailed than needed (19.9%), need more expertise (19.1%), doesn't affect nursing intervention (16.2%), lack of equipment (15.4%), and lack of knowledge (14.7%).

CONCLUSION: More than half of the skills taught in baccalaureate nursing program were not actually practiced in clinical setting. Since students were studying and were evaluated against several procedures in the nursing laboratory that have never been practiced, it is recommended to put more emphasis with the students to overcome the barriers to practice in the clinical setting what they have been already taught in a basic and essential health assessment course. In addition to re-evaluation of the content of physical assessment courses is highly recommended.

Judith Aponte

Associate Professor, Hunter College, The City University of New York,
USA

Karen Tejada

Hunter College, The City University of New York, USA
&

Mariel Acosta-Melo

Hunter College, The City University of New York, USA

**Systematic Literature Review:
Diabetes Internet-based Spanish Language Health
Information**

Background: Diabetes is a growing epidemic that is affecting Hispanics in high rates. Globally and among all ethnic groups, Type 1 diabetes mellitus (T1DM) accounts for 5-10% of all diabetes cases, and Type 2 diabetes mellitus (T2DM) accounts for 90-95% of cases. Since most cases of diabetes are of T2DM, diabetes statistics are primarily of people with T2DM. In 2014, 29.1 million people in the United States (U.S.) had diabetes.

Introduction: During 2013, Latinos comprised 17% (54 million) of the total U.S. population and, approximately 12.8% of those U.S. Hispanics had diabetes. A critical and common public health concern for Hispanics is the prevalence of diabetes, which, in 2010, was the seventh leading cause of death in the U.S. overall, and the fifth leading cause of death for Hispanics in the U.S.

The internet has become a place that many health consumers go to access and gather health-related information. Although Hispanics use the internet for health-related informational and educational purposes, there is a lack of information available in the Spanish-language.

Methods: A review was conducted to examine the literature on internet-based, Spanish-language, diabetes focused information. One search was conducted, using three different databases (i.e. CINAHL, MEDLINE, and PubMed). The search used the keywords *diabetes*, *internet*, and *Spanish*, and was based on published articles from January 1, 2005 to June 30, 2016.

Results: Of the 46 articles reviewed, one was a duplicate, and 41 were eliminated. These findings show a lack of data and research on Spanish-language, internet-based diabetes informational and educational sites.

Conclusion: Qualitative and quantitative studies are needed to develop and examine Spanish-language diabetes internet sites and the

health-related impact they have on Hispanics who prefer Spanish-language sites.

Hulya Arslantas

Associate Professor, Adnan Menderes University, Turkey

Ayden Coban

Associate Professor, Adnan Menderes University, Turkey

I. Ferhan Dereboy

Professor, Adnan Menderes University, Turkey

Muazzez Şahbaz

Teaching Assistant, Adnan Menderes University, Turkey

Ezgi Sari

Research Assistant, Adnan Menderes University, Turkey

&

Dondu Kurnaz

Midwife, Ministry of Health, Turkey

Severity of Pregnancy Period Discomforts: Does it Predict Postpartum Depression and Maternal Attachment?

Objective: This study was conducted to determine if severity of pregnancy period discomforts predict postpartum depression and maternal attachment or not.

Method: The study was planned as a follow-up research. The study was conducted with 493 pregnant women; 171 first trimester, 159 second trimester, 163 third trimester respectively; who applied to "Adnan Menderes University Research and Application Hospital Gynaecology and Maternity Policlinic" and "Ministry of Health Public Hospitals Union Aydin Maternity and Pediatrics Hospital Policlinics" and met the study criteria. While determining number of women for follow up in second interview, it was decided to include 50 women for each trimester when power was taken as Power= .80; Alpha= .05; d= .50 in Cohen's d table, which Cohen suggests to calculate minimum number of person in each group for situations to make comparisons between two groups. But, possible losses were considered and it was decided to include %30 more person for each group and total number of women was calculated as 195. While choosing those women draw method was applied and they were reached via phone 4-6 weeks after the delivery. In data collection, for the first interview "Interview Form" and "Scale for Pregnancy-Related Discomforts" were applied to all the pregnant women, for the women in second interview "Edinburg Postpartum Depression Scale" and "Maternal Attachment Scale" were used. While searching for relation between scales, correlation analyse was used.

Results: When relation between prenatal and postpartum period total scale scores of women participated in the research were examined; no relation was found between total SPRD scores of first, second, third trimesters and postpartum depression scores ($r=0,163$; $r=0,054$; $r=0,058$; $p>0.05$, respectively). There was a low and positive relation between first trimester SPRD total scores and maternal attachment score ($r=0,163$; $p<0.05$); and no relation was found between second and third trimester SPRD total scores and maternal attachment ($r=0,054$; $r=-0,013$; $p>0.05$, respectively).

Conclusion: Discomfort severity related to pregnancy did not predict postpartum depression, first trimester discomforts related to pregnancy predicted maternal attachment in a very low level but second and third trimester discomforts did not predict maternal attachment.

Alison Bardsley

Senior Lecturer, Coventry University, UK

Clare James

Senior Lecturer, Coventry University, UK

&

Neil Kelly

Senior Lecturer, Coventry University, UK

The Use of Simulation to Develop Critical Thinking and Decision Making Skills in Student Independent Prescribers

The need for nurses to develop critical thinking and decision-making skills has been heightened in response to rapidly changing health care environments. Nurse independent prescribing has emerged over the last decade in response to a number of challenges within healthcare, in particular the rise in patients with complex health needs and long term conditions. Independent prescribers must develop enhanced critical thinking and decision-making skills in order to safely and effectively assess, diagnose and treat patients, whilst coping with the expansion of their role. If nurses are to deal effectively with this complex change in role, increased demands and greater accountability, they must become skilled in higher-level thinking and reasoning abilities.

Rubenfelf and Scheffer (2001) identified ten habits of the mind and seven skills or critical thinking in nursing. Habits of the mind are affective characteristics toward critical thinking, which include confidence, inquisitiveness, open-mindedness, perseverance and reflection. Skills for critical thinking include analysing, discriminating, information seeking and logical reasoning. All of these are required to become safe and effective independent prescribers.

With the use of these academics as course designers in the School of Health and Life Sciences at Coventry University have developed low and high intensity simulation to facilitate students in progressing along the novice to expert continuum (Benner, 1984) gain competence, confidence and develop their critical thinking skills.

This paper will present how low intensity simulation employing patient case studies is utilised with students working in groups to provide the requirements for assessment, tests and examinations to help them arrive at a differential diagnosis. As the course progresses high intensity simulation is employed using role-play to mirror the realities of practice. The paper will also demonstrate how these skills

are then tested within the clinical practice environment and within the university through observed structured clinical exams (OSCE's).

Maria Reinaruth (Reina) Carlos (Imaizumi)
Professor, Ryukoku University, Japan

The Stepwise International Migration of Philippine-educated Nurses and its Policy Implications on Japan's Recruitment and Retention of Foreign Workers in the Elderly Care Sector

In aged societies, the issues of employing and retaining foreign-educated health workers to take care of mainly the elderly population has increasingly gained attention and relevance. This presentation hopes to contribute to the literature by taking the case of Philippine-educated (Philippine-born) nurses whose stepwise international migration pattern has impacted on the elderly care sector's labor market in Japan.

The objectives of this presentation are twofold: First, we discuss how and why Philippine-educated nurses engage in stepwise migration, based on fieldwork results in Austria, Australia, Dubai, UK and Singapore. Here, we attempt to theorize on the factors affecting their stepwise migration behavior and explain how nurses distinguish between transit and final destinations over time. Second, we look at the implications of such migration pattern/behavior on the employment of Philippine-educated nurses in Japan, which has created a scheme to accept them as nurses and certified careworkers under a bilateral economic partnership agreement in 2009. Recently also, the Japanese government has ratified a bill allowing foreign careworkers to be employed in the elderly care sector as technical trainees.

It was found out that stepwise migration is a rational decision when destination countries' unpredictable and whimsical recruitment and migration policies towards healthcare workers. Philippine-educated nurses are inclined to take up stepwise migration in order to accumulate various resources in the transit destinations that are deemed useful and as preparation to reach the final destination. Also, in the case of Japan, many Philippine-educated nurses come to work in the elderly care sector as certified careworkers. Given Japan's current immigration and healthcare workforce policies, Japan for them is considered largely as a transit, rather than final destination. The low retention rate of such workers will undoubtedly have important implications on the alleviation of labor shortage in this aged society.

Note: Certified careworker is a term used for those who passed the national licensure examination, which consists of three parts – personal care, housekeeping and nursing care.

Sevim Celik

Professor, Bulent Ecevit University, Turkey

Tulin Kurt

Nurse, Zonguldak State Hospital, Turkey

Nurten Tasdemir

Assistant Professor, Bulent Ecevit University, Turkey

&

Elif Dirimese

Assistant Professor, Bulent Ecevit University, Turkey

Determination of Intensive Care Nurses Knowledge about Spirituality and Spiritual Care

Aim: This study was conducted with the aim of determination of intensive care nurses knowledge about spirituality and spiritual care

Method: The study was designed as a descriptive study. The study was performed with 129 intensive care nurses between July and August 2016. The data were collected by using personal information form and Turkish version of the Spirituality and Spiritual Care Rating Scale. The data were evaluated by using descriptive statistical methods, independent variables student's t-test, one-way ANOVA, Mann Whitney U and Kruskal-Wallis tests and Pearson Correlation Analysis.

Results: It was determined that intensive care nurses' mean age were $30,31 \pm 6,34$, 77,5% were female, 50,4% married, 59,7% had a graduate degree, and 55,8% were not have child. It was found that the majority of intensive care nurses indicated that they had trained about spiritual care (68,2%). Also half of intensive care nurses (51,2%) indicated that they had received training during their nursing education. It was determined that average score obtained from spirituality and spiritual care subscale were $3,52 \pm 0,50$, obtained from religious subscale were $3,48 \pm 0,78$, obtained from individual care were $3,57 \pm 0,64$, and obtained from spirituality and spiritual care rating scale were $3,64 \pm 0,58$ by intensive care nurses. The average total subscales scores and spirituality and spiritual care rating scale points intensive care nurses who are married and have child were significantly high ($p < 0,05$). The average of religious, individual care subscales and spirituality and spiritual care rating scale scores of intensive care nurses who were indicated that they had trained about spiritual care were found significantly high ($p < 0,05$). There was no statistically significant and relationship between the nursing profession characteristics of intensive care nurses and their scores on spiritual and spiritual care rating scales ($p > 0,05$).

Conclusion: The study showed that intensive care nurses' knowledge of spiritual and spiritual care was moderate. It was determined that the knowledge levels of intensive care nurses were affected by the demographic characteristics and were not affected by the nursing profession characteristics.

Carol Chamley

Associate Professor, London Southbank University, UK

Jason Pritchard

Senior Lecturer, Coventry University, UK

&

Louise Price

Senior Lecturer, Coventry University, UK

The Great Debate: The Future of Children and Young People's Nursing in the United Kingdom

Health Education England's long awaited response to the 'Shape of Caring Report' (Willis 2015) has opened up and fuelled national debate relating to the future direction of under-graduate children's nurse education in the United Kingdom. The report has focused upon developing a robust and flexible workforce with a 'whole person approach to care' however concerns have been expressed which question and challenge how children's nursing would be delivered through this ambition? Focusing upon a more generic programme has raised concerns that specialist fields of practice such as children's nursing would be '*watered down*' leaving the specialism vulnerable and exposed to an adult-centric curriculum with 'add-on specialisms. The report suggests 2 years whole person core training, + 1 year specialism + 1 year preceptorship. However it would be impossible to equip students with the range of skills and knowledge to care for children 0-19 years.

The Children and Young People's Nurse Academics UK (CYPAUK) group has been established representing a unified voice for the specialism and associated policy-making. Children present very differently to adults experiencing different and unique challenges which increases their vulnerability, coupled with dynamic developmental anatomy and physiology, which may influence disease presentation during childhood. Health Outcomes for Children reflect that the United Kingdom has witnessed an estimate of 1,951 *excess deaths* when compared to other countries such as Sweden. Whilst the causes are complex and multifactorial recent epidemiological and statistical data have identified major causative factors but the repeated message relates to the fact that specialist education of healthcare professionals are important contributing factors (Wolfe et al 2013, Viner et al 2014).

This paper will exemplify and explore in more detail the implications for the strategic direction of children's nursing in the UK,

noting that change has to be in the best interest of children, young people and families and not under a political or cost saving banner of educational and financial efficiency.

Pat Colliety

Senior Teaching Fellow, University of Surrey, UK

&

Amy Dopson

Senior Teaching Fellow, University of Surrey, UK

Exploring Ethical Issues Through Performance Simulation - A Collaboration between Performance and Practice

This presentation discusses an initiative developed between three child health teaching fellows and a theatre studies lecturer, which has brought together students in child field nursing and theatre studies for collaborative workshops. The unique nature of these workshops involves a hybrid of simulation, performance and reflection, which we term 'supported performance simulation'. The aims differed for both student groups, second year student nurses were given the opportunity to explore challenging ethical situations based upon 'real life' practice scenarios, testing strategies to manage these in a safe, simulated environment; theatre studies students were enabled to investigate their understanding of performance in simulation. Theatre experience, of working with performance to enable learning in others, was used both as an exercise in itself and to better prepare theatre studies students for employment after university. We adopted a mode of working that we termed supported performance simulation, grounded in Problem Based Learning, in which we supported students to discover their own learning, through reflection, then apply and extend this knowledge in practical discovery. Critically, we adopted this model of supported performance simulation for both sets of students. In this presentation, we will report on this project as it addresses the development of knowledge for student nurses; we will address our research with theatre students in separate work.

The workshops were based within the University simulation suite, which enabled a range of realistic ward and community environments to be created. The theatre studies students were given a set of short, written guides to the location, people, and issues for a particular sequence of events. The theatre students developed and performed initial scenes to all the nurses in the group, who were asked to respond to the situation as it unfolded.

Later, scenarios were delivered to a small group of 4-6 student nurses, with 1-2 theatre studies students acting the role of either a patient, family member or healthcare professional. One student nurse took the lead in each scenario, observed by their peers. They were

encouraged to manage the situation independently and experiment with their approach, with opportunities throughout to pause the scenario in order to seek advice and support from their peers, and then try an alternative approach. Following the conclusion to each situation the teacher facilitating that scenario led a broader discussion, exploring ethical issues raised and the decision making process.

The workshops were filmed, with students' permission, in order to be reviewed during a structured classroom-based review nine months later, when the nursing students were in their third year. This allowed students to reflect upon what they had learnt during the workshop and how this had influenced their ability to manage any ethical challenges subsequently experienced in practice. In this review, the nursing students fed back enthusiastically, reporting the value of the workshops in increasing their clinical confidence. As a result the teaching staff recognised the need to evaluate in greater depth the impact of this workshop, and the model of 'supported performance simulation', as a teaching and learning method for both groups of students. An illuminative evaluation of the project was undertaken and will be discussed within this presentation.

Victor Contreras Ibacache

Project Manager, Pontificia Universidad Catolica de Chile, Chile

The Nursing Work Environment in a Hospital in Santiago, Chile

The aim of this study was to identify the perception about the nursing work environment (NWE) in a hospital in Santiago, Chile.

Background: Chile exhibits excellent health indicators in Latin America. The stability in the health indicator has increased the tendency to provide safety and quality of care to pursue excellence in hospitals.

Introduction: The impact in the quality of care provided is strongly related with NEW perception, whereby this is a priority goal of providing excellence in nursing care.

Methods: A cross-sectional descriptive study was proposed with a non-probabilistic convenience sample of 157 bachelor nurses and nurse technicians who work in a University Hospital located in Santiago. Data collection was conducted by electronic self-administered questionnaire (demographic) and collect information by Practice Environment Scale of the Nursing Work Index in Spanish.

Results: The overall mean score in the PES-NWI was 2.9 (SD \pm 0.67) indicating that in general the participants' perception of the NWE was positive. Were no significant differences in the overall scores of the PES-NWI between nurses with a bachelor's degree and nurse technicians.

Discussion: The perception of NWE was favourable, with the highest scores in the areas of interdisciplinary positive relationships and joint relations practice, and the quality of care provided, these results are congruent with others studies at same field. The perception of NWE decreasing significantly with the years of experience mainly in areas such as participation in professional institutions and leadership and professional management.

Nursing's implications: To improve this area in the future is necessary to increase participation in the institution since this is the first challenge to achieve higher retention rates.

Bruno Cotter

Associate Professor, University of California San Diego, USA

HIV and Cardiovascular Disease: The Newest Chronic Disease

Cardiovascular disease, and particularly coronary heart disease (CHD), is an emerging area of concern in the HIV population. Soon after the introduction of potent antiretroviral therapy (ART), concerns were raised about a possible increased risk of coronary heart disease. HIV infection has become a chronic disease in countries in which effective combination ART (cART) has been available since the mid-1990s. Contemporary studies have shown that in HIV-infected patients, rates of acute myocardial infarction are up to twice as high as in the non-infected patients in Western countries. Recent reports have also found that chronic inflammation, immune activation and antiretroviral drugs play a more dominant role in HIV-related CHD compared with CHD in the general population. Whether cART, and in particular protease inhibitors (PI), increases the risk for CHD has been extensively debated over the past decade. However, cART and the PI risk-benefit ratio remains positive, as the increase in life expectancy conferred by cART far outweighs the associated risks for myocardial infarction.

Importantly, cardiovascular risk should also be evaluated in HIV-infected children because vertically infected individuals have been exposed long-term to both HIV and cART. Therefore, the risk for premature atherosclerosis in adulthood among HIV-infected children requires further investigation to develop adequate strategies of prevention.

The HIV epidemic infection has had a devastating effect on health care provision, resources and life expectancy in Africa and other underdeveloped countries. The introduction of ART has also dramatically improved life expectancy of many of these patients. However, many underdeveloped countries are a long way from providing a comprehensive prevention program, as well as effective antiretroviral therapy for all infected with HIV. Very little research emphasis has been placed on the influence of HIV on heart disease. However, the expected improved survival related to progressively more patients being treated with cART will be an ideal platform for researchers in underdeveloped countries to study the various aspects of cardiovascular disease in HIV-infected patients, both in those who are cART naïve and in those who are treated with cART.

Available data suggest the presence of an accelerated process of coronary atherosclerosis in the HIV-infected population due to multiple factors, including a higher prevalence of conventional risk factors, emerging new risk factors (chronic inflammation, immune activation) and the role of cART. Evaluating new strategies to prevent CHD in HIV-infected patients is a major concern. It will be crucial for cardiovascular clinicians to become fully engaged in the care of HIV-infected patients. In addition, the expertise, knowledge and engagement of cardiovascular investigators, as well as their collaboration with HIV investigators and researchers will be critical to further advancing the field of HIV-related cardiovascular disease.

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Using Mobile Technology and Community Health Workers to Reduce Preterm Birth

Global preterm birth rates are on the rise. It is the single most important cause of neonatal death and second leading cause of death in children under five. Across 184 counties, preterm birth rates (per 100 live births) range from 5 - 18%. Yet, 75% of these deaths could be prevented with feasible, cost-effective care.

Purpose: We used a community-based participatory research approach that partnered academic researchers with a rural community advisory board. We tested an evidence-based intervention involving concierge mobile technology with community health worker reinforcement. Study aims: 1) measure intervention feasibility; 2) evaluate differences in preterm births, low birth weight, adherence to medical care, patient activation; and 3) measure health costs.

Design: The 16-month study used a two-group experimental design. Patients were assigned to the Control (i.e. usual medical care only) or Intervention (i.e. usual medical care plus mobile technology with community health worker reinforcement).

Results: Of 110 patients recruited, n = 77 completed the study. Participants were highly satisfied with the intervention (CSQ-8 scores were M = 3.59, SD 0.3). They were actively engaged with mobile technology (hyperlink hits were M = 48.72%) and CHW chats. Full term deliveries were slightly higher in Intervention versus (p = .508). Normal birth weights were also slightly higher for Interventions (p = .955). The Intervention group had an average of 93.85% (SD = 8.3) kept medical appointments and showed statistically significant improvements in patient activation on the PAM instrument pre/post (M = 0.19) p < .05. Hospital charge data showed a \$1,039 cost savings per participant for interventions versus controls. Financial return on investment for the intervention ranged from 235.8% (i.e. mobile technology, training, and CHW patient management) to 1,859% (mobile technology only).

Conclusions: Mobile technology is an emerging venue for promoting health education. Our results document it is also cost effective with the potential to improve patient activation, which has been linked to healthcare costs. Patients were highly satisfied with the intervention. That there were no significant differences in birth outcomes is likely related to the small sample size of our population.

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**Women who have Sex with Women:
Attitudes and Practices on Prevention of HIV/AIDS**

Objective: To identify the association between attitudes and practices on prevention of HIV/AIDS for women who have sex with women with age, education level, monthly income and religion. **Methodology:** epidemiological, cross-sectional study, developed through a KAP survey (Knowledge, Attitudes and Practices). Data were collected through a questionnaire available in both physical and electronic format. The sample included 91 women aged over 18 years living in Teresina. The SPSS for Windows (Statistical Package for Social Sciences) version 20.0 was used for data processing and identification of associations with statistical significance at $p < 0.05$. **Results:** The associations were evaluated using the chi-square test with significance level of 5%. There was a statistically significant association between attitudes and practices with the level of education and religion ($p < 0.05$). **Conclusion:** Women who have sex with women surveyed have practices and attitudes that vulnerabilize HIV / AIDS. It is vital to the diagnosis of these aspects for the planning of public policies in order to contribute to the formulation of effective and efficient actions involving forms of prevention and transmission of HIV / AIDS focused on this population.

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Sociodemographic Characteristics and Morbidities among Institutionalized Elderly without Cognitive Decline

Objective: To describe the sociodemographic and clinical characteristics of elderly people without cognitive decline in long-stay institutions. Methods: Mini-examination was applied Mental State and a form to investigate sociodemographic and clinical aspects in elderly people without cognitive decline. Data were analyzed using SPSS 18.0 and Chi-square test. Results: There was a predominance of elderly people without cognitive decline in men (55.7%), single (63.29%), aged ≥ 75 years (54.43%) with systemic hypertension (64.56%) and use of drugs that act on the cardiovascular system (64.56%). Conclusion: It is necessary that the institutionalized elderly without cognitive impairment are continuously evaluated for early diagnosis of pathological cognitive aging to prevent dementia states.

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**Impact of an Intensive 12-Week Wellness Coaching Program
on Self-Care Behaviours among Adult Primary Care Patients
with Pre-Diabetes**

Background: Thirty seven percent of US adults 20 years and above have pre-diabetes; about 70% are expected to develop diabetes within 10 years. Progression can be prevented or delayed through positive lifestyle interventions. The challenge is to enable individuals to initiate and maintain healthy lifestyle changes. Wellness coaching offers a one-on-one focused self-management support program to health education that enhances patient motivation and guides them towards behavioral change. While its benefit in diabetes management is widely reported, its role in patients with pre-diabetes has not been widely explored.

Method: This prospective study assessed whether an individualized 12 week wellness coaching intervention for primary care patients with pre-diabetes will improve self-care behaviors as measured by self-reported changes in physical activity level and food choices. Five hundred sixty adult patients 18 years and older with pre-diabetes, who met study inclusion criteria were invited to participate in 12 weeks wellness coaching sessions delivered by certified coaches. Responses from questionnaires at baseline, 6 weeks and 12 weeks were analyzed.

Results: Of 168 consented patients, 99 completed at least one coaching session. Majority of participants were elderly, female, overweight or obese; 50% were retired. At baseline, 50% did not engage in any stretching exercise or had <60 minutes aerobic exercise per week (walking, swimming, biking). While confidence level in ability to make healthy eating choices was moderately high (7 on scale of 1-9), reported

success in doing so was only rated 5.5. At 6 and 12 weeks, average stretching time per week significantly increased from 26.5 minutes to 48.6 and 63.9 minutes respectively; average aerobic exercise time also significantly increased both at 6 and 12 weeks from 117 minutes to 166 and 199 minutes respectively. Success in making healthy eating choices increased from baseline to 6.7 and 7 at 6 and 12 weeks, a significantly statistical improvement. The significant effects on both exercise and eating behavior persisted even after adjusting for age, sex and baseline glucose/A1c values.

Conclusions: A 12 week wellness coaching among adult primary care patients with pre-diabetes resulted in significant improvement in both self-reported physical activity level and food choices. Wellness coaching was independently associated with increase in activity and healthy eating behaviors.

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The Possibility of Suicide, Problem Solving Ability and Associated Factors among High School Students

Puberty is a period the most frequently experienced of suicidal behaviours. When young people perceive inadequate themselves in terms of problem solving - ability, they feel frustrated and anger, and their first thought is to commit suicide. Hence, this situation is increasing the possibility of their suicide. The aim of this study is to determine the possibility of suicide, problem solving-ability and associated factors among high school. Students. It is planned as a descriptive study

The study was conducted in health vocational high schools, located in the center of Aydin, Türkiye. The population of this study consists of 463 students educated in Aydin Güzelhisar Vocational And Technical Anatolian High School. The sample of study is 210 students. The sample is estimated in 95% confidence intervals as using sampling methods known population. The sample is determined as 270 students with 1,25 pattern effect. Multi-sampling method was used in sample selection. After, the sample was determined, it was admitted that classes were as stage, and chapters were as cluster. Then, the number of students presenting each stage was stated, and 4 clusters from each stage were included in the sample with random drawing method. The data were obtained as using a personal information form, Problem Solving Inventory, suicide probability scale. Before, the study was no started, ethical approval, permissions of individuals and organizations had received. The data were analyzed in SPSS-15software package. One Way Anova, t-test, and correlation analysis were used in statistical analysis

The mean age of the students participating in the study was $15,78 \pm 0,98$ (min:14, max:18). It was found that the mean scores of Suicide Probability Scale was $76,22 \pm 11,76$, the mean scores of Problem Solving Inventory was $110,79 \pm 17,22$. It was determined that the possibility of suicide was higher than the other in obese, living in city center, having a family memeber who is having chronic and mental disease, not having been speaking with parents, speaking with peers when have problem, not been trusted by parents, having addictive

habit, violence in the family. Also, the possibility of suicide and Problem Solving Inventory Scores of the students who one of their acquaintance committed suicide was higher than the students who stated that one of their acquaintance not committed suicide. Consequently, middle and negativ correlation was found between their mean scores of Problem Solving Inventory and Suicide Probability Scale. It should be determined that the students having higher possibility of suicide be directed to the relevant departments to find support and that education about problem solving-ability be organized for them.

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Effect of Using Mobile Phone Services and Internet to Promote Breastfeeding during the Infant Period: An Intervention Study

Objective To evaluate the effect of using Mobile Phone Service and Internet to promote the exclusive breastfeeding rate.

Methods Pregnant women were divided into intervention group and control group in four communities in Erqi districts of Zhengzhou city from May to August in 2013. Intervention group was implemented by community intervention model based on mobile phones and the Internet. The control group accepted routine maternal health care services. Compare the breastfeeding attitude and breastfeeding behavior before and after the intervention. The data analysis methods involved descriptive statistic analysis, two independent sample t-tests, and logistic regression model.

Results The scores of breastfeeding attitude in intervention group were significantly higher than that of control group ($P < 0.05$). Breastfeeding rate in the intervention group was higher than the control group at 7 days, one month, four months six months after birth, with statistical significance ($P < 0.05$). Weaned rate in the intervention group was lower than the control group at six months, nine months, and twelve months postpartum, with statistical significance ($P < 0.05$).

Conclusion Health education based on Mobile Phone Services and Internet may improve breastfeeding rate and decrease infant weaned rate effectively.

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Motivation and Empathy among Nurses in Hospitals and Community Clinics: The Mediating Role of Burnout

Study Goal

The current study focuses on hospital and community nurses and examines their work motivation and empathy in these two different health settings. Motivation and empathy are critical components in the caring professions, and its absence could have a negative effect on the workers and the quality of care they provide. The purpose of the study was to investigate the relationship between motivation and empathy by examining the mediating role of burnout in hospitals and community clinics. Understanding of this relationship could enhance policy makers' support of professional medical personnel functioning in hospitals and community clinics.

Methodology

For this quantitative study 457 nurses working in Israeli public hospitals and community clinics, filled in questionnaires. Data analysis was conducted using descriptive statistics, Pearson correlation, regression analysis, and bootstrap method.

Findings

Findings show a significant positive correlation between the variables (motivation, empathy, and burnout). In addition, burnout mediated the relation between motivation and empathy in the community clinics but not in the hospitals.

Implications for Practice

While improving nurses' work quality in community clinics, issues related to nurses' burnout should be included and implemented as related to motivation and empathy. It is possible that there are other mediators between motivation and empathy among hospital nurses, and that calls for further research.

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Explore Nurses', Doctors' and Parents' Perceptions on Family Needs in Pediatric Critical Care Units at King Khaled Hospital in Jeddah

Family-centered care (FCC) approach acknowledges that the family has the greatest influence over an infant's/child's health and wellbeing. Assessing the FMs' needs is an important component to apply and improve family-centered care, and it is essential for pediatric nurses in the intensive care units to identify and understand these needs (Mundy C. 2010). Meeting the needs of family having neonate or child in intensive care is part of implementing the philosophy of family-centered care.

Aim of the Study: to explore nurses', doctors' and parents' perceptions on family needs in pediatric critical care units at King Khaled Hospital in Jeddah.

Methodology: Exploratory and descriptive design was used. Doctors, nurses and parents from Pediatric Critical Care Units at King Khalid Hospital, Jeddah participated in the study using non-probability convenient sampling technique. Critical Care Family Needs Inventory (CCFNI) a tool developed by Jane Leske (Leske, 1986) was used for assessing nurses', doctors', and parents' perceptions on family needs. The original English version was translated into Arabic by qualified English to Arabic translator. Validity was tested by Arabic faculty staff members and subjected to a pilot test to test for its validity within this context Reliability of the CCFNI was 0.97 by Gundo et al (2014). Ethical considerations were ensured by getting IRB approval and all participants signed the informed consent.

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Satisfaction of Family Health Strategy Users in a Capital of the Brazilian Northeast

INTRODUCTION: Health services gained space in constant quality assessments due to improvements in health care. Internationally, the service quality ratings are given primarily through analysis of the satisfaction of users of health services. In Brazil this discussion gains emphasis on primary care services because they constitute the main gateway to the National Health System through the Family Health Strategy. From the user satisfaction analysis can identify any gaps in assistance and indicate strategies to improve health care. **OBJECTIVES:** To analyze the satisfaction of users of the Family Health Strategy in relation to the aspects of reliability and security. **METHODS:** Quantitative research, with 353 registered participants in an Integrated Health Center of the East Regional of a Brazilian Northeastern capital through the SERVQUAL instrument; data collection took place from January to May 2015 and the research was approved by the Research Ethics Committee. **RESULTS:** Regarding the Reliability dimension, the participants agreed that the professional register the service, perform the treatment in the promised date and s/he is interested in solving the problems. Regarding the Security dimension, most of the participants was indifferent to the behavior of professionals in relation to confidence generated by them. The participants demonstrated safety to request the services when met with politeness by professionals. Moreover, in the two analyzed dimensions it was realized that there is a tendency of increase in satisfaction as the income of participants decreases with significant statistical relationships, and satisfaction regarding Reliability and Safety are inversely proportional to income. **CONCLUSION:** The users of the Family Health Strategy expressed satisfaction with the services received. However, more studies with different methodological approaches are needed in order to better elucidate the inter-subjective issues that shape the process of interaction between users, health professionals and services.

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The Effect of Research Activity on Nursing Students' Research Anxiety and Attitudes to and Awareness of Research and Development

The aim of the study was to determine the effect of performing research of nursing students on their research concerns and attitudes to and awareness of research and development. The study was conducted with 38 students in a nursing department of a university in Ankara, Turkey. A single group pre-test and post-test design was used in the study. To collect the data socio-demographic questionnaire, "research anxiety scale" and "attitudes to and awareness of research and development scale" were used. Kolmogorov-smirnov test and paired sample t-test and McNemar test were used in the evaluation of the data. The study was approved by the research ethics committee of a university in Ankara. Firstly, the students carried out pre-tests before the research started. Then, these students performed research in groups of 3-person during the fall and spring semesters under the supervision of an advisor. The students carried out all the steps of the research process. After the research was completed, the students carried out the post-tests.

The mean age of the students was 22.82 and 60.5% of the students had Grade Point Average at mid-level. Eighty-four percent of the students were female. Based on Kolmogorov-Smirnov test, data were distributed normally ($p>0.05$). While the students' research anxiety pre-test mean score was 43.03, post-test score was 38.61 and this difference was statistically significant ($t=4,080$, $p=0.000$). Similarly, while the students' attitudes to and awareness of research and development pre-test mean score was 120.74, post-test score was 125.55 and this difference was statistically significant ($t=-2.609$, $p=0.013$).

The research findings determined that the research anxiety was decreased and attitudes to and awareness of research and development were increased in the students. We have suggested that the students might be encouraged to perform research and participate in research activities by nursing education institutions and faculty members.

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**The Curse of Wet Hands! The Significance of Hand Drying
and Efficacy of Different Methods**

Wet hands are an infection risk, increasing the potential for cross infection, as well as the harm to the skin condition of healthcare practitioners. This presentation examines the infection risk associated with wet hands, efficacy research of different drying methods, and the impact on safe clinical care.

Current research and practice recommendations concentrate on hand washing, compliance rates and the efficacy of different interventions to improve hand washing. There is, however, a noticeable neglect of hand drying practice and the current paucity of research fails to recognise its importance in the prevention and control of infection. There is increasing recognition that hand drying is of equal importance to hand washing, that there is a lack of compliance amongst practitioners, and that the efficacy of different methods varies with the clinical implications of different methods of significance.

The presentation examines a number of published international studies, which evaluate firstly the extent of hand drying amongst professionals and secondly the efficacy of different methods in clinical areas. The presentation notes that despite this evidence, research needs to focus and evaluate the extent of drying by practitioners and the efficacy of drying methods within the clinical environment. The curse of wet hand and skin irritation further exacerbate the potential of non-compliance and the likelihood of translocation of microorganisms.

Greater attention and emphasis needs to hand drying and its equal importance when we consider hand hygiene in the clinical context. We must accept that patient safety is put at risk when we fail to dry our hands.

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**Impact of 1,3,4-Thiadiazine Derivative on Pancreas Islets in
Diabetic Rats**

Diabetes is a worldwide metabolic disorder that requires multiple therapeutic approaches and stimulates research focused on more efficient antidiabetic drugs. The potential of a possible antidiabetic drug can be considered to be antiglycative, antioxidant and β -cell protecting. Previously, we have identified in silico that a representative of 1,3,4-thiadiazines the compound L-17 combines antioxidant and antiglycative properties which were confirmed in vitro and in vivo. However, it is unclear whether L-17 can also contribute to the protection of β -cells in the pancreatic islets of alloxanised diabetic rats.

Four groups of 5 Wistar rats weighing 220-250 g were formed: control, L-17, alloxan diabetes, alloxan diabetes plus L-17. Type 1 diabetes mellitus was modeled by alloxan administration (100 mg/kg per day intraperitoneally, 3 days, total dose 300 mg/kg). An aqueous solution of L-17 was administered intramuscularly (40 mg/kg per day, 3 injections simultaneously with alloxan, and 12 injections in total for 4 weeks). The tests of plasma glucose, glycated hemoglobin in erythrocytes, tissue and plasma fructosamine, the histological and morphometric investigation of the pancreas were made.

L-17 had no effect on the number, neither size of the pancreatic islets nor the content of β -cells in healthy animals. We revealed that injections of L-17 to diabetic rats decreased glucose, glycated hemoglobin and fructosamine levels as compared to the same indicators of untreated diabetic rats. The total number of cells increased in the islets after L-17 injections to diabetic rats, but the number of islets and the proportion of β -cells remained as in the diabetic rats.

Therefore, L-17 ameliorates hyperglycemia without affecting the β -cell survival in alloxanised diabetic rats. Further studies of islet cell composition, insulin and insulin-like growth factor expression are necessary to explain the anti-diabetic effect of the 1,3,4-thiadiazine derivative.

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Management of Diabetic Nephropathy using Structured DAG Oils in Murine System: A Comparative Assessment of Redox-Regulated Signaling System

Diabetes mellitus is a group of metabolic diseases characterized by chronic hyperglycemia with instabilities in carbohydrate, fat and protein metabolism resulting from defects in insulin secretion, insulin action or both. With the increasing prevalence of diabetes consistently there is an urge for proper effective prevention. The present study was carried out to investigate whether the capric acid (Cp) and caprylic acid (Cy)-diacylglycerol (DAG) oil (Cp-DAG or Cy-DAG), two novel structurally formulated lipids, plays any beneficial role in renal pathophysiologies in diabetic rats. Streptozotocin (STZ) induced diabetic rats were taken to conduct the study. STZ exposure increased renal damage associated serum markers (urea and creatinine) as well as NO production in the kidney tissue. Moreover, the same exposure enhanced the reactive oxygen species (ROS) generation and lipid peroxidation following the reduction of reduced glutathione (GSH) levels and antioxidant enzyme activities. Hyperglycemia-associated renal pathophysiologies also activated the redox-regulated stress response pathways (involving phosphorylation and dephosphorylation of p38, ERK1/2 MAPKs and NF- κ B) and increased the pro-inflammatory cytokines burden which in turn led to renal inflammation. However, supplementation with Cy-DAG oil better counteracted on STZ-treated oxidative stress-mediated renal damage in comparison to the Cp-DAG oil and could act as significantly better therapeutic dietary supplement in preventing renal dysfunction in diabetic nephropathy.

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Nursing Students' Knowledge and Practices on the use of Peripheral Venous Catheter

Aim: The aim this study is to determine the knowledge and practices of nursing students who completed surgical nursing course, on peripheral venous catheters use.

Method: This descriptive study was conducted with 269 nursing students who attended the surgical nursing course during the fall semester of 2016-2017 in Nursing Department of Health Science Faculty. The research data collected by Personal Information Form and a Venous Catheter Knowledge and Practice Questionnaire developed by researchers according to guidelines of Turkish Society of Hospital Infections and Control. The data evaluated by descriptive statistics and beside this independent variables t test, One Way ANOVA, Kruskal Wallis tests were used.

Results: It is found that the mean age of students were $19,73 \pm 0,49$, all were second year students, 4,8% (n=13) had graduated from associate nursing degree , 0,4% (n = 1) worked as a nurse at a hospital. Students mostly completed surgical nursing clinical courses at intensive care units (76.2%) and emergency departments (71%). It was determined that during clinical practice 94.8% of the students had practiced peripheral venous catheters to patients, 51.7% of them practiced 1-5 times 30.5% 11 or more times. It is found that 90.7% of the students stated that they had been educated about catheter infections and prevention during nursing courses. It was found that the level of knowledge about the use of peripheral venous catheter was moderate with an average of score of 14.50 ± 2.92 (min: 0, max: 23). Nearly all students gave correct answer to the placement of the venous catheters to upper extremity veins in adults (99.6%), hand hygiene with water and soap (92,6%) before insertion of catheter, catheter replacement (94,4%) in case of visible contamination and deterioration of catheter integrity, everyday control of catheter entry site (98.1%). No significant

difference was found between the demographic characteristics of the students, frequency of catheter education, frequency of peripheral venous catheter practice, number of catheter infection education, clinical practice site and knowledge of usage of peripheral venous catheter average points ($p > 0,05$). It is determined that students mostly provides hand hygiene with alcohol (82,2%), water and soap (72,2%) and gloves (86,2%) before applying peripheral venous catheter cleaning the catheter area with 70% alcohol (79.4%), uses antibiotic cream (71.4%), replaces catheters in every 24-48 hours (82.9%), replaces non blood transfusion catheters in every 24 hours (98.5%).

Conclusion: The study showed that the knowledge and practice about using peripheral venous catheter by nursing students who had complete the surgical nursing course, is not at the expected level.

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Healthy Lifestyle Behaviours of First Year Students in Nursing School

Temporary relocation due to university education has an impact on the health lifestyle of individuals who are not yet grown out of adolescence, and negative behaviour set more with the problems experienced especially within the first year of relocation.

The objective of this study is to determine healthy lifestyle behaviour of first year students in nursing school.

The study is a cross sectional study conducted with first year students in the Department of Nursing in Adnan Menderes University in the spring term of 2014-2015 academic year. The population of the study consists of 260 students and the sample of the study consists of 193 students selected using sampling from finite population method. Verbal consents of participating students and authorization from the university have been obtained. Personal Information Forms and Healthy Lifestyle Behaviour-II Scale (HLBS) were used as evaluation instruments.

The study data was analysed with the SPSS statistics program (Version 18, Chicago IL, USA); arithmetic mean, median, standard deviation, frequency and percentage values, student t-test and Kruskal Wallis test were used.

The mean age of the students participated in the study was 19.25 ± 1.29 and they were all in their first year (freshman). 74.5% (n=143) of the students are female and 25.5% (n=49) of the students are male.

84.5% of the students (n=163) reported that they have nuclear family and 71.4% (n=137) reported that their family has balance in their income and expenditure.

Most commonly consumed foods for the students on a daily basis were identified: 15% (n=27) milk and dairy products; 27.5 % (n=50)

fruits and vegetables, 17.8% (n=32) legume; 21.7 % (n=39) grains, 18.2% (n=33) meat and meat products.

The mean HLBS score of the students is 128.61 ± 18.90 ; the mean score for Health Responsibility Subscale is 19.47 ± 4.49 ; the mean Physical Activity Subscale score is 16.74 ± 5.44 ; the mean Nutrition Subscale score is 19.02 ± 3.76 ; the mean Emotional Development Subscale score is 26.78 ± 4.71 ; the mean Interpersonal Relationship Subscale score is 26.29 ± 4.43 and the mean Stress Management Subscale score is 19.60 ± 3.91 .

The Physical Activity Subscale Scores of male students were significantly higher than those of female students ($t= 2.406$; $p= 0.017$) and the Stress Management Subscale Scores of the students whose families' income level is higher than their expenditure were significantly higher those whose families' income level is lower than their expenditure or equal ($KW=6.464$; $p=0.039$).

It can be concluded that the healthy lifestyle scores of students are at medium level; that male students have a higher level of physical activity and students who report income higher than expenditure have a better stress management.

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What are the Barriers for Developing Nurse Leaders? A Review

OBJECTIVE: The aim of this systematic review was to examine the evidence regarding barriers to nurse leadership development.

BACKGROUND: Nurses comprise the largest segment of the healthcare workforce. Nursing has consistently been ranked as the most respected position by United States Gallop Poles with the exception of 2011 when fire fighters were ranked number 1. However, only 6 percent of healthcare organizational board members were nurses (AHA 2011). Why are nurses not moving into these highest levels of healthcare organizational leadership? Historically it has been difficult to find staff nurses willing to pursue leadership positions. What are the barriers for staff nurses to move into leadership positions?

METHODS: An electronic literature search for “night shift nurse errors” was conducted using Pubmed, CINAHL, Health Source: Nursing/Academic Edition, and Cochrane Collection Plus databases. Inclusion criteria used was English language, full text available, and published in a peer-reviewed journal between July 1, 2006 and July 1, 2016. Originally 482 studies were identified and the abstracts reviewed for relevance. Duplication citations were removed. The remaining studies were analyzed and categorized based on Johns Hopkins Strength of Evidence Hierarchy.

RESULTS: Twelve studies were selected for analysis based on the inclusion criteria. Some of the barriers to developing nurse leadership identified were time constraints, lack of involvement in policy development, lack of formal preparation for leadership role, lack of opportunity for advancement, need for additional training or education, lack of influence in interdisciplinary care planning, lack of clarity about leadership duties and responsibilities, and lack of leadership succession planning. Nurses identified that since they are not perceived as major revenue generators as compared to physicians, leadership roles for nurses are restricted. An additional perceived barrier was that the public perception of nursing roles did not include senior level leadership, therefore the compensation for nursing was lower than other healthcare professions within the organization leadership structure. Resources for leadership preparation was not seen as much of a priority for nurses as in some of the other healthcare disciplines. Finally, the lack of a nursing framework for the professional

development of the leadership role, opportunities to lead, and a mechanism to sustain leadership development were identified as barriers to nurses moving into leadership roles.

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Why Does it Hurt So Much? Understanding Women's Experience of Breastfeeding-Related Pain

Breastfeeding is the optimal source of infant nutrition with protective health effects for both women and children. Despite the World Health Organization recommendation of exclusive breastfeeding for the first 6 months, many women discontinue breastfeeding well before. Nipple pain associated with breastfeeding is a primary contributor to breastfeeding cessation; however, there is minimal literature exploring postpartum women's experiences with breastfeeding pain. As such, our purpose is to explore the experience and meaning of women's breastfeeding-related pain in a gendered, social and cultural context.

Design: A descriptive qualitative design was utilized. Using maximum variation sampling, 15 women were recruited from Well Baby/Breastfeeding clinics at the Middlesex-London Health Unit in London, Ontario, Canada.

Sample: Breastfeeding postpartum women reporting breastfeeding-related pain and were able to read, understand and speak English.

Methods: Individual interviews (60-90 minutes) were conducted using a semi-structured interview guide. Interviews were audio-taped and transcribed verbatim along with field notes.

Data Analysis (under progress): A feminist, intersectional framework will situate the results. Qualitative descriptive methods will guide data analysis. Multi-level coding, constant comparison techniques, and content analysis will identify key data themes using NVivo 10.

Significance: This novel research has the potential to improve knowledge of women's lived experience of breastfeeding-related pain, increase public awareness, promote social support and inform clinical practice - targeting education and development of preventive and treatment interventions for childbearing women.

Research Team: The multidisciplinary team has an extensive and collective depth of clinical and research expertise in women's health, pain science, knowledge translation strategies and qualitative research methods.

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Nurse Independent Prescribing in the United Kingdom

Nurse Independent Prescribing is well established with the United Kingdom (UK) with over 54,000 nurse and midwife prescribers across the UK (Royal College of Nursing (RCN), 2010). Its origins began in 1986 with a recommendation that community nurses could prescribe from a limited list of drugs and applications (Cumberlege Report, 1986). The emerging role provided continuity of care for a growing rise in the number of patients with complex health needs particularly in the community. The role also addressed the significant reduction in available doctors. The role is now well established within community and acute healthcare settings, with nurses prescribing over 12.8 million items in one year (NHS Prescribing Service, 2010).

Nurse prescribers are specially trained nurses allowed to prescribe any licensed and unlicensed drugs within their clinical competence. In 2006, nurse prescribers were given full access to the British National Formulary (BNF) and this now puts nurses on a par with doctors in relation to their prescribing capabilities. Since 2012 nurse prescribers have also been able to prescribe controlled drugs within their area of competence.

Patients have reported a high level of satisfaction and confidence in nurse prescribing, with no difference in prescribing methods between nurse and doctor prescribing (Jones et al, 2010).

This paper argues that nurse independent prescribers can provide a valuable contribution to patient care, providing better care for patients, faster access to medicines and a better use of nurses' and doctors' time.

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&

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The Efficiency of Sand Bag, Close Pad, and Cold Application in Combination with Sand Bag to Prevent Peripheral Vascular Complications Post-Coronary Angiography and Post-Percutaneous Coronary Intervention

In the literature, no study has been found comparing the effectiveness of sand bag (SB), cold application in combination with sandbag method (CASB), and Close Pad application (CP) to prevent vascular complications after Coronary Angiography (CAG) or Percutaneous Coronary Intervention (PCI). So, we aimed to determine the effectiveness of these three methods in preventing peripheral vascular complications after coronary intervention.

120 patients were included in this experimental study and three groups each consisting 40 patients were formed by randomization. The SB, CP, and CASB methods were performed for the first, second, and the third groups, respectively. The data were collected by using Personal Information Forms, Individual Observation Forms, and Numerical Pain Scale. The presence of local complications were investigated at 15th minute, 4th hour, 1st day and 2nd day after the sheath withdrawal. The area of the hematoma was measured with the mezzanine, and calculated as square centimeters. It was judged as 'major' if hemorrhage required transfusion, and 'minor' if hemorrhage didn't require transfusion. The ecchymosis were wrapped with a polyethylene millimetric plastic film and bordered by an acetate pen, and then calculated as millimeters squared. The pain felt by the patient was quantified on the scale.

In the CAG group; it was determined that these three methods have similar efficacy on preventing hematomas, SB method alone and CASB are superior to CP method to prevent bleeding, all three methods are not effective to prevent ecchymosis, and SB method alone was effective in preventing pain. In the PCI group; it was found that the SB is superior to other methods in preventing hematoma, SB and CP are superior to CASB method in preventing bleeding, ecchymosis; SB and CASB methods are superior in pain relief.

We have shown that the methods used in our study cohort are effective in preventing potential complications, however they are not

exactly superior to each other. So, it is proposed that cost-effective approaches and institutional policy should be taken into consideration in the selection of the closure method.

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Determination of Prevalence and Etiology of Medical Errors in Healthcare Practices

Aim: During the delivery of healthcare services, medical errors might occur leading to death, injury, disablement, or the delay of treatment. This descriptive study aims to determine prevalence and etiology of medical errors in healthcare practices.

Material and Method: This research is a retrospective study implemented between 01 January and 30 April 2015. Findings were elicited from the newspapers of 2014 that were archived in a hospital's central library. Of the archived 17 newspapers, the printed copies for 12-months were reached. Data were analyzed via a questionnaire form consisting 19 questions based on the literature and assessed by the use of descriptive statistics. Totally 105 news were found in relation to medical practice errors.

Findings: Regarding the news on medical errors it was determined that 95.2% was on current-news sections of newspapers; 49.5% were delivered by a news agency; and %12.4 did not mention the concerned institution. Of the medical errors 18.1% were related to diagnosis while 9.5% to false medicine delivery; 59.0% occurred at public healthcare institutions while 28.6% at private healthcare institutions; 67.6% occurred at surgery rooms, emergency rooms, and gynaecology clinics respectively (33.3%, 16.2%, 14.3%); 22.9% occurred due to negligence while 21.0% due to the lack of attention; and 28.6% violated International Patient Safety Targets securing correct party, correct procedure, and correct patient surgery. Among the health personnel making the medical error, 67.6% were doctors and 4.8% were nurses while 9.5% of news did not mention the responsible health professional. Lastly, 48.6% of medical errors resulted in death and 63.8% of the medical error consequences were submitted to the court.

Conclusion: The foremost application in order to prevent medical errors is to determine medical error types and factors causing medical errors in addition to the determination of areas where health care professionals tend to make medical errors.

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The RNA Binding Protein Quaking is a Key Regulator of Endothelial Cell Differentiation, Neovascularization and Angiogenesis through Direct Binding of the 3'UTR of STAT3

The capability to derive endothelial cell (ECs) from induced Pluripotent Stem (iPS) cells holds huge therapeutic potential for diabetes. Objective- This study elucidates the precise role of the RNA-binding protein Quaking isoform 5 (QKI-5) during EC differentiation from both mouse and human iPS cells and dissects how RNA-binding proteins can improve differentiation efficiency towards cell therapy for important vascular diseases such as diabetes. iPS cells represent an attractive cellular approach for regenerative medicine today since they can be used to generate patient-specific therapeutic cells towards autologous cell therapy. In this study, using the model of iPS cells differentiation towards ECs, the QKI-5 was found to be an important regulator of STAT3 stabilisation and VEGFR2 activation during the EC differentiation process. QKI-5 was induced during EC differentiation, resulting in stabilisation of STAT3 expression and modulation of VEGFR2 transcriptional activation as well as VEGF secretion through direct binding to the 3' UTR of STAT3. Importantly, iPS-ECs overexpressing QKI-5 significantly improved angiogenesis and neovascularization and blood flow recovery in experimental hind limb ischemia. Notably, human iPS cells overexpressing QKI-5, induced angiogenesis on Matrigel plug assays in vivo only seven days after subcutaneous injection in SCID mice. These results highlight a clear functional benefit of QKI-5 in neovascularization, blood flow recovery and angiogenesis. They, thus, provide support to the growing consensus that elucidation of the molecular mechanisms underlying EC differentiation will ultimately advance stem cell regenerative therapy and eventually make the treatment of vascular diseases such as diabetes a reality.

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Using Twitter to Facilitate the Dissemination of Information and to Provide a Platform for Continued Professional Development for Independent Prescribers

Coventry University highlighted digital literacy as a pillar of learning. Therefore it is a requirement and expectation of Coventry University academics to engage in delivery of learning through digital media (Coventry University 2016). There has been a shift away from traditional teaching methods, such as power point, which has been seen as archaic, to the use of digital media being hailed as a panacea for enabling the dissemination of information directly to students, and from students, at any time, rather than just within the lecture theatre (Sukbramianiam 2013). This approach enables a flipped approach to learning where students assimilate information from a digital stream prior to lectures, discussing their thoughts and findings within the lecture with their peers.

The independent prescribing academic team at Coventry University developed a learning strategy that encompassed digital literacy facilitating this through the use of a Twitter account. The accounts primary focus was to disseminate articles, news and information about independent prescribing and related health care issues to students, whilst on the course and to facilitate ongoing continuing practice development (CPD) on completion. The aim was to also enable students to post on the Twitter feed sharing similar information with the wider student group and their peers in practice. Twitter was seen as a vital component of the teaching strategy within the independent prescribing course as it facilitated a direct form of contact with the students throughout the course rather than limited to face to face lectures or tutorials. The twitter feed is also being utilised to develop ongoing support networks for students once qualified and promote CPD events

This paper will present the implementation of the Twitter account and discuss whether it enhances student experience. The independent prescribing academic team are currently evaluating this initiative.

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The Effect of Hyperemesis Gravidarum on Pregnancy Adaptation

Hyperemesis gravidarum affects the pregnant woman's physical and psycho-social health, but it also causes pregnancy adaptation problems. The purpose of this study is to analyse the effect of hyperemesis gravidarum on pregnancy adaptation.

The research was carried out by employing analytic case-control at Maternity Polyclinics and Gynaecology Service in Aydın Maternity and Children's Hospital between April-August, 2016. The study got 42 hyperemesis gravidarum diagnosis and was carried out with 148 pregnant women in total and these pregnant participants were chosen by random sampling method. For evaluating the data, descriptive statistics, X² test, t-test, Mann Whitney U test were benefitted.

Socio-demographic and obstetric features of the pregnant participants participating in the research as the case and control group were compared statistically, and it was found that the groups were similar. It was determined that the pregnant women in the case group perceived the changes occurring based on pregnancy worse when compared to the pregnant women in the control group (X²=18,477, p=0,001). When the total points the pregnant women in case and control group got from Prenatal Self Evaluation Questionnaire (PSEQ) and sub-scales were compared, it was determined that there is a statistically significant difference among the thoughts of the pregnant about herself and her baby (p=0,000), acceptance of pregnancy (p=0,000), acceptance of motherhood role (p=0,001), being ready for labour (p=0,001), fear of labour (p=0,008), condition of the relationship between the pregnant and her mother (p=0,001), condition of the relationship between the pregnant and her partner (p=0,012), and Prenatal Self Evaluation total scale points (p=0,000).

As a result, it was determined that hyperemesis negatively affects the pregnant woman's thoughts about herself and her pregnancy, acceptance of pregnancy, motherhood role, being ready for labour, fear of labour, relationship with her mother, relationship with her partner, and pregnancy adaptation. On the other hand, it can be said that

pregnant women having hyperemesis gravidarum perceive the changes occurring based on pregnancy worse (negative) when compared to other pregnant women.

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Increased risk of Alzheimer's disease in Type 2 Diabetes: Neuroimmune Effects of Dysregulated Peripheral Factors as a Possible Link

Alzheimer's disease (AD) is the most prevalent form of dementia worldwide. The hallmark features of AD include abnormal deposition of aggregated proteins, excessive neuronal death in specific brain regions and chronic neuroinflammation. Non-neuronal brain cells, such as microglia and astrocytes, support neuronal health under physiological conditions but become adversely activated in AD brains. Persistent dysregulation and harmful activation of microglia and astrocytes can result in chronic neuroinflammation, which can be damaging to surrounding cells including neurons responsible for cognitive functions and can give rise to the clinical signs of AD. Currently, there are no effective treatment options for AD; therefore, elucidating AD risk factors to delay or prevent this debilitating disease is an emerging area of research.

Recent epidemiological evidence points to type 2 diabetes mellitus (T2DM) as a significant and increasingly widespread AD risk factor. Lifestyle changes may prevent T2DM and, by extension, lead to a reduction in the prevalence of AD. A number of studies have already elucidated the effects of T2DM on the health of neurons. Since T2DM is characterized by a peripheral pro-inflammatory state, we hypothesized that neuroinflammatory mechanisms could be at least partially responsible for the observed link between T2DM and AD. More specifically, we studied the effects of high glucose levels and of metabolic hormones that have reduced functionality in T2DM on the neuroinflammatory response of microglia and astrocytes. We focused on insulin as well as the incretin hormones glucagon like peptide (GLP)-1 and glucose dependent insulinotropic polypeptide (GIP) as candidate signaling molecules that may regulate neuroinflammatory processes. We confirm that high glucose levels increase susceptibility of neuronal cells to injury caused by AD-related agents, such as hydrogen peroxide and fibrillar amyloid beta-42 protein (A β 42).

In addition, we demonstrate that high glucose levels upregulate secretion of the pro-inflammatory interleukin (IL)-6 and IL-8 by human U-118 MG astrocytoma cells and primary human astrocytes. Furthermore, we demonstrate that both microglia and astrocytes express insulin and incretin receptors. Finally, we demonstrate that the

three metabolic hormones studied selectively regulate specific non-neuronal cell functions. We propose that insulin could have anti-inflammatory properties in the brain and may protect against microglia-mediated neurotoxicity, while GLP-1 and GIP exhibit anti-apoptotic, antioxidant and trophic effects on microglia. Thus, we have discovered that insulin, GLP-1, GIP and high glucose regulate specific aspects of neuroinflammation, which can be the mechanistic link between T2DM and the increased risk of AD. Neuroimmune mechanisms can therefore be targeted for development of future AD treatment options.

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**Improving Orthopedic Patient Outcomes through
Implementation of a Multimodal Pain Protocol**

Undermanaged post-operative pain is challenging for orthopedic patients, families and health care staff. Currently, there is no consensus on ideal pain management strategy following total hip arthroplasty (THA). A multi-disciplinary group was formed and discussed the need to:

- Improve patient care and pain management
- Provide highest quality cost-effective patient care
- Enable patients to move earlier with less pain

The goal of this collaborative project was implementation of a multi-disciplinary pain management protocol for primary total hip arthroplasty patients to decrease length of stay, decrease opioid use and improve patient satisfaction.

An evidence-based multi-modal pain protocol was designed to provide pain medications for total joint patients in three phases:

1. Pre-operative – aggressive pre-emptive medications
2. Operative – medications given throughout surgery
3. Post-operative – from unit admission to discharge

This retrospective cohort study reviewed records of 81 consecutive patients undergoing primary THA utilizing traditional anesthesia and opioid-dependent pain management compared to 78 primary THA patients receiving the new protocol. Length of stay (LOS), pain scores, opioid use and other clinical data were analyzed for each group. Results showed a shorter length of stay, less opioids used, improved reported pain scores and a significant decrease in patients admitted to extended care facilities at discharge.

This protocol was well received by patients, families, providers and nurses. Patients' comments were overwhelmingly positive: "I can't believe how little pain I had." "I'm going home sooner than I thought."

Teamwork and communication were essential to this projects' success. Timely problem solving and follow-up were vital to developing a safe and successful protocol. This multi-modal pain practice has demonstrated multiple positive outcomes in patients undergoing total hip arthroplasty

and has now expanded to patients following total knee arthroplasty. The positive outcomes are significant and this protocol should be considered for wider implementation in these patient populations.

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Debriefing Scale Development for Nursing Stimulation Education

Background: Simulation education provides a safe and meaningful learning environment for students, which gives them opportunities to direct hand-on care, enhances their clinical knowledge and skills to practice and to improve their confidence by the role play approach. Debriefing is very important stage for the simulation education which is a core part through this learning process, so that students not only reflect on their performance, but also expect them to build the value and positive attitude of nursing professional. However, application of simulation teaching in nursing education is inadequate in the literature.

Aim: The aim of this study was to develop a valid and reliable measurement instrument to evaluate the learning outcomes of debriefing process in simulation education.

Methods: It took a year under the cross-sectional study design. The sample of this methodological study consisted of totally 493 nursing students who were senior and participated in the simulation scenarios. The Scale was developed from debriefing literature and expert opinion. Through stratified random sampling, 247 students were examined using item analysis, exploratory factor analysis, and reliability analysis. A target sample of 246 students was then randomly divided into two groups to perform confirmatory factor analysis and cross-validation.

Results: According to the Confirmatory Factor Analysis, the scale had 18 items and three subdimensions, namely, attitudes/emotional, knowledge, and learning outcome of simulation. Cronbach's alpha reliability coefficient of Debriefing Scale turned out to be 0.966 and Cronbach's alpha for its subdimensions were 0.916, 0.950, and 0.950, respectively. The Cross Validation was no significant correlation ($p > .05$) which shows the appropriateness of the scale.

Conclusion: The Debriefing Scale for Nursing Simulation Education has the potential to assist in providing further insight into the assessment of the effectiveness of this form of learning. It is hoped that this scale will serve as a useful measure of debriefing in simulation education.

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Functional Health Literacy of Asylum Seekers and Refugees: A Pilot Study in Italy

Context: literature shows how some groups of population, among which are the people seeking International Protection and the Refugees, find difficult to access services in National Health Systems. Usually, Asylum Seekers have limited Health Literacy (HL) that makes understanding the appropriate health information difficult.

The objective is to consider the relationship between how people requesting International Protection and Refugees approach the Italian Health System to request health services and their level of Functional Health Literacy (FHL).

The Method used is a mixed approach. Data were obtained using several tools: a self-administered questionnaire in which the subjects revealed social and demographic data and a face to face interview together with the S-FHL Scale fulfilment in order to identify the functional level of HL. 21 subjects were interviewed in two centers of Protection System for Asylum Seekers and Refugees (SPRAR).

Results show a picture of the actual situation. Data report a problematic or insufficient FHL level. Some factors, such as gender, age and health perceptions, play a role in the FHL levels. Some racial prejudices were reported. Language barrier had the most impact on the communication gap. Nevertheless, none of the subjects were denied health services.

In conclusion, although this study is a pilot, we have experienced difficulty in obtaining Asylum Seekers trust to be open about their experience. Our results are in accordance with literature for inadequate

level of FHL and lack of knowledge of the Italian Health System.

This study highlighted several other issues to be taken into consideration for future research on the team.

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Determining Factors Affecting the Quality of Life in Elderly Nursing Home Residents

Aim: This descriptive study aims to determine factors affecting the quality of life in elders residing in nursing homes.

Material and Method: This study was realized with 150 elders residing in two nursing homes between 28.05.2015 and 30.09.2015. Data were collected via a literature-based questionnaire form having 39 questions on sociodemographic and clinical features of elders and by using the Standardized Mini Mental State Test (SMMST) and the Nottingham Health Profile (NHP). SMMST consists 11 items and is assessed through total 30 points whereas the score range of 28-30 indicating "normal", 24-27 indicating "low", and 0-23 indicating "impaired" state of cognitive function. NHP consists 38 questions consisting subgroups of physical activity, pain, sleep, social isolation, emotional reaction, and the energy level and assessed based on "yes" or "no" responses. For each subgroup, "0 point" indicates the best health condition while "100 points" indicate the worst health condition. Percentage, Chi-square test, one-way ANOVA, and Student t test were used in data analysis.

Findings: Mean age of elders was 73.1 ± 8.9 . It was detected that of elders 49.3% were female, 47.3% described their mental state as "good", 85.3% had a chronic disease, and 68.7% had limited functions relating daily life activities. Whereas 96.7% of elders received a score in the 0-23 range of SMMST, the mean score for 96.7% of elders was 17.5 ± 3.9 . Total mean scores of elders detected from NHP subgroups of pain, physical activity, energy level, sleep, social isolation, and emotional reactions and total mean score of the scale was detected as 3.1 ± 2.5 , 2.4 ± 1.7 , 0.6 ± 0.9 , 2.2 ± 0.1 , 1.7 ± 0.1 , 0.4 ± 0.1 , and 10.1 ± 5.9 respectively.

Conclusion: Although mean scores of cognitive functions were low, mean scores of the quality of life of elders were good. Activities to improve mental states of elders and increasing the participation of elders in social activities and events are suggested.

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**Risk Perception among Persons with Pre-Diabetes,
Thailand**

Purpose: Currently, Thailand faces with the increasing number of pre-diabetes which will develop to be diabetes in the next few years. Risk perception is an important factor of self-protective behavior that could reduce the progression of a disease. Little is known how individuals with pre-diabetes perceived their risk of diabetes development. This study aimed to examine risk perception of developing diabetes mellitus and its associating factors among Thai people with pre-diabetes living in semi-urban district of Chonburi, Thailand.

Methods: Guided by the Risk Perception Attitude Framework (RPA). A cross-sectional study was conducted in 219 Thai people with pre-diabetes (FPG = 100-125 mg %). Samples were recruited by simple random sampling from five health-promoting hospitals located in semi-urban district Chonburi, Thailand. Self-report questionnaires were used to assess the associations between knowledge of diabetes mellitus, current BMI, current behavioral practices, and risk perception of diabetes. The outcome measures included the Risk Perception Survey for Developing Diabetes (RPS-DD), the Knowledge of Diabetes Mellitus, and the Health Behavioral Practice questionnaire.

Results: Findings revealed that more than 50% of respondents aged higher than 45 years. 50% of them were overweight (BMI > 25 kg/m²) and more than 40% of respondents had family history of diabetes and hypertension. Most of them reported high scores on optimistic bias for not developing diabetes. In addition, 48.4% of them believed that they had low chance of getting diabetes in the next few years. With bivariate analyses, only knowledge of diabetes and optimistic bias were significant negatively associated with diabetes risk perception ($p < .01$). There were no significant relationship between current BMI, current health practice and diabetes risk perception among this population.

Conclusions: Results indicated that Thai individuals with pre-diabetes perceived themselves at low risk for getting diabetes.

Increasing their awareness of developing diabetes by improving knowledge of diabetes and diabetes prevention is recommended, thereby, it can reduce the incidence of future diabetes.

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Violence and Abuse against the Elderly

Introduction: Violence against the elderly is any act or omission, committed in public or private location that causes death, damage or physical or psychological suffering. Mistreatments are single or repeated acts, or even lack of action that causes suffering or distress and which occur within a relationship of trust. Objectives: to analyze the violence and abuse against the elderly; identify the types of violence suffered by the elderly and investigate the old front of conduct to situations of abuse. Methodology: Qualitative study conducted with 100 elderly enrolled in Basic Units of the municipality of Picos Health, Piaui, through a semi-structured interview guide. Data were processed in IRAMUTEC software and analyzed by Hierarchical Classification Descending. The study was approved by the Research Ethics Committee of the University Center Uninovafapi - CAAE: 49541115.1.0000.5210. Results: were presented in 5 semantic classes: Class 1 - elderly Rights related to violence and abuse; Class 2 - Elderly Care in the family and society; Class 5 - Knowledge of the elderly on violence and ill-treatment; Class 4 - Types of violence suffered by the elderly. Class 3 - Assistance to the elderly in cases of violence and abuse. Conclusion: Violence and abuse are related to the acquired rights through legislation / the Elderly that determines their rights and contribute to their protection. The elderly have knowledge about the types of violence highlighting the financial violence. The assistance provided to the elderly in cases of violence and abuse is limited to police reports records in police stations, the request for aid to tutelary and prosecutorial advice to seek justice and protection. The care of the elderly in cases of violence is neglected by health services, except when there is physical abuse with injuries and wounds.

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Sensitivity and Attachment Interventions in Early Childhood: A Systematic Review and Meta-Analysis

A systematic review and meta-analysis of randomized controlled trials (RCT) was conducted to determine whether early interventions are effective in improving attachment security and parental sensitivity. Electronic databases were searched 2002-2015 onwards, All RCTs delivered to mothers, fathers or carers, before their child's mean age was 36 months, via 1:1 support, group work or guided self-help were included. The search was restricted to English Language publications. Study Selection, data extraction and quality appraisal were independently undertaken by two authors. With regard to analysis, where appropriate, dichotomous data were pooled using the Mantel-Haenszel odds ratio method and for continuous data descriptive statistics were collected in order to calculate standardized mean differences and effect sizes.

Four studies met inclusion criteria and were divided into two groups: North American & Canadian and South African based studies. Combining data from both groups indicates that early interventions improve attachment security and improves rates of disorganized attachment. One study provided extractable data on the outcome of parental sensitivity, which shows that early interventions were effective in improving maternal sensitivity at 6 and 12 months. Study results generally support the findings of a previous review (Bakermans-Kranenburg, Ijzendoorn, & Juffer, 2003) that found that early interventions improved attachment security and maternal sensitivity (In Press).

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Developing Virtual Learning Environments at DP in Nursing, NOVIA UAS

The purpose of the project is to develop virtual learning environments that will stimulate students to reflect and to use self-directed learning methods in evidence based nursing care. However, communication and cooperation are emphasized in the learning process. The project has an academic agenda aiming at publishing articles built on the different phases of the project.

Phase one was a pilot study aiming at exploring the possibilities social media open for home- internationalization (Chan, Nyback 2015). The results showed that students, by using social media, learn from each other and develop an understanding for different cultural traditions, meanings and values.

Phase two is ongoing and focus on how blended learning methods can be used when teaching clinical nursing skills. Contact teaching consists mainly of introduction, supervision and evaluation. The students have access to instruction films and laboratory environment for practice. The students decide when they are ready for evaluation of the given practical procedure and, with their own devices, film the procedure. The student's films are uploaded on YouTube and sent to the teacher who evaluates the student's performance of the given procedure. The main result of this phase is that the students have a better ability in practical procedures and the evaluation of a procedure on film has a higher level of credibility due to possibilities to look at a film several times compared to a class-situation, which is in real time and cannot be repeated.

Phase three is ongoing and focus on evaluation methods. Objective Structured Clinical Examination (OSCE) is developed for three different levels in nursing education, beginner, experienced and advanced. These levels correspond to year 1, 2 and 3 in nursing education. The different criteria used focuses on the competences the nursing student need to achieve for practical training periods at different levels of education.

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Assessing Knowledge Regarding Vulvovaginal Candiasis among Female University Students

Background: Vulvo vaginal candidiasis (VVC) is common clinical problem facing adolescent females throughout the world particularly in hot, subtropical climates. Annually in the United States there are approximately 13 million cases of, resulting in 10 million gynecologic office visits per year. It is estimated that 75% of women will experience at least one episode in their lifetime, and 50% will experience multiple episodes.

Aim of the study: To assess the knowledge of female university students about VVC.

Research Design: A descriptive design was utilized to achieve the aim of current study.

Setting: The proposed study was conducted at Cairo University hostel where female students were residing and selected from non-medical Faculties.

Sample: A simple random sample of 100 female university students was recruited for this study.

Tools of data collection: Two tools were used to collect the study data; structured interview tool, and VVC structured knowledge assessment interviewing tool.

Results: Findings of the current study revealed that, mean age of the studied sample was 20.18 ± 1.19 years and more than two thirds of them fell in the age class 20-24 years. Regarding the menstruation characteristics among the studied sample, age range at menarche was 11-14 years with a mean \pm SD of 12.30 ± 1.88 years. Concerning the duration of menstruation, it ranged between 2-6 days with a mean of 4.23 ± 1.25 . Mean total score of VVC knowledge of female university student was found to be 18.87 ± 7.83 out of 85, which indicated poor knowledge level.

Conclusion: Female university students had poor knowledge regarding Vulvovaginal Candidiasis and awareness classes or programs may be needed.

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Sleep Quality in Breast Cancer Receiving Radiotherapy

Objective: The aim of this study was to evaluate the sleep quality of patients with breast cancer and relationship with pain, depression and anxiety.

Methods: It was a descriptive study. The participants were 48 breast cancer patients who receiving radiotherapy. The research instruments used included Pittsburgh Sleep Quality Index (PSQI), EORTC Quality of Life Questionnaire-Core 30, Beck Depression Inventory, Beck Anxiety Inventory, Numerical Pain Rating Scale. Data were evaluated by using licensed IBM SPSS 21.0.

Results: For the patients participating in the study, the mean age was 50.41 ± 11.14 year, the mean PUKI score was 4.52 ± 3.97 . Results indicated that no statically significant relation between sociodemographics characteristics (educational status, marital status, occupation, caregiver, chronic disease, symptom) and sleep quality ($p > 0.05$). There were a positive correlation between sleep quality and symptom score, anxiety, depression ($r = 0.448, p = 0.001$; $r = 0.409, p = 0.004$; $r = 0.325, p = 0.024$, respectively) while there were a negative correlation between sleep quality and functional score, global quality of life ($r = -0.483, p = 0.001$; $r = -0.452, p < 0.001$, respectively).

Conclusion: Results indicated that patients with breast cancer receiving radiotherapy was good, considering that sleep quality can be predictor of quality of life.

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Introducing e-Portfolios to Post-Registration Nursing and Allied Health Professionals

In the current technological age, the image of students hauling around unwieldy portfolio documents between University and placements, poses an outdated picture in the world of higher education. The authors aimed to transport their department into the 21st Century, providing their post-registration courses with the kudos they deserve.

A solution was to introduce a robust, user-friendly, electronic portfolio system which is accessible by both students and lecturers, and editable by their supervisors in practice. E-portfolios have been shown to be a suitable method of assessment (Green *et al*, 2014) and offer other major advantages in mobile access and data back-up and retrieval (Garrett *et al*, 2013).

A range of platforms for the e-portfolio were considered by the authors: free e-portfolio systems e.g. Google Sites; a bespoke system to be developed specifically for the University; and existing systems as used by other higher education institutions. A pilot of the system was organized to test the ease of use of the e-portfolio for both students and academic staff.

This presentation will consider the journey so far, illustrating the insight gained and difficulties encountered. It will further assess the potential for pre-registration and post-graduate use of a continuous e-portfolio, to enable career-long assessment and revalidation.

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Generating Social Responsibility in Nursing through a Service-Learning Experience in Chile

Introduction: Service learning has been used as an important strategy, which has been demonstrated as a helpful methodology in education. The nursing training should support the teaching of ethics, the stimulus for social responsibility and values within the curricular activities. This abstract describes a learning service experience in clinical practice developed in a third year nursing course.

Aim: To strengthen social responsibility in nursing undergraduate education.

Method: Qualitative, study case. The methodology of learning service was incorporated within one of the professional courses in the third year, called "Nursing Care in Women and Children II" in clinical practice in pediatric centers for a period of five weeks. All the pediatric centers have ill children with multiple diseases such as surgery problems, cognitive deficiency and physical disabilities. Students worked in groups within pediatric units, and under the supervision of nursing instructors with the goal to develop a project that responds to the needs of particular problems in patients, relatives and communities inside of pediatric centers. After finishing the five weeks some students and nursing supervisors were interviewed on their experiences and learning with writing reports. Then, these reports were analysed using content analysis.

Results: The outcomes were service learning project itself, strengthened both problem solving and reflexive thinking. Students learned to solve problems, using tools such as, brainstorming, communication and searching skills. In addition, making decisions process was developed with reflexive thinking, leadership abilities, and the capabilities of improving management process and care delivery strategies As well as the critical role of nursing in social concerns based on ethical values, outcomes described from students and nursing supervisors.

Conclusions: The development of innovative strategies such as

learning service methodology was useful in order to reinforce social abilities in nursing clinical practice. Social responsibility should be an essential component of undergraduate nursing educational process.

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Critical Thinking in Nursing: Reference Theoretical and Instruments for Your Assessment

Introduction: critical thinking is considered a competence to be acquired or improved during the process of training of nursing students. In this context, we highlight in Brazil the National Curricular Guidelines (DCN's) (1), they determine that education should be critical, reflective and creative. Thus, the central aim is to train professional critical and reflective nurses able to intervene in the existing health realities and which will be inserted in the provision of health care. However, guidelines for achieving this purpose are limited and the lack of clarity and consensus on the development of this standard attitude to think critically and reflective are still a knowledge gap to be exploited. In the international literature, are identified numerous critical thinking settings used interchangeably, such as creative thinking, reflective, clinical reasoning and diagnostic reasoning. Some of the published scientific papers focused on presenting critical thinking as an important skill, but do not have a concrete definition and develop it. Regarding the assessment of critical thinking, some studies have tools to evaluate critical thinking of students and different health professionals, however there are instruments designed for some PC skills over others, giving greater emphasis on logical reasoning and linear thinking. In relation to nursing, studies are still very ignorant, opening spaces for carrying out further studies and testing other instruments yet explored this area of knowledge (2).

This study aimed to make an integrative literature review, looking for scientific evidence available on theoretical foundation and evaluation of critical thinking in teaching and assistance in health. To meet the objective of the research, formulated the following question: what theoretical frameworks used to support studies relating to critical thinking in teaching and assistance in health and what assessment tools used nowadays?

Objectives: To identify the theoretical frameworks and tools for assessing critical thinking (PC) that has grounded studies in health. Method: an integrative literature review, with search of scientific

articles in Portuguese, English and Spanish in the databases LILACS, SCIELO IBECS, MEDLINE / PubMed and Scopus using the descriptors thinking, thinking, teaching and nursing. Published articles were selected from the years 2010 and 2015, identifying 3147 articles and of those, 23 were selected articles.

Results: all analyzed articles described some kind of theoretical framework to sustain the research. The studies were performed following the six steps using a summary table with key information to be collected in scientific production and revealed three relevant categories: theoretical frameworks of critical thinking, application of critical thinking in health and instruments evaluation of critical thinking.

Conclusion: 60% of the studies analyzed have referred Peter Facione on the basis of their research proposals. Eight different instruments were identified for evaluation of the PC being exploited in health. Thus, it was noted the need for further research to understand this phenomenon and its effects on education and assistance in health. It was shown with this integrative review a multitude of definitions used in studies which focus on critical thinking, however, there is a predominance of references to Facione, Scheffer and Rubenfeld, Ennis and Paul, which serve as the basis for construction of research in the field the criticality of thought in various health professions and also education. It is noteworthy that there are many tools for assessing critical thinking, but also in the international literature we see the recurrence of studies using instruments developed by Facione, which may be related to its efficacy and positive results found.

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Factors Affecting Clinical Decision Making Skills of Nurses

Aim: This descriptive study aims to determine factors affecting clinical decision-making skills of nurses.

Material and Method: The research was realized with 225 nurses at internal diseases and surgical units of a state hospital between 4 April and 15 May 2015. After the needed consents were taken, data were collected via a questionnaire form having 19 questions on sociodemographic and working-life features of nurses. Nurses' clinical decision making perception was assessed by Jenkins's (1983) Clinical Decision Making in Nursing Scale (CDMNS). It consists 40 items with 4 subscales: "search for alternatives or options", "canvassing of objectives and values", "evaluation and re-evaluation of consequences", and "search for information and unbiased assimilation of new information". Each subscale has 10 items whereas the score range is from 40 to 200 in the whole scale and 10 and 50 in the subscales with no cutting point. A high score taken from the scale indicates the perception in decision-making is high, vice versa. Percentage, Mann Whitney U test, and Kruskal Wallis test were used for data analysis.

Findings: Of nurses, 88% were female, 68% were married, 41.3% had Bachelor's degree, 94.7% worked as service nurse, 72.9% worked as a nurse for 1 to 5 years, 92% worked as a staff nurse, 48% were satisfied with their current department, 76.9% worked in shifts, and 51.1% defined work-life quality as "good" and job satisfaction as "medium". Median scores for the whole CDMNS and its aforementioned subscales were 134, 34, 34, 32, and 32 respectively.

Conclusion: CDMNS score differed in terms of education level, marital status, years of work at the current department, working status, state of satisfaction with the current department, and job satisfaction level of nurses. In order to promote clinical decision-making skills of nurses, reconstruction of curriculums in the nursing education is suggested.

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Determining the Use of Herbal Medicine among the Hospitalized Patients of the Physical Therapy and Rehabilitation Unit

Aim: This descriptive study aims to determine the use of herbal medicine methods by inpatient patients of a physical therapy and rehabilitation unit.

Material and Method: The research was realized with the participation of 207 patients between 2 March and 1 September 2014. After needed consents were taken, data were collected via a questionnaire form having 37 questions on sociodemographic and clinical features of patients and their use of herbal medicine methods and analyzed by Percentage, Chi-square, and Fisher's exact tests.

Findings: Of study participant patients, 76.8% were female, 98.1% were married, 34.3% were primary school graduate, and 99% had social insurances. It was determined 96.1% of patients were satisfied with the current medical treatment; 33.3% were suggested complementary and alternative treatment methods by relatives; 28.5% thought both medical treatments and complementary and alternative treatment methods were effective; 4.3% found herbal drugs as safe; 91.3% thought there might be possible side effects of herbal drugs when interacted with other drugs; and only 1.4% believed that herbal drugs were more effective than other drugs and utilized some herbs such as linden (52.2%), lemon (48.3%), garlic (17.9%), mint (16.4%), daisy (10.1%), and ginger (9.7%). Use of herbal medicine by patients differed in terms of marital status, social insurance, family structure, satisfaction with the current medical treatment, considering herbal drugs as safe, and considering herbal drugs as safer than other drugs.

Conclusion: In this study, although the majority of patients did not find herbal drugs as safe and thought of probable side effects in case of interaction with other drugs, approximately half of them (48%) utilized herbal drugs during medical treatment. We therefore suggest that use of herbal medicine by patients should be determined and patients should be informed about the advantages and disadvantages of these treatments in an unprejudiced way.

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Shift Huddle: Culture of Safety and Window of Opportunity

Shift huddles are brief meetings conducted on a nursing unit. Typically, they are scheduled at least twice a day at shift change. The purpose of the huddle is to communicate potential safety problems facing patients or the staff.

We focused on two concepts- safety risk factors and after-action review (AAR), to develop the huddle. A review of literature was conducted to identify key components of the process. Additionally, the huddle was designed to focus on safety risk factors from the events that occurred on our adult medical-surgical nursing unit during the previous 6 months. The design was used to identify crucial components of a safety huddle and to create opportunities to reinforce safety initiatives.

The format of the huddle includes the following:

- A. Safety risk factors the staff needs to be aware of for hospitalized adults throughout their shift. These included patients who posed a high fall and/or high injury risk; a score of 3 or above on the Modified Early Warning Score (MEWS) or Systemic Inflammatory Sepsis Response (SIRS) score, patients at risk for skin breakdown with a BRADEN score of 18 or below; patients with a urethral catheter; and patients with central venous access devices (CVADs).
- B. Patient incident/events/near misses and safety issues that occurred on the previous shift.
- C. Good catches.
- D. Physician/staff concerns and staff recognition.
- E. Education/updates on safety initiatives.

Staff members have firmly embraced the process of having 5 to 10 minute huddles. They feel that it had positive impact on patient outcomes and staff satisfaction. Additionally, it has promoted a sense of teamwork that benefits both staff and patients.

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**Creating a Health and Wellness Paradigm in the “OMICS”
Era**

Healthcare systems worldwide are currently in a state of creative disruption and stress. There is a revolution occurring due to extremely rapid technological advances that enable detailed molecular profiling of individuals to achieve more precise diagnoses of disease and to more accurately match therapies to the individual. This is being driven by new and rapidly developing “omic” technologies such as genomics, proteomics, metabolomics, etc. On the other hand, the healthcare system is under increasing strain as health-related spending reaches unsustainable levels due in large part to an aging population. Thus, it is imperative to move from an acute care and treatment of frail elderly paradigm to a health and wellness paradigm that fosters healthy aging. Healthy ageing is the process of optimizing opportunities for health, participation and well being in order to enhance quality of life as people age.

Today, we intervene late, when the patient exhibits symptoms of disease. Under the new paradigm, we may intervene much earlier in the natural cycle of diseases, years before they strike their victims. We must now develop a much more preemptive approach that manages disease over its entire life cycle, from identifying an individual’s susceptibility to a disease, to prevention, early diagnosis, reduction of complications, and smarter therapies. “Omic” technologies are paving the way to make this future a reality and are capable of providing definitive molecular-level, person-specific data while increasingly becoming more accurate, comprehensive, and inexpensive. Examples are genomic analyses to characterize the DNA in our cells, proteomic and metabolomic analyses of molecules in our blood and other biosamples, and microbiomic analyses of the microbes coexisting with our bodies.

This presentation will introduce a discussion of today’s concepts of healthy aging and the impact “omic” sciences will play in making this future a reality.

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Osteosarcoma during Pregnancy - Case Report

In Poland, sarcomas represent about 1% of all cancer diseases. Every year about 800 new cases are diagnosed. Osteosarcoma is the most frequently recognized primary malignant bone tumor.

Osteosarcomas are diagnosed more frequently in children and adolescent males, whereas in pregnant women they are extremely rare. We present a case of a 29-year-old pregnant woman with a highly diverse osteosarcoma. A patient who was in 23rd week of pregnancy was treated with multiple doses of chemotherapy while fetal health was being monitored.

The plan for a therapeutic process included inducing a pregnancy solution at the moment of the fetus reaching maturity, then continuing oncological treatment.

According to the established protocol of treatment in 34 week pregnancy was completed via cesarean section. The woman gave birth to a daughter in good condition. Surgical treatment was conducted after delivery until complete post-pregnancy healing. There was no reduction of dose or quantity of planned and conducted courses of chemotherapy due to pregnancy.

The paper offers an analysis of diagnosis and therapy of pregnant women with osteosarcoma based on own experience and on the basis of a relevant literature.

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The Effects of Preoperative Education on Postoperative Compliance: Dental Surgery Patients

Aim: The aim of this study was to evaluate the effects of preoperative education on postoperative compliance of the patients who underwent dental surgery.

Method: The study was designed as semi-experimental type. The study was performed with 100 patients who underwent dental surgery in Dentistry Research and Application Center in Black Sea Region between April and September 2016. The study was designed in two groups; Group I (n=50) preoperative education and Group II preoperative education with a brochure develop by researchers. Postoperative compliance was evaluated on postoperative 7th day. Preoperative education prepared and implemented by researchers. Data were collected with Personnel Information Form with five questions (age, gender, etc.) and Postoperative Compliance questionnaire with ten questions. The data were analyzed using SPSS software (Statistical Package for the Social Sciences, version 16, SPSS Inc. Chicago, IL, USA). The data were evaluated by using descriptive statistical methods and Chi-square (χ^2). Permission for the study was obtained from the Bulent Ecevit University Clinical Research Committee (Reg. Number: 2016-41-24/02).

Results: The mean age of the patients was 26.03±6.38 (min:20, max:45) and 50% of the patients were men. There were not statistical difference between Group I and Group II according to age group, gender, marital status and employment status ($p>0.05$). Total ten items was evaluated in two groups. There was not statistical significance in six items (using antibiotics regularly, using analgesics regularly, compress after surgery, nutrition, smoking, postoperative spit), but there was statistical significance in four items (postoperative cold application, brushing teeth, gargling, having acidic foods).

Conclusion: According the results of this study, preoperative education with a brochure more effective than preoperative education for dental surgery patients.

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The Effect of Maternal Obesity on Maternal and Neonatal Health

The aim was to investigate the effect of maternal obesity on maternal and neonatal health. The study was made as case-control study between the dates March 2015 – August 2016 in woman after childbirth service of İskenderun State Hospital in Turkey. The woman in testing were separated into two groups as normal weight according to before pregnant body mass index (control group n=144) and obese (case group n= 142) and the study was completed with 286 women in total. Data were collected with Data Collection Form and Edinburgh Postpartum Depression scale. Data collection forms were completed with method face to face meeting with puerperant, some data were completed with taking from patient files and with telephone meeting after 6 weeks later from birth. Complementary statistics were used for data analysis, chi square test and student t-test.

It was determined that the average of obese women is higher than women of control group about age, pregnancy, count of living child and average of obese women is lower than women of control group about education level, average of birthday week ($p<0,05$). It was determined that women of obese group is living process higher rate about pregnancy, early and late term complications after birth according to control group ($p<0,05$). There is no difference between groups about risk of depression after birth the end of 6 weeks ($p>0,05$). Caesarean rate is high for newborns of both groups of women. There is no statistics difference about birth forms, starting breastfeed of newborns in first half hour, concerning complication of new birth ($p>0,05$). It was determined 1 and 5 minutes Apgar score of new birth of obese women are lower ($p<0,05$). As a result, problems of obese women occur at a higher rate according to women with normal kilos in terms of antenatal and postpartum. We advise examination from preconceptional period for women who are expecting a baby, as well as making service training and advising for obese women.

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**Student Nurses' Changing Perceptions of Nursing:
A Two Year Longitudinal Study**

Background: Previous studies have shown that nursing students' perceptions of nursing change over time. Little research has been undertaken in the Netherlands of students entering nursing programmes and of how they progress.

Objectives: The aims of this study were to explore whether nursing students' orientation and attitudes towards nursing changed over time, when these changes occurred, and what factors influenced the changes. We also aimed to identify the factors that prompted them to consider leaving their programmes, and what factors affected their motivation to stay.

Design: A longitudinal quantitative survey design was used.

Participants: Questionnaires were administered to all students enrolled in a Bachelor's of nursing programme at four nursing universities of applied sciences in the Netherlands. The data for this study were collected at four time intervals between September 2011 and June 2013.

Methods: Respondents completed a survey consisting of the Nursing Orientation Tool (NOT), the Nursing Attitude Questionnaire (NAQ) and background characteristics. The continuous variables were non-normally distributed and non-parametric repeated measures tests were therefore used to test students' changing orientation and attitudes towards nursing. A Friedman test was used to test changes in scores on the NOT and the NAQ over time, followed up by post-hoc Wilcoxon Signed Rank Tests to test when significant differences in orientation

and attitudes occurred.

Results: At T0 (September 2011), a total of 1244 completed questionnaires were returned. Of these initial 1244 students, 123 completed the survey each time, and this group was used for the further analyses. The results showed an improvement in the students' orientation and attitudes towards knowledge, skills and the professional roles of nurses, while empathic behavior decreased over time. Although the changes showed non-linear patterns over time, the results showed clear effects between the different time points. The reasons for attrition proved to be related both to problems with the educational programme and to personal problems. An important motivator for students to stay in the course was their passionate desire to become nurses, suggesting that the positive aspects of a nursing career dominated the problems they encountered.

Conclusions: Tutors and preceptors should pay more attention to the individual perceptions and problems of first and second-year students, both in the classroom and during clinical placements. Knowledge of the students' perceptions from the very beginning could be vital to study success.

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From Established to Emerging Research Trends in Health Information Technology for Nurses

Background & aims: Health information technology, such as electronic health records and clinical decision support systems, are being adopted and implemented internationally. These systems play an increasingly important role in nursing, providing nurses with advanced electronic tools for better patient care. Along with the increasing focus on creating and implementing health information technology for nurses came the emergence of the interdisciplinary field of nursing informatics. However, little is currently known about the state of nursing informatics and the cutting edge research trends in this field. Our goal is to therefore summarize and describe the latest research trends in nursing informatics as presented at one of the central nursing informatics conferences internationally.

Methods: We summarized the major research trends in nursing informatics as captured in the proceedings of the 13th International Congress in Nursing Informatics (held in Geneva, Switzerland, June 2016). We extracted and standardized the keywords assigned to all the congress presentations and conducted a frequency analysis to identify the most common trends.

Results: We extracted 1,525 keywords assigned to 393 abstracts (podium and poster presentations and papers) presented at the congress. After standardizing the terms, we identified 14 research themes assigned to ten or more abstracts. The most common themes included mobile health (16% of all abstracts); education (15.5%); electronic health records (13.5%); standardized terminologies (9.7%); and system design (7.9%). Some of the emergent trends included data/text mining (3.6%); and big data (2.5%).

Discussion & conclusions: Our findings indicate that while several traditional themes in nursing informatics research prevail (e.g., education or standardized terminologies), new trends are emerging, compared to the literature from the previous years (e.g., big data and text/data mining). Our results can inform future health informatics educational curricula or development of the next generation of health information technology systems for nurses.

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Autonomy Levels and Professional Attitudes of Nurse Educators

Introduction: Autonomy and professionalism are the essential components of one's professional status. Developed professional values are very important in nursing education. Nurse educators play a very important and critical role in maintaining scientific development and providing high quality education in nursing.

Objective: The objective of this study is to determine autonomy levels and professional attitudes of nurse educators.

Material-Method: The study population consists of 2009 educators, 856 of whom were senior lecturers, 475 of whom were lecturers and 678 of whom were research fellows who all work in nursing education institutions at bachelor's degree level. With the effect size of 0.3 and 99% power and 0.05 margin of error, the study sample consists of 486 people, 172 of whom were senior lecturers, 103 of whom were lecturers and 211 of whom were research fellows. Geographical distribution was taken into consideration to ensure that the study sample represents the entire country. 24 schools in 7 geographical regions were randomly selected. The Individual Identification Form, the autonomy sub-dimension of the Sociotropy-Autonomy Scale and Healthcare Professional Attitude Inventory were used to collect data in this study. Approval was obtained from the Scientific Ethics Committee of a university and written consents were obtained from the schools and educators included in the study.

Findings: The mean age of the educators included in the study was 35.4 ± 8.39 and 94.2% of the educators were female. 35.5 % of the educators were senior lecturers, 21.2% were lecturers, and 43.4 % were research fellows and the mean years they worked in the profession was 13.02 ± 8.93 , and the mean years worked as an educator was 9.60 ± 7.81 . The mean score for autonomy was 80.04 ± 15.69 and the mean score in the Healthcare Professional Attitude Inventory was 146 ± 10.59 . The

mean score for autonomy was the highest among full professors, and the mean score for the healthcare professional attitude inventory was the highest in associate professors and the mean scores for both scales were the lowest in research fellows. A positive low-level correlation was found between the age, the number of years in the profession, mean number of years as an educator and the mean score in the Healthcare Professional Attitude Inventory.

Conclusion: Based on the study findings; the authors concluded that autonomy levels of nurse educators were higher than the average and their professionalism was at a high level and there was a positive correlation between the two scales and with the increasing professional experience, professional attitude also improves.

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Nurses' Well-Being as a Quality Indicator for Improved Care

Background: Within a hospital, the main task of executive nurses is to manage their team and to organize associated processes as to provide high quality care to patients. Appropriate communication skills are, as such, a key success factor. Efficient communication ensures higher job satisfaction resulting in lower turnover intention and decreased burnout.

Aim: This study aimed to explore the relationship between communication satisfaction and job satisfaction and the impact on burnout and turnover intention among a cohort of executive nurses.

Method: In a multicentre study in three hospitals, data were collected on communication satisfaction and job satisfaction in a large sample of nurses (n = 1455). Data included (1) the Communication Satisfaction Questionnaire (Downs & Hazen, 1977) (translated in Dutch and subsequently validated and pilot tested), (2) the scale 'Turnover intention' of the Questionnaire on the Experience and Evaluation of Labour and (Van Veldhoven & Meijman, 1994), (3) the Maslach Burnout Inventory (Maslach et al., 1996). Job satisfaction was measured by means of a visual analogue scale. Within this large sample, executive nurses were selected and compared to nursing staff in general.

Results: Within the three participating hospitals, respectively 106 executive nurses and 1349 ward nurses completed the questionnaire; 68.9% (73/106) of the respondents are female. The executive nurses have an average age of 48 years. Their mean work experience is 26.0 years. The vast majority works on a fulltime basis (94.3%, 100/106). An average job satisfaction level of 7.59/10 was found. Only one person had a score ≤ 5 on job satisfaction (0.95%, 1/106). Concerning communication satisfaction, executives were found most satisfied with the trust received from their supervisor (90.6%) and least with their communication overload (45.3%). 57.5% (61/104) has a low, 36.8% (39/104) an average and only 3.8% (4/104) a high turnover intention. None of the respondents had a burnout profile. 12.3% (13/104) has a high emotional exhaustion, 11.3% (12/104) a high depersonalization and 12.3% (13/104) a low personal accomplishment. These data were comparable with ward nurses and are summarized in the following tables.

	Executive nurses	Ward Nurses
Average job satisfaction	7.59/10	7.49/10
Trust received from their supervisor	90.6%	81.8%
Communication overload	45.3%	-

TURNOVER INTENTION	Executive nurses	Ward Nurses
LOW	57.5%	59.9%
AVERAGE	36.8%	33.3%
HIGH	3.8%	6.9%

BURNOUT INDICATIVE FOR BURNOUT	Executive nurses	Ward Nurses
INDICATIVE FOR BURNOUT	0%	2.9%
High emotional exhaustion	12.3%	12.4%
High depersonalization	11.3%	10.7%
Low personal accomplishment	12.3%	21.9%

Conclusion: Levels of job satisfaction among executive nurses are comparable to those among ward nurses. Burnout indication and turnover intention are low. Nevertheless, there is room for improvement with regard to communication satisfaction as nurse executives experience considerable communication overload. This can be a particular focus for management in order to increase job satisfaction and to decrease the incidence of burnout and turnover intention among key collaborators within the organization.

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The Relationship between the Support Needs and Pain-Fatigue Levels of Women Undergoing Postpartum

Objective: The research was carried out to determine the relationship between the support needs and pain-fatigue levels of women that experience postpartum.

Method: The research was performed as a cross-sectional study on 302 women that underwent postpartum after normal and cesarean delivery in a state hospital of Central Anatolia Region of Turkey between January-June 2016. Personal Information Form, Visual Analogue Scale (VAS), Visual Analogue Fatigue Scale (VAS-F) and Postpartum Support Questionnaire (PSQ) were used for data collection. The gathered data were evaluated with t-test, ANOVA and Pearson Correlation analysis with a $p < 0.05$ significance level.

Results: Participating women's VAS was found as 3.50 ± 1.89 , fatigue sub-scale was found as 50.91 ± 22.55 , energy sub-scale was found as 21.89 ± 10.30 , importance of need was found as 124.25 ± 45.03 , and the mean score for the received support was found as 83.88 ± 46.27 .

A statistically significant positive correlation was determined between VAS and importance of need ($r = 0.212$; $p = 0.000$) scores; and between VAS and received support ($r = 0.137$; $p = 0.017$) scores. A statistically significant negative correlation was found between the energy sub-scale (among fatigue sub-dimensions) and importance of need score ($r = -0.213$; $p = 0.000$); and between the energy and received support ($r = -0.154$; $p = 0.007$) scores, whereas no significant relationship was found between the fatigue sub-scale, and importance of need and received support scores ($p > 0.05$).

Conclusion: Pain, fatigue and energy levels of participating women were determined to be lower than moderate, and they were found to have received no postpartum support. They nonetheless seemed to take no notice of their needs. However, high pain and low energy levels of women increase the importance of support need and necessitate higher levels of received support.

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My Emotions & My Patients' Care: Effect of Nurses' Emotions on Nurses' Caregiving Roles in Surgical Wards

Aim: Nursing is a profession that aims to help the patients, identify and meet the care needs of them. Both patients and nurses have emotions and emotions are effective on behaviors of the people and affect the tasks performed cognitively. When viewed from this respect, it is considered that surgical settings can be emotional intensity units. The study aims to determine effect of the emotions of the nurses who had been working in surgical units on their caregiving roles.

Methods: This descriptive and correlational study was conducted with 74 nurses who were working in Trakya University Health Center for Medical Research and Practice, Surgical Units and volunteered to participate in the study. Data were collected by data collection form, Attitude Scale for Nurses in Caregiving Roles and Need for Affect Scale. Frequency, percentage, mean, standard deviation and correlation analysis were used for data assessment.

Results: In this study, it was found that mean age of the nurses was 31.91 ± 6.01 , mean of professional experience was 10.48 ± 6.31 and mean of the weekly working time was 46.58 ± 6.58 . In their clinic, 54.2% of the nurses reported that they were faced with emotionally distressing situations and most of the emotionally distressing situations were deaths in painful conditions and at a young time. A statistically significant relationship was found between nurses' motivation to approaching emotion-inducing situations and their caregiving roles.

Conclusion: This study demonstrated that the attitudes for caregiving roles of the surgical nurses were at a good level and nurses' motivation to approaching emotion-inducing situations had positive effects on these attitudes. Nurses should be aware of the patients' and their own emotions, and improve themselves in terms of recognizing and understanding emotions of the patients. Further research examining relation of nurses' and patients' emotions should be performed in other clinical areas and specific units.

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Investigation of Intensive Care Nurses' Knowledge and Attitudes Regarding Closed Suctioning System

Objective: This study is planned to examine intensive care nurses' knowledge and attitudes regarding the closed suctioning system (CSS).

Methods: The sample of this descriptive and cross-sectional study includes 147 nurses (%79.4) who work in anesthesia and internal medicine intensive care units of two university hospitals and two training research hospitals in the city of İzmir, Turkey. The research took place between September 1 and December 30, in 2016. The research data were collected via an identifier form and the questionnaire of intensive care nurses' knowledge and attitudes regarding closed suctioning system. Descriptive statistics, Mann-Whitney U and *t* test were used in evaluating the data.

Results: The median age of nurses' is 29.31 ± 4.84 , their working time in the intensive care units is 4.96 ± 4.06 and 82.3% of them are female with the 79.6% of a graduate degree in nursing. It was determined that 65.3% of the nurses have not received an in service training regarding CSS and %82.7 of them want an education on it. The nurses' median scores of knowledge, regarding CSS, is 7.07 ± 2.42 (0-20 points) and it was stated that there was no statistically significant difference between their median knowledge scores and the institution where the nurses worked, gender, education level, receiving in-service training and their desire of an education ($p > 0.05$). The 69.4% of nurses stated that the usage of CSS' catheters was easy, while 58.5% of them claims that the duration of suctioning was shorter. While % 47.6 of nurses state that when dense secretion occurs, and %57.8 of them indicate that if the catheter does not suction secretions of the system sufficiently they change catheter before the expiration date; on the other hand %58.8 of them points out that the catheter is sufficient to suction secretions.

Conclusions: It can be said that, regarding closed suctioning system, the median knowledge scores of the nurses, who work in the intensive care units of the hospitals under the scope of this research, is low but their attitudes towards the usage of closed suctioning system is

positive. According to our findings, for improving the knowledge of nurses regarding closed suctioning system the periodic in service training can be implemented, and the use of this method in intensive care units can be promoted.