



Families Expecting and Living with a Baby: a Perspective on Parental Worries

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Accepted: 17 February 2022 / Published online: 30 March 2022
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Abstract

The aim is to describe parents' worries about their family's life situation during pregnancy and when their children are very young. The aim is to form a better understanding of parental worries for being able to better help them in child and family services. Previous research indicates that parental worries and concerns are not always addressed. Data consisted of parents' open answers ($N = 98$) to questionnaires carried out at two time points: during pregnancy and the early childhood of the family's children. The data were analyzed by inductive content analysis. The results show that families had six different types of worries. The parents described worries concerning health, parental challenges, relationships, sufficiency of resources, standard of living, and difficulties in obtaining support. Challenges related to family life or parenthood could emerge suddenly or develop slowly and cumulate. Either kinds of challenges were often difficult to solve without outside assistance. Identifying and intervening in parental worries sufficiently early is crucial and effective. It is difficult for the professionals who work with families to form a comprehensive perception of children's and family's life situation without systematic evaluation and discussions on parental worries.

What is already known about the research topic?

- While the nurses employed by child welfare clinics aim to discuss family issues such as relationships and raising children, this is not always done systematically.
- Many different assessment questionnaires are used in family services for children, but there is a lack of a systematic review on the topic.
- Too often, the life situation of a family with children is only addressed when the family's situation has already seriously declined.

What new information does the research produce?

- The worries of families with children are very diverse and parents are interested in discussing them.
- In the absence of other support networks, parents wish that time is reserved for discussing their worries at the child welfare clinic.
- There is a particular need for support in families with worries concerning a parent's mental health, conflicts in their relationship, or responsibilities unevenly distributed among the other parents.

How can the results be utilized in nursing practice, training and / or research development?

- Parental worries should be systematically investigated.
- The support needs of families are diverse and it is key to chart them separately for each family.
- Services should be developed to better take the needs of families into account and use e.g. these results on parental worries for developing interventions like dialog for helping parents.

Extended author information available on the last page of the article

Keywords Family with children · Worries · Parenting · Family relationships · Sufficiency of resources · Standard of living · Getting support

Introduction

In the everyday life in Finnish society, and also internationally, inequality and polarization of families has increased (Moisio, 2010, Nelson et al., 2020). While many families with children are doing well, the daily lives of many other families with children are affected by worries, which may escalate without proper support. Therefore, in examining the worries of families with children, attention should also be paid to manifold worries parents may have concerning the families' everyday life. These should be addressed before they escalate into complex problems. For example, the cycle of social exclusion may start very early in life, originating from seemingly "minor" problems. In addition, increasing attention has been recently paid to the intergenerational transition of worries and risky conditions (Hughes et al., 2017).

Background

Focusing support measures on the worries and challenges occurring during early childhood has been found more effective than intervening in problems identified later, although this view has also been criticized (Rea & Burton, 2020). Studies by Ellonen et al. (2017, 2019) and Lepistö et al. (2016, 2017) on the worries and risky conditions affecting families with children found that both of these can be identified through systematic assessment and discussions with the family. Worries brought up by parents include loneliness (20% of respondents), anxiety (20%), inflexible parenting practices (21%) or family quarrels (17%). Many parents have reported experiencing several of these, allowing us to talk about risk conditions (Milner & Crouch, 2017). The key is to systematically address worries and possible risk conditions together with parents and then provide the family with support as needed (Lepistö et al., 2017). According to our thinking, parents have many kinds of worries which can be less or more serious while looking from outside the family. They can start as minor and escalate over time if they are not addressed, within the family itself, or together with professionals where the family visits. It would be really important to be able to address the worries while those are in a minor stage. All kinds of worries are important to families themselves but some may be easier to solve or make changes. Crucial is to identify the worries as early as possible.

The factors resulting in exclusion and disparity in well-being often occur at very early stages of a person's life (Paananen & Gissler, 2014). The origins of the spiral of social exclusion have been charted in previous research, such as the extensive National Birth Cohort 1987 study, whose results strongly support an idea that deprivation tends to be passed down from one generation to the next unless adequate support measures are targeted correctly at a very early life stage (Kestilä et al., 2012; Kataja et al., 2014). There is a wealth of international research on the phenomenon of ACEs (Adverse Childhood Experiences), which refers to the existence of potentially harmful events and the development of risk conditions in childhood (Hughes et al., 2017, Nelson et al., 2020). One of the most common of these is violence towards children in its various forms. The more negative events occur in a child's life, the more likely it is that negative development, risk conditions, and intergenerational disadvantage will

arise later on in his or her life. Previous research (MacMillan et al., 2005; Edgcombe & Ploeger, 2006; Shields et al., 2007) suggests that early support can influence families' daily lives and provide them with ways to cope with difficult family situations and prevent maltreatment. The earlier the worries a family or parents have are addressed and relevant help provided, the easier it is to intervene in risk conditions and improving the family's everyday life.

In many countries, such as Finland, public health nurses have a key role in working with families during pregnancy and while living with the child. Families visit certain public health nurses on a regular basis and the services are free of charge. Therefore, in their professional capacity, public health nurses are able to provide new child protection tools for all families. In Finland, national guidelines have been developed for professionals trying to identify child maltreatment (Paavilainen & Flinck, 2013). In addition, public health nurses' knowledge and skills of identification have been surveyed (Paavilainen et al., 2014a, Suzuki et al., 2017). According to the results of these surveys, although they identify child maltreatment quite well, systematic tools for risk assessment in the general population are needed. Hitherto, these tools included such things as intuition and tradition, nurses' risk assessment skills, and long cumbersome home visiting programs (e.g., Olds, 2002, Mikton & Butchart, 2009), which demand tremendous resources. In addition, the tools for evaluating the concerns or empathy of parents (Rodriguez, 2013, Staal et al., 2013) raising older children have also been developed. Most of the risk assessment tools have been used and evaluated with families with some already known problem or diagnosis, such as depression or substance abuse (Lefever et al., 2008, Staal et al., 2013). There is a clear need to make research on ordinary family services provided to all, and to identify families' minor worries before they become difficult.

Nearly all expecting parents and families with children are covered by free maternity and child welfare services in Finland. As a result, the clinics play a key role in identifying parental worries and needs for early support as well as contribute to providing the required support (Perälä et al., 2014). While families are generally satisfied with these services (Klemetti et al., 2018), they have also presented development needs for the clinics and their services (Flinck et al., 2019). For a long time, reducing inequalities in well-being and health has been a key goal of social and health care, also globally. A key challenge in developing services involves using research-based evidence. There is need for taking the perspective of parents' experiences into account more often to obtain feedback from those who use the services.

The Aim of Research and Research Question

The aim of this study is to describe worries related to the life situation of families expecting and living with a baby. Knowledge about the topic needed for understanding the families' situation better and for developing the services for families with children to better answer their needs.

Research question:

1. What kinds of worries parents have regarding their family situation?

Materials and Methods

The Sample

The data used in this study were collected from Finnish parents expecting a baby at the 30th week of pregnancy and the same families when their baby was ten months old. The research project received a positive statement from the Ethics Committee (R11198H). In addition, the research project was granted a research permit by each participating organization. The data were collected from two regions in Western Finland. One of the regions was mainly urban, and the other more rural. The research questionnaires were distributed to families by the maternity and child welfare clinic nurses. The child's mother and other parent filled out separate questionnaire forms. In this study, the term "other parent" refers to the child's father, the mother's male spouse, or the mother's same-sex parent and term "unmarried" means single or divorced mother. The respondents filled out the questionnaire after an appointment at the clinic or at home and returned it to the nurse in a sealed envelope. The nurses provided the questionnaires to the researchers. The questionnaires were coded to enable the researcher to join the responses belonging to the same family at the first and second stages. In the first phase, 763 of the 1,200 questionnaires submitted to the clinics were distributed to the families. Of the families, 395 responded to the survey, making the response rate 52%. The second phase 121 families answered, but after the validity review, only 106 family responses ended up in the data (Table 1).

The Data of This Study

In this study, the research data comprise the responses to an open-ended question, in which parents were asked to write down any worries or concerns regarding their current family situation ("Finally, you may want to write down your thoughts that worry or reflect on you in your current family situation"). In total, there were 109 open responses, but some responses had to be deleted because they did not answer the research question. The final research material consisted of 98 responses.

Data Analysis

Open-ended responses were analyzed using inductive content analysis. The analysis was started by reading through the responses several times to form a comprehensive picture of the worries experienced by the families. Expressions describing the research question and the studied phenomenon were identified from the text (Elo & Kyngäs, 2008; Kylmä & Juvakka, 2012). Inductive content analysis was carried out in this study according to the steps presented by Kylmä and Juvakka (2012): first reducing and then grouping expressions to eventually form abstracted categories from the groups. Based on the original expressions, reductions corresponding to the research question were formed by allowing meaning to take shape in the material regarding the phenomenon under investigation. (Elo & Kyngäs, 2008; Kylmä & Juvakka, 2012). Substantially similar reduced expressions were grouped together. After combining the reduced terms, the categories were given names that described all the reductions they included (Elo & Kyngäs, 2008; Kylmä & Juvakka, 2012). The classification process was continued until the analysis consisted of 18 subclasses and 6 upper classes (Fig. 1).

Table 1 Background information of respondents $N = 106$.

	Frequencies	
	n	%
Background factors		
Mother's age in years		
25 and younger	13	12.7
26–30	42	41.2
31–35	27	26.5
36 and older	20	19.6
Age of other parent		
25 and younger	7	8.3
26–30	29	34.5
31–35	31	36.9
36 and older	17	20.2
Mother's marital status		
Marriage	73	70.2
Cohabitation	29	27.9
Unmarried	2	1.9
Marital status of other parent		
Marriage	61	72.6
Cohabitation	23	27.4
Duration of mother's relationship		
Less than 5 years	19	19.0
5–10 years	38	38.0
Over 10 years	43	43.0
Duration of the other parent's relationship		
Less than 5 years	12	13.8
5–10 years	36	41.4
Over 10 years	39	44.8
Number of mother's children		
One child	44	43.1
Two or more children	58	56.9
Number of children of the other parent		
One child	36	40.9
Two or more children	52	59.1
Mother's level of education		
Primary school or 2nd grade education	50	49.0
University or college	52	51.0
The other parent's level of education		
Primary school or 2nd grade education	62	70.5
University or college	26	29.5
Mother's employment status		
Employed or studying	29	28.4
On parental leave	62	60.8
Unemployed or other	11	10.8
The other parent's employment status		
Employed or studying	69	82.1
On parental leave	7	8.3
Unemployed or other	8	9.5

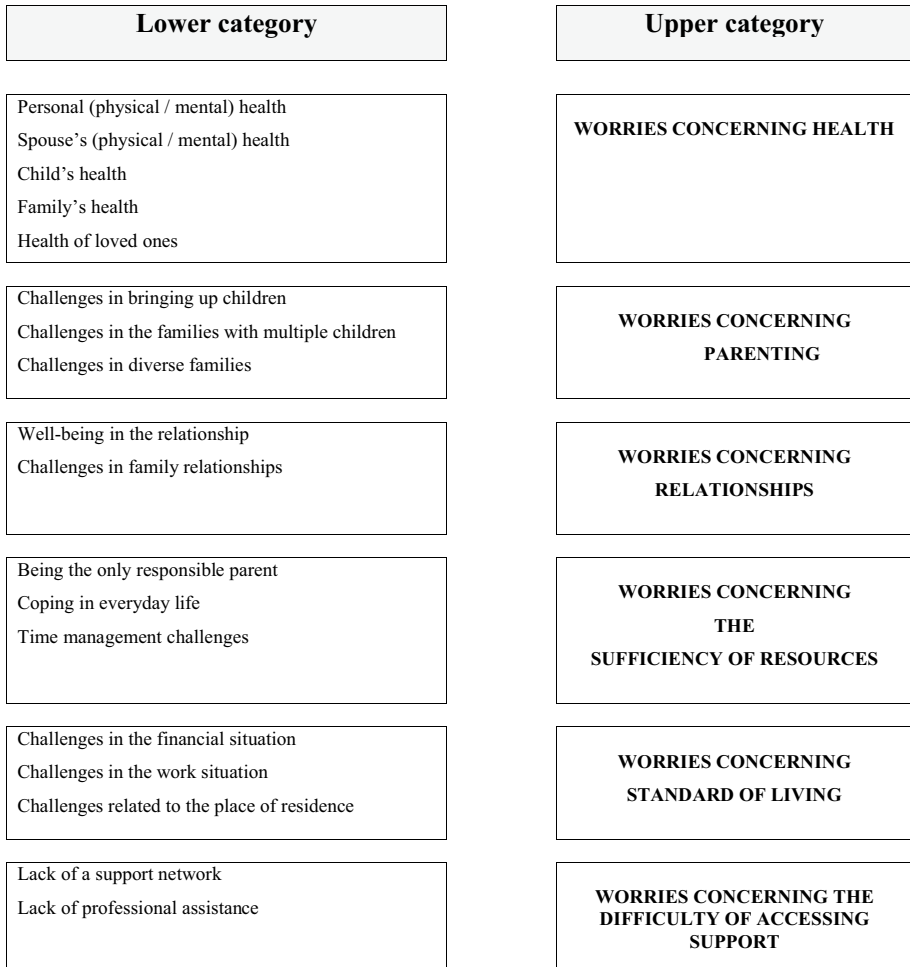


Fig. 1 Worries concerning family situation according to parents

Results

Background Factors of Respondents

The majority of respondents were aged between 26 and 35 (Table 1). The majority of parents were married, and more than half of the mothers and other parents had more than one child. Around 40% had been in their current relationship for more than ten years and less than one fifth had been in their relationship for less than five years. The educational background of mothers was very evenly distributed, but less than a third of the other parents had a university or college degree. The majority of mothers were on parental leave when the child was ten months old. By contrast, the majority of the other parents were students or employed.

Worries Concerning the Family Situation

Worries Concerning Health

The respondents' worries concerning health emerged as worries concerning their own or their spouse's physical or mental health, worries about the child's health, and worries about the health of one's own family or other loved ones. Parents' worries about their own physical health included worries regarding their own health, worries about how their illness affects their everyday life, and worries about their nutrition and sleep. The parents' worries about their mental health were concerned with low mood or depression. Some respondents were also concerned that their low mood was putting a strain on their family.

Parents also expressed worries about their spouse's health. The worries about the spouse's physical health concerned the spouse's alcohol use and tobacco smoking. In addition, the parents expressed worries about how the mother will be able to cope with childbirth. There were also worries about the spouse's mental health, which appeared as worries about the spouse's sadness, worries irritability, and depression.

"Psychosis brought on by insomnia and excessive strain when the youngest child is 10 months old." (H60)

"I'm worried about my husband's fits of rage and a continuous tense atmosphere." (H88)

The parents were also worried about their child's health, which appeared as concerns about the health of the unborn child and that the child will inherit some genetic disease. Respondents were also worried about their child's health and feared exposing their child to health hazards. Parents whose child had an illness were worried about the impact of the child's illness on their everyday life and on the child's well-being. The parents were also worried about the health of their own family members and other loved ones. The worries concerning the health of family members appeared as worries whether all family members would stay healthy and worries about how an illness would affect their everyday life. The worries about the health of loved ones emerged as concerned the alcohol consumption of a loved one, worries related to the mental health of a loved one, and general worries related to the health of a loved one.

"Our child was born prematurely and there is obviously a worry of whether he will stay healthy." (H7)

"... As an only child, my situation burdened by my depressed and panic-stricken mother who drinks beer nearly every day." (H103)

Worries Concerning Parenting

The respondents' worries related to parenting appeared as challenges concerning bringing up the child, challenges emerging in families with many children, and challenges emerging in a diverse family. The challenges related to upbringing included worries about parenting principles, the worries that the child will be excessively demanding as well as changes brought by the birth of a baby. Worries emerging in the responses of families with many children liked challenges included challenges emerging in handling day-to-day life with more children, an ability to take into account any worries of the baby's older siblings, and siblings' attitudes towards caring for the baby. By contrast, the worries identified by

respondents representing diverse families included challenges faced by an LGBTI family, a multicultural family, or a reconstituted family.

“Sometimes I wonder if I have enough strength to raise a child.” (H15)

“I also consider whether I will have enough time to take the older children into account when the baby is still an infant.” (H69)

“What worries me is that our family type will not be considered as ‘real’ as a heterosexual family.” (H28)

Worries Concerning Relationships

The parents’ worries concerning their relationships were expressed as worries about the well-being of their relationship and worries related to challenges in the family relationships. The respondents expressed concerns related to the well-being of their relationship in cases where they felt the relationship was strained or there were conflicts or a lack of trust in the relationship. Worries were also expressed regarding a lack of sexual relations. In turn, challenges observed regarding family relationships were concerned with worries about a broken family, conflicts with a former spouse, and conflicts with relatives.

“We didn’t quarrel at all before the baby was born, but these days we have a fight about once a week.” (H107)

“I was divorced 4 years ago, and I still can’t get along with my ex-husband.” (H106)

Worries Concerning the Sufficiency of Resources

Worries about the sufficiency of resources emerged as worries about being the only responsible parent, coping in everyday life, and challenges related to time management. Being the only parent responsible for the child included having the sole responsibility for family matters, coping with the child alone, coping with housework alone, and feeling lonely as a parent. Coping in everyday life included worries related to the respondents’ own or their spouse’s coping, and worries related to feelings of anxiety and tiredness, and running daily life and making excessive demands to themselves. Worries related to time management concerned the sufficiency of time available for the parents, fulfilling their wishes and dreams, reconciling work and family life, equal distribution of childcare, and worries about whether there was enough relationship time.

“The situation of our family is such that I take care of everything alone, housework, bills, childcare, etc.” (H1)

“The daily routines of a family with children, of course, take energy.” (H78)

“Returning to work. Both parents work in shifts, spending time together, not sure whether there is enough time off work for children, family, spending time together, relationship.” (H85)

Worries Concerning Standard of Living

Worries related to standard of living appeared as challenges in the family’s financial situation, challenges in the work situation, and challenges concerning the family’s residence. The challenges related to the financial situation emerged as worries about the family’s subsistence, worries about the adequacy of financial support, worries about the ability to provide for the family, worries about the spouse’s money consumption, and worries about major purchases.

The challenges related to the work situation appeared as worries about respondents' own or their spouse's employment, the lack of a permanent job, and worries about the general labor market situation. Challenges related to the family's place of residence appeared as discomfort and uncertainty in the current housing conditions.

"I myself would like to be at home with the children, but in a tight spot, I will have to return to work." (H55)

"Sometimes it worries me how I will be able to get a job after spending time at home with the children." (H105)

"My apartment is cramped, and I don't consider it my home." (H25).

Worries Concerning the Difficulty of Accessing Support

Worries about the difficulty of accessing support emerged as concerns about the lack of a support network or professional assistance. The challenges in the lack of a support network included worries related to the lack of help in childcare for those with no support network to help them in their day-to-day lives and also worries regarding the unavailability of grandparents in situations in which the baby's grandparents were not interested in helping the family with their everyday lives. The lack of professional help meant that parents had difficulty accessing help and reducing the need for help. Families who had difficulties accessing assistance had not been able to apply for professional assistance. On the other hand, some families who had applied for help had also encountered professionals underestimating their problems.

"It's upsetting for my husband that his parents show no interest in the unborn baby." (H10)

"I just wonder why you don't get any help at the clinic; they just laugh there!" (H104)

Discussion

Review of Results

In order to support the well-being of families with children, it is important to look at what factors burden the daily lives of families. The worries raised by families in this study concern issues for which families commonly need support. Supporting families with their needs, enables creating a sense of security in the families' everyday realities. Families with children were worried about their health, parenting, interpersonal relationships, adequacy of resources, standard of living, and difficulty in accessing support. Similar results have been presented in the Children's Health, Welfare and Services study, in which parents expressed a need for more support in coping and meeting their baby's needs. They also highlighted health problems resulting from worries and depression. More than half of the families in the study were also affected by financial worries. (Klemetti et al., 2018). According to Perälä et al. (2011), the most significant parental worries include children's physical health, the parents' personal coping, the adequacy of time spent with the child, parenting skills and the parent's ability to act in conflict situations. Families have also described worries concerning problems in their relationship as well as financial problems and unemployment. (Perälä et al., 2011.)

Based on estimates, 126,000 children living in Finland live in child poverty. Parents who struggle with their family's livelihood have more problems than other parents in their

relationship, and experience more worries concerning their parenting as well as their child's health, their lifestyle, emotional life, social relationships, and learning (Salmi et al., 2016). For a child, poverty can manifest as a variety of social consequences. The family's financial difficulties have been found to cause experiences of inequality and incompetence in children in relation with their peers. (Hakovirta & Rantalaiho, 2012, Nelson et al., 2020) The impact of financial worries in families with children should be assessed not only from the perspective of the child's current life but also the child's future prospects. As child poverty poses complex challenges to the well-being of children and their families, efforts should be taken to address the issues to ensure that policymaking can better identify the needs for support in families.

The worries and support needs of families are diverse, and each family's situation should be charted individually. In a systematic literature review by Tanninen et al. (2014), various interventions targeted in an early stage have been found to be effective in supporting parenting and relationships, as well as in supporting well-being, social networks, and socioeconomic status. The same themes also emerged in the data of the present study as family-related worries described by parents. Parents have also been found to be committed to working on their worries when they feel involved in their personal affairs. (Rantanen & Paavilainen, 2019.) The early identification of the worries families have and intervening in them is key and effective (Halme & Perälä, 2014; Paavilainen & Flinck, 2015, Nelson et al., 2020).

In this study, parents' worries about the adequacy of resources manifested as worries about coping in everyday life and time management. The challenges in the work situation included worries described by the parents examined in our study. According to the report by Salmi and Lammi-Taskula (2014), employment is a factor that increases well-being, but the demanding nature of work has been found to increase parents' workload. Common challenges include a lack of time with family due to work, a feeling of neglecting things at home, worrying about coping as a parent, and challenger related to sharing housework. As many as 40% of mothers and fathers worry about their coping. This is associated with exhaustion and depression, and an increase in feelings of anxiety. (Salmi & Lammi-Taskula, 2014).

The parents examined in this study raised concerns related to the difficulty of obtaining support in the absence of familiar support systems connections and professional assistance. Based on previous research data, it is known that the quality of the interaction between families and health care professionals has been perceived as particularly important for the implementation of support (Häggman-Laitila, 2005; Paton et al., 2013; Rautio, 2013). Family-based support and resource-centered partnerships support families with children at an early stage and prevent problems from growing, and also help families identify their support needs. Bekaert et al. (2021) concludes that regular, open and transparent communication facilitates trust which is the foundation for partnership, and this in turn, facilitates positive outcomes for the family. Many of the parents examined in this study were pleased with the open, encouraging support, peer activities, and advice they had received related to their everyday lives. Some appreciated the compassion and empathy shown by professionals. Listening to the family's story and finding a new perspective with the family was considered valuable. (Also Bekaert et al., 2021) This support should be implemented systematically and in a timely manner, especially in primary services for families with children, for example at counseling centers and child welfare clinics (Milner & Crouch, 2017). A systematic, realistic and sufficiently concrete discussion of the worries, raised by the family is an important form of support in itself. This can proceed as dialog during which both parents and professionals can openly discuss on the issue.

Previous research has shown that the support received from a counseling center does not always meet the families' needs for special support (Laitinen et al., 2013; Lepistö et al., 2016). Everyday challenges in family life and parenting can suddenly become overwhelming or slowly accumulate into a vague tangle of worries that are difficult to solve without outside support. From a child's perspective, parents' difficult life situations, such as social exclusion, unemployment, interpersonal problems, intoxicants or domestic violence, or parental worries such as loneliness, poverty and anxiety, or worrying activities such as educational violence, are often detrimental to the child. (Paavilainen & Flinck, 2015; Flinck & Paavilainen, 2016.) In the research data examined in this study, families in need of special support for their own or their spouse's mental health were worried about conflicts in their relationship, or one of the parents was solely responsible for taking care of the children. Counseling needs to be based on insight into the real daily lives of families, which makes it important to chart the worries expressed by families. A lack of understanding of the worries families have among professionals may leave families with an experience that they are not valued or are treated in a degrading way, or that the family's need for help is downplayed or underestimated (Vuori, 2012). If families do not feel genuinely encountered at the clinic, it is also more difficult for them to bring up difficult issues.

Reliability and Ethical Aspects of the Study

The relatively small data size ($n=98$) can be considered as a factor undermining the reliability of this study. Despite the paucity of findings, it is necessary to describe these families, as it highlights the challenges that families with children face, which should be intervened into prevent abuse. The parents expressed a wide range of worries in this rather small data set, which indicates both the richness of the material and a desire among the parents to express their worries. It can also be said that although the material was collected from parents in the period 2012–2013, the worries they expressed are still very topical (Flinck et al., 2019). The worries of families are still not addressed systematically and in good time, as can be seen from the fairly new research on the subject presented in this article. Worries are a quite sensitive research topic. However, it is really important to find out early signs of them from parents, expressing needs for support of families. Parents have a right to express their own perspectives as the basis for collaboration with professionals (TENK, 2012, Paavilainen et al., 2014b).

Conclusions

Parents are entitled to receiving adequate support for their childcare and upbringing duties. While this is partly implemented both by those close to the family and professionals working in family services for children, but there is also quite a lot of room for development, as we can see in the results of our study. Parents do not always know what kinds of family-related or personal concerns can be raised in any service for families with children. Helping families as well as possible requires finding ways to identify risk factors in the family and discuss the worries raised by the parent. In order to find solutions to the worries expressed by parents together, they must be first identified. It is difficult for professionals caring for families with children to have a holistic view of the well-being of children and families unless this is systematically assessed. For this reason, forms that parents fill out

themselves should be used. It is important that parental responses are discussed together at the clinic. A realistic and sufficiently specific discussion with parents about their role and tasks as parents as well as issues related to the child and any worries or concerns in the family's daily life helps determining the need for support and assistance, and selecting necessary measures.

In the future, it is important to study how systematically family worries are addressed and to develop workable methods through research. In our European Commission funded ERICA Project (<https://projects.tuni.fi/erica/>) we have developed a mobile application for parents, for their own self-assessment on their needs and worries. The app will be further tested by research in clinical practice. Future research should also examine the different needs of different families so that they can be supported individually. Based on previous research, quite a lot is known about the individual risk factors that affect the well-being of the family and the child. More should be known about the connections that occur between these as well as what interventions can be used to mitigate and eliminate the risks.

Acknowledgements The authors wish to thank Professor Emeritus Joel Milner from Northern Illinois University for valuable help with the CAP Inventory and for supporting our research.

Author Contributions All authors contributed to the study conception and design. Material preparation, data collection and analysis were performed by Sari Lepistö, Mari Raunima and Eija Paavilainen. The first draft of the manuscript was written by Sari Lepistö and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

Funding This study was funded by Ministry of Social Affairs and Health, Finland (Grant no. 201610044).

Data Availability Not available.

Declarations

Conflict of Interest The authors have no conflicts of interest to declare that are relevant to the content of this article.

Ethics Approval Statement All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards. The study was approved by the Research Ethics Committee of Pirkanmaa Hospital District in Southern Finland (R11198H).

Consent to Participate Informed consent was obtained from all individual participants included in the study.

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