

Factors Influencing the Practice of Holistic Care by Nurses in Selected Hospitals in Ondo State

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Abstract

Nurses have been educated with a fragmented biomedical allopathic focus and do not have a good understanding of the meaning of holistic care as a compelling evidence which suggested that nurses are not familiar with holistic care and in essence neglect this model of caring, do not engage in this method and get involved only in patients' physical needs ignoring the mental, spiritual and social needs of patients. This study assessed the factors that influence the practice of holistic care by nurses in selected hospitals in Akure, Ondo State. A descriptive research design was employed using purposive sampling method. Nurses were selected and a self-structured questionnaire was used to collect data. Data was analyzed using relevant tables and statistical calculations.

A pre-tested structured questionnaire was administered to 109 nurses using purposive sampling technique. A significant number of the respondents 35.8% within the ages of 26 to 30 years formed the highest population for the study. More than three quarters of the respondents (87.2%) have heard or learnt about the concept of holistic care. Also, 84.4% understand the concept of holistic care. The findings from this study also revealed that 68.8% of nurses believed that holistic nursing care is cumbersome to practice, it was also noted that 58% of nurses reported that the educational content and procedures while in school did not spell out holistic care in an extensive way. It was also noted that there are no adequate resources and the nurse-patient ratio is high. However, recommendations and suggestions calling the training and retraining of professional nurses and the nursing council should be sought to look into the curriculum of training to address the issue.

Keywords: *Holistic care, Factors, Practice, Nurses*

Introduction

An individual is made up of the body, mind and spirit and with respect to this concept would allow the nurse to encourage the individual patient in self-care which will lead to hope, self-autonomy, dignity, harmony, self-discipline, social growth life and energy (Thompson, Quinn, Paterson, Cooke, McQuigan & Butter, 2008). This care also includes a wide range of approaches, including medication, education, communication, self-help, and complementary treatment. (Morgan & Yoder, 2012). In holistic nursing, all aspects of patients and their effects on the treatment process are considered and the patients' thoughts, emotions, cultures, opinions, and attitudes are factored in as contributing to recovery, happiness, and satisfaction. (Selimen & Andsoy, 2011). Holistic care has been since the days of Florence Nightingale and she

developed this type of care as a better model of caring (Selimen & Andsoy, 2011). It is quite unfortunate that most nurses have been educated with a biomedical allopathic focus and do not have a good understanding of the meaning of holistic care as a compelling evidence which suggested that nurses are not familiar with holistic care and in essence neglect this model of caring (Selimen & Andsoy, 2011 & Olive, 2003), some do not engage in this method (Tjale & Bruce, 2007) and get involved only in patients' physical needs. In respect to this, patients' other needs and sometimes more grievous problems are not addressed (Olive, 2003). The mental, spiritual and social needs of patients are ignored (Porter, 1997) and patients are considered as biological machines (Kolcaba, 1997).

When an individual is ill, compounded psychological, social and cultural needs disrupt a patient's balance (Selimen & Andsoy, 2011) and goes a long way to affect his/her ability to carry out everyday activities (Newshan, 2004). In holistic care, addressing patients' physical, emotional, social and spiritual needs, brings back their balances and gives them the ability to deal with their illnesses and therefore improving their lives (Tjale & Bruce 2007). Using the ordinary medical model alone for treatment exposes patients to serious threats, prolonged hospitalization, and raises treatment costs (Olive, 2003). Similar studies conducted in the USA have revealed that 67% of American patients in hospitals do not receive holistic care (Daaleman 2008) and a study conducted in England showed that only 5% of hospitalized patients were subject to holistic care (Olive, 2003). The identification of contributory factors is of importance for providing this method of caring when bearing in mind the beneficial effects of holistic care. Literature shows that most studies have been narrowed to specific areas, such as operating rooms or the care of the elderly who were terminally sick (Selimen & Andsoy, 2011 & Choowattanapakorn & Nay & Fetherstonhaugh 2004). Other studies attempt to explain the concept of holistic nursing and nurses' perception of it (Strandberg, Ingvar & Borgquist & Wilhelmsson 2007, Tjale & Bruce, 2007) or the reasons for failure to employ this method. Holistic care is undesirably affected by factors as inadequate timing, improper professional relationship, incomplete reports from nurses, inadequate clinical control, unavailability of resources (Keegan 1987) poor professional and administrative perceptions, limited knowledge, and motivational and organizational factors (Selimen & Andsoy, 2011). This has brought great influence of holistic care on management and more effective nursing, the health-care systems in many countries in recent decades have tried to promote holistic care by spreading over changes to the educational and administrative systems (Selimen & Andsoy, 2011). It is so evident that there are other factors affecting holistic nursing that must be exposed on time. An investigation into this matter using a qualitative approach that includes multiple methods of data gathering and emphasizing

reality experience (Strubert & Carpenter, 2007) can help us to obtain significant and broad data and this will noticeably clarify the existing background and the actual state surrounding the formation of holistic care.

When holistic care is understood by nurses in a comprehensive form, it will facilitate professional autonomy (McEvoy & Duffy 2008) and it will enable nurses to consider patients' needs in a more systematic and scientific way (King & Gate 2006, Baldacchino, 2008). Furthermore, a clear conceptual definition of holistic care will provide a consensus on its meaning thereby facilitating its application in nursing practice, research, education, and theory development.

Statement of Problem

Despite the global clamour for the use of holistic care as a panacea to the problem of poor nursing practice, most developing countries are yet to fully adopt this method. In Nigeria, most nurses have not come to terms with the practice of holistic care resulting in complications of illnesses and diseases. This can be due to inadequate timing, improper professional relationship, incomplete reports from nurses, inadequate clinical control and when resources are not available (Keegan, 1987) poor professional and administrative opinions, limited knowledge, motivational and organizational factors. (Selimen & Andsoy, 2011)

Objectives of the study

The objectives of this study were to:

1. assess the perception of nurses on the concept of holistic care.
2. assess the practice of holistic care by nurses in selected hospitals in Ondo State.
3. determine those factors influencing the practice of holistic care.

Research Questions

1. What is the perception of nurses about the concept of holistic care?
2. How do nurses practice the holistic care?
3. What are the factors influencing the practice of holistic care despite the knowledge about the concept?

Methodology

Research design

A descriptive research design was adopted which utilized self-administered structured questionnaire to assess the factors influencing the practice of holistic care by nurses in selected hospitals in Ondo State.

Sampling Technique and Sample

The population of this research were nurses practicing in the University of Medical Science Teaching Hospital Complex (UNIMEDTHC), Mother and Child Hospital (MCH) in Akure, Ondo State. There were one hundred and fifty nurses (150) in two hospitals respectively.

Stratified sample technique was used to select the sample based on the characteristics of the population under study; Taro Yamen's formula was used to calculate the sample size:

$$n = \frac{N}{1 + N(e)^2}$$

Where n= sample size

N=Total population

e=sample error=0.05

Population size of nurses in University of medical science teaching hospital complex=100

Population size of nurses in Mother and Child Hospital = 50

Total population=150

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{150}{1 + 150(0.05)^2}$$

$$n = \frac{150}{1 + 150(0.0025)}$$

$$n = \frac{150}{1 + 0.375}$$

$$n = \frac{150}{1.375}$$

$$n = 109$$

$$\frac{100}{150} \times 109$$

=73(NURSES FROM UNIMEDTHC THAT WERE PURPOSIVELY SAMPLED)

$$\frac{50}{150} \times 109$$

=36(NURSES FROM MOTHER AND CHILD HOSPITAL THAT WERE PURPOSIVELY

SAMPLED)

$$73 + 36 = 109$$

The sample size of 109 nurses was determined for this study.

Instrumentation

The instrument used for the collection of data in this study was a self-structured questionnaire on the factors that influence the practice of holistic care by nurses in selected hospital in Ondo State. The questionnaire consists of section A, B, C, and D. Section A contains personal data of the respondent, section B contains information to assess the perception of the respondents about holistic care, section C contains the assessment of the practice of holistic care and section D contains information to determine the factors that influence the practice of holistic care.

Data Collection and Analysis

A self-administered questionnaire on the factors influencing the practice of holistic care by nurses designed by the researcher was used to collect data which was distributed to all nurses purposively.

Ethical Considerations

Ethical clearance was obtained from Ondo State Health Research and Ethics Committee with protocol number OSHREC/19/03/2019/115. All participants gave informed consent prior to data collection and necessary permission was taken from the institutions.

Results

Data was collected from nurses working at selected hospitals in Akure, Ondo State. The method of analysis was done by the use of frequency and percentage.

Table 1: Socio-Demographic Data of Respondents

Variables	Frequency (n=109)	Percentage (%)
AGE(in years)		
21-25	25	22.9
26-30	39	35.8
31-35	20	18.3
36-40	11	10.1
above 40	14	12.8
SEX		
Female	98	89.9
Male	11	10.1
EDUCATION		
RN/RM	40	36.7
Degree	60	55.0
Masters	9	8.3
PhD	-	-
WARDS		
Casualty	18	16.5
Medical	28	25.7
Surgical	29	26.6
Gynaecological	16	14.7
Paediatric	18	16.5
RANK		
Chief Nursing Officer	10	9.2
Assistant Chief Nursing Officer	11	10.1
Principal Nursing Officer	23	21.1
Nursing Officer I	30	27.5
Nursing Officer I	35	32.1
EXPERIENCE(in years)		
0-5	45	41.3
6-10	34	31.2
11-15	12	11.0
16-20	12	11.0
above 20	6	5.5

Table 1 shows the socio demographic characteristics of nurses studied. The age distribution of 109 respondents, 22% of the respondents were within the age of 21-25years, 35.8% were within the age of 26-30years, 18.3% were within the age of 31-35years, 10.1% were within the age of 36-40years while 12.8% of the respondents are above 40years. It also noted that 89.9% of the respondents were females while 10.1% were males. In addition, 36.7% of the respondents had RN, 55.0% had degree, 8.3% had their masters while none had PhD. Furthermore, 16.5% of the respondents work in the casualty ward, 25.7% work in the medical ward, 26.6% work in the surgical ward, 14.7% work in the gynaecological ward and 16.5%

work in the paediatric ward. Also, 41.3% of the respondents have experience within 0-5years, 31.2% have 6-10years of experience, 11.0% have 11-15years of experience which is the same percentage with those who have 16-20years while 5.5% of the respondents have above 20 years of experience of practice.

Research question 1: What is the perception of nurses about the concept of holistic care? The above question was answered by determining the frequency count/percentage of each of the participants' responses to items on the perception of holistic care.

Table 2: Perception of Nurses about the concept of holistic care

	Yes F(%)	No F(%)	Indifferent F(%)
Is there any laid down rule or hospital policy for the practice of holistic care?	10 (9.2%)	54 (49.5%)	45 (41.2%)
Have you ever attended any lecture/seminar on the concept of holistic care?	59 (54.1%)	40 (36.7%)	14 (12.8%)
Have you heard or learnt about the concept of holistic care?	95(87.2%)	9(8.3%)	5(4.6%)
Did your curriculum in nursing school dwell more extensively on holistic care?	8(7.3%)	92(84.4%)	9(8.3%)
Good communication skills and professional commitment are the major principles of holistic care	80(73.%)	20(18%)	9(8.3%)
Is holistic care too cumbersome to practice?	75 (68.8%)	34 (31.2%)	
Do you think practicing holistic care is time-consuming?	76 (69.7%)	33 (30.1%)	
Does holistic care practice involve special training of nurses?	59 (54.1%)	50 (45.9%)	
Complications of illnesses and diseases can be minimized by holistic care.	99 (90.8%)	10 (9.2%)	
Holistic care should be treated as one entity and not a fragment of some procedures	75(68.8%)	34(31.2%)	

Table 2 shows that 87.2% of the respondents have heard or learnt about the concept of holistic care, only 8.3% have not and just 4.6% were indifferent about the knowledge of the concept. Also, it also reflected that 54.1% of the respondents have attended a lecture/seminar on holistic nursing care, 36.7% of the respondents have not while 12.8% were indifferent to attending any lecture on holistic care. The table also shows that 9.2% of the respondents are aware of a laid down rule or hospital policy for the practice of holistic care, while 49.5% of the respondents are not aware and 41.2% were not sure of the policy. Also, 84.4% of the respondent acclaimed that holistic care is not extensively spelt out in the nursing curriculum while 73.4% believed that good communication skills and professional commitment are the major principles of holistic care. 68.8% of nurses

attested that holistic care is cumbersome to the practice, while 31.2% respondents said it is not cumbersome to practice. Also, 69.7% of the respondents said that the practicing of holistic care is time-consuming and 30.1% of the respondents said the practice of holistic care is not time-consuming. Also, 54.1% shows holistic care practice involves special training of nurses. In addition, 90.8% of the respondents said that complications of illnesses and diseases can be minimized by practicing holistic care.

Research question 2: How do nurses practice holistic care? The above question was answered by determining the frequency count/percentage of each of the respondent's responses to items on the practice of holistic care by the respondents.

	YES F(%)	NO F(%)
Do you practice holistic care at any point during your shift?	24(22%)	85(78%)
Have you been able to carry out a holistic nursing care without hindrance(s) during your shifts?	36(33%)	73 (67%)
Have there been times when you and other members of the healthcare team discussed the treatment/management plan of the patients?	87 (79.8%)	19 (17.4%)
If holistic care is institutionalized, would you love to practice it without any hindrance?	89 (81.7%)	20 (18.3%)

Table 3 shows that 78% of the respondents do not practice holistic care while only 33% of the respondents have been able to carry out holistic care without hindrances during their shift and 67% have not been able to carry out a holistic care without hindrance(s) during their shifts. Also, 79.8% of the respondents have been involved with other members of the healthcare team in the treatment plan/management of their patients during ward rounds and only 17.4% were **not involved**. 81.7% would have loved to carry out holistic care without any hinderance.

Research question 3: What are the factors influencing the practice of holistic care despite the knowledge of the concept?

The above question was answered by determining the frequency count and percentage of each of the respondent responses to items on factors influencing practice of holistic care

	Agree F(%)	Disagree F(%)	Indifferent F(%)
No in-depth explanation and detailed content or procedure of holistic care in the Nursing educational / training curriculum	87(80%)	22(20.2%)	---
Individual updates & training influence the practice of holistic care more than experience	98 (89.9%)	4 (3.4%)	7 (6.4%)
Both intrinsic and extrinsic motivation of nurses can influence the practice of holistic care.	99 (90.8%)	7(6.4%)	3 2.8%)
Increased workload due to nurse to patient ratio influence the practice of holistic care negatively	95 (87.2%)	9 (8.3%)	5(4.6%)
Nurses being excluded from the treatment plan of patients have no effect on the practice of holistic care.	10 (9.2%)	94 (86.2%)	5 (4.6%)
Availability of adequate resources and equipment contributes to rendering holistic care.	96 (88.1%)	6 (5.5%)	7(6.4%)

Table 4 shows that 80% of nurses agreed that no in-depth explanation and detailed content or procedure of holistic care in the nursing educational / training curriculum while 89.9% of the respondents agreed that individual updates and trainings influence the practice of holistic care, 3.4% of the respondents disagreed while 6.4% were indifferent. Also, it can be deduced from the Table 3 shows that 90.8% of the respondents agreed that both intrinsic and extrinsic motivation influence the practice of holistic care, 6.4% of the respondents disagreed while 2.8% were indifferent.

Furthermore, 87.2% of the respondents agreed that increased workload due to inappropriate nurse-to-patient ratio is a factor that influences the practice of holistic care negatively, just 8.3% disagreed while 4.6% were indifferent. Just 9.2% of the respondents agreed that nurses being excluded in the treatment plan of patients have no effect on the practice of holistic care, 86.2% disagreed and 4.6% of the respondents were indifferent. It was also noted that 88.1% of the respondents agreed that availability of

equipment and resources contributes to rendering holistic care, just 5.5% disagreed and 6.4% were indifferent.

Discussion of Findings

The study revealed that majority of the respondents had the knowledge about the concept of holistic care either through fragmented modules on the concept, seminars, though few of the respondents have attended seminars or workshop on holistic care or experience on the job. This is in line with a study conducted by Pelzang, Wood & Black (2013) in Bhutan to explore the understanding and perception of patients oriented care among staff nurses, data was collected through mixed approach and survey questionnaires and the findings revealed that nurses had knowledge regarding patient-centered care but expressed the need to improve the knowledge through in-house training, workshop and seminars attendance.

Majority of the respondents claimed that there is a lay down rule guiding the practice of holistic

care and the turn out for attending seminars on holistic care is low. This is so surprising since the nurses' turn-up for seminars and workshop is low and they stressed that the curriculum of nursing did not dwell extensively on holistic care. Hence, the need to be worried on how the nurses practise holistic care in the hospitals and majority of the respondents said holistic care is cumbersome to practice. As such the practice of holistic care will be cumbersome because of the earlier report.

Furthermore, almost all the respondents said that the curriculum in nursing school did not dwell more extensively on holistic care during schooling: The content of educational programs is not based on the philosophy of holistic care. King and Gates' study points to the same results and shows that teaching holistic nursing to undergraduate nursing students is not available in the curriculum of nursing and the content of educational programs. (Frisch NC. 2007). Similarly, the results of Strindberg's study in Sweden show that most nursing education are based only on biological science. Revising nursing education seems to be vital for the inclusion of holistic care in nursing students. Strandberg has also suggested this matter in his study. (Strandberg, Ovhed , Borgquist , Wilhelmsson , 2007).

Based on the findings of this study that motivational factors are influential in identifying patients' various needs and generating holistic perceptions of the patient, almost all the respondents believed that this factor has a great influence on the practice of holistic care which in turn encourage nurses to attend to patients' diverse needs and provide holistic care. As a large percentage of the respondents believed that good communication trait and professional commitment are the major principles of holistic care. This is in line with previous studies that nurses who are invariably friendly and emotional tend to be happy at work and more capable of identifying patients' needs and nursing. Olive 2003, revealed that nurses, compared to their equals, are not only more dependable, intelligent, flexible, and conscientious, but also more highly motivated. (Berg & Sarvimäki, 2003) Good communication skills, professional

commitment should be stressed among nurses and they should be encouraged with incentives and proper and adequate salaries that will motivate them.

According to the findings of this study, most nurses believe that their main concern in their courses has been with becoming competent in doing routine tasks and that they had little opportunity to consider the other needs of patients. This can be traced to the ratio of nurses to patients in these settings, the ratio is 1 to 25-30 patients. majority attested that they do not practice holistic care in their various settings and also that they do not carry out holistic care and majority are willing to engage in holistic care if there are policies binding it in the hospital settings. Some factors that were identified in this study that influenced the practice of holistic care are: no in depth explanation and detailed content or procedure of holistic care in the nursing curriculum, individual updates and training influence the practice, motivation and availability of adequate resources.

Implication of the study for clinical practice

The delivery of the right care at the right time, concentrated on the needs of patients, requires a change in the work environment, as well as changes in the attitude of nursing practice and education, and in the amount of nursing staff for effective practice of Holistic care are; regular seminars and workshops and other equipment motivating nurses and employment of adequate and capable professional nurses, cooperation among nurses and regular supervision of the staff in implementation of the nursing process (Chudi Chukwuka 2013)

Conclusion

The study revealed that majority of nurses do not practice holistic care in these two settings and most of the respondents want to embrace the concept but there are barriers and factors that are delaying the utilization of holistic care approach despite the fact that there is adequate knowledge and the curriculum does not expand more on the concept.

Recommendations

Findings from this research are indications of the need for nurses to have adequate knowledge

and right perception about the concept of holistic care and to further update themselves to have adequate skills and understanding. They should also get fully involved in the treatment plan and management of their patients. Also, nurses should ensure that the rules and principles guiding every procedure are followed to minimize the occurrence of complication of illnesses. The Nursing Council has a whole lot to play in curriculum development of holistic care since it is the foundation of the knowledge received for holistic care. Lastly, more research should be conducted to update knowledge and skills about the concept of holistic care.

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