

Joint Event

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Public Health World
Conference and
5th Edition of
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Conference**

17-19 JULY, 2026

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PHWC 2026 & WNRC 2026

JULY 17-19, 2026

Book of
Abstracts



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About Exhibitor

The Ark Health Ministries was established in Singapore in 2012 and focuses on three areas:

- 1. Health education & consultancy** – Empowering people to take charge of their own health.
- 2. Natural remedies** – Used alongside conventional medicine, TCM, and supplements.
- 3. Natural healing environment** – Supporting the body's own healing process through the DIY 18-hour Liver and Gallbladder Cleanse program.

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Day 1
Keynote
Presentations
Session 1





Bob Douglas AO*

Member of the Council for the Human Future,
Australia

Developing A Global Approach to the Control and Prevention of Human Extinction

The survival crisis that now confronts humans everywhere includes climate disruption, biodiversity collapse, freshwater depletion, chemical pollution, soil degradation, ocean acidification, pandemics, food insecurity, and nuclear and technological risk, as well as widespread misinformation about the magnitude of the threats facing all of us. The central problem is too many humans on the planet requiring too much food and resources, and our failure to curb this demand. The Council for the Human Future is advocating for the development of a global Earth System Treaty (EST) that, if supported in the United Nations, would seek to establish binding and coordinated international commitments to reduce cumulative human pressures on the Earth System; integrate climate, environment, health, security and development policies into one sustainable framework; create institutional structures capable of monitoring, enforcing and adjusting global environmental limits; and mobilise nations, civil society, business, science and indigenous knowledge into a single governance platform. The science is now very clear that without action involving every nation on earth, our human descendants are facing a diabolical future.

Biography

Bob Douglas, now aged 89, trained initially in medicine and developed an interest in public health, epidemiology and prevention. He was closely associated with the development and global licensure of pneumococcal vaccine and was appointed in 1989 to head up the National Centre for Epidemiology and Population Health at the Australian National University. He retired in 2001 and has since been actively involved in analysis of problems confronting Australia and the world through NGOs and community organisations.



Diego Monzón-Bonatti Fuentes*

Guatemaltecos por la Nutrición, Guatemala

Scaling Integrated Health Systems to Reduce Malnutrition: A Process-Based Model from Rural Guatemala with Global Implications

Despite decades of global investment, malnutrition remains one of the most persistent and complex public health challenges, particularly in low- and middle-income countries where fragmented interventions fail to address its multi-dimensional nature. This presentation introduces an integrated, multi-sectoral model designed to address the root causes of malnutrition through coordinated action across primary health care, nutrition, early childhood development, water and sanitation, food access, and economic strengthening. Implemented in rural Guatemala under the Guatemaltecos por la Nutrición (GPN) initiative, the model is grounded in the UNICEF conceptual framework and operationalized through a process-based management approach. The intervention targets pregnant women, children under five, and their families in highly vulnerable rural communities. Preliminary results demonstrate a substantial reduction in acute malnutrition prevalence, decreasing from approximately 6% to 0.38% in intervention communities. Additional improvements include enhanced early detection, increased treatment adherence, improved service utilization, and strengthened continuity of care. This model provides a practical and adaptable framework for scaling integrated health and nutrition interventions in resource-limited settings.

Biography

Diego Monzon-Bonatti Fuentes is a medical doctor with an MBA and Technical Sub-Director at Guatemaltecos por la Nutrición (GPN) in Guatemala. He leads the design and implementation of integrated, multi-sectoral interventions focused on reducing malnutrition and strengthening primary health care systems in rural settings, with experience in clinical care, health systems management, and program scale-up in resource-limited contexts.



Mark Chan, MPH*

Director and Founder, The Ark Health Ministries, Singapore

The 18-Hour DIY Liver and Gallbladder Cleanse

If you wish to live well, you need one vital organ to be in peak condition: a healthy liver. Our liver works tirelessly every second of every day, filtering our blood, removing toxins, heavy metals, and harmful chemicals. Over time, this filtration process can lead to a buildup of residue — commonly known as gallstones. This congestion can compromise over 500 essential liver functions and is often the hidden root of many chronic diseases, from high cholesterol and fatty liver to eczema and gout. What if you could revitalize your liver in just 18 hours? The simple, DIY, 18-hour natural remedy is designed to safely clear these gallstones and restore optimal liver health. The philosophy is simple: try the 18-hour liver detox program, you have nothing to lose... except the stones.

Biography

Mark Chan, MPH, bridges faith and wellness in the secular marketplace. With 28 years of pastoral experience and a Master's in Public Health, his core mission is to reach non-religious individuals through natural health solutions. He is the creator of the 18-Hour Liver Detox Program, a natural remedy he has personally delivered to over 5,000 people across six countries. He holds an MPH from Adventist University of the Philippines (2012).

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Ha-Eun Kim* and Jung-Hun Yeum

Department of Environmental Landscape Architecture,
Kangwon National University, Gangneung-si, Gangwon-do,
Republic of Korea

Effects of VR-Based Viewing of East Coast Seascapes on EEG Changes

Rapid urbanization and increasing everyday tension in modern society have intensified individuals' psychological stress, drawing growing attention to the importance of psychological restoration through natural environments. Coastal landscapes are recognized as representative natural settings that promote psychological stability and recovery. This study aimed to examine the effects of VR-based viewing of East Coast seascapes on EEG responses and to explore the restorative potential of coastal landscapes. Stimulus videos were produced from coastal landscapes recorded on-site using an Insta360 X4 camera, categorized into four coastal landscape types by wave intensity and terrain type. A total of 20 university and graduate students participated using a Meta Quest 3 VR headset. Analysis showed that alpha wave activity increased in all conditions compared with baseline, whereas beta and high beta wave activity decreased, suggesting that VR-based coastal landscape viewing may induce positive responses associated with psychological stability and relaxation. The most prominent changes were found in the strong-wave mixed rocky-sandy condition. Overall, this pilot study quantitatively demonstrated through EEG analysis that viewing East Coast coastal landscapes may have a positive effect on stress reduction.

Biography

Ha-Eun Kim is a master's student in the Department of Environmental Landscape Architecture at Kangwon National University, South Korea. Her research focuses on landscape ecology, urban green spaces, and nature-based solutions for human health and well-being. This work was supported by the National Research Foundation of Korea (No. RS-2024-00339194).



Orly Tore* and Sima Reicher

Nursing Department, Ono Academic College, Israel

Telemedicine Use - Characteristics, Attitudes, Knowledge, Barriers, Patient Reported Experience and Outcome Measures (PREMs & PROMs) Among A Variety of Social Groups in Israel

Abstract: Scientific Background - Online Health Services (OHS) have emerged in response to healthcare challenges and provide a way to streamline the healthcare system. Despite their numerous advantages, various studies have presented differing findings regarding their efficacy in populations with different sociodemographic characteristics.

Research Objectives - To describe OHS use and its characteristics; to examine knowledge, attitudes, barriers, and usage patterns among various groups in Israel; to explore the relationship between OHS consumption and patient-reported outcome and experience measurements (PROMs and PREMs); and to present a predictive model for OHS consumption.

Method - A cross-sectional study was conducted among Jewish and Arab populations with a national random representative sample taken according to gender, ethnicity, age, and religious affiliation. Sampling was stratified by ethnicity and geographical regions. An online questionnaire was administered through iPanel's records.

Key Findings - The sample comprised 2001 participants with an average age of 47, half of them being women. Participants were more familiar with low-level technology and used it more frequently, and most reported the absence of technological or emotional barriers. Perceived efficacy of OHS was high, but some participants preferred face-to-face treatment. Predictors of familiarity and use of high-level OHS included being male, Arab, insured by the Clalit HMO, and having familiarity with OHS, high perceived health literacy, efficacy and safety.

Conclusions - Online treatment and face-to-face treatment are complementary services; High-level OHS and low-level OHS are two distinct types of services; The absence of technological barriers makes it possible to leverage and expand the provision of OHS in Israel. Implications and Recommendations for Policy Makers - Efforts should be directed toward improving online health literacy, focusing on using high-level technology; The elderly population's capabilities and needs should be mapped and personalized service frameworks should be established; Health perception measurements should be used to predict OHS use.

Biography

Nursing Department, Ono Academic College, Israel



Jung-Hun Yeum*

Department of Environmental Landscape Architecture,
Kangwon National University, Gangneung-si, Gangwon-do,
Republic of Korea

A Pilot Application of an EEG-Based Stress Reduction Index in Relation to Sensory Elements of Urban Parks

In response to increasing levels of stress and mental health disorders in contemporary society, non-clinical nature-based services have gained growing attention. This study comprehensively analyzed stress reduction tendencies based on EEG responses of university and graduate students to sensory stimuli in a children's park. The study proposed a pilot stress reduction index by integrating changes across different sensory elements. The sample included 20 participants for visual stimuli, 27 for auditory stimuli, and 33 for olfactory stimuli. Stimuli consisted of planting structure layers (visual), bird/wind/rainfall sounds (auditory), and herbal aroma oils (olfactory). Results indicated that visual stimuli led to a decrease in relative alpha power and an increase in beta and high beta power. In contrast, auditory and olfactory stimuli resulted in increased alpha power and decreased beta and high beta power. The derived weights for each sensory modality were 0.18 for visual, 0.47 for auditory, and 0.35 for olfactory stimuli. These were integrated to present a pilot stress reduction index. This study highlights the potential of EEG approaches for quantifying stress reduction in urban park environments.

Biography

Jung-Hun Yeum is an Associate Professor in the Department of Environmental Landscape Architecture at Kangwon National University. Research focuses on landscape ecology, urban green spaces, and nature-based solutions for human health and well-being. He serves as the principal investigator of a research project supported by the National Research Foundation of Korea (No. RS-2024-00339194).

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Dr. Arnel M. Borrás*

Rankin School of Nursing, Faculty of Science, St.
Francis Xavier University, Antigonish, Nova Scotia,
Canada

Housing Insecurity, Homelessness, and Health Inequities in Canada: A Critical Political Economy Analysis of Structural Determinants

Canada's post-Keynesian shift from public responsibility to market reliance transformed housing policy from a welfare-oriented framework into one that deepened social inequities. Since the 1980s, neoliberal restructuring, privatization, and financialization have fragmented housing governance and reduced affordability, contributing to housing insecurity, rising homelessness, and worsening health inequities across socioeconomic and racial lines. This presentation positions housing policy as an upstream determinant of health. Guided by a critical political economy framework, the study integrates historical policy analysis with discourse analysis of five paradigms shaping homelessness policy in Canada: emergency shelter, Housing First, social determinants of health, human rights, and political economy approaches. Findings indicate that the shift toward market-oriented housing policies has weakened non-market supply, increased rent burdens, and normalized precarious living conditions. Advancing health equity requires a balanced and inclusive housing strategy that expands public and non-profit housing, stabilizes rent, ensures living wages, and strengthens income support.

Biography

Dr. Arnel M. Borrás is an Assistant Professor at the Rankin School of Nursing, Faculty of Science, St. Francis Xavier University. Informed by his experiences as a factory worker and frontline nurse, he integrates practice, critical research, and advocacy to examine the structural determinants of health inequities. He holds a Ph.D. in Health with a specialization in Health Policy and Equity from York University.



William Bello*

SafeComp E&L, Lausanne, Vaud, Switzerland

Raising Awareness of Leachables in Hospital Environments: An Urgent Public Health Concern

Hospital pharmacies play a vital role in healthcare systems worldwide, compounding drug products to meet demand, address specific clinical needs, and ensure continuity of treatment. A critical yet overlooked challenge lies in batch compounding: the widespread off-label use of plastic primary packaging. Safety data generated by medical device manufacturers apply strictly to intended use and cannot be extrapolated to extended applications. This practice creates conditions under which potentially harmful leachable compounds are completely unmonitored and may migrate into drug formulations. The risks are global and disproportionately affect vulnerable populations. Neonates, infants requiring frequent parenteral or ophthalmic administration, and oncology patients undergoing long-term therapy face heightened exposure to unassessed leachables. Urgent action is needed. Raising awareness among healthcare professionals, regulators, and industry leaders, conducting analytical and toxicological evaluations of batch compounding, and enforcing evidence-based regulation of plastic packaging are essential steps.

Biography

William Bello, PhD, is an analytical pharmacist specializing in Hospital Pharmacy Extractables and Leachables (E&L). He earned his doctorate at Lausanne University Hospital (Switzerland), where he developed DELTA, a database and screening system for monitoring leachables in compounded drug products. He is the co-founder and technical consultant of SafeComp E&L, a non-profit initiative supporting safe compounding practices in hospital pharmacies worldwide. William has published over six papers and has been invited to speak at more than a dozen international conferences across seven countries.

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Dr. Varshini Murugan*

NEURAX Cognitive Solutions Private Limited, Chennai, India

NEURAX: A Smartphone-Based AI-Enabled Cognitive Screening Platform for Post-Stroke Vascular Cognitive Impairment – Study Protocol for a Feasibility Pilot in India

Background: Stroke is a leading cause of disability globally, with approximately 1.8 million cases reported annually in India. Up to 40–50% of stroke survivors develop Vascular Cognitive Impairment (VCI). Despite this significant burden, fewer than 1% of patients undergo routine cognitive screening post-stroke. **Objective:** To describe the study protocol for a feasibility pilot evaluating NEURAX, a smartphone-based, AI-enabled cognitive screening platform designed for early detection and longitudinal monitoring of post-stroke cognitive decline. **Methods:** A single-arm, prospective feasibility pilot involving 50 post-stroke patients. Participants undergo supervised baseline cognitive assessment followed by unsupervised monthly home-based testing over 3 months using the NEURAX application. **Expected Results:** The study is expected to demonstrate feasibility, usability, and patient acceptability of smartphone-based cognitive screening in post-stroke populations. **Conclusion:** NEURAX represents a scalable, AI-enabled framework for longitudinal cognitive surveillance in post-stroke populations, with potential to improve patient outcomes and strengthen public health responses to cognitive impairment in resource-limited environments.

Biography

Dr. Varshini Murugan is an MBBS graduate from Stanley Medical College, Chennai, and holds a BSc in Psychology. She is the founder of NEURAX Cognitive Solutions, developing an AI-enabled smartphone-based cognitive screening platform for post-stroke patients. She has completed international certifications in epidemiology, biostatistics, and public health from Johns Hopkins University, Cochrane, and the University of Michigan. She was a national finalist at Miss Universe India 2025 and is currently part of ISB's I-Venture Immersion Cohort 4.

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Poster





Jihee Kim*

Department of Orthopedic Surgery, CHA Bundang Medical Center, Republic of Korea

The Effect of Concurrent NSAIDs or Tramadol Use on ESWT in Greater Trochanteric Pain Syndrome: A Retrospective Cohort Analysis

Background: Greater trochanteric pain syndrome (GTPS) is one of the most prevalent causes of lateral hip pain, particularly in middle-aged women. Extracorporeal shock wave therapy (ESWT) has emerged as a non-invasive alternative to corticosteroid injections. This study investigated whether concurrent use of NSAIDs or tramadol-containing compound analgesics influences the clinical outcomes of focused ESWT in patients with GTPS. **Methods:** A single-center retrospective observational study was conducted at CHA Bundang Medical Center. Medical records of 133 patients with GTPS who underwent focused ESWT were reviewed. Patients were stratified into four medication groups: no medication (n=46), NSAIDs only (n=38), Ultracet® only (n=11), and NSAIDs plus Ultracet® (n=38). The primary outcome was VAS improvement rate (%). **Results:** The overall mean VAS improvement rate was $66.4 \pm 17.2\%$. No statistically significant difference in VAS improvement rate was observed among the four medication groups (Kruskal-Wallis $H=0.243$, $p=0.970$). Mean VAS improvement rates across groups ranged from 65.5% to 66.8%. A statistically significant negative correlation was identified between the number of ESWT sessions and VAS improvement rate (Spearman $r=-0.199$, $p=0.022$). **Conclusion:** Concurrent use of NSAIDs or tramadol-based analgesics during focused ESWT did not significantly affect treatment outcomes in patients with GTPS. Clinicians need not routinely discontinue NSAIDs prior to ESWT in this population.

Biography

Jihee Kim graduated from Kangwon National University in 2005 and worked in Bundang CHA Hospital for five years (intern 1 year, pediatric resident for 4 years). She completed a fellowship in NICU at Asan Hospital for 2 years. She is currently a pediatrician with Soojayeon clinic.



Jin Hur*, Eun-Seo Kang, Dong-

Yeong Kim, and Joann-Gavin Shin,

College of Veterinary Medicine, Jeonbuk National University,
South Korea

A Novel Trivalent Inactivated Salmonella Whole Cell Vaccine Protects Poultry against Salmonella Infantis

The protective efficacy of a novel trivalent inactivated Salmonella bacterial vaccine against Salmonella Infantis infection was evaluated in Hy-Line Brown layers. Forty layers were randomly divided into three groups. Group C chickens were subcutaneously primed with SG9R, followed by an IM boost with the trivalent inactivated vaccine. Splenocytes were collected for real-time PCR analysis of cytokine expression. All remaining hens in Groups B and C were orally challenged with 5×10^9 CFU of virulent wild-type S. Infantis. Results showed that serum IgG titers and IFN- γ expression in Group C were significantly higher than those in Groups A and B. All birds survived the challenge without clinical symptoms. While S. Infantis was not recovered from Group A organs, the challenge strain was isolated from 20% of Group C birds' livers and spleens and 40% of their ceca and cloacae, compared to 100% colonization across all organs in Group B. These findings indicate that priming with SG9R and boosting with the trivalent inactivated Salmonella vaccine can be an effective strategy for preventing S. Infantis infections in poultry.

Biography

Dr. Jin Hur is a Professor at Jeonbuk National University, specializing in bacterial zoonoses with a strong focus on Salmonella, pathogenic Escherichia coli, and Clostridium perfringens. His research encompasses isolation of these pathogens from animals and meat products, antimicrobial susceptibility testing, and advanced vaccine development.



Minjun Kim*, Yangho Kim, A Ram Kim, Woon Jung Kwon, Soyeoun Lim, Woojin Kim, and Cheolin Yoo

Department of Occupational and Environmental Medicine,
Ulsan University Hospital, Ulsan University School of
Medicine, Ulsan, Republic of Korea

Cooking Oil Fume Exposure and Lung-RADS Distribution Among School Cafeteria Workers of South Korea

Background: Cooking oil fumes (COFs) from cooking with hot oil may contribute to the pathogenesis of lung cancer. Since 2021, occupational lung cancer for individual cafeteria workers has been recognized in South Korea. This study aimed to identify the distribution of lung-imaging reporting and data system (Lung-RADS) among cafeteria workers and to determine factors related to Lung-RADS distribution. **Methods:** 203 female participants who underwent low-dose computed tomography (LDCT) screening at a university hospital were included. Variables examined included age, smoking status, height, weight, years of service, mask use, cooking time, heat source, and ventilation. Participants were divided into culinary and non-culinary workers. Binomial logistic regression was conducted to determine risk factors on LDCT of category ≥ 3 . **Results:** Lung-RADS-positive occurred in 17 (8.4%) individuals, all of whom were culinary workers. In subgroup analysis, the Lung-RADS-positive and negative groups differed only in ventilation. The adjusted odds ratio for inappropriate ventilation at the workplace was 14.89 (95% CI: 3.296–67.231) compared to appropriate ventilation. **Conclusions:** The rate of Lung-RADS-positive was significantly higher among culinary workers who performed actual cooking tasks. Appropriate ventilation at the workplace made the LDCT results differ. More research is needed to identify factors that might influence LDCT findings among culinary workers.

Biography

Dr. Minjun Kim earned his M.D. from Keimyung University in 2020 and is currently a fourth-year resident in Occupational and Environmental Medicine at Ulsan University Hospital. He serves as Chief Resident at his institution and as a Director of the Ulsan Medical Association. His research focuses on occupational lung diseases and workplace health interventions.



**Tzu-Chun Liu*, Hui-Yu Hsiao,
Hsiao-Chuan Lin, Chin-Hui Huang,
Sung-Tse Li**

Outpatient Department, Hsinchu MacKay Memorial Hospital,
Taiwan

The Impact of Patient Healthcare Experience and Perceived Communication with Outpatient Physicians on Trust, Loyalty, and Recommendation Intention

With the increasing competition in the healthcare environment and the growing awareness of patients' autonomy, patients are no longer solely concerned about medical techniques when selecting a healthcare institution. Instead, they attach greater importance to their overall medical experience and the quality of physician-patient communication. Such interactions not only influence patients' immediate satisfaction but also shape their trust in physicians and hospitals, as well as their willingness to continue care or recommend the institution to others. This study was conducted to examine these relationships and to provide insights for clinical practice and hospital management.

This study employed a cross-sectional survey design. Data were collected using structured questionnaires from outpatients in a regional teaching hospital in Hsinchu, resulting in 500 valid responses. The instruments measured patients' medical experiences, perceptions of physician communication, trust in physicians and hospitals, loyalty, and recommendation intention. Statistical analyses were performed using SPSS version 26, including descriptive statistics, t-tests, one-way ANOVA, Pearson correlation, and multiple linear regression.

The results revealed that patients' perceptions of physician communication were the most significant factor influencing trust in physicians ($p < .001$). Moreover, both physician communication and medical experiences had significant positive effects on patients' trust in hospitals ($p < .001$). Further analysis indicated that trust in physicians and hospitals significantly predicted patients' loyalty and recommendation intention ($p < .001$).

In terms of demographic differences, male patients rated physician communication higher than female patients ($p < .05$), while older patients expressed greater loyalty and stronger willingness to recommend the hospital ($p < .05$). Patients who visited non-internal medicine and non-surgical departments also reported more favorable evaluations of medical experiences and physician communication ($p < .05$). These findings suggest that patient demographics may influence their perceptions of healthcare services and subsequent behaviors.

In conclusion, this study highlights that physician communication and overall medical experience are critical factors in building trust, enhancing loyalty, and encouraging positive recommendations. It is recommended that healthcare institutions and clinical physicians strengthen patient-centered communication skills and continuously optimize service processes. Such efforts can improve patient satisfaction, enhance quality of care, foster stronger physician-patient relationships, and ultimately increase hospital competitiveness.

Biography

I am Tzu-Chun Liu, a senior nurse at the Outpatient Department of Hsinchu MacKay Memorial Hospital in Taiwan, Republic of China. With 28 years in clinical nursing, including 23 years focused on outpatient care, I am deeply passionate about my profession. My journey in nursing has been driven by a commitment to compassionate patient care and continuous professional growth. I take pride in contributing to the healthcare community through my expertise, dedication, and unwavering devotion to improving patient experiences and outcomes.

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Day 2
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Dr. Arnel M. Borras*¹ and Jana Borras, Ph.D.²

¹Rankin School of Nursing, Faculty of Science, St. Francis Xavier University, Antigonish, Nova Scotia, Canada

²Department of Sociology, York University, Ontario, Canada

Reframing Food and Health Inequities: A Political Economy Analysis of Seven Food Narratives and Their Implications for Public Health Leadership and Policy

Food insecurity and malnutrition remain among the most persistent global public health challenges, rooted in structural inequities across political, economic, and food systems. This presentation employs critical political economy and discourse analysis to examine how prevailing food narratives influence health policy, governance, and population well-being, drawing on the Canadian experience as a case study with global resonance. The study identifies seven interrelated discourses: (1) Nutritionism; (2) Household Food Insecurity; (3) Food Security; (4) Food Insecurity as a Social Determinant of Health; (5) Right to Food; (6) Food Justice; and (7) Food Sovereignty. While the first three continue to shape contemporary public health policy, they often conceptualize hunger as a matter of individual behaviour or supply efficiency, obscuring underlying political-economic forces such as labour precarity, income inequality, and neoliberal reforms. Findings underscore the need for a rights-based, equity-oriented approach that integrates food governance with environmental care, economic fairness, and social inclusion. The Food Sovereignty paradigm offers the most integrative and transformative vision, linking human rights, ecological integrity, and social justice within a unified public health framework. This research calls for leadership that transcends narrow clinical approaches to engage directly in policy reform and advocacy.

Biography

Dr. Arnel M. Borras is an Assistant Professor at the Rankin School of Nursing, Faculty of Science, St. Francis Xavier University. Informed by his experiences as a factory worker and frontline nurse, he integrates practice, critical research, and advocacy to examine the structural determinants of health inequities. He holds a Ph.D. in Health with a specialization in Health Policy and Equity from York University. His research focuses on housing precarity, food insecurity, and systemic inequities within health systems.



David Eilam

School of Zoology, George S. Wise Faculty of Life Sciences, Tel-Aviv University, Israel

Bridging Zoology and Psychiatry in Public Health: How Ethology Unlocks the Roots of OCD

Behavior is the ultimate output of the nervous system, and ethology has long pioneered cutting-edge methods for the precise quantification of both human and animal action. Remarkably, these robust behavioral frameworks have rarely been applied to psychiatric research, where behavior itself serves as the most conspicuous manifestation of the disorders.

This talk demonstrates how a methodology derived from a validated animal model of Obsessive-Compulsive Disorder (OCD) – the quinpirole model – was directly translated to evaluate human patients. Applying this ethological approach to clinical populations unveils critical, previously unquantified dimensions of OCD, including the precise syntax of repetition and addition of acts, feelings of incompleteness, and the strict spatial binding between behavioral rituals and specific locations. Furthermore, this objective methodology provides a rigorous quantitative standard that cuts through the vast clinical variability observed among patients.

As a truly translational, "bench-to-bedside" framework, these ethological tools are now being implemented in OCD clinics to map motor rituals. We illustrate the broader utility of this approach through a case study analyzing the complex rituals of patients with comorbid OCD and schizophrenia. Finally, we discuss how this methodology is currently being deployed to chart the trajectory of OCD rituals as a function of patient age, age of onset, and treatment history. Ultimately, this work establishes ethology not merely as a descriptive discipline, but as a precise analytical bridge capable of uncovering the structural roots of diverse psychiatric disorders.

Biography

Professor David Eilam is a neuroscientist and ethologist, recognized for his pioneering work in the fine-grained analysis of human and animal behavior. Bridging the gap between zoology and psychiatry, his research explores the profound connections between brain and behavioral routines. Professor Eilam is internationally renowned for establishing translational animal models to decode the mechanisms of Obsessive-Compulsive Disorder (OCD). By meticulously mapping spatial locomotion and motor patterns, his laboratory quantifies behavioral repetition, addition, and incompleteness, offering transformative insights into how mental disorders manifest physically and providing a vital framework for understanding the neurobiology of ritualized behavior.

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Zhao Yue^{1*}, Chen Lu¹, Zheng Ziling², Zhang Meng³, and Gao Fengli¹

¹Department of Nursing, Tsinghua Changgung Hospital, School of Clinical Medicine, Tsinghua Medicine, Tsinghua University, China

²Department of Hematology, Peking University First Hospital, China

³Department of Nursing, Peking University First Hospital, China

Career Adaptability Among Junior Nurses: The Roles of Demographic Factors, Practice Environment, Psychological Flexibility

Background: Career adaptability is a pivotal factor influencing nurses' well-being and professional performance. This study explored the relationships between practice environment, psychological flexibility, and career adaptability among junior nurses, with the goal of informing strategies to enhance adaptability and mitigate turnover.

Methods: We conducted a multicenter cross-sectional study across four hospitals in China. An online-based survey was used to recruit junior nurses from February to October 2023. Data was collected using a general information questionnaire, the Career Adapt-Abilities Scale, the Practice Environment Scale, and the Personalized Psychological Flexibility Index. Hierarchical regression analysis was employed to identify factors associated with career adaptability. The Wilcoxon-Mann-Whitney test, Kruskal-Wallis test, Spearman correlation, and hierarchical regression were used to analyze the data.

Results: A total of 810 valid responses were analyzed. The total score for junior nurses' career adaptability was 77.28 ± 19.71 , indicating a low level of adaptability. Higher career adaptability was observed among female junior nurses, and junior nurses with postgraduate education, married marital status, four-year work experience, day-shift pattern, monthly income ≥ 10001 yuan. Spearman correlation analysis revealed that both practice environment ($r = 0.260$) and psychological flexibility ($r = 0.590$) correlated significantly with the career adaptability of junior nurses (all $P < 0.001$). The regression model indicated that both practice environment and psychological flexibility influenced career adaptability in this population ($P < 0.001$).

Conclusions: Practice environment and psychological flexibility are critical determinants of career adaptability among junior nurses. Nurse managers should prioritize fostering a supportive practice environment and implementing psychological training programs to improve psychological flexibility and career adaptability among junior nurses, thereby

addressing workforce retention challenges.

Implications for Nursing Management

Nurse managers should create a supportive practice environment and provide psychological training to enhance psychological flexibility in junior nurses and improve their career adaptability, thus reducing staff turnover.

Biography

Zhao Yue holds a Doctor of Philosophy (PhD) in Nursing and currently serves as a nursing administrator at a hospital. With a dual focus on clinical management and academic research, Zhao Yue devotes efforts to two core areas: nurse mental health promotion and evidence-based nursing. Committed to enhancing nurses' psychological well-being through targeted interventions and advancing standardized nursing practices via evidence-based approaches, Zhao Yue bridges theoretical insights with frontline care needs, contributing to both the improvement of nursing quality and the sustainability of healthcare teams.



Hyeong-Kyun Lim* and Jung-Hun Yeum

Department of Environmental Landscape Architecture,
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Republic of Korea

Analysis of EEG Characteristics According to Planting Layer Structures in Urban Parks

Rapid urbanization and population concentration are associated with higher levels of stress and depressive symptoms. Urban parks play an important role in supporting stress reduction and emotional restoration. This study presented images with different planting layer structures in a VR environment and measured EEG responses to quantitatively analyze the relationship between planting structure and stress reduction effects. The study sites were selected from 29 children's parks in Gangneung-si, and three parks with high use intensity were chosen. Seven planting layer structure types were derived and presented as visual stimuli to 20 university students using a Meta Quest 3 VR headset. EEG was measured using 16 channels. Alpha waves increased from single-layer to double-layer and multi-layer structures, whereas beta and high-beta waves decreased. Relaxation indices (RAB, RAHB, RST) were highest in the multi-layer structure. In the comparison between double-layer structures, the broad-leaved type showed higher alpha and relaxation values than the coniferous type. Overall, stress reduction tended to improve from single-layer to multi-layer structures, suggesting that these results may serve as basic data for planting design strategies in urban parks aimed at enhancing stress reduction effects.

Biography

Hyeong-Kyun Lim is a master's student in the Department of Environmental Landscape Architecture at Kangwon National University, South Korea. Research focuses on landscape ecology, urban green spaces, and nature-based solutions for human health and well-being. This work was supported by the National Research Foundation of Korea (No. RS-2024-00339194).



Dr. Varshini Murugan

Founder & CEO, NeuraX Cognitive Solutions Private Limited,
India

From Molecules to Algorithms: Integrating Blood Biomarkers, Digital Biomarkers, and Computational Neuroscience for Precision Brain Health

Background: Neurological disorders, particularly Alzheimer's disease and related dementias, represent a growing global health challenge with substantial clinical and socioeconomic implications. Conventional approaches largely rely on episodic assessments and often detect disease after significant neuronal injury has occurred. Recent advances in blood-based biomarkers, digital biomarkers, and computational neuroscience offer an opportunity to transition from reactive disease management to continuous and precision-based brain health monitoring.

Objective: To review emerging evidence supporting the integration of chemical biomarkers, digital biomarkers, and computational approaches for early detection, risk stratification, and longitudinal monitoring of neurodegenerative disorders, and to explore their implications for future neurotechnology infrastructures.

Methods: A narrative review of previously published literature and contemporary evidence was conducted focusing on blood biomarkers, including phosphorylated tau-217 (p-tau217), glial fibrillary acidic protein (GFAP), and neurofilament light chain (NfL). Advances in digital biomarkers derived from wearable devices, electroencephalography (EEG), sleep metrics, cognitive assessments, and passive physiological monitoring were examined. Recent developments in computational neuroscience, machine learning, and predictive modeling were also evaluated.

Results: Emerging evidence suggests that blood biomarkers such as p-tau217 possess high diagnostic accuracy for Alzheimer's disease and may facilitate earlier identification of neurodegeneration. Similarly, GFAP and NfL have demonstrated promise as indicators of neuroinflammation and neuronal injury. Parallel developments in digital biomarkers enable continuous monitoring of cognitive performance, sleep architecture, motor activity, and physiological variability through wearable technologies and EEG systems. Computational

neuroscience and artificial intelligence permit multimodal integration of molecular, physiological, and behavioral data, enabling predictive models capable of identifying subtle changes preceding clinical decline. Such approaches have the potential to support personalized interventions and longitudinal disease monitoring beyond conventional clinical encounters.

Conclusion: The convergence of blood biomarkers, digital biomarkers, and computational neuroscience represents a paradigm shift toward precision brain health. Future neurotechnology infrastructures are likely to integrate molecular signatures with continuously acquired physiological and behavioral data to enable earlier diagnosis, individualized treatment strategies, and improved neurological outcomes. Moving from isolated measurements to intelligent longitudinal systems may redefine how neurodegenerative disorders are detected, monitored, and managed across the continuum of care.

Biography

Dr. Varshini M.D. is a physician, health-tech entrepreneur, and Founder of NeuraX Cognitive Solutions Pvt. Ltd., an AI-enabled precision neurotechnology startup focused on post-stroke cognitive rehabilitation, digital biomarkers, and neurological monitoring. She completed her MBBS from Stanley Medical College and Hospital, Chennai, and has expertise in clinical medicine, neuroscience, digital health innovation, and public health initiatives.

Through NeuraX Cognitive Solutions, Dr. Varshini is pioneering AI-assisted multimodal cognitive assessment systems integrating digital neuropsychology, neurobehavioral analytics, neuroanatomical mapping, and remote rehabilitation pathways to support stroke survivors and individuals at risk of cognitive impairment.

An international award recipient and recognized youth leader, Dr. Varshini has represented healthcare innovation platforms globally, advocating for technology-driven and data-based solutions to improve neurological healthcare accessibility. Her mission is to democratize cognitive healthcare and build scalable neurotechnology ecosystems that bridge neuroscience research with real-world patient care.



Seohyung Ahn*

Korean Minjok Leadership Academy
Republic of Korea

Ear Molding Grade

Objective: Ear molding for treatment of congenital ear deformities is effective and safe, so the use of ear correction devices is increasing in newborns. But there is no unified standard grading for evaluating the outcomes of ear molding. Methods: We investigated how each study evaluated the effectiveness after ear molding. The search encompassed English databases and full text except case study including PubMed from January 2016 to April 2026. Results: A total of 22 studies about ear molding were eligible. 6 studies use 'effective rate' and 3 studies use from 1 to 5 scores to evaluate the result. The rest of 13 studies use 3 or more things of Excellent, Good, Fair and Poor. Conclusion: It is expected that various ear correction devices will be developed and applied. To assess the corrective effect, we suggest standardizing grades the assessment of ear molding to 'Excellent/Good/Poor' and refer to it as "Nathan's grades of newborn's ear molding".

Biography

Seohyung Ahn was born in 2010 and is a student of Korean Minjok Leadership Academy (high school). Having lived in Bordeaux, France for two years (2019–2021), she has a deep interest in biology and medicine and has invented a neonatal ear correction device. She continues to challenge herself in new research and emerging fields.



**Mylène Telliez-Gardoque^{*1,3},
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¹Faculty of Health Sciences, University of Reunion Island, France

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Advanced Practice Nurse Training in Reunion Island: A Three-Year Review and Transition to a Hybrid Model to Promote Territorial Equity in the Indian Ocean

Background: Advanced Practice Nurse (APN) training program, established in 2023 in Reunion Island and Mayotte, awards a State Diploma recognized as a Master's degree. This program developed to improve healthcare access and support chronic disease management in Indian Ocean French overseas territories. The region faces a major healthcare gap between Réunion and Mayotte, compounded by a critical shortage of specialists and growing medical deserts in isolated areas. While advanced practice is a key lever for medical equity, insularity remains a structural barrier.

Objective: To evaluate effectiveness of the current in-person training model and justify the transition towards a blended learning model for territorial equity.

Mixed methods:

- Candidate withdrawal qualitative analysis of over last three application cycles.
- Teaching and internships satisfaction quantitative questionnaires through three (2023, 2024, 2025).
- Professional integration quantitative survey of the first graduating class (2025).

Results: Significant dropout rates were observed among candidates from Mayotte, primarily due to mobility challenges.

Student satisfaction with the APN training in Reunion remained consistently high over three years.

93% of graduates secured professional positions within six months post-graduation. Student feedback highlighted quality of teaching, clinical challenges, and financial and familial difficulties related to relocating for training.

Conclusions: 2026/2027 session will adopt a blended learning format to:

- Maintain pedagogical quality.
- Neutralize geographical barriers.
- Encourage professional anchoring of APN in Mayotte from the training phase.

Training quality measured by academic performances but also by adaptability to real-life challenges. Hybridized program is a strategic lever to ensure healthcare access in Indian Ocean.

Biography

As the educational coordinator for the Advanced Practice Nurse (APN) training programme since its creation in 2023 on Reunion Island, I oversee the strategic roll-out of this new curriculum. My career is based on solid experience as a general care nurse, complemented by expertise in educational engineering acquired as a senior nurse trainer at a nursing training institute. With a master's degree in quality and risk management, I combine organisational rigour with clinical vision. Today, I use my skills to ensure the academic excellence of the IPA Master's programme while adapting the learning methods to the geographical challenges and specific health needs of the Indian Ocean territories.



Tyagi C.*, Tyagi U., Tyagi V., Dey S.

DiagNXT, Vectorise Global Pvt. Ltd., India

Can Routine Healthcare Data Be Trusted for Artificial Intelligence? Evidence from 10,000 Outpatient Encounters

Artificial Intelligence (AI) is increasingly adopted for clinical decision support, disease surveillance, and health system management; however, healthcare data quality and trustworthy AI deployment remain significant barriers to real-world implementation [Weiskopf & Weng, 2013; Amin et al., 2024]. This study aimed to evaluate the suitability of routine outpatient healthcare data for AI-enabled clinical intelligence and public health applications. Exploratory descriptive analysis and data quality assessment were performed on approximately 10,000 anonymised outpatient encounters obtained during a healthcare innovation challenge. The dataset contained routine clinical observations, symptom information, presenting complaints, and clinician-assigned severity indicators. Analysis identified substantial data quality deficiencies, including physiologically impossible observations such as systolic blood pressure of 2,147,483,647 mmHg, diastolic blood pressure of 10,080 mmHg, pulse rate of 821 beats per minute, oxygen saturation of 999%, and random blood sugar of 100,130 mg dl⁻¹ [Kahn et al., 2016]. Simultaneously, clinically significant events were severely underrepresented: no recorded temperatures above 104°F, only 3 pulse-rate observations above 130 beats per minute, 38 cases with systolic blood pressure ≥ 180 mmHg, 89 cases with oxygen saturation $\leq 90\%$, and only 43 records at the highest severity level [Nestor et al., 2019; Rusanov et al., 2014]. These findings demonstrate that routine outpatient datasets may contain both extreme documentation errors and severe class imbalance, creating significant risks for AI model development, validation, and deployment. The findings reinforce the importance of clinical data governance, explainable and human-in-the-loop AI approaches, and workflow-centred validation frameworks for healthcare AI systems [Liao et al., 2022]. This study contributes to Digital Health and Public Health Informatics by highlighting robust data quality assessment, clinical oversight, and disease surveillance analytics as prerequisites for reliable clinical workflow intelligence and population-level health insights.

Biography

A member of the Global Alliance for AI's Social Good and Inclusion Council, Chirag Tyagi has spent six years deploying AI across governments and public institutions. Seeing healthcare lag where every other sector thrives, he co-founded DiagNXT — to build the evidence, standards, and trust responsible clinical AI demands.



Sharick Graciela Braca Torres

Manuela Beltran University, Colombia

The Role of Nursing in School Health: A Scoping Review

School health has become a relevant area for the development of preventive strategies, health promotion, and comprehensive care for children and adolescents.

This research analyzes the role of nursing professionals in school environments through a Scoping Review approach, identifying competencies, interventions, challenges, and opportunities for strengthening nursing practice in educational settings.

The study highlights that school nurses contribute significantly to the creation of healthy environments through education, disease prevention, early detection of health conditions, emotional support, emergency response, and coordination between healthcare systems and educational communities.

Background and Rationale: Educational institutions represent key spaces where health behaviors are established and where early interventions can improve quality of life.

The integration of nursing professionals into schools allows continuous health monitoring, promotes self-care, supports vulnerable students, and strengthens collaboration among students, families, teachers, and healthcare providers.

Despite international evidence supporting school nursing, implementation remains unequal due to differences in health policies, professional recognition, and availability of nursing services.

Scientific Gap: Although school nursing demonstrates positive impacts worldwide, there are still limitations regarding standardized roles, regulations, and research production in several contexts, including Latin America. Identifying current evidence is necessary to understand how nurses contribute to educational and health outcomes.

Research Objective: To analyze scientific evidence regarding the role of nursing professionals in school health environments, including their functions, competencies, interventions, barriers, and contributions to student well-being.

Methodology: A Scoping Review methodology was conducted following the Joanna Briggs Institute (JBI) framework. The PCC model (Population, Concept, Context) guided the research process.

Population: Nursing professionals involved in school health. Concept: Roles, competencies, and interventions of school nursing. Context: Educational institutions and school health environments.

Scientific literature was explored through databases including PubMed, SciELO, Scopus, and academic sources.

Studies related to health promotion, prevention, nursing interventions, and school-based care were considered.

Main Findings: The evidence demonstrates that school nurses perform multiple functions:

- Health education for students, teachers, and families.
- Prevention programs and promotion of healthy lifestyles.
- Management of chronic diseases and emergency situations.
- Support for mental health and emotional well-being.
- Development of inclusive and safe educational environments.
- Collaboration with multidisciplinary healthcare teams.

However, barriers include limited institutional support, insufficient policies, and lack of permanent nursing positions in schools.

Discussion: School nursing represents an expansion of traditional nursing practice by incorporating community health, education, leadership, and prevention.

Nurses act not only as healthcare providers but also as educators and advocates for children's rights and well-being. Strengthening school nursing programs may contribute to healthier communities and more equitable access to preventive healthcare.

Conclusion: Nursing professionals are essential in improving school health outcomes.

Their presence in educational environments supports prevention, early intervention, health literacy, and comprehensive student care. Recognizing and strengthening the role of school nurses is an important strategy for advancing public health and improving educational environments internationally.

Biography

Manuela Beltran University, Colombia



Zhuangchao Huo*, Jia Li, Zhihui Cao, Hongxia Ban

Department of nursing, Zhuhai Campus of Zunyi Medical University, China

Evaluating Measurement Properties of Subjective Cognitive Decline Assessment Tools in Preclinical Alzheimer's Disease Based on the COSMIN Guidelines: A Systematic Review

Objective: Based on the Consensus-based Standards for the selection of health measurement instruments (COSMIN) guidelines, this study systematically evaluated the methodological quality and measurement properties of assessment tools for subjective cognitive decline (SCD) in preclinical Alzheimer's disease, aiming to identify high-quality assessment tools.

Methods: A computerized search was conducted in PubMed, Web of Science, CINAHL, EMbase, Cochrane Library, Scopus, CNKI, WanFang Database, VIP, and SinoMed (China Biology Medicine database) for literature related to the psychometric evaluation of assessment tools for SCD in preclinical Alzheimer's disease. The retrieval period spanned from the establishment of the databases to March 2, 2026. Two researchers independently screened the literature and extracted data. Methodological risk of bias and quality of measurement properties of the included studies were assessed using the COSMIN guidelines. The GRADE evidence grading system was applied to classify evidence levels, ultimately formulating recommendation levels.

Results: A total of 18 studies were included, covering 12 assessment tools for SCD: the Sahlgrenska Academy Self-reported Cognitive Impairment Questionnaire (SASCI-Q), the Subjective Cognitive Decline Questionnaire (SCD-Q), the Subjective Cognitive Decline Scale (SCDS), the Cognitive Function Instrument (CFI), the Everyday Cognition Scale (ECog), the Everyday Cognition Scale Revised (ECog-II), the McCusker Subjective Cognitive Impairment Inventory (McSCI), the Chinese version of the McCusker Subjective Cognitive Impairment Self-Report Scale (McSCI-S), the Subjective Cognitive Decline Questionnaire (17-item version) (SCD-Q17), the Subjective Cognitive Function Decline Scale for Middle-aged South Koreans (SCFD-K), the Healthy Brain 9 (HB9), and the Brief Elderly Cognitive Screening Inventory (BECSI). Among them, McSCI and SCFD-K received grade A recommendations; SCD-Q, ECog, and the Chinese version of McSCI-S received grade C recommendations; and the remaining 7 tools were classified as grade B recommendations.

Conclusions: McSCI and SCFD-K were classified as grade A recommendations and could be temporarily recommended until better evidence emerges. However, their methodological quality requires improvement, and their measurement properties need further validation.

Biography

Mr. Huo Zhuangchao is currently a postgraduate student pursuing his Master's degree in Nursing at Zunyi Medical University, Zhuhai Campus, located in Zhuhai, Guangdong, China. His primary research interests focus on geriatric nursing and chronic disease management, aiming to optimize nursing interventions and improve the quality of life for elderly patients. Prior to his postgraduate studies, he gained foundational clinical experience during his undergraduate training. He has actively participated in several academic projects investigating evidence-based nursing practices and patient safety. Committed to integrating theory with practice, he is enthusiastic about contributing to the nursing profession through rigorous research. He is also a dedicated member of his university's academic seminar group, constantly seeking to enhance his professional skills.



Sabila Nelson, Ph.D.*

Saneki Public Health Advancement for Sustainable Development (PHAS-D) Uganda Limited, Uganda

The Psychosocial and Economic Dimensions of Maternal Health Services in Sub-Saharan Africa. Implications For Proliferated Uptake

Background: The utilization of maternal health services in Sub-Saharan Africa is irregular, mainly orchestrated by psychosocial and economic considerations. International covenants to minimize maternal deaths notwithstanding, ameliorated uptake of antenatal, skilled childbirth, and postnatal management are still working in progress. Objective: This study consolidates the latest findings, 2020–2026 on the psychosocial and economic dimensions shaping uptake of maternal health services in Sub-Saharan Africa and explores implications for proliferated utilization. Methods: An account of consolidated peer-review studies and systematic reviews was carried out, emphasizing the determinants of maternal health service use covering varied sub-Saharan settings. Results: Psychosocial characteristics such as maternal literacy, gender norms, family and community support significantly influence uptake. Economic dimensions including household wealth, employment stability, and cost of care remain critical encumbrances, with countryside women unevenly excluded. Evidence demonstrates enhancing uptake by combined strategies, integrating subsidies, community health worker engagement, spousal involvement, and culturally responsive outreaches. Conclusion: Utilization of maternal health services in sub-Saharan Africa should be viewed exclusively from the medical standpoint but rather psychosocial and economic perspectives. Managing inequalities in literacy, wealth, and gender norms, while reinforcing community support and reducing financial barriers, is essential for proliferated uptake. Equity focused policies and integrated service delivery models can accelerate progress toward maternal health targets.

Biography

Saneki Public Health Advancement for Sustainable Development (PHAS-D) Uganda Limited, Uganda



Sabila Nelson, Ph.D.*

Saneki Public Health Advancement for Sustainable Development (PHAS-D) Uganda Limited, Uganda

Motivational Pathways Reinforcing Substance Use and Their Relevance for Improving Cessation Interventions in Public Health Systems

Background: Hallucinatory substances including tobacco and alcohol continually contribute highly to preventable illnesses and deaths across the globe with superfluous consequences in less affluent nations. Inasmuch as cessation interventions are available, regression rates remain significant. Objective: To examine the underlying reasons for substance abuse and evaluate the effectiveness of contemporary cessation strategies, with emphasis on applicability in resource-constrained settings. Methods: Appraisal profiling progressive global evidence from 2020 to date, behavioral science architecture and world-wide implementation experiences. Results: The motivation for substance abuse is a product of interlinked psycho-emotional factors (stress, trauma, social norms), economic constraints (affordability, susceptibility to informal-economies), and frameworks (weak regulations and enforcement, limited mental health services). Integrated programs that target a combination of mental health support, social norms, individual level interventions with strong policy enforcement show elevated outcomes. Conclusion: Cessation programs are most effective when they directly address the root causes of substance use and operate across multiple levels of influence. Integrating mental health services, strengthening policy enforcement, expanding digital support, and embedding interventions within community structures are critical for sustainable impact.

Biography

Saneki Public Health Advancement for Sustainable Development (PHAS-D) Uganda Limited, Uganda.

PHWC 2026 & WNRC 2026

JULY 17-19, 2026

Day 3
Keynote
Presentations
Session





**Henry Zeidan^{*1}, Gluzar Shah²,
Iman Zeidan³**

¹Georgia Southern University, School of Public Health, USA

²McLaren Medical Center, USA

³Central Michigan University, School of Medicine, USA

Association between Internet Use for Health Information and Alzheimer's Disease Diagnosis among Older Adults in the United States: Examining Racial and Gender Disparities

Background: Alzheimer's disease (AD) disproportionately affects racial and ethnic minority populations, who experience higher prevalence, mortality, and reduced access to timely diagnosis, treatment, and long-term care. These disparities are driven by intersecting social determinants of health, including socioeconomic disadvantage, structural racism, chronic stress, and limited access to culturally competent care. Objective: To examine the association between internet use for health or medical information and Alzheimer's disease diagnosis among older adults in the United States, and to assess whether this relationship varies by race/ethnicity, gender, and diabetes status. Methods: Data were obtained from Round 13 (2024) of the National Health and Aging Trends Study (NHATS), a nationally representative survey of adults aged ≥ 65 years. Multivariable logistic regression models estimated adjusted odds ratios (AORs) for AD diagnosis, controlling for age, sex, race/ethnicity, educational attainment, household income, and diabetes status. Results: Internet use for health information was significantly associated with Alzheimer's disease diagnosis. The association was stronger among individuals without diabetes and remained significant among those with diabetes, suggesting potential cognitive and behavioral mechanisms. Conclusion: Digital health engagement is associated with Alzheimer's disease diagnosis among older adults, with meaningful differences across sociodemographic and health subgroups. These findings highlight both the promise of digital health tools and the urgent need for equitable access and culturally responsive digital health strategies to reduce Alzheimer's disease disparities globally.

Biography

Dr. Henry Zeidan, Ph.D., DrPH, MPH, FAAC, HCLD, CC is an experienced biomedical scientist, public health professional, and High-Complexity Clinical Laboratory Director with over 30 years of academic leadership and teaching experience. He holds a DrPH in Health Leadership and an MPH from Augusta University, along with a Ph.D. in Biomedical Sciences (Biochemistry). Dr. Zeidan has served as Professor of Pharmacology, Course Director, and Acting Dean of Basic Sciences, and currently teaches graduate biomedical sciences. His expertise includes biochemistry, pharmacology, clinical chemistry, nutrition, and public health.



Yann A. Meunier, MD*

Stanford University Medical Center (Former Director, International Corporate Affairs and Business Development); Academy of Public Health; Johns Hopkins Center for Global Health; National Academy of Medicine (Brazil); Academy of Medicine (Singapore); National Academy of Medicine (USA); Australasian College of Tropical Medicine, USA

A Roadmap to Transform Global Health

After establishing a global health prioritization framework, the author will present how to build a global prevention architecture, create a global health metrics agency, redesign global health governance, build a pandemic early warning and response network, implement cross-sector health coalitions, professionalize global health leadership, integrate corporate health expertise, create a global health knowledge engine, and embed moral clarity into health decision-making.

Biography

Yann Meunier, MD is a global health expert and transforming global health pioneer. He is a physician, visionary strategist, and relentless advocate for global wellness, blending deep expertise with bold innovation to reshape the future. With over 25 years of experience working in 43 countries and living in 6 continents, spanning clinical care, corporate strategy, academic mentorship, and health promotion, he has held titles ranging from PCP, CEO, CMO, and professor to podcast creator and international conference chair. He was decorated with fellowships and honors from elite medical academies across Brazil, Singapore, Australia, Canada, and the U.S. His mission is to dismantle health disparities and reinvent global health with audacious, actionable vision.



Jessica Perkins

Tobacco Harm Reduction, United Kingdom / South Africa / France

The Potential of Oral Nicotine Pouches as a Harm Reduction Tool

Oral Nicotine Pouches (ONPs) have emerged as an unexpected breakthrough amidst the persistent public health crisis caused by tobacco smoking. With 1.27 billion smokers worldwide and 3.7 billion people affected by oral diseases, ONPs offer a risk-reduced solution that helps mitigate harm on both fronts. ONPs deliver nicotine without combustion and without tobacco — earning them a low spot on the relative risk scale. Increasingly, evidence demonstrates that ONPs may be one of the most effective smoking cessation tools available today. This research traces the origins and growth of ONPs with a particular focus on their potential in lower- and middle-income countries (LMICs) and proven benefits among women in providing a gender-sensitive solution. LMICs disproportionately bear 84% of the burden caused by the oral health crisis. The research also examines common myths and misconceptions regarding tobacco harm reduction and ONPs, providing evidence of their incorrect or outdated nature to accurately understand the potential and power of ONPs in addressing the tobacco epidemic.

Biography

Dr Delon Human is a French and South African dual citizen and physician qualified in family medicine and child health, with an MBA from Edinburgh Business School. He is a healthcare consultant specializing in global health strategy, harm reduction and health communication. He has acted as adviser to WHO Director-Generals and UN Secretary-General Ban Ki Moon. Formerly, he was Secretary General of the World Medical Association (WMA) and Secretary General of the International Food and Beverage Alliance (IFBA).



Benjamin O. Akinyemi*¹ and Alice I. Ogundele²

¹Management Consultant and Researcher, Karlstad, Sweden

²Department of Nursing, Elizade University, Ilara-Mokin, Ondo State, Nigeria

Human Resource Development Climate as a Lever for Health System Strengthening: A Comparative Study of Nurses' and Doctors' Perceptions in Nigerian Public Hospitals

Health system performance and resilience are fundamentally shaped by the capacity, motivation, and governance of the health workforce. This study examines the human resource development climate (HRDC) in public hospitals in Ondo State, Nigeria, with a focus on how organisational and leadership practices are perceived by nurses and doctors. HRDC was assessed across six dimensions: top management commitment to HRD, employee development, autonomy, openness and authenticity, rewards, performance and potential appraisal systems, and superior–subordinate relationships. A cross-sectional survey was conducted among 611 health professionals (524 nurses and 87 doctors). Results demonstrate that nurses report significantly more positive perceptions of the HRDC than doctors across most dimensions, particularly in employee development, rewards, appraisal systems, and superior–subordinate relationships. These findings highlight the importance of profession-sensitive human resource development strategies as a component of strengthening health systems, with implications for workforce engagement, retention, and performance in low- and middle-income settings.

Biography

Dr Akinyemi is a former Vice Chancellor of KIM University, Rwanda, and previously served as a Senior Lecturer in Management at the University of Rwanda. He has lived and worked across Nigeria, Botswana, Germany, and Switzerland. A certified management consultant and fellow of several professional bodies, Dr Akinyemi holds a PhD in Organisational Behaviour, a Doctor of Management, and a master's degree in Personnel Psychology.



Mika*

Master's Student in Midwifery, Universitas 'Aisyiyah
Yogyakarta, Indonesia

Non-Pharmacological Interventions to Support Maternal-Fetal Attachment Among Pregnant Women: A Scoping Review

This study is a scoping review that maps and describes non-pharmacological interventions used to support maternal-fetal attachment among pregnant women in antenatal care settings. The review was registered on the Open Science Framework (OSF) with Registration DOI: 10.17605/OSF.IO/8W47P. Maternal-Fetal Attachment (MFA) refers to the psychological bond between mothers and their unborn babies during pregnancy, and strengthening this bond through evidence-based non-pharmacological interventions has the potential to contribute to maternal well-being, early bonding, and improved outcomes for both mother and child in antenatal care settings.

Biography

Mika is a midwife and Master's student in Midwifery at Universitas 'Aisyiyah Yogyakarta, Indonesia, currently in her second semester. She completed her Diploma IV and Professional Midwifery Program at Poltekkes Kemenkes Palangka Raya in 2022. She currently works as a midwife at Permata Hati Hospital, providing care for pregnant women, mothers in labor, and newborns. Her main research interest lies in Maternal-Fetal Attachment, particularly non-pharmacological interventions that strengthen the psychological bond between mothers and their unborn babies.



Akosa Elizabeth Wambalaba*

M-PESA Foundation / Amref Health Africa, Kenya

Kenya's Social Health Insurance Fund and Women's Health Equity: Mapping Gendered Pathways within the M-PESA Foundation Health Partnership Model

Persistent disparities in maternal and newborn health outcomes remain a significant challenge in low- and middle-income countries. This paper examines a multi-level health intervention framework implemented through a coordinated collaboration of M-Pesa Health, Amref Health Africa, and digital health providers including Zuri Health. The framework integrates health system strengthening, community-based interventions, and digital health innovations to improve access to maternal, newborn, and primary healthcare in underserved counties in Kenya. Drawing on the Uzazi Salama initiative, the intervention adopts a continuum-of-care approach spanning antenatal, intrapartum, and postnatal services. Key components include upgrading health facilities, strengthening emergency obstetric and neonatal care capacity, expanding community health outreach through Community Health Volunteers, and leveraging telemedicine and tele-diagnostic platforms. The findings underscore the potential of multi-sectoral and digitally enabled health system innovations to improve healthcare access, quality, and outcomes in resource-constrained settings.

Biography

M-PESA Foundation / Amref Health Africa, Kenya



Taiwo Akanbi Olaiya*, Kehinde Omowumi Ajayi and Esther Oluwafunmilayo Olope

Department of Public Administration, Obafemi Awolowo University, Ile-Ife, Nigeria

Efficacy of Control in Public Administration: A Realist Narrative of COVID-19 Bureaucracy and Citizen's Rationality Nexus in Nigeria

The study seeks to reimagine Nigeria's handling of COVID-19 not in terms of administrative failure and civic irresponsiveness, but rather in terms of a rational process wherein institutional logic and survival instincts intersect. COVID-19 did not create dysfunction; it merely revealed the operating system of Nigeria as it is. The realist narrative challenges the binary of a dysfunctional government versus a recalcitrant citizen, arguing that both parties have been rational actors, each with fidelity to incentives inherited from the postcolonial administrative landscape. The bureaucracy used lockdowns to extract rents and sustain relevance. Palliatives succeeded as patronage vaults. Non-compliance by citizens was not moral failure; it was survival optimisation. When citizens declared that 'corona is a scam,' they offered a social judgment — opting out with semantic resistance against a state that had used public health to justify predation.

Biography

Taiwo Akanbi Olaiya is a Professor of Public Administration with multidisciplinary background in Demography & Social Statistics, Law, and Public Administration, specialising in public policy analysis, comparative politics and democratic governance.



Heather McCutcheon* and Sana Kausar Habiya

Reiki Brigade NF, USA

Investigating Perceived Stress and Pain Reduction Following Brief Reiki Sessions in High-Stress Communities: An Exploratory Study

Background: Reiki is a non-invasive modality that has shown significant promise in reducing stress and pain levels across diverse populations. Its use is expanding in hospitals where reported benefits include improvement in both physical and psychological parameters. This study focuses on brief, community-based Reiki sessions in reducing stress and pain levels in high-stress communities in Chicago. **Objectives:** To analyze changes in self-reported stress and pain levels before and after a single, ten-minute Reiki session among high-stress groups in community settings in Chicago. **Methods:** Data from 59 events between September 2022 and December 2024 was analyzed. Quantitative measurements used a 1–10 scale accompanied by facial expression visuals. Qualitative measures used open-ended post-intervention questions. All data were de-identified. **Results:** Reiki sessions were provided to 1,724 members of high-stress communities throughout Chicago. The majority of participants reported significant change in stress (72.62% reduction overall) and pain (63.34% reduction overall) following a single ten-minute session. Quantitative results were statistically significant, with a p-value of <0.01 in all categories. **Conclusions:** This study provided valuable insights into how participants perceive the impact of Reiki in reducing both stress and pain levels. More rigorous research is needed to evaluate the impact of short Reiki sessions in non-clinical settings, and repeated sessions over time.

Biography

Heather McCutcheon is a licensed massage therapist, Reiki Master, and founder/executive director of the Reiki Brigade NFP. Since 2011, she and her team have offered more than 8,000 ten-minute Reiki sessions to Chicago police and fire fighters, homeless veterans, incarcerated individuals, medical students, and conference attendees. She and co-author Sana Habiya have recently had a paper accepted by Frontiers in Psychology.



David John Wortley*

World Lifestyle Medicine Education Services (WLMES), UK

The Impact of Digital Innovation and Lifestyle Medicine on Nursing Roles and Practices

The rapid integration of digital innovation and lifestyle medicine is transforming the scope and delivery of nursing care across all healthcare settings. This presentation explores how emerging technologies—such as wearable devices, telehealth platforms, artificial intelligence, and digital therapeutics—are reshaping nursing roles from reactive care providers to proactive health partners. At the same time, the growing adoption of lifestyle medicine principles—centering on nutrition, physical activity, sleep, stress management, social connection, and substance avoidance—is expanding the nurse's role in behavior change support, patient education, and community-based prevention strategies. Through case studies and evidence-based insights, we examine how nurses are leading in digital data interpretation, remote monitoring, and personalized care planning, while also fostering patient empowerment and adherence to healthy lifestyle behaviors. The integration of these two forces is not only enhancing patient outcomes and reducing chronic disease burden but also demanding new competencies in digital literacy and interprofessional collaboration. This session highlights implications for nursing education, workforce development, and policy, and proposes a roadmap for embedding digital-lifestyle synergy into everyday practice. By embracing this dual transformation, nurses can position themselves at the forefront of a more sustainable, preventive, and person-centred healthcare model.

Biography

David Wortley is a Non-Executive Director of the World Lifestyle Medicine Education Services (WLMES) in the UK and a VP of the International Society of Digital Medicine (ISDM). He is a Fellow of the Royal Society of Arts and Commerce and a global thought leader and innovator on enabling technologies for health, education and the environment. He is on the editorial board of the Digital Medicine Journal. He is an Associate Member of the Royal Society of Medicine and a Visiting Fellow at the Faculty of Health and Social Sciences at Bournemouth University.



Gülbu Tanrıverdi*

Public Health Nursing Department, Faculty of Health,
Canakkale Onsekiz Mart University, Türkiye

Can Artificial Intelligence Reduce Social Inequity in Health?

In this study, the intersection of artificial intelligence and social justice in healthcare is examined within the context of nursing practice. Positive impacts include reducing disparities, supporting early diagnosis, enhancing transparency in decision-making, and strengthening community-based and personalized care. AI can lessen nurses' administrative workload, expand telehealth options, and create more time for direct patient engagement. Integrating AI into nursing education offers opportunities to prepare future professionals as technologically competent and ethically sensitive leaders. At the same time, AI presents significant risks. Algorithmic bias may reproduce inequities based on gender, race, or socioeconomic status. Unequal access to digital tools increases the risk of exclusion in rural areas and among low-income populations. Commercialization may weaken the humanistic values at the core of nursing. Culturally insensitive systems can undermine trust between nurses and patients, while lack of transparency raises accountability concerns. Moreover, AI cannot replace human empathy and ethical reasoning, both of which are essential in mental health, pediatric, and palliative care. Limited AI literacy among nurses further threatens the safe and equitable use of these technologies. Active participation of nurses in the design, governance, and application of AI systems is necessary to ensure that ethical, cultural, and clinical dimensions are fully integrated. Nursing curricula must be updated to include AI literacy, ethical reasoning, and cultural sensitivity. Interdisciplinary collaboration among healthcare providers, policymakers, and technology experts is essential for developing transparent and inclusive systems. When nurses engage not only as users but also as leaders and advocates, AI can become a tool that strengthens rather than weakens social justice in healthcare.

Biography

Prof. Dr. Gülbu Tanrıverdi is a Professor of Public Health Nursing at Çanakkale Onsekiz Mart University. A pioneer in transcultural nursing in Türkiye, she has served as editor of several books and authored numerous book chapters. With nearly 100 scientific articles, she has made significant contributions to the field and delivered lectures on cultural competence and sensitivity at national and international platforms. Her research applies theories such as Leininger's Sunrise Model to address the health needs of migrant and refugee communities. She has also played an active role in organizing transcultural nursing congresses in Türkiye, fostering academic growth and advancing the discipline.



Zhen-huan LIU*

Affiliated Nanhai Maternity Children's Hospital of Guangzhou
University of Chinese Medicine, China

Quality of Life in Children with Autism Spectrum Disorder

Objective: To investigate quality of life in children with autism spectrum disorder and evaluate the validity of existing QoL questionnaires for use with children with ASD aged 8–12 years. **Method:** 200 children with autism spectrum disorder (male: 118, female: 82) and 120 normal children (control group) were included. The PedsQL (Pediatric Quality of Life Inventory) was used as the primary measure. Separate path analyses were performed to evaluate models of QoL and intellectual evaluation. **Results:** The test group had lower scores on the PedsQL 4.0 universality Core scale compared with the control group. The quality of life of children with ASD was lower than that of the normal group in scores of physical functioning (62.30 ± 25.05), emotional functioning (53.57 ± 26.69), social functioning (44.63 ± 27.91), and school functioning (38.69 ± 30.60). **Conclusions:** Results suggest greater impairment in adaptive functioning and emotional disorders. For high-functioning children with ASD, potential positive development played a significant role in rehabilitation. Physicians are encouraged to evaluate for early treatment in the overall care plan.

Biography

Zhenhuan LIU is a Professor of Pediatrics and Pediatric Acupuncturist, PhD tutor. He has been engaged in pediatric clinical and child rehabilitation for 40 years, leading a rehabilitation team that has treated more than 40,000 cases of children with intellectual disability, cerebral palsy, and autism from China and more than 20 countries. More than 26,800 children with deformity returned to school and society and became self-sufficient. He is Vice-Chairman of the Rehabilitation Professional Committee for Children with Cerebral Palsy, World Federation of Chinese Medicine Societies, and Visiting Professor of the Chinese University of Hong Kong. He has edited 10 books and published 268 papers in international and Chinese medical journals.

PHWC 2026 & WNRC 2026

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Day 3
Oral
Presentations
Session





Fahima Mohammed Al Harthy*

Royal Hospital, Oman

The Effectiveness of Pre-Delivery Educational Program in Reducing the Level of Childbirth Fear Among Primigravida Mothers

Introduction: To ensure positive pregnancy and birth outcomes, healthcare providers working in antenatal clinics are expected to provide regular antenatal education to enable early detection and timely management of pregnancy-related high risks and to prevent complications during pregnancy, birth, and postnatal period (Maha, Vidya and Amandu, 2023). Primi gravida mothers experiencing fear toward the mechanism of labour. Prenatal education provides knowledge and orientation which is capable for reducing the level of fear associated with child birth. This study conducted to measure the effectiveness of pre delivery educational program on reducing the level of childbirth fear among primi gravida mothers.

Methodology: Quantitative study, the design used in this study is pre- test and post- test experimental group design. Sample size will be around 60-75 primi gravida mothers, for a period of 6 months. Educational program will be introduced for experimental group, they receive sessions about process of normal delivery, addressing the factors that leading to childbirth fear and how to overcome it, besides their routine antenatal care. The level of fear from delivery will be measured by Self-Evaluation Questionnaire (SEQ) before and after implement the educational program.

Results: The childbirth fear among experimental group reduced significantly after education . Severity of childbirth fear decreased due to the effect of educational session and mothers will feel more comfortable and being more confident after having knowledge about process of childbirth The results provide powerful evidence that the workshop significantly reduces fear of childbirth. The drop in scores is large, consistent, and highly statistically significant. This supports the effectiveness of the workshop and shows that it is a beneficial intervention for reducing childbirth anxiety.

Conclusion: Pre delivery educational program found to be more effective in reducing level of childbirth fear among primi gravida mothers.

Biography

With an experience of 21 years as staff Nurse / Midwife, I am working at Royal Hospital, the biggest Hospital in Oman as a tertiary hospital. I have been working in Maternity Unit with different experiences as staff Nurse, Senior Nurse, Shift In charge, Midwife and ward in charge. Then, Since November 2020 I have moved as part time to work with Career Development Center (CDC) twice per week as a new Project at Royal Hospital. Then from April 2021 till December 2021 I joined PMS project at Royal Hospital as a core member & received 160 hours coaching from HR consultant. From 11 September 2022 onwards I have been appointed as head Unit Nurse of Maternity Department in Royal Hospital with total workforce of 299 staff and medical orderlies with 7 wards including delivery suite, outpatients and High Dependency Wards. I always seek different areas of expertise to widen my experience and knowledge in life.



Engy Abdelrhman Khamis*

Assistant professor of Medical Surgical Nursing, Faculty of Nursing, Modern University for Technology and Information (MTI), Egypt

Effect of Educational Program on Nurses Perception Regarding Green Hospital and Attitude towards Patient Safety Guidelines

Green hospital facility aims to improve patient wellbeing, help in the healing process, and make efficient use of natural resources without harming the environment. Patient safety is the avoidance and prevention of patients' injuries or adverse events resulting from the processes of health care delivery. Aim: To evaluate the effect of educational program on perception of nurses regarding green hospital and their attitude towards patient safety guidelines. Research design: A quasi experimental pre-post-test design was utilized to achieve the aim. Setting: The study was conducted at Nasser Institute, affiliated to the secretariat of specialized medical centers, Ministry of health, Cairo, Egypt. Sampling: A purposive sample of 107 nurses. Tools: (I) A) Structured sociodemographic and work data. B) Pre-post perception questionnaire regarding smart hospitals initiative green hospitals. (II), Pre-post attitude scale towards patient safety guidelines. Results: The total positive green hospital perception of nurses was improved from 6.5% to 90.7% after the intervention. Also the total positive attitude towards patient safety guidelines by nurses was improved from 8.4% in pre-test to 86.9% in post-test. In addition to a positive significant correlation between nurses' total green hospital perception and attitude towards patient safety guidelines. Conclusion: The educational program detected improvement in the positive nurses' perception regarding green hospital and their positive attitude towards patient safety guidelines, with a strong positive correlation. Recommendation: Green hospital and patient safety guidelines should be implemented nationally to be in line with the sustainable development goals.

Biography

Assistant professor of Medical Surgical Nursing, Faculty of Nursing, Modern University for Technology and Information (MTI), Egypt



Michelle Hope-Dowey*

Anglia Ruskin University, UK

Insights of How Patients Determine the Quality of Their Care in A Ward Setting

What was investigated and why?

In the National Health Service (NHS) in the UK there have been high profile failings in quality care such as the Mid-Staffs scandal resulted in the Francis Inquiry (2013) demonstrating that quality has a role to play. Quality is often measured using objective outcome measures which have been defined by the healthcare professionals, this identified a gap in what quality means to patients. This research aimed to fill this gap by using a qualitative approach to understand quality from the patients' perspective.

The research question is: How do patients determine the quality of their care ?

The objectives are:

- To gain insight into factors that patients consider as important in their care in a ward setting
- To explore factors that influence the patients' perspective of quality

How the topic was investigated

An Instrumental multiple case study (Stake, 2006) was the methodology used in this qualitative research to allow an in-depth exploration of the factors which patients determine as contributing to the quality of their care. Using multiple forms of data, a three-phase approach was used: phase 1- documentary review, phase 2 interviews, phase 3 methodological triangulation.

What was found?

The factors which the participants identified as important in determining the quality of their care offer a novel insight into understanding the phenomenon of quality. A conceptual model was developed to capture both the objective and subjective measures of quality in healthcare. There are 21 key factors identified in the Hope model of quality alongside the internal and external assessors of quality used in the NHS in England.

What conclusions were drawn from the evidence?

This case study offers new and significant knowledge, firstly, the insight into factors that patients consider as important in their care in a ward setting. The findings identified 21 factors including the identification of a new theme which is not captured in the definition of quality. Secondly the factors that influence the patients' perspective of quality, this is determined in part through observing how other patients are treated and how staff treat each other. Finally, the use of a thematic framework supported by emojis is a novel approach to capturing the subjective measurements of quality.

Biography

Michelle is Registered Nurse passionate about quality care for patients both academically and in her professional role. With clinical expertise in haematology and oncology she has progressed into senior operational and corporate roles developing her leadership skills within both the NHS and the private sector.

As a Darzi Fellow alumnus she is passionate about high quality patient care and has experience as a specialist advisor to the CQC as well as gaining a QSIR practitioner qualification to build upon the QI skills gained during her time as a Darzi Fellow.

Michelle is a caring, approachable, and authentic leader who uses her initiative to motivate and inspire others, utilising the knowledge & skills gained during her clinical and professional leadership experience to ensure that both staff and patient experience is of a high quality.

Michelle is proud to have double Masters qualifications with an MSc in Advanced Practice (leadership) & an MBA in Health & Social Care. She is also currently a student researcher at Anglia Ruskin University on the DProf Health & Social Care programme.

PHWC 2026 & WNRC 2026

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Poster





Dr. Hazel Ebenezer*

Tobacco Harm Reduction, India

Exploring Oral Nicotine Pouches as a Region- and Gender-Sensitive Harm Reduction Solution

Despite existing global tobacco control policies, combustible tobacco use continues to burden health systems worldwide, particularly in low- and middle-income countries (LMICs) and disproportionately towards women. Oral Nicotine Pouches (ONPs) provide a region- and gender-sensitive solution to the tobacco crisis, helping address health equity and human rights in public health. Delivering nicotine without combustion and without tobacco, ONPs lie low on the scale of relative risk, making them an important alternative to smoking. This research explores the potential of ONPs in LMICs, which account for 84% of the oral health crisis. For millions using toxic oral tobacco products, ONPs offer a pathway to better health that acknowledges real-world barriers to cessation. A recent national survey in Sweden among ex-smokers found that ONPs emerged as the most effective quitting method among both genders and was three times more popular than vapes among women. Since the introduction of ONPs in 2016, Sweden has seen a 200% rise in quit rates among women. The research showcases the health gains and widespread region- and gender-sensitive benefits of adopting ONPs as a harm reduction tool.

Biography

Dr. Hazel Ebenezer is a Human Rights Consultant based in India. She holds a Ph.D. in Women's Rights Law from the University of Kent, where her research focused on the intersection of law, cultural norms, and private forms of violence against women in India. She has served as an adjunct professor and guest lecturer, and has dedicated her career to raising awareness and advocating for policies that empower individuals and communities.



Helio Caballero Rojas, PhD* and Myriam Ruiz Rodríguez, PhD

Public Health Department, Faculty of Health Sciences,
Universidad Industrial de Santander (UIS), Colombia

Primary Health Care Orientation in a University Care Model: Preventive Governance and User Experience in Primary Health Care (PHC): Gaps Between Institutional Design and Clinical Practice

Primary Health Care (PHC) reforms in Latin America increasingly emphasize prevention, continuity of care, and integrated service delivery. This study analyzes the degree of preventive orientation and organizational coherence of a university-based health care model in Colombia from the perspectives of users, health professionals, and institutional managers. A cross-sectional analytical study was conducted at UISALUD using the Primary Care Assessment Tool – Ibero-American version (PCATIA) applied to adult users (n=220), primary care professionals (n=13), and institutional managers (n=7). Findings revealed substantial differences between institutional and user perceptions of preventive care. Managers reported the highest overall PHC orientation (3.53/4), followed by users (3.15/4) and professionals (3.00/4). Accessibility emerged as the main structural weakness across all groups. The greatest discrepancy was identified in preventive orientation and anticipatory care, where users perceived substantially lower performance than professionals and managers. These results suggest that the principal challenge is not the absence of preventive policies, but rather the limited operational translation of those policies into everyday patient experience.

Biography

Helio Caballero Rojas is a nurse, magister, and PhD in public health. Researcher affiliated with the Faculty of Health Sciences at the Universidad Industrial de Santander (UIS), Colombia. His academic interests focus on Primary Health Care, epidemiology, cancer surveillance, health systems evaluation, and public health governance. His work emphasizes the evaluation of PHC-oriented organizational models and the integration of evidence-based approaches into health system decision-making.



Reem Alharbi* and Dr. Talal Qadah

Faculty of Applied Medical Science, Clinical Laboratory
Science, King Abdulaziz University, Saudi Arabia, Jeddah

Assessment of Glucose 6 Phosphate Dehydrogenase Deficiency Among Individuals with Sickle Cell Disorder

Background: Glucose 6 phosphate dehydrogenase (G6PD) deficiency and sickle cell disease (SCD) are inherited red blood cell disorders associated with oxidative stress and hemolysis. The coinheritance of these conditions may influence the hematological profile and clinical outcomes in the affected individuals. This study aimed to determine the prevalence of G6PD deficiency among SCD patients and to evaluate its association with hematological and biochemical parameters. Method: A cross-sectional study was conducted among 79 patients with confirmed SCD attending the Hematology Department at King Fahad Hospital, Almadinah between November 2024 and November 2025. G6PD enzyme activity was measured using a quantitative UV kinetic method. Statistical analysis included the Mann-Whitney U test, Fisher's exact test, and Spearman correlation analysis. Bonferroni correction was applied only for the correlation analysis to adjust for multiple correlations, with the adjusted statistical significance defined as $p=0.003$. Results: G6PD deficiency was identified in 10 of 79 patients (12.7%). G6PD-deficient patients were significantly younger than non-deficient patients (median age: 22 vs. 28.5; $p=0.01$). No statistically significant differences were observed between G6PD-deficient and non-deficient groups in hematological or biochemical parameters. However, non-deficient patients demonstrated a higher frequency of Vaso-occlusive crisis ($p=0.04$). After Bonferroni correction, significant positive correlations were observed between G6PD activity and hemoglobin ($r=0.33$, $p<0.0001$), RBC count ($r=0.24$, $p=0.001$) and hematocrit ($r=0.37$, $p<0.0001$). No significant associations were identified between G6PD activity and biochemical markers of hemolysis, including LDH and total bilirubin. Conclusion: The prevalence of G6PD deficiency among SCD patients was 12.7%. G6PD activity showed significant positive associations with erythrocyte-related parameters but not with hemolysis markers. These findings suggest a potential role of G6PD activity in maintaining erythrocyte integrity in SCD patients. Larger studies are recommended to further clarify the clinical implications of G6PD deficiency in sickle cell disease.

Biography

Reem is a Medical Laboratory Technologist specializing in Hematology and is currently pursuing a Master's degree in Hematology. She has over five years of experience in clinical laboratory practice, with particular interests in red blood cell disorders, laboratory quality management, and clinical research. Her current research focuses on the co-inheritance of sickle cell disease and glucose-6-phosphate dehydrogenase (G6PD) deficiency and their potential impact on hematological parameters and clinical outcomes. Reem is committed to advancing hematology through research that supports evidence-based patient care.



**Nahlah Alqriqri^{*1,2,3}, Safa'a Aldahlawi², Iuliana Denetiu²,
Mohannad Hazzazi^{1,2}, Majed Almashjary^{1,2,3}**

¹Department of Medical Laboratory Sciences, Faculty of Applied Medical Sciences, King Abdulaziz University, , Saudi Arabia

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Role Of Red Blood Cell Abnormalities In Enhancing Stroke Susceptibility Among Patients With Microcytic Hypochromic Anemia

Background: Stroke remains a leading cause of mortality and long-term disability worldwide, with its pathophysiology strongly influenced by alterations in blood rheology, microcirculatory flow, and oxygen transport. Red blood cells (RBCs) are key determinants of hemorheological behavior, and both structural and functional abnormalities may impair vascular perfusion. Microcytic hypochromic anemia, characterized by reduced erythrocyte size and hemoglobin content, has been associated with altered deformability and aggregation properties that may influence cerebral microcirculation and contribute to cerebrovascular vulnerability.

Aim: This study aimed to investigate the relationship between RBC abnormalities in patients with microcytic hypochromic anemia and alterations in erythrocyte aggregation behavior, with potential implications for microvascular dysfunction and cerebrovascular risk.

Methods: A case–control study was conducted including 162 participants, comprising 78 patients diagnosed with microcytic hypochromic anemia and 84 age- and sex-matched healthy controls. Hematological parameters, including hemoglobin (Hb), hematocrit (Hct), red blood cell count (RBC), mean corpuscular volume (MCV), mean corpuscular hemoglobin (MCH), mean corpuscular hemoglobin concentration (MCHC), and red cell distribution width (RDW), were measured using an automated hematology analyzer. RBC aggregation properties were evaluated using a Laser Optical Rotational Cell Analyzer (LORCA), which quantified aggregation amplitude (Amp; extent of RBC aggregation), aggregation index (AI; rate and magnitude of aggregate formation), half-time ($t_{1/2}$; time required to reach 50% of maximal aggregation), and recovery time (T_r ; time required for disaggregation and restoration of baseline cell distribution). Statistical analyses were performed to compare groups and assess

correlations between hematological indices and aggregation parameters.

Results: Patients with microcytic hypochromic anemia demonstrated significantly lower Hb, Hct, MCV, MCH, and MCHC values, alongside significantly elevated RDW levels compared with controls ($p < 0.05$). In addition, RBC aggregation amplitude, aggregation index, and recovery time were significantly reduced in the patient group ($p < 0.05$), indicating altered erythrocyte aggregation dynamics. Correlation analysis revealed significant associations between hematological indices and aggregation parameters, suggesting that changes in RBC morphology and composition are closely linked to impaired hemorheological function.

Conclusion: Microcytic hypochromic anemia is associated with both quantitative hematological abnormalities and functional alterations in RBC aggregation behavior. These rheological impairments may contribute to compromised microcirculatory flow and potentially increase susceptibility to cerebrovascular dysfunction. Evaluation of RBC aggregation properties, alongside routine hematological indices, may provide additional insight into vascular risk stratification in affected patients.

Biography

Nahlah Atallah Alqriqi is a graduate student in the Department of Medical Laboratory Technology, Faculty of Applied Medical Sciences, King Abdulaziz University, Jeddah, Saudi Arabia. She is currently pursuing her Master's degree in Hematology. Her research focuses on the role of red blood cell abnormalities in enhancing stroke susceptibility among patients with microcytic hypochromic anemia, with particular emphasis on red blood cell aggregation dynamics using advanced rheological techniques such as the Laser-Assisted Optical Rotational Cell Analyzer (LORRCA). Her academic interests include hematology, blood rheology, and the pathophysiological mechanisms linking anemia to vascular complications.



**Nour Hatem*, Muhammad Rifqi
Ihsan, Aurora Dyah Anggraini
Wijaya, Baiq Louis Felisa Amanda
and Warlia Mursida**

Faculty of Medicine and Health Sciences, University of
Mataram, Indonesia

Socio-Cultural Perspectives on the Risk of Typhoid Fever in Coastal Lombok: A Literature Review

Typhoid fever remains a significant public health problem in coastal and island communities, primarily due to limited access to clean water, inadequate sanitation facilities, inconsistent hygiene practices, and the influence of local cultural traditions. This literature review integrates recent epidemiological data and field observations from Lombok, Indonesia, to explore risk factors with a particular focus on socio-cultural aspects. The findings indicate that beyond infrastructural deficiencies, traditional practices such as eating with bare hands and sharing meals from a common container (begibung) may increase the risk of fecal-oral transmission. Furthermore, the reliance on traditional medicine often leads to delays in diagnosis and medical treatment. Similar studies in Fiji and Samoa highlight that infrastructural improvements alone are insufficient without concurrent behavioral changes. This review underscores the importance of integrated interventions that include provision of clean water, improvement of sanitation, culturally sensitive health education, and enhanced surveillance systems to sustainably control typhoid fever in coastal populations.

Biography

Nour Hatem Mohamed is an international medical student at Mataram University, Indonesia, with academic and research experience in public health, nutrition, and digital health innovation. He has published multiple peer-reviewed articles in international journals and participated in international academic programs with institutions including Harvard Faculty, Stanford University, WHO, and FIFA.



**Soko John^{*1}, Muchinga James¹,
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¹Department of Epidemiology and Biostatistics, University of Zambia, Lusaka, Zambia

²Levy Mwanawasa Medical University, Lusaka, Zambia

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Determinants of Cervical Cancer Screening Uptake among Women of Reproductive Age in Zambia: Evidence from the 2024 Zambia Demographic and Health Survey

Cervical cancer remains a major public health challenge and a leading cause of cancer-related mortality among women in low- and middle-income countries, including Zambia. This study examined the determinants of cervical cancer screening uptake among women of reproductive age in Zambia using nationally representative data from the 2024 Zambia Demographic and Health Survey. A total of 5,866 women aged 15–49 years were included. Multivariable logistic regression analyses identified factors associated with screening uptake. Only 27.2% of women had ever undergone cervical cancer screening, indicating low uptake. Screening uptake increased significantly with age — women aged 35–39 years were nearly five times more likely to be screened compared to those aged 15–19 years (AOR=4.96, 95% CI: 3.67–6.70). Women in rural areas were less likely to undergo screening (AOR=0.70). Women from the richest households had higher odds of screening (AOR=2.06). Targeted interventions focusing on rural populations, younger women, and economically disadvantaged groups are critical to improving uptake.

Biography

John Soko is a public health researcher with a background in Epidemiology and Biostatistics. He holds an MSc in Public Health and is currently pursuing a doctoral degree in Epidemiology. His research interests include disease surveillance systems, health systems strengthening, and the application of statistical and AI-driven methods in public health.



Dr. Chris E. Stout*

Founding Director, Center for Global Initiatives, USA

Humanitarian Intervention in Global Health: Methods and Tools

This presentation reviews the integration of various academic aspects of healthcare and career involvements incorporating seemingly diverse areas into a model of humanitarian intervention that is global in scale. Beginning with the diseases of poverty from a global health perspective, statistical data gives way to stories about humanitarian organizations that are as innovative in their approach as they are successful in their outcomes. Inspirational stories as well as practical tools will round out this rich and engaging presentation.

Biography

Dr. Chris Stout is a licensed clinical psychologist and international humanitarian. He is the Founding Director of the Center for Global Initiatives (a Top-Rated Nonprofit) and Executive Producer and Host of the "Living a Life in Full" podcast with an audience of over 3 million. He was a Fellow in the School of Public Health and Full Professor in Psychiatry at the University of Illinois, Chicago. He served as a NGO Special Representative and spoke at the United Nations, and is one of only 100 world-wide leaders appointed to the World Economic Forum's Global Leaders of Tomorrow. He is a Best-Selling Author, having published 38 books translated into 8 languages, and is a recipient of four Humanitarian Awards and four honorary doctorates.



Manal Abudeyah*, Nouf Al-Sadon, Hadeel Al-Amrani

Emergency Medicine Department, Prince Sultan Military
Medical City, Riyadh, Saudi Arabia`

Point-of-Care Ultrasound for Shock Assessment: Utilization, Perceptions, and Barriers Among Emergency Physicians in Riyadh, Saudi Arabia

Background: Point-of-care ultrasound (POCUS) has become an essential bedside tool for the rapid assessment of patients with shock. However, data regarding its utilization, physicians' perceptions, and barriers to implementation among emergency physicians in Saudi Arabia remain limited.

Methods: A cross-sectional survey was conducted among emergency medicine consultants, specialists, and senior residents practicing in Riyadh, Saudi Arabia. Data were collected between October 2025 and March 2026 using a validated self-administered electronic questionnaire assessing demographic characteristics, POCUS utilization, physicians' perceptions, perceived benefits, barriers to implementation, and factors associated with POCUS use. Descriptive and inferential statistical analyses were performed.

Results: A total of 152 emergency physicians were included. Frequent POCUS use for shock assessment was reported by 63.2% of participants, with the RUSH protocol being the most commonly utilized approach (90.1%). Most physicians agreed that POCUS improves diagnostic accuracy (90.8%), reduces clinical decision-making time (86.8%), and should be an essential component of emergency medicine training (93.4%). The most commonly reported barriers were time constraints (61.2%), limited access to ultrasound equipment (54.0%), and lack of formal training (51.3%). Frequent POCUS use was significantly associated with hospital type and employment in tertiary care centers, while higher perception scores were associated with greater clinical experience and frequent POCUS utilization.

Conclusion: Emergency physicians in Riyadh demonstrated high utilization and positive perceptions of POCUS for shock assessment despite persistent implementation barriers. Expanding structured ultrasound training and improving access to ultrasound equipment may facilitate broader adoption and optimize emergency care.

Biography

Dr. Manal Abudeyah, MD, is an Emergency Medicine resident at Prince Sultan Military Medical City, Riyadh, Saudi Arabia. Her academic interests include point-of-care ultrasound (POCUS), emergency ultrasound education, medical education, and clinical research. She has participated in several educational and research projects aimed at improving emergency medicine practice and patient care. Her current research focused on physicians' utilization, perceptions, and barriers to POCUS implementation in shock assessment among emergency physicians in Saudi Arabia.



**Alia Shareef*, Rati Jani, Lisa Vincze,
and Roshan Rigby**

School of Health Sciences and Social Work, Griffith University,
Australia

Quantifying the Magnitude of TAS2R38-Mediated Bitter Sensitivity in Shaping Adult Diet Quality and Eating Behaviour: Evidence from A 407-Participant Australian Cohort

Individual variation in bitter taste perception, partly mediated by polymorphisms in the TAS2R38 receptor, has been proposed as a biological determinant of dietary behaviour and obesity risk. This cross-sectional study examined 407 Australian adults classified as phenylthiocarbamide (PTC) tasters (n=211) or non-tasters (n=196). Diet quality was assessed using the Australian Recommended Food Score (ARFS), and eating behaviours were measured using the Adult Eating Behaviour Questionnaire (AEBQ). Linear regression models estimated adjusted mean differences between tasters and non-tasters, controlling for age, sex, education, income, and smoking status. Adjusted differences were small for BMI (0.77 kg/m²; 95% CI -0.27, 1.82) and overall diet quality (ARFS -0.82 points; 95% CI -2.74, 1.09). These findings suggest that TAS2R38-mediated bitter sensitivity exerts limited influence on habitual dietary patterns in contemporary adult food environments. Behavioural, environmental, and socio-demographic factors may outweigh sensory-genetic variation in shaping population-level diet quality.

Biography

Alia Shareef is a PhD candidate in Nutrition and Dietetics at Griffith University, Australia. Her research focuses on sensory biology, dietary behaviour, and population-level determinants of diet quality, investigating how genetic variation in bitter taste perception interacts with eating behaviour traits and anthropometric outcomes in adult cohorts..



**Angelica G. Macatangay, MD*, C.P.R.
Yacapin, MD, M.A. Francisco, MD**

Department of Surgery, Batangas Medical Center, Philippine

Geospatial Analysis of Level 2 and 3 Hospitals in Southern Tagalog Region IV-A

Introduction: Southern Tagalog Region IV-A (CALABARZON) is among the Philippines' most populous and rapidly urbanizing regions, yet access to advanced hospital care remains uneven. This study employs GIS technology to analyze the spatial distribution, accessibility, and population coverage of Level 2 and 3 hospitals across Region IV-A. Methods: Hospital data were sourced from the Department of Health's National Health Facility Registry. Geographic coordinates were obtained from OpenStreetMap and population data from the Philippine Statistics Authority. Using ArcGIS, hospitals were mapped, nearest facilities determined via Euclidean distance, and service populations estimated. Results: A pronounced clustering of Level 2 and 3 hospitals exists in highly urbanized areas such as Calamba, Lucena, Batangas City, and Lipa City. Remote municipalities in Quezon, Oriental Mindoro, and Occidental Mindoro face substantial access gaps, with some areas located over 100 km from the nearest advanced facility. Severe capacity mismatches were found, with some hospitals serving millions beyond their designed capacity. Conclusion: This study highlights critical geographic inequities in advanced surgical care across Southern Tagalog and Mindoro, providing actionable insights for the Department of Health, local government units, and regional planners to advance the equity goals of Universal Health Care.

Biography

Dr. Angelica Macatangay is a General Surgeon at Batangas Medical Center in the Philippines. Her medical journey is marked by her commitment to excellence and patient care. Beyond the hospital, she nurtures a deep love for the arts and is an enthusiastic stargazer who explores the night sky in her leisure time.



Ava Rose Evans, MA*

Doctor of Behavioral Health Candidate, Arizona State University

Student Achievement Success Specialist, A.T. Still University School of Osteopathic Medicine in Arizona, Phoenix, Arizona, United States

Enhancing Social Determinants of Health Screening Through Workflow Optimization in Community Clinic Settings Serving Underserved Populations

Social determinants of health (SDOH) significantly influence health outcomes, healthcare utilization, and long-term patient well-being, especially among underserved populations. Community clinics frequently serve individuals experiencing barriers such as housing instability, food insecurity, transportation challenges, financial strain, and restricted access to preventive and behavioral health services. Although SDOH screening is now widely acknowledged as essential to whole-person care, inconsistent workflows and limited integration into routine practice hinder sustainable implementation. This quality improvement project evaluates strategies to enhance SDOH screening processes in community clinics serving vulnerable populations in Arizona. The intervention incorporates a standardized screening tool, clearly defined staff roles and responsibilities, structured training protocols, referral pathways, and ongoing monitoring processes to facilitate continuous improvement. The primary objectives are to increase screening completion rates, improve provider and staff adoption, enhance workflow acceptability, and strengthen the identification and referral of unmet social needs. This project contributes to the expanding evidence base supporting integrated, patient-centered, and equitable care models.

Biography

Ava Rose Evans, MA, is a Doctor of Behavioral Health candidate at Arizona State University and serves as a Student Achievement Success Specialist at A.T. Still University School of Osteopathic Medicine in Arizona. Her professional focus includes student success, healthcare quality improvement, and the implementation of equitable systems of care for underserved populations.



Yen-Ju Chen*² and Kao Shih-Ling¹

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Taiwan

Interplay of Personality Traits, Stress, and Coping Mechanisms Among Breast Cancer Patients: A Cross-Sectional Study

Background: Breast cancer remains the leading malignancy among women in Taiwan. As survival rates improve, understanding the psychosocial determinants of patient well-being — particularly how personality influences stress management and coping — becomes a critical public health priority. **Objective:** This study investigated the correlations between physiological symptoms, personality traits, perceived stress, and coping strategies among breast cancer patients. **Methods:** A cross-sectional design was employed, utilizing structured questionnaires to survey 100 breast cancer patients at a major medical center in central Taiwan. Data collection included demographic profiles, the Big Five Personality Traits scale, a stress assessment, and a coping styles inventory. **Results:** The majority of patients (74%) sought medical intervention following self-detection of a breast lump. 'Agreeableness' was the most prominent personality trait (Mean = 5.2 ± 1.2). 'Fear' emerged as the primary stressor (Mean = 2.1 ± 1.1), with married patients reporting significantly higher stress levels. 'Acceptance' was the most prevalent coping strategy (Mean = 3.3 ± 0.7). Agreeableness and presence of a primary caregiver accounted for 22% of the variance in approach-oriented coping. **Conclusion:** Psychological resilience in breast cancer patients is multifaceted, driven by both innate personality and external support systems. Routine psychological screening and individualized coping assessments should be integrated into clinical oncology pathways.

Biography

With years of experience as a Nurse Practitioner specializing in breast cancer care within a medical center's surgical unit, my research is deeply rooted in long-term clinical observation and patient management.



Yen-Ju Chen*² and Mei-I Lin¹

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²Department of Nursing, Da-Yeh University, Changhua City, Taiwan

Leisure Activity Patterns Among Shift-Rotating Nurses: A Cross-Sectional Study in a Regional Teaching Hospital

Background: Participation in leisure activities is a proven determinant of physical and mental well-being. However, shift-rotating nurses often face significant barriers to engagement, including irregular schedules, sleep disturbances, and post-shift exhaustion. **Objective:** This study aimed to investigate the leisure activity patterns and participation preferences of shift-rotating nurses within a hospital setting. **Methods:** A cross-sectional design was employed, utilizing cluster random sampling to recruit 236 shift-rotating nurses from a regional teaching hospital in Southern Taiwan. Data were collected via structured questionnaires including a standardized Leisure Activity Participation Scale. **Results:** The mean scores for leisure activity categories, ranked from highest to lowest participation, were: (1) Recuperative/Restorative, (2) Artistic/Cultural, (3) Intellectual/Knowledge-based, (4) Social, and (5) Physical Exercise/Health-oriented, indicating a heavy reliance on passive, restorative leisure. **Conclusion:** The findings underscore a gap between passive rest and active health promotion among nursing staff. Hospital management should design health promotion programs aligned with shift-workers' needs to enhance social participation, overall well-being, and workforce retention.

Biography

With years of clinical nursing experience, I currently serve as a Nurse Practitioner in a medical center's medical unit. My research is deeply informed by my long-term involvement in frontline medical care.



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Symptom Distress, Sleep Quality, and Quality of Life Among Rhinitis Patients Following Posterior Nasal Nerve Ablation Combined with Bilateral Inferior Turbinate Radiofrequency Surgery

Background: Rhinitis is a chronic condition characterized by nasal obstruction, rhinorrhea, and sneezing, which significantly impairs patients' sleep quality and overall quality of life (QoL). There is a need to evaluate post-operative status and the interplay between symptom relief and life quality following posterior nasal nerve ablation combined with radiofrequency surgery. Objective: To investigate the current status of symptom distress, sleep quality, and quality of life in rhinitis patients who underwent posterior nasal nerve ablation combined with bilateral inferior turbinate radiofrequency surgery, and to explore the correlations among these variables. Methods: A cross-sectional descriptive design was employed with a convenience sample of 120 rhinitis patients from the otolaryngology outpatient clinic of a regional teaching hospital in Southern Taiwan. Instruments used included the SNOT-22, the Insomnia Severity Index (ISI), and the WHOQOL-BREF questionnaire. Results: Patients generally reported low to moderate symptom distress and satisfactory sleep quality. Lower symptom distress was strongly associated with improved sleep quality and higher WHOQOL-BREF scores. Symptom distress and sleep quality were significant predictors of health-related quality of life. Conclusion: Post-operative rhinitis symptoms remain closely linked to sleep patterns and life satisfaction. Clinical follow-up should include routine screening for sleep disturbances and individualized symptom management to optimize long-term quality of life.

Biography

With years of clinical nursing expertise, I currently serve as an ENT Nurse Practitioner at a medical center. My research is driven by identifying and addressing prevalent concerns among patients in clinical practice.



Chih-Ching Liu*¹ and Chien-Hui Liu²

¹Department of Health Care Management, National Taipei University of Nursing and Health Sciences, Taiwan

²Division of Emergency Medical Service, New Taipei City Fire Department, Taiwan

The Association Between COVID-19–Related Hospitalization and Suicide Risk Among People Living With Dementia in Taiwan: A Population-Based Cohort Study

Patients hospitalized due to COVID-19 infection have a significantly higher risk of suicide-attempt hospitalization compared with the general population. Individuals with dementia are also at an increased risk of COVID-19–related hospitalization. However, evidence regarding the impact of COVID-19–related hospitalization on suicide risk among patients with dementia remains limited. This retrospective cohort study investigated whether individuals with dementia who experienced COVID-19–related hospitalization had a higher risk of suicide compared with those hospitalized for respiratory tract infection (RTI). A secondary analysis of a nationwide dataset of individuals aged 20 years and older with dementia in Taiwan was conducted from January 1, 2011 to December 31, 2022. Among 25,226 patients with dementia, 16 suicide events were identified. The suicide mortality rates among patients with dementia who experienced COVID-19–related hospitalization and RTI hospitalization were 122.40 and 35.15 per 100,000 person-years, respectively. COVID-19–related hospitalization was associated with a significantly increased risk of suicide, even after adjusting for pre-existing psychiatric disorders including depression. These findings suggest that greater attention should be paid to suicidal ideation among patients with dementia following COVID-19–related hospitalization.

Biography

Dr. Chih-Ching Liu is an Associate Professor in Health Care Management at National Taipei University of Nursing and Health Sciences, Taiwan. She previously served as an official at Taiwan's Ministry of Health and Welfare and is a certified Public Health Professional. Her research focuses on healthcare services and risk assessment. She has published more than 35 papers in SCI/SSCI journals, including in JAMA Network Open, and serves on the editorial board of BMC Public Health.



**Daniel Kim*, Olga Timofeeva,
Qiheng Zhang and Nwe Nwe Soe**
UCLA Immunogenetics Center, Department of Pathology and
Laboratory Medicine, University of California Los Angeles,
United States

Optimizing Donor Selection in Hematopoietic Cell Transplantation: A Comprehensive Review

The landscape of allogeneic hematopoietic cell transplantation (HCT) has undergone a profound transformation with the advancement of post-transplant cyclophosphamide (PTCy), enabling safe and effective transplantation from haploidentical and HLA-mismatched unrelated donors. As donor availability has expanded, the challenge has shifted from identifying a suitable donor to selecting the optimal donor and transplant platform for an individual patient. Contemporary evidence demonstrates that outcomes after haploidentical and mismatched unrelated donor transplantation are broadly comparable. Donor selection should be individualized, prioritizing immunologic compatibility — particularly avoidance of donor-specific anti-HLA antibodies — alongside donor age, ethnicity, urgency of transplantation, quality of HLA mismatch, and institutional experience. Across multiple registry and retrospective studies, younger donor age consistently emerges as a dominant predictor of overall survival, often outweighing donor type itself. This evolving paradigm underscores the need for a patient-centered, risk-adapted approach to donor selection.

Biography

Daniel Kim is a student researcher working in collaboration with the UCLA Immunogenetics Center, focusing on donor–recipient matching in hematopoietic stem cell transplantation. His research emphasizes the intersection of immunogenetics and health equity, particularly addressing disparities in the bone marrow donor registry. He leads a nonprofit organization dedicated to increasing donor diversity and improving access to transplantation for underrepresented populations.



Erin Flanagan*

Health Policy, York University, Toronto, Ontario, Canada

Health Equity and the Climate Crisis: A Critical Case Study of Canada's Public Health and Policy Landscape

Background: Climate change is widely recognized as a major global health threat with disproportionately harmful effects on socially and economically marginalized populations. Despite growing evidence linking climate change to health inequities, equity considerations remain inconsistently integrated into climate and health policy in Canada. **Methods:** This dissertation employs a qualitative critical case study design informed by a critical materialist political economy framework and a health equity lens. Data are generated through critical discourse analysis of policy documents, official statements, and flagship journals produced by major Canadian public health and healthcare organizations, complemented by semi-structured interviews with key informants. **Results:** The analysis examines how climate change is framed within Canadian public health and healthcare discourse, the degree to which health equity is embedded in institutional priorities, and how power relations shape policy engagement and mobilization. Findings identify patterns of alignment and misalignment between institutional rhetoric and action, as well as structural and discursive barriers to transformative climate justice engagement. **Conclusion:** This research demonstrates the need for stronger integration of health equity and climate justice within Canadian public health and healthcare responses to the climate crisis, offering policy-relevant recommendations to support more equitable, justice-oriented, and transformative climate action.

Biography

Erin Flanagan is a PhD candidate in the Graduate Program in Health at York University. Her research examines the intersection of climate change and health equity, with a focus on how power, political economy, and institutional discourse shape public health and healthcare responses in Canada. Her work contributes to scholarship on planetary health equity, climate governance, and the social determinants of health.



Gang Liu*

Department of Radiology, Gansu Provincial Center for Disease Control and Prevention (Joint Laboratory of Institute of Radiology, Chinese Academy of Medical Sciences), China

The Central Role of Lymphocyte Damage and Immune Retention in the Pathogenesis of Long-Term COVID-19

Background: The complex immunopathological events and immune residues induced by COVID-19, including lymphocyte damage and immune retention, play central roles in long COVID-19. Objective: To elucidate the immune mechanism underlying the occurrence and persistence of COVID-19 symptoms by exploring biomarkers, diagnostic targets, the mechanism of lymphocyte damage, and manifestations of immune retention. Methods: The pre-epidemic group (2015–2017), epidemic group (2021–2024), relaxed public health intervention group (2023–2024), and control group were analyzed. White blood cell count, lymphocyte count, NLR, lymphocyte ratio (LYM%), and detection rate of lymphocyte ratios >40 were analysed. Results: From 2021–2024, NLR values continued to decrease and LYM percentage averages continued to increase. The detection rate of a lymphocyte ratio >40 was greater from 2022–2024 compared with 2021 ($P<0.01$). Neutrophil counts continued to decrease, and lymphocyte counts continued to increase. Conclusion: Long COVID-19 patients show significant clinical and immunological heterogeneity. The average LYM percentage and LYM percentage $>40\%$ were associated with immune status. Repairing the immune system damaged by the novel coronavirus can stop the continuation of the outbreak and serve as an immunotherapy target to control long-term COVID-19.

Biography

Gang Liu graduated from Lanzhou University majoring in Preventive Medicine and works in Gansu Provincial Center for Disease Control and Prevention. He is mainly engaged in research of occupational health monitoring, radiation epidemiology and biological dose estimation of radiation workers. The chromosome biological dose estimation technology he works on has reached the international advanced level.

Global Patterns in Personalized Malaria Therapy Research: Insights from a Prospective Bibliometric Review
Enwuchola Goodness Ojofuche*¹ and Obaro S. Michael^{1,2}

¹Faculty of Pharmaceutical Sciences, Department of Pharmacology and Toxicology, University of Ibadan, Nigeria ²College of Medicine, Department of Pharmacology and Therapeutics, University of Ibadan, Nigeria

Abstract Introduction: Malaria remains a major public health challenge in sub-Saharan Africa. The integration of personalized medicine — leveraging genomics, proteomics, transcriptomics, and epigenomics to tailor therapies — remains underexplored in malaria treatment, in contrast to oncology and other infectious diseases.

Methods: This study employed a bibliometric analysis of online scholarly outputs to assess the scope of personalized medicine in malaria therapy. Articles were retrieved over a six-month period using Google Scholar. A total of 462 articles were reviewed and classified by thematic direction and geographic origin.

Results: Of 462 articles reviewed, only 9 (~2%) directly addressed personalized antimalarial approaches and 18 (~4%) explored them indirectly, while 435 (94%) focused on general malaria therapy. Regional analysis showed 13 (52%) contributions from malaria endemic countries and 12 (48%) from non-endemic regions. High-income countries continue to dominate precision- and genomics-based malaria research.

Conclusion: This analysis highlights a critical gap in malaria research. Personalized antimalarial therapy has yet to be integrated into mainstream malaria research. Bridging this gap could improve drug efficacy, reduce resistance, and align malaria control strategies with global precision medicine efforts.

Biography Enwuchola Goodness Ojofuche is a recent graduate of the Faculty of Pharmaceutical Sciences, University of Ibadan, Nigeria. Her research interests focus on precision medicine, malaria therapeutics, and genomics, reflecting a commitment to advancing personalized healthcare especially in Africa. She aspires to lead research and training in personalized medicine across Africa, translating genomic insights into patient-centered solutions.



Heng Zhang^{*1,2} Zeyu Zhang¹ and Chenghao Li¹

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Worldwide Prevalence and Disability From Mental and Substance Use Disorders across Childhood and Adolescence, 1990–2021: Evidence From the Global Burden of Disease Study

Background: Mental disorders (MDs) and substance use disorders (SUDs) are a growing global health concern. The COVID-19 pandemic has further exacerbated the mental health crisis and highlighted socioeconomic inequalities. Methods: Data from the 2021 GBD study were used for analysis of MDs and SUDs. Results were stratified by age group (5 to 9, 10 to 14, 15 to 19, and 20 to 24 years) and sex. The study estimated the global burden of 12 MDs and SUDs in children and adolescents aged 5–24 years from 1990 to 2021. Results: In 2021, approximately 12.8% of children and youths aged 5 to 24 globally had at least one MD, and over 1.2% had a SUD. From 1990 to 2021, the prevalence of SUDs decreased by 19.44%, while MDs showed a 3.31% decrease until 2019, then a 9.07% increase from 2019 to 2021, particularly in anxiety and depressive disorders. Females experienced greater impact of MDs post-pandemic compared to males. Countries with high SDI shouldered disproportionately high burden, with the COVID-19 pandemic further exacerbating SDI-related inequalities. Conclusions: Notable sex and age differences of MDs and SUDs among children and adolescents point to an urgent need for sex-specific and age-specific policies. A coordinated global response is urgently needed to bridge the mental health treatment gap.

Biography

Dr. Heng Zhang, Master's Supervisor, is a recipient of the Jiangsu Provincial Youth Talent Program in Maternal and Child Health and the Wuxi Double Hundred Outstanding Young Talents Award. With over a decade of experience in medical teaching and research in child healthcare, he has extensive expertise in the assessment, diagnosis, treatment, and intervention of neurodevelopmental delays and common developmental and behavioral disorders in children including ADHD, ASD, language delays, and learning difficulties.



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Development of a Multi-Component Care Module for Post-Transient Ischemic Attack Individuals in the Klang Valley, Malaysia

Past studies reported the existence and persistence of residual impairments post-TIA. In Malaysia, limited published data on TIA patients and the absence of a locally tailored care module hinder effective management. Using the first three steps of the Design, Development and Research framework, this study identified problems, defined objectives, and developed a care module. Phase 1 involved review of 78 medical records and telephone interviews with patients to determine sociodemographic and clinical profiles, residual impairments, and information needs. Phase 2 comprised a scoping review to identify existing care programs. Most TIA cases were Malay (56.4%) and male (64.1%), with a median age of 67 years, and commonly presented with hypertension (85.9%), diabetes mellitus (80.8%), and hyperlipidaemia (56.4%). Residual impairments included fatigue (66.7%), weakness (54.2%), and balance problems (41.7%). The resulting two-section module provides targeted education and a structured physical activity program. Module validation with 12 experts yielded I-CVI scores of 0.83–1.00, with understandability and actionability scores of 86.35% and 91.67%, respectively. A valid care module addressing local post-TIA needs through evidence-based and culturally relevant content is essential for improving functional outcomes and quality of life.

Biography

Ho Wei Sheng is a PhD candidate in Physiotherapy at the National University of Malaysia (UKM), with special interests in neurological rehabilitation and stroke care. His doctoral research focuses on the development and validation of a culturally tailored, multi-component care module for individuals following transient ischaemic attack (TIA) in Malaysia.



**Karen Lynn Webb*, Cherise
Harrington, Aaron Moore, Amy
Linder and Irene Doherty**

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Adapting a Digital Weight Management Intervention for Young Adults at A Historically Black University: Preliminary Results from the BeFAB-HBCU Study

Background: Obesity and type 2 diabetes are rising disproportionately among young people, with African American students at Historically Black Colleges and Universities (HBCUs) facing unique risks due to biological, social, and environmental factors. Early intervention during young adulthood is critical to reduce long-term cardiometabolic risk. Methods: The BeFAB program, a culturally tailored digital lifestyle intervention, was adapted for HBCU students. Phase 1 formative research included surveys, focus groups, and Community Advisory Board input to identify cultural, psychosocial, and structural factors influencing health behaviors. BeFAB-HBCU was developed as a digital intervention integrating weekly mobile messages, videos, interactive newsletters, logging features, and app-based competitions. Results: The pilot is structured with two groups (n=150 students each). Preliminary results from Group 1 demonstrate high acceptability of digital delivery methods and strong student engagement. Conclusion: Findings indicate that a culturally tailored, technology-driven approach is feasible for engaging HBCU students in healthy behaviors, demonstrating the potential of mobile health interventions as scalable models for disease prevention, particularly for reducing long-term cardiometabolic disparities in young African American adults.

Biography

Dr. Karen Webb, Ph.D., RN is an Assistant Professor of Nursing at North Carolina Central University. Her research focuses on reducing health disparities and improving population health through community-based interventions targeting chronic disease. She is Co-Principal Investigator of a NIH-funded project, BeFAB, an mHealth intervention designed to improve health literacy and physical activity among students.



Kenneth R. Pelletier, PhD, MD*

Departments of Medicine, Family & Community Medicine, and Psychiatry, University of California School of Medicine, San Francisco (UCSF), USA

Change Your Genes – Change Your Life: Epigenetics of Longevity

Biology is no longer destiny. Our DNA doesn't determine our health and disease prospects, as geneticists once believed. According to the new science of epigenetics, the vast majority of our genes are fluid and dynamic — and their expression is shaped by what we think and what we do. Our genetic profile may signal an inherited vulnerability to a disease, but our choices and behaviors determine whether these genes will be switched on or off. Each of us can influence our genes to create optimal health and longevity. Dr. Pelletier will discuss the latest epigenetic research, including progress on the \$10 Million X Prize, and share timely media coverage including details of the 'Blue Zone' communities around the world and its potential impact on science. He will also cite the cutting-edge technologies that will forever change the landscape of optimal aging and longevity.

Biography

Kenneth R. Pelletier, PhD, MD is Clinical Professor of Medicine, Family and Community Medicine, and Psychiatry at UCSF, where he is Director of the Corporate Health Improvement Program (CHIP). Dr. Pelletier is also Chairman of the American Health Association and Vice President with American Specialty Health (ASH). He previously served as Clinical Professor of Medicine at Stanford University School of Medicine and Director of the Stanford Corporate Health Program, as well as Director of the NIH-funded Complementary and Alternative Medicine Program at Stanford (CAMPS).



**Kevin Saldarriaga Bedoya^{*1,2,3},
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Colombia

Telehealth Care and Clinical Outcomes in Colombian Patients with Chronic Diseases at Latin America's First Digital Hospital, 2019 to 2025: A Pre-Post Study

Background: Telehealth has been proposed as a strategy to improve the management of chronic diseases and to address inequities in healthcare access. However, long-term evidence from real-world programs in Latin America remains scarce. Objective: To evaluate the long-term clinical and social effects of a hybrid telehealth model implemented at the Alma Mater Hospital of Antioquia, the first digital hospital in Latin America, for patients with hypertension, type 2 diabetes mellitus, and dyslipidemia. Methods: A retrospective pre-post study was conducted, including 319 adults who received continuous hybrid telehealth care between 2019 and 2025. Within-patient changes were assessed using paired tests with false discovery rate adjustments. Results: Substantial reductions in hospitalizations, emergency visits, and acute complications were observed. Significant improvements were recorded in body weight, BMI, blood pressure, LDL cholesterol, triglycerides, and total cholesterol. Program adherence increased by 34 percentage points, and the proportion of participants meeting at least one international therapeutic target rose from 22 to 53 percent ($p < 0.001$). Conclusion: Hybrid telehealth care was associated with sustained improvements in cardiometabolic control and behavioral outcomes, contributing to reducing inequities in access to specialized care for low-income and geographically remote populations.

Biography

Department of Epidemiology, University of Groningen, University Medical Centre Groningen, The Netherlands



León Isaac Quispe Huaranca* and Edgar Quispe

Universidad Nacional del Altiplano Puno, Perú

Gestión Organizacional de la Atención Primaria en el Sistema Regional de Salud en Puno, Perú (Organizational Management of Primary Care in the Regional Health System in Puno, Peru)

In the globalized world, the COVID-19 pandemic generated deep concern in humanity, making it important to analyze the organizational management of primary health care in the Puno region of Peru. The methodological design is phenomenology within the framework of qualitative research. Intentional and convenience sampling was carried out in the field, identifying decision-making actors in the process of health services management at different levels of care, including the Puno Regional Health Directorate, directors of the eleven Health Networks, and two directors of regional-level hospitals. Data collection based on semi-structured interviews, focus groups, and documentary review were analyzed according to human talent management, personal behavior theory, and organizational paradigm approaches. The results of organizational management of Primary Health Care in the Puno region address six emerging subcategories: unfavorable organizational culture and climate; centralization and prioritization of curative and recuperative medicine; organizational anarchy in the regional health system with deficient governance; institutional and organizational instability; politicization of the health system; and deficiencies in the training of health professionals. Adequate human talent management will significantly contribute to renewed organizational management of the regional and national health system based on a unified and complementary model between Primary Care and curative and recuperative medicine.

Biography

Universidad Nacional del Altiplano Puno, Perú



**Lihua Huang^{*1,2}, Hongyu Hao¹,
Wenyu Wang¹, Yanshu Li¹, Yueqing
Shao¹, Yanfang Yang¹, Jinjin Cui¹
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²School of Public Health, Baotou Medical College, China

Cadmium Induced POLN Mutations Trigger M6A/ YTHDF2-HRSP12-POP1 Mediated CIRC_FANCA Degradation, Activating the TCA Cycle to Drive Malignant Transformation

Objective: This study aims to elucidate the degradation mechanism of circ_FANCA in the malignant transformation of human bronchial epithelial cells induced by cadmium and to reveal its regulatory mechanism on the tricarboxylic acid (TCA) cycle, providing new molecular targets for prevention and early diagnosis of cadmium-related lung cancer. **Methods:** Genome-wide association analysis combined with Sanger sequencing was used to predict and validate POLN gene mutation sites. High-throughput sequencing and qRT-PCR screened and validated circ_FANCA. In vivo and in vitro functional experiments established the tumor-suppressive role of circ_FANCA. RNA pull-down and western blot experiments validated the interaction between circ_FANCA and downstream target protein MYC. **Results:** (1) Mutant POLN recruits YTHDF2 and enhances m6A methylation modification; (2) The YTHDF2-HRSP12-POP1 complex specifically degrades m6A-modified circ_FANCA; (3) circ_FANCA regulates the upregulation of MYC, activates TCA cycle enzymes (ACLY/ASCT2), and drives metabolic reprogramming and malignant transformation. **Conclusion:** This study reveals that cadmium exposure induces POLN mutations, which mediate the degradation of circ_FANCA via the 'm6A/YTHDF2-HRSP12-POP1' axis, thereby activating the TCA cycle to promote metabolic reprogramming and malignant transformation.

Biography

Lihua Huang currently serves as Director of the Chinese Society of Toxicology and Director of the Chinese Society of Environmental Mutagenesis. Her primary research focuses on environmental pollutant exposure and human health effects, with particular emphasis on the toxic effects of environmental chemicals on the respiratory system and their epigenetic mechanisms. She has led four National Natural Science Foundation projects and published over 40 papers as first or corresponding author.



Lynn Nguyen*

Fruititions eTutoring, Honolulu, Hawaii, USA

Fragile Minds in Fragile States: Cognitive and Emotional Impacts of Chronic Instability on Young Children

Children living through humanitarian emergencies experience some of the most profound and lasting consequences of crisis. This presentation examines how conflict, displacement, natural disasters, and public health emergencies fracture the foundational stages of early childhood development, creating cascading effects on physical, cognitive, social, and emotional wellbeing. Early childhood is defined by rapid brain growth and intense environmental sensitivity. When families are uprooted and community systems collapse, the conditions required for healthy development are destabilized. The session highlights the core developmental domains most affected during emergencies, including attachment and caregiver bonding, early learning opportunities, nutrition, emotional regulation, and language acquisition. Research shows that toxic stress, when prolonged and unbuffered, can alter neural pathways, shaping lifelong trajectories in education, behavior, and health. Evidence-based strategies for resilience and recovery include child-friendly spaces, supportive parenting programs, early learning in crisis contexts, and trauma-informed community care. The presentation concludes with recommendations for public health practitioners and policymakers, including prioritizing early childhood development within emergency response plans and investing in caregiver mental health.

Biography

Ms. Lynn Nguyen is dedicated to advancing equitable mental health support for communities affected by humanitarian emergencies. With experience in community engagement, crisis response, and trauma-informed practice, her work centers on amplifying the voices of women, children, and displaced families. She has contributed to cross-sector collaborations that strengthen service access, improve culturally grounded care, and address systemic gaps that worsen mental health outcomes during crises.



Dr. Nguyen Nhat Dinh Ngo

Department of Cardiology, Hoan My Sai Gon Hospital, Ho Chi Minh City, Vietnam

A Rare Case: Primary Pericardial Tumor

Background: Pericardial tumors are rare entities, often incidentally discovered when presenting with a combination of pericardial and pleural effusion, arrhythmias, and pulmonary embolic complications. Methods: Case report. Results: A rare case of pericardial tumor diagnosed and managed at Hoan My Saigon Hospital is reported. The patient, a female, was found to have pericardial and pleural effusion secondary to a pericardial tumor, which was promptly diagnosed and treated. Conclusion: Pericardial tumors are uncommon and present with diverse and potentially life-threatening clinical manifestations if not identified in a timely manner. In cases of massive pericardial effusion accompanied by arrhythmia and pulmonary embolism, malignancy should be considered. Tissue biopsy and multimodal therapy are key to improving patient prognosis.

Biography

Dr. Ngo Nguyen Nhat Dinh is a cardiology internist at Hoan My Saigon Hospital. She graduated from the University of Medicine and Pharmacy at Ho Chi Minh City and has over four years of clinical experience. She has published a case report on severe hypertriglyceridemia and presented on oxygen therapy and HFNC at the Hanoi International Cardiology Conference.



Nikita Khoo*

College of Integrative Studies, Singapore Management University, Singapore

The Invisible Middle: Healthcare Access Inequities Among the Sandwiched Class in Urban Singapore

As the population ages and healthcare costs rise globally, middle-income families increasingly face financial and caregiving pressures that challenge traditional assumptions of economic security. Policy frameworks prioritize support of the low-income population, leaving an increasing number of working adults insufficiently protected. This study examines the inequalities in access to healthcare faced by middle-income individuals who simultaneously support dependent children and elderly parents in Singapore's urban healthcare system. Despite Singapore's internationally recognized health efficiency and universal coverage mechanisms, middle-income families may face structural vulnerability due to subsidy eligibility thresholds, cost-sharing requirements, and the increasing burden of chronic disease and long-term care. Using Singapore as a case study, this research draws on social determinants of health frameworks, the healthcare access pathway model, and policy implementation literature. The findings highlight the need to expand the health equity framework beyond poverty-focused models to include the vulnerability of middle-income populations in aging societies. Policy implications include redesigning subsidy thresholds, strengthening carer support mechanisms, and improving financial protection for chronic and long-term care needs.

Biography

Nikita Khoo is a PhD candidate in Asian Urbanism at Singapore Management University. Her research examines the intersection of health policy, urban governance, and social determinants of health, with a focus on healthcare equity and middle-income vulnerability in ageing societies. She has professional experience in health economics, policy research, and healthcare market access.



Olena Hankivsky, PhD*

School of Public Policy, Simon Fraser University, Vancouver, Canada

Strengthening Intersectionality-Based Policy Analysis to Advance Health Equity

Intersectionality is recognized as a vital framework for analyzing and addressing how multiple, overlapping social identities and systems of power shape inequities and privilege. Based on a 4.5-year research project funded by the Canadian Institutes of Health Research (CIHR), this paper presents findings from a variety of studies examining the state of intersectionality-informed policy-relevant research and practice internationally. These include two international workshops with researchers, community-based and NGO actors, and policy actors from government and international organizations; textual critical analysis of existing guides; in-depth interviews with those who have developed guidance from around the world; and survey results from those who have engaged with the Intersectionality-Based Policy Analysis Framework (Hankivsky et al. 2012) — recognized as one of the most promising practices in operationalizing intersectionality. The results show what is required for the operationalization of intersectionality to fully reach its transformational potential for advancing equity and social justice in health policy.

Biography

Olena Hankivsky is a Professor in the School of Public Policy and Founder and Director of the Institute for Intersectionality Research and Policy, Simon Fraser University, Vancouver, Canada. She is recognized for her work applying intersectionality in research and policy with a specific focus on health. She has over 20 years of experience working across academic, government, NGO, and international organizations including WHO and UN. She has been a Visiting Professor at the Graduate Institute Geneva, London School of Hygiene and Tropical Medicine, and Columbia University. Patient Activation, Functional Status, and Quality of Life in Women with Fibromyalgia: A Cross-Sectional Study Rachel Shvartsur*^{1,2}, Mirel Spektorman², Dafna Grosberg³, Racheli Magnezi² ¹Department of Management, Faculty of Social Sciences, Bar-Ilan University, Ramat-Gan, Israel ²Department of Nursing, School of Health Sciences, Ashkelon Academic College, Ashkelon, Israel ³The Pain Rehabilitation Unit, Sheba Medical Center, Tel Hashomer, Ramat Gan, Israel Abstract Background: Patient activation — an

individual's knowledge, skills, and confidence in managing health — has been linked to improved outcomes in chronic illnesses. Its role in fibromyalgia, particularly among women, remains underexplored. Objective: To examine associations between patient activation, functional status, and health-related quality of life (HRQoL) in women with fibromyalgia. Methods: A cross-sectional online survey was conducted with 233 Israeli women recruited via the ASAF Fibromyalgia Association. Validated measures included the Patient Activation Measure (PAM-13), Revised Fibromyalgia Impact Questionnaire (FIQR), and Short Form-12 (SF-12) for HRQoL. Results: PAM scores correlated positively with MCS-12 ($r=.27$, $p<.001$) but were not significantly associated with FIQR-Total scores. Higher PCS-12 and MCS-12 scores were independently associated with lower FIQR-Total scores. Traditional religiosity was positively associated with higher FIQR-Total scores and higher MCS-12 scores. Conclusions: Patient activation may support emotional well-being in fibromyalgia patients but may be insufficient alone to reduce symptom burden. Integrated, gender-sensitive, biopsychosocial care models that enhance activation and address both physical and mental health may improve outcomes in women with fibromyalgia. Biography Dr. Rachel Shvartsur is a senior lecturer and Head of the M.S.N. program in the Department of Nursing at Ashkelon Academic College, southern Israel, and a postdoctoral researcher at Bar-Ilan University. Her expertise is in epidemiological research and public health, with a particular focus on mental health in diverse populations.



**Samina Akhtar*, Aysha Almas,
Zainab Samad, Gerald S.
Bloomfield, Salim S. Virani, and
Khairulnissa Ajani**

Aga Khan University, Karachi, Pakistan; Duke Global Health
Institute, Duke University, USA

Banking on Health: Developing a Cardiovascular Disease Prevention Intervention for Sedentary Employees in Urban Karachi, Pakistan

Background: Cardiovascular diseases (CVDs) and their risk factors are leading causes of morbidity and mortality worldwide, with physical inactivity and unhealthy dietary practices as key modifiable contributors. Sedentary employees, such as bank workers, are at high risk of CVD due to prolonged sedentary work nature and work-related stress. This study aimed to explore awareness, perceptions, and intervention preferences for CVD prevention among bank employees in urban Karachi, Pakistan. **Methods:** This exploratory qualitative study is part of the m-LiFE (mobile-based Lifestyle Intervention for Employees), a pilot cluster randomized controlled trial (NCT06981247). Bank employees aged 20–65 years across 3 bank organizations were purposively selected. Data were collected from six focus group discussions (FGDs) and nine in-depth interviews (IDIs). **Results:** Four major themes emerged: (1) Awareness – participants demonstrated moderate awareness of CVD risks; (2) Perceptions – participants attributed CVD risk to urban lifestyles, poor dietary habits, and physical inactivity; (3) Existing Workplace Initiatives – banks occasionally organized health campaigns but none addressed long-term strategies; (4) Preferences – participants preferred low-burden, context-sensitive digital health interventions. **Conclusion:** Bank employees are aware of CVD risks but face psychosocial and structural barriers to healthy behavior change. They prefer interventions that are low-effort, tech-enabled, and integrated into daily routines.

Biography

Samina Akhtar is a PhD candidate in Population and Public Health at Aga Khan University, where she also serves as an Instructor in Research. Her research focuses on the prevention and management of non-communicable diseases (NCDs), with a particular emphasis on cardiovascular health. She is passionate about developing and implementing innovative, evidence-based interventions that promote healthier lifestyles in diverse populations. Her current PhD project is pioneering in Pakistan, introducing workplace-based interventions aimed at reducing cardiovascular risk among sedentary employees.



Sheow Yun Sie*, Claire Barbander, and Cara English

Department of Psychology, Queens College, City University of New York; Department of Psychology, CUNY Graduate Center; Cummings Graduate Institute for Behavioral Health Studies, United States of America

Clinical Pathway for Autistic Children with Comorbid Epilepsy: A Multidisciplinary Care Model

Children diagnosed with autism spectrum disorder (ASD) and co-occurring epilepsy experience some of the most complex challenges in pediatric care. These conditions are typically managed in fragmented systems, leading to delayed interventions, poorer health outcomes, and significant caregiver burden. This project proposes and evaluates a novel multidisciplinary clinical pathway implemented at The Precious Child (TPC), an applied behavior analysis (ABA) agency. The pathway integrates external specialist consultations with TPC's internal ABA services. A Doctor of Behavioral Health (DBH) functions as the primary care coordinator. Preliminary financial modeling indicates a 37.14% return on investment through reductions in emergency department visits, hospital admissions, and staff turnover. Beyond cost savings, the pathway demonstrates improvements in clinical outcomes including seizure management, adaptive functioning, and social skills. This model provides an innovative framework for addressing the dual diagnosis of ASD and epilepsy, advancing health equity, optimizing resource allocation, and establishing a replicable model of integrated care.

Biography

Sheow Yun Sie, MA, BCBA, LBA, is a Licensed and Board-Certified Behavior Analyst and Clinical Research Coordinator in the Stress in Pregnancy (SIP) Lab at Queens College, City University of New York. Since 2019, she has coordinated research on prenatal stress, neurodevelopment, and child outcomes, contributing to multiple peer-reviewed publications. Currently a Doctor of Behavioral Health (DBH) candidate at the Cummings Graduate Institute, her work bridges clinical practice, research, and health systems innovation in integrated care.



Shuo Sheng*

Lead Researcher, China

Epidemic Intelligence at Scale: Federated Multimodal Large Language Models Leveraged by Compute Network Convergence

Background: The next wave of public-health threats will be signalled by heterogeneous data—text, imaging, genomics, mobility, IoT. Training centralised AI on such sensitive, geo-distributed corpora is often unlawful or infeasible. We describe a federated, bandwidth-aware framework enabling privacy-preserving continual learning of trillion-parameter multimodal LLMs. Methods: Partitioned-parameter LLM (Transformer-XL) with cross-modal alignment layers; dynamic token/sample-selection to minimise upstream traffic (<3% of raw data); asynchronous federated learning with differential privacy ($\epsilon \leq 1$); intent-based network orchestration (SONATA 3.0) for sub-10 ms edge inference. Results: Pilot on 4.2M chest X-rays, 1.1B social-media posts and 0.9M wastewater samples across 14 APAC cities showed 37% higher F1 in early outbreak detection (0.93 vs 0.68), 48% reduction in training energy, and inference latency ≤ 120 ms on 5G. Conclusions: Compute-network synergy turns raw telco infrastructure into a communal AI super-computer, letting health authorities share models instead of data.

Biography

Lead Researcher, China



Sohyun Park*, Mijung Park, and Sunhee Park

Department of Infectious Disease Research, Busan
Metropolitan City Institute of Health and Environment, Republic
of Korea

Carbapenem Resistance and Carbapenemases in Bloodstream Enterobacterales, Busan, South Korea, 2018–2024

Carbapenem-resistant Enterobacterales (CRE) have emerged as a major global public health threat due to limited therapeutic options and high mortality rates, particularly in bloodstream infections. This study investigated the distribution of species, antimicrobial resistance patterns, and carbapenemase genotypes among CRE isolates recovered from bloodstream infections in Busan, South Korea, from 2018 to 2024. A total of 609 non-duplicate CRE isolates collected from 51 healthcare institutions were analyzed. *Klebsiella pneumoniae* was the predominant species (81.8%), followed by *Escherichia coli* (11.7%) and *Enterobacter* spp. (4.6%). Carbapenemase-producing Enterobacterales (CPE) accounted for 98.2% of isolates, with KPC-type carbapenemases being most prevalent (88.2%). These findings indicate that KPC-2-producing *K. pneumoniae* remains the principal driver of CRE bloodstream infections in Busan. The presence of multiple carbapenemase genotypes across healthcare institutions suggests ongoing regional dissemination of resistance determinants.

Biography

Sohyun Park, PhD, is a public health researcher at the Busan Metropolitan City Institute of Health and Environment, Republic of Korea. She plays a leading role in regional surveillance of infectious diseases, antimicrobial resistance, and foodborne pathogens. Her work integrates laboratory-based diagnostics with epidemiological analysis to support rapid and evidence-based responses.



T. Cordova-Fraga*, LA Pérez-Martínez, BO Murillo-Ortiz and R. Guman-Cabrera

División de Ciencias e Ingenierías, Universidad de Guanajuato campus León; Unidad de Investigación Médica, OOAD Guanajuato; División de Ingenierías, Universidad de Guanajuato campus Irapuato-Salamanca, México

Automated Detection and Characterization of Renal Lithiasis by Using U-Net and Hounsfield Unit Analysis in CT Scans

An automated methodology for the detection and characterization of renal lithiasis in DICOM-formatted CT scans is presented, combining a U-Net convolutional neural network (CNN) with quantitative Hounsfield Unit (HU) analysis. The U-Net architecture was trained for precise kidney segmentation, followed by morphological filtering to eliminate erroneous regions while preserving anatomical structures. A threshold of 300 HU was applied to identify calculi, generating dedicated lithiasis masks and coronal/sagittal projections. Stone density was estimated via HU histogram analysis, enabling potential chemical composition inference. Validation using standard metrics demonstrated outstanding performance: Dice coefficient (98.2%), Intersection over Union (IoU) (96.4%), and accuracy (99.9%). This approach enhances stone localization and supports non-invasive characterization, offering significant clinical value for diagnostic accuracy and therapeutic planning in urolithiasis management.

Biography

División de Ciencias e Ingenierías, Universidad de Guanajuato campus León



Xinya Tu*, Yi Yu and Dan Luo

Xiangya School of Public Health, Central South University,
Changsha, Hunan; FuRong Laboratory, China

A Preliminary Study on the Development and Application of a Stress Reduction Mini Program for Pregnant Women Undergoing Prenatal Diagnostic Services

Objective: This study aimed to mitigate psychological stress among pregnant women undergoing prenatal diagnostic services. We integrated the WHO Self-Help Plus intervention with a family-participatory stress reduction module and delivered this combined intervention via a WeChat mini-program. **Methods:** An intervention framework was established through literature review and multidisciplinary expert consultation. A randomized controlled pilot trial was conducted between January 1 and February 28, 2025. The intervention group received a 21-day intervention via the mini-program, whereas controls received routine care. **Results:** 40 dyads of pregnant women and their spouses were randomized to each group, and 32 dyads completed follow-up. Post-intervention analyses revealed significantly lower pregnancy-related stress, depression, and anxiety scores in the intervention group versus controls (All $P < 0.05$). Feasibility assessment showed excellent usability with acceptance and completion rates of 95% and 84% respectively. **Conclusion:** This digital stress reduction WeChat mini-program significantly alleviates psychological stress, depressive and anxiety symptoms, while enhancing family functioning. It holds considerable promise for wider application.

Biography

Dr. Tu is a lecturer at the Xiangya School of Public Health at Central South University and a 2025 CMB Global Health Leadership Fellow. She completed the eight-year MD programme at Xiangya School of Medicine and previously practised as an attending physician. Her research focuses on digital health interventions for vulnerable populations, particularly related to maternal mental health.



Yanli Zuo* and Xiaodan Li

School of Public Health, Guangxi Medical University, China

A Comparison of Work Preferences Among Guangxi's Rural Oriented Tuition Waived Medical Students During the Three Stages: University, Standardized Residency Training, and Contract Fulfillment

Background: To address the widespread attrition and instability among primary care healthcare workers, China launched the rural-oriented tuition-waived medical education (RTME) programme in 2010 to train more general practitioners for service in grassroots rural facilities. **Methods:** A discrete-choice-experiment questionnaire was developed and administered to 1,475 RTMSs recruited through stratified cluster sampling from three universities. Mixed logit models were used to estimate students' job preferences and willingness to pay for selected job attributes. **Results:** Monthly income, workplace atmosphere, workload, career-development opportunities, working conditions, and living environment all exert significant motivational effects on job preferences. Workplace atmosphere ranked first in preference weight. Job location significantly motivates job preferences of RTMSs in the service-fulfilment stage, but not those in school or in standardized residency training. **Conclusion:** The influence of economic and non-economic factors on job preferences varies across different career stages. A phased and differentiated incentive mechanism should be established to enhance the stability of primary healthcare personnel.

Biography

Yanli Zuo, Ph.D. in Social Medicine and Health Service Management, is Professor in the Department of Biostatistics, School of Public Health, Guangxi Medical University, and Visiting Scholar at Brandeis University, USA. Her primary research focuses on health policy, primary healthcare, and medical insurance systems. She has led over 20 research projects and published more than 60 papers in SCI-indexed and Chinese core journals.



Chia-Chun Lin* and Yen-Ju Chen

Department of Nursing, Changhua Christian Hospital,
Changhua City; Department of Nursing, Da-Yeh University,
Taiwan

Symptom Distress, Social Support, and Work-Related Quality of Life Among Cancer Patients

Background: Advances in oncology have significantly improved survival rates, leading to a growing population of cancer survivors who wish to remain in or return to the workforce. Work-Related Quality of Life (WRQoL) has emerged as a pivotal yet under-addressed dimension of cancer survivorship. Objective: To examine the current status, interrelationships, and influencing factors of symptom distress, social support, and WRQoL among employed cancer patients. Methods: A cross-sectional design using convenience sampling was employed. 95 cancer patients participated. Data were collected via demographic profile, Symptom Severity Scale, Social Support Scale, and the Quality of Working Life Questionnaire for Cancer Survivors (QWLQ-CS). Results: Symptom distress was significantly and negatively correlated with WRQoL ($p < 0.05$), whereas social support showed a strong positive correlation ($p < 0.01$). The final regression model explained 29% of total variance in WRQoL. Social support was the strongest positive predictor. Conclusion: WRQoL for cancer patients is determined by a complex interplay of clinical symptoms and external support systems. Public health policies should prioritize symptom management and the development of workplace-based social support networks to facilitate sustainable Return to Work pathways.

Biography

With years of experience as a Head Nurse specializing in cancer care within a medical center's medical unit, the presenter's research is deeply rooted in long-term clinical observation and patient management.



Ying Su*, Hanxin Zhang, and Michael Phillips

Suicide Research and Prevention Center, Shanghai Jiao Tong University School of Medicine Affiliated Mental Health Center, China

Expanding China's Mental Health Workforce by Training Psychologists to Administer A Standardized Psychiatric Diagnostic Instrument

Objectives: Expanding the number of mental health professionals capable of identifying mental illness, especially in primary medical institutions and communities that lack psychiatric services, is a prerequisite to increasing the availability of high-quality mental health services. We aim to train psychologists to administer SCID-5-CV and compare their diagnoses in both clinical and community settings to that of psychiatrists. **Methods:** We adapted a standardized SCID-5-CV training program for clinical psychologists, trained five psychiatrists and five psychologists, and compared their diagnoses in 50 psychiatric outpatients. Diagnostic consistency was assessed using Kappa. **Results:** Based on 49 samples, the diagnostic agreement between psychologists and psychiatrists for primary diagnoses was moderate, with a weighted kappa of 0.480. For secondary diagnoses, the weighted kappa was 0.313, indicating fair agreement. **Conclusions:** Well-trained psychologists who are qualified to administer the SCID-5-CV should be more actively involved in mental health epidemiological surveys, psychiatric research, and the delivery of mental health services in settings where psychiatrists are scarce.

Biography

Dr. Ying Su graduated from Saarland University in Germany in 2015 with a degree in Psychology. From 2016 to 2018, they worked as a postdoctoral researcher at Nanyang Technological University. Since 2019, they have been conducting research in public mental health at the Shanghai Mental Health Center.



Zeyu Zhang* and Heng Zhang

Wuxi School of Medicine, Jiangnan University, Wuxi, Jiangsu;
Department of Women Health Care, Wuxi Maternity and Child
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University, China

Global, Regional, and National Burden of Disease Attributable to Child Growth Failure, 1990–2021: Results from the GBD Study

Background: Child growth failure (CGF), expressed as stunting, wasting, and underweight in children under five years, is associated with negative health consequences. Methods: Data on disease attributable to CGF were downloaded from the Global Burden of Disease Study (GBD) 2021. Estimated annual percentage change (EAPC) was used to quantify temporal trends of CGF-related mortality and disability-adjusted life-years (DALYs) across 204 countries and territories from 1990 to 2021. Results: In 2021, CGF risks were responsible for nearly 800,000 deaths and over 70 million DALYs among children under five globally. Between 1990 and 2021, deaths and DALYs attributable to CGF decreased by 78%, with the greatest reductions in high-middle SDI regions. However, burden remained highest in low-SDI regions, particularly Western Sub-Saharan Africa. Lower respiratory infections and diarrheal diseases were the leading causes, accounting for 72% of CGF-related mortality and DALYs. Conclusions: CGF is an economic, behavioral, and cultural problem. Future policies should prioritize WASH and malaria control in low-SDI regions, strengthen gender-responsive nutrition and breastfeeding interventions globally, and enhance resource allocation through comprehensive growth monitoring.

Biography

Zeyu Zhang is currently pursuing a master's degree in public health and Preventive Medicine at Wuxi Medical School, Jiangnan University. Research focuses on retrospective analysis of the current status and high-risk factors of growth deviations in children, based on the Wuxi Medical Big Data Platform. As first author, has published a study on temporal trends in the prevalence of growth failure in China in the journal JMIR Public Health and Surveillance.



Huanhuan LIU*

School of Health Economics and Management, Nanjing
University of Chinese Medicine, Nanjing, Jiangsu, China

A Study on the Evolutionary Logic and Driving Mechanisms of China Traditional Chinese Medicine Policies Under the Theory of Discontinuous Equilibrium: A Policy Analysis 1990 to 2025

Objective: Based on the nonlinear characteristics of the evolution of traditional Chinese medicine (TCM) policies and using the theory of discontinuous equilibrium as an analytical framework, this study explores the evolutionary logic and driving mechanisms of China's TCM policies from 1990 to 2025. The findings aim to provide theoretical support and practical guidance for optimizing the TCM governance system, reducing coordination frictions, and establishing a normalized incentive mechanism. Methods: A sample of 1,243 TCM-related policy documents issued at the central government level between 1990 and 2025 was selected. A combined approach of content analysis and statistical testing was employed to systematically analyze policy intensity, the structure of policy instruments, and governance logic. Results: The distribution of TCM policy intensity exhibited a leptokurtic pattern, with a kurtosis value of 7.26—significantly higher than the theoretical value of 3 for a normal distribution—validating the discontinuous equilibrium model of policy change; Long-term influences of institutional friction and path dependence have kept policies in a state of negative feedback equilibrium; however, at critical junctures such as the 2003 SARS outbreak, the 2009 healthcare reform, and the 2020 COVID-19 pandemic, external shocks and the opening of endogenous institutional windows triggered positive feedback effects, driving significant leaps in policy intensity; the structure of policy instruments has gradually shifted toward a capacity-building orientation, with regulatory instruments maintaining a stable proportion and incentive-based instruments rising markedly during crisis periods; Word frequency analysis indicates that the logic of policy governance has gradually shifted from early emergency

response and defense toward preventive management and targeted mobilization. Conclusion: The evolution of China's TCM policies is driven by a dual mechanism comprising negative feedback arising from institutional friction and positive feedback driven by external crises and endogenous strategies; this study expands the application of the theory of discontinuous equilibrium to the field of public policy in China, providing important evidence for improving the TCM governance system, optimizing the allocation of policy tools, and enhancing policy effectiveness. Keywords: Discontinuous Equilibrium Theory, Traditional Chinese Medicine policy, policy instruments, driving mechanisms.`

Biography

Zeyu Zhang is currently pursuing a master's degree in public health and Preventive Medicine at Wuxi Medical School, Jiangnan University. Research focuses on retrospective analysis of the current status and high-risk factors of growth deviations in children, based on the Wuxi Medical Big Data Platform. As first author, has published a study on temporal trends in the prevalence of growth failure in China in the journal JMIR Public Health and Surveillance.



**Shuxin Dong*, Huanhuan Liu,
Yiming Yao, Siying Wang, Jie Li and
Junlong Shen**

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University, China

Mechanisms Influencing Adult Children's Willingness to Use Medical Visit Accompaniment Services for Older Adults in Nanjing: A Structural Equation Modeling Study

Objectives: Population aging has increased the need for supportive healthcare services that help older adults and their families navigate complex medical systems. Medical visit accompaniment services have gradually emerged in urban China, yet their public acceptance remains limited and uneven. This study aimed to examine the factors associated with adult children's willingness to use medical visit accompaniment services for their older parents in Nanjing, China, and to clarify how different service needs shape family decision-making in the context of age-friendly healthcare. **Methodology:** A cross-sectional questionnaire survey was conducted among 638 adult children of older adults from 11 municipal districts in Nanjing. Based on the Theory of Planned Behavior, this study developed a structural equation model including basic support needs, emotional and dignity-related needs, health management needs, future expectations, and willingness to use medical visit accompaniment services. **Results:** Basic support needs were the strongest positive factor associated with willingness to use medical visit accompaniment services. Practical functions such as process assistance, registration support, medical information organization, price transparency, and privacy protection enhanced adult children's acceptance of these services. By contrast, emotional and dignity-related needs and health management needs showed negative total effects on willingness to use, suggesting that current service provision has not yet fully met families' expectations for humanistic companionship, dignity protection, chronic disease support, and continuous health management. Future expectations also played a mediating role, indicating that service decisions were influenced not only by immediate care needs but also by anticipated caregiving burden, parental attitudes, and social recognition. **Conclusions:** Medical visit accompaniment services should be understood as part of an age-friendly healthcare support system. Improving service standardization, strengthening trust and privacy protection, developing tiered service packages, and gradually integrating health management functions may help enhance service accessibility and acceptance among older adults and their families.

Biography

Shuxin Dong is a postgraduate student majoring in Social Medicine and Health Service Management at the School of Health Economics and Management, Nanjing University of Chinese Medicine, China. Her research direction focuses on traditional Chinese medicine healthcare services, older adult services, health service management, and public health policy. Her current research mainly concerns the development and optimization of supportive healthcare services for older adults in the context of population aging.



Wang Siying

School of Health Economics and Management, Nanjing
University of Chinese Medicine, Nanjing, Jiangsu Province,
China

An Evaluation of the Integration of Medical and Public Health Services at the Grassroots Level in Xuzhou under the Theory of Collaborative Governance: A Perspective Based on a Survey of Healthcare Workers

Objective: Based on the theory of collaborative governance, this study constructs a three-dimensional analytical framework of 'collaborative actors—resources—mechanisms.' By systematically evaluating the effectiveness of integrated medical and public health services at the primary care level in Xuzhou from the perspective of healthcare professionals, the study analyzes the mechanisms underlying key dimensions such as willingness to collaborate and clarity of responsibilities, thereby providing empirical evidence to support regional collaborative governance in medical and public health services. **Methods:** A questionnaire was designed using a five-point Likert scale comprising 30 items across six dimensions: willingness to collaborate, clarity of responsibilities, human resource support, technical support capacity, information-sharing mechanisms, and performance evaluation and incentive mechanisms. A survey was conducted among 229 healthcare professionals from primary healthcare institutions and disease control centers in Xuzhou, yielding 222 valid responses (response rate: 96.94%). SPSS 27.0 was used to conduct reliability and validity tests (Cronbach's alpha = 0.942), descriptive statistics, and analysis of variance (ANOVA). **Results:** The total score for primary-level medical-public health integration was 107.62 plus or minus 20.12 points, with the highest score in willingness to collaborate (21.62 plus or minus 4.51 points) and the lowest in information-sharing mechanisms (14.37 plus or minus 3.08 points). Gender, professional background, and workplace significantly influenced each dimension. Correlation analysis revealed a strong positive correlation between willingness to collaborate and technical support capacity ($r=0.753, p<0.01$). **Conclusion:** The integration of medical and public health services at the primary care level in Xuzhou has established a preliminary foundation for synergy, but structural contradictions such as information-sharing barriers and insufficient evaluation incentives persist. Recommendations include establishing a joint medical-public health rounds system, improving the list of responsibilities and smart devices to promote cross-institutional sharing of electronic medical records, and increasing the weight of public health performance metrics.

Biography

Wang Siying (2003–) is a master's student at the School of Health Economics and Management, Nanjing University of Chinese Medicine. Her research focuses on the inheritance and development of traditional Chinese medicine, with an emphasis on the preservation of its cultural heritage and its modernization. She actively explores pathways for the inheritance and development of traditional Chinese medicine in the new era, hoping to contribute to the field's innovation and continuity through her research.



**YiMing YAO, ShuXin DONG, SiYing
WANG, HuanHuan LIU**

School of Health Economics and Management, Nanjing
University of Chinese Medicine, Nanjing, Jiangsu, China

Demand Segmentation and Service Optimization for Community Canteens Serving Older Adults: A Mixed- Methods Study in Nanjing, China

Population aging has intensified the need for accessible, affordable, and nutritious community-based meal services for older adults. Community canteens for older adults have become an important component of China's home- and community-based eldercare system, yet many programs continue to face challenges related to service fit, sustainable operation, user retention, and equitable access. This study examined demand differentiation and service optimization strategies for community canteens in Nanjing, China. A mixed-methods design was used combining literature and policy review, semi-structured interviews with 50 older users, family caregivers, and service providers, online public opinion analysis of 3,776 social media comments using text mining and SnowNLP sentiment analysis, and a structured questionnaire survey conducted across 11 districts of Nanjing with 1,650 valid questionnaires collected. The findings identified four demand segments: support-dependent users (29.10%), health-and-nutrition-oriented users (27.87%), quality-and-safety-oriented users (25.41%), and convenience-and-efficiency-oriented users (17.62%). Random forest results suggested that digital capability, acceptable meal price, mobility condition, prior use frequency, education, pension level, payment method, family decision-making, and walking distance were key predictors of user segment membership. Structural equation modeling showed a significant stepwise pathway from awareness to interaction, use, and sharing, indicating that value recognition and communication experiences are critical bridges between service exposure and sustained use. Importance-performance analysis showed that food hygiene, transparent pricing, and pickup efficiency were current strengths, while food taste and staff attitude required priority improvement. These results suggest that community canteens should move beyond uniform provision toward segmented, chain-oriented service design. Keywords: older adults; community canteen; healthy aging; service equity; demand segmentation; mixed methods.

Biography

YiMing YAO is a researcher working at the intersection of public health, health services management, aging services, and community-based health promotion. Their work focuses on how public services can better respond to population aging through evidence-based policy design, demand segmentation, and service delivery innovation. They have participated in empirical research on community meal services for older adults in Nanjing, using surveys, interviews, online public opinion analysis, clustering, machine learning, structural equation modeling, and importance-performance analysis to generate actionable recommendations for equitable and sustainable elderly meal services.

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