



RESEARCH ARTICLE / ARAŞTIRMA YAZISI

Mediator Role of Psychological Resilience in Transmission of Psychological Trauma, Anxiety, and Obsessive-Compulsive Disorder

Aktarılan Psikolojik Travma, Kaygı, Obsesif-Kompulsif Bozuklukta Psikolojik Dayanıklılığın Aracı Rolü

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Abstract:

The violent conflicts that began in Nicosia on December 21, 1963, continued for 11 years. Following the war, Turkish Cypriots were forced to migrate to the north, while Greek Cypriots had to move to the south. It is evident that the process experienced by the Turkish Cypriots was traumatic. Therefore, the aim of this study is to examine the mediating role of psychological resilience in the relationship between transgenerational psychological trauma, anxiety, and OCD among second- and third-generation Turkish Cypriots, taking into account that 50 years have passed since the survivors' painful experiences and that the survivors are now the parents of today's young adults. This study employed a relational survey model and Hayes' Model 4 for the mediation analysis and was conducted with a total of 305 participants, comprising 195 women and 110 men. Data were collected using the Transgenerational Psychological Trauma Scale, Beck Anxiety Inventory, DSM-5 Repetitive Thoughts and Behaviors Scale, and Brief Resilience Scale, in addition to demographic information obtained through a Demographic Information Form prepared by the researchers. The collected data were analyzed using SPSS version 27 through Multiple Regression Analyses. The results indicated that psychological resilience and transgenerational trauma significantly predicted anxiety and OCD levels. Moreover, the findings showed that psychological resilience was negatively associated with anxiety, whereas transgenerational psychological trauma was positively associated with both anxiety and OCD. Multiple regression analyses and Sobel tests conducted in the study confirmed that psychological resilience partially mediated the relationship between family functionality and anxiety.

Keywords: Resilience, OCD, Transferred Trauma, Anxiety, Migration.

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Öz:

21 Aralık 1963'te Lefkoşa'da başlayan şiddetli çatışmalar 11 yıl boyunca sürmüştür. Savaşın ardından Türkler kuzeye Rumlar ise güneye göç etmek zorunda kalmıştır. Kıbrıs Türklerinin yaşadıkları sürecin travmatik olduğu açıktır. Dolayısıyla bu çalışmanın amacı, Kıbrıs Savaşı'ndan sağ kurtulanların acı dolu hikayelerinin üzerinden 50 yıl geçtiğini göz önünde bulundurarak, hayatta kalanların, günümüzdeki genç yetişkinlerin ebeveynleri olduğu gerçeğine dayanarak savaşa ilgili olarak ikinci ve üçüncü kuşak Kıbrıslı Türkler'de aktarılan psikolojik travma, kaygı ve OKB ilişkisinde psikolojik sağlamlığın aracı rolünün incelenmesidir. İlişkisel tarama modeli ve Hayes model 4 araştırma modelinin kullanıldığı bu araştırma 195 kadın ve 110 erkek olarak 305 kişi ile yapılmıştır. Araştırmanın verileri, Aktarılan Psikolojik Travma Ölçeği, Beck Anksiyete Ölçeği, Dsm-5 Yineleyici Düşünce ve Davranışlar Ölçeği ve Kısa Psikolojik Sağlamlık Ölçeği ile elde edilmesine ek olarak katılımcıların demografik bilgilerine araştırmacılar tarafından oluşturulan Demografik Bilgi Formu aracılığı ile ulaşılmıştır. Elde edilen veriler SPSS 27. programı aracılığıyla Çoklu Regresyon Analizi Testleri ile analiz edilmiştir. Elde edilen bulgulara, psikolojik sağlamlık ve aktarılan travmanın kaygı ve OKB düzeylerini yordadığını sonucuna ulaşılmıştır. Aynı zamanda bulgular, psikolojik sağlamlığın, kaygı ile negatif yönde, aktarılan psikolojik travmanın ise kaygı ve OKB ile pozitif yönde bir ilişkili olduğunu göstermektedir. Çalışmada gerçekleştirilen Çoklu regresyon analizleri ve Sobel testi, aile işlevselliği ile kaygı arasında psikolojik dayanıklılığın kısmi aracı rol oynadığını doğrulamıştır.

Anahtar Kelimeler: Psikolojik Dayanıklılık, OKB, Aktarılan Travma, Kaygı, Göç.

Introduction

Throughout human history, conflicts between diverse communities have persisted, although they have become less common in recent decades (Bozkurt, 2011). The Greeks on the island wanted to turn Cyprus into a Hellenic island after the violent conflicts between the Turkish and Greek Cypriots in 1931. Although both Turkish and Greek Cypriots lost their lives during the conflict, the vast majority of Cypriots were subjected to numerous negative experiences such as property loss and internal displacement (Okay, 2022). The Republic of Cyprus was established on 16 August 1960 by the Turks and Greeks of Cyprus. However, it can be said that the two communities, with differing religions and languages, failed to form a unified national identity, leading to various conflicts. These problems became violent with the clashes started by the Greeks in Nicosia on December 21, 1963, and the conflicts spread across the whole island. On July 20, 1974, Turkey launched a military intervention in Cyprus, invoking its rights under the Treaty of Guarantee, following more than a decade of intercommunal tensions and violence. After the peace operation, the Turks migrated to the north and the Greeks to the south (TRNC Ministry of National Education, 2014). It is clear that the events of 1963–1974 were reported as traumatic experiences for the Turkish Cypriots (Karaoğulları & Eş, 2021). In the literature, traumatic incidents can be classified as sexual assault, being held prisoner by armed groups, being subjected to torture, being detained in concentration camps, and conflict or war (Öztürk, 2004). However, second- or third-generation individuals who were not present at the time of the traumatic event, except those who experienced it, may show unanticipated symptoms similar to those of traumatized individuals (Uslu, 2021). Moreover, in the context of the intergenerational transmission of psychological trauma, parents' emotions regarding their experiences of genocide—although consciously suppressed and inadequately processed—are unconsciously internalized by their second-generation children (Danieli, 1998). Many studies dealing with intergenerational impacts and trauma on individuals often focus on mass experiences such as

war and genocide (Fossion et al., 2015; Scharf, 2007; Yehuda et al., 1998). Also, it is clear that migration and conflict are interrelated phenomena (Dovidio & Esses, 2001). At this point, it is clear that while Turkish Cypriots migrated to the north, Greek Cypriots also experienced forced migration to the south. Thus, the island of Cyprus has turned into a divided country consisting of regions with two separate ethnic communities (Acun, 2019). Depending on all these, it is possible to say that the war and forced migration phenomena experienced during the 1963–1974 period were psychologically traumatic for the people of Cyprus (Karaoğulları & Eş, 2021). The sources of stress and difficult situations encountered in the migration process itself change to a large extent, whether the migration process is compulsory or voluntary, and the causes of stress and traumatic experiences in forced migration increase compared to those in the voluntary migration process (Uluocak, 2009). In the context of forced migration, individuals feel intense anxiety about the future while they act with feelings of helplessness (Ekşi, 2002; Loizos, 2007).

Theoretical Framework

After experiencing a traumatic event, individuals often develop a heightened sense of alertness and the persistent feeling that the traumatic event could reoccur at any moment. Consequently, intense emotions experienced in the aftermath of trauma may lead to various psychological responses (Bilgiç, 2011; Aker, 2012). However, symptoms similar to or even different from those of the directly affected individuals can also be observed in second- or third-generation individuals who were not physically present during the traumatic event. This phenomenon is referred to as Transgenerational Psychological Trauma (TPT) (Uslu, 2021). Most studies conducted under the framework of intergenerational transmission focus on the transmission of societal traumas following events such as forced migration, war, or terrorism, which have had a wide-reaching impact on entire nations (Öztürk, 2018, 2020; Çiydem, Bilgin, & Öztürk, 2023). In the literature, the migration process is generally described as having four

phases — the pre-migration period, the act of migration, the search for a place to settle, and adaptation to a new location — each of which can create significant psychological effects and pose risks for trauma among migrants (Foster, 2001; Uluocak, 2009). Volkan (2008) emphasized that the process of adapting to new living areas in the northern region for Turkish Cypriots who were forced to migrate after 1974 was prolonged and challenging. Many researchers have reported that individuals who experienced negative events such as internal or external migration or forced displacement are at increased risk of developing Post-Traumatic Stress Disorder (PTSD) and anxiety (Baron et al., 2003; Fazel et al., 2005). Furthermore, it is widely accepted that the negative appraisal of trauma-related thoughts can increase the likelihood of developing symptoms of Obsessive-Compulsive Disorder (OCD), and that compulsive behaviors may emerge as a coping mechanism to reduce the anxiety and stress resulting from such appraisals (Rachman, 2002). At the same time, individuals' reactions to adverse and stressful life events, as well as their coping strategies, can vary significantly. While some people react to traumatic experiences with symptoms such as anxiety, others may recover quickly from the psychological impact and resume their previous level of functioning (Polizzi et al., 2020). In one study, researchers stated that the migration factor in the transmission of trauma between generations is not limited to individuals who directly experience trauma, but also that subsequent generations can carry the psychological effects of these experiences (Erbekir & Direktör, 2024). In this context, the ability to withstand such challenges is referred to as psychological resilience (Doğan, 2015). Based on this theoretical framework, the following research questions have been formulated to guide the study.

Do the psychological resilience levels of the research participants predict their levels of Transgenerational psychological trauma, anxiety, and OCD?

Does psychological resilience play a mediating role in the relationship between Transgenerational psychological trauma, anxiety, and OCD levels among the research participants?

Methods

Research Model

The relational survey and the Hayes Model 4 research model were used in this research. The relational survey model is used to determine the change or level of two or more variables together (Karasar, 2013). Hayes Model 4 (Process Macro), developed by Andrew F. Hayes, is a research method that tests different situational mediation effect models with regression in the context of observed variables, with regulatory and mediation effect analyses (Gürbüz, 2019). The analysis of the data obtained for the study was conducted using the SPSS 27 program. The research method employed is the snowball sampling method, as it involves identifying a person connected to the research topic who then shares the research with others (Biernacki & Waldorf, 1981).

Research Participants

The study sample consists of young adult individuals from the general population residing in the Turkish Republic of Northern Cyprus. The research sample participated

voluntarily within the scope of the snowball sampling method, and the participants comprise 305 people, including 195 women and 110 men.

Procedure

Ethical approval was obtained from the Scientific Research and Publication Ethics Committee of the European University of Lefke, TRNC, Cyprus (2022/10, ethics committee code BAYEK 015.05). Before participation in the study, all participants were provided with informed consent forms, and their consent was obtained. For this study, participants were provided with a demographic information form, the Transferred Psychological Trauma Scale, the Beck Anxiety Inventory, the DSM-5 'Level 2—Repetitive Thoughts and Behavior—Adult' Scale, and the Brief Psychological Resilience Scale. Data were collected online via Google Forms. Participants were informed about the purpose of the study beforehand and assured that their personal information would not be shared with anyone. They were also instructed on how to complete the scales and reminded that participation was voluntary.

Data Collecting Tool

Demographic Information Form

The researchers created this form to collect the demographic information for the study. The form includes questions about age, gender, whether the participants' parents were actively involved in the war process, where they migrated from after the war, and whether their parents were held captive during the war.

Transferred Psychological Trauma Scale

The Transferred Psychological Trauma scale, developed by Beyza Uslu, consists of 19 items and 3 sub-dimensions. The contents of these components, which are suitable for administration to all age groups aged 18 and over, use a 5-point Likert-type scale, with responses ranging from 1 (strongly disagree) to 5 (completely agree). The scale has a Cronbach's alpha internal consistency coefficient of 0.849 and is considered highly reliable (Uslu, 2021).

Beck Anxiety Inventory

The scale assesses indicators of anxious mood and general anxiety symptoms. It is a Likert-type assessment scale. According to Beck et al. (1988), higher total scores on the scale indicate higher anxiety levels. Ulusoy conducted a validity and reliability study on this scale in 1996 and translated it into Turkish (Ulusoy et al., 1996).

DSM-5 'Level 2-Repetitive Thoughts and Behaviour-Adult' Scale

The DSM-5 'Level 2—Repetitive Thoughts and Behavior—Adult' Scale was adapted into Turkish by Aşçıbaşı, Öztekin, and Aydemir (2017). The scale measures repetitive thoughts and behaviors in individuals aged 18 and above. The reliability coefficient of the scale is 0.910, and each item is rated on a 5-point Likert scale ranging from 0 to 4 (Aşçıbaşı et al., 2017).

Brief Psychological Resilience Scale

The brief resilience scale developed by Smith, (2008) was adapted into Turkish by Doğan, (2015) as a 6-item, 5-point Likert-type measurement tool. The scale is scored as 1- 'I totally disagree', 5- 'I totally agree'. In the adaptation study of Doğan (2015), Cronbach's alpha reliability was reported as .81 and the internal consistency coefficient as .83.

Results

Table 1. Skewness and Kurtosis Table for Participants' Transferred Psychological Trauma, Anxiety, OCD and Resilience Levels.

	Skewness	Kurtosis	N
Transferred Psychological Trauma	-.368	-.471	305
Emotion Behaviour Regulation	-.529	-.004	305
Family Functioning	-.553	-1.005	305
Past Family Traumas	-.743	-.252	305
Anxiety	-.856	.158	305
OCD	.450	-.582	305
Psychological Resilience	1.104	1.866	305

In social sciences, skewness and kurtosis values are used to assess the normality of data distribution. Therefore, in this study, the skewness and kurtosis values have been examined. To indicate the normality of the distribution, certain cutoff points for the skewness and kurtosis coefficients are provided in the literature. If the

distribution is normal, the skewness and kurtosis coefficients should fall within the range of -2 to +2 (George & Mallery, 2010). Therefore, based on the skewness and kurtosis values, it is assumed that the data of the study follow a normal distribution, and parametric tests have been used in the analyses.

Table 2. Simple Regression Analysis for Family Functionality and Psychological Resilience.

Variable	R	R ²	β	F	t	Significance
Constant					30.941	.001
Family functionality	.147a	.022	.147	6.681	2.585	.010

Dependent Variable: Psychological Resilience

According to the first criterion proposed by Baron and Kenny, the predictor variable must have a significant effect on the outcome variable. In this regard, as shown in the table, in Step 1, the predictive effect of family functioning on psychological resilience was examined using simple linear regression analysis. The regression model was found to be significant, $F(6,681) = 21.618$, $p < 0.05$. The results indicate that family functioning

significantly predicts psychological resilience ($\beta = 0.147$, $p < 0.05$). Additionally, family functioning explains 14% of the variance in psychological resilience. According to the second criterion, it is expected that the predictor variable should have a significant effect on the mediator variable. In this context, in Step 2, the predictive effect of psychological resilience on anxiety was examined through simple linear regression analysis (see Table 3).

Table 3. Simple Linear Regression Analysis for Family Functionality and Anxiety.

Variable	R	R ²	β	F	t	Significance
Constant					5.512	.001
Family functionality	.181a	.033	.181	10.307	3.210	.001

In Table 3, the regression model for psychological resilience and anxiety was found to be significant, $F(10,307) = 1903.104$, $p < 0.05$. According to the results, family functioning significantly predicts anxiety ($\beta = 0.181$, $p < 0.05$). Thus, family functioning explains 18% of the variance in anxiety. Finally, according to the fourth criterion outlined by Baron and Kenny (1986), in order to talk about the existence of a mediating effect, the mediator

variable must be included in the analysis, and the predictive effect of the independent variable on the dependent variable must either disappear (complete mediation) or decrease (partial mediation). In this regard, in Step 4, a multiple hierarchical regression analysis was conducted to analyze the predictive effect of family functioning on anxiety (see Table 4).

Table 4. Multiple Regression Analyses: Relationships Between Transgenerational Psychological Trauma, Family Functioning, Psychological Resilience, Anxiety, and OCD.

	Independent Variable	B	Std. Error	β	t	p
Anxiety	Constant	34.625	7.999	—	4.329	.000*
	Transgenerational Psychological Trauma	0.376	0.046	0.420	8.200	.000*
	Psychological Resilience	-1.406	0.389	-0.185	-3.616	.000*
Obsessive Compulsive Disorder	Constant	5.971	3.155	—	1.894	.059
	Transgenerational Psychological Trauma	0.169	0.018	0.471	9.340	.000*
	Psychological Resilience	-0.303	0.153	-0.100	-1.977	.049*
Anxiety	Constant	50.799	8.384	—	6.059	.001*
	Family Functioning	1.221	0.321	0.212	3.800	.001*
	Psychological Resilience	-1.607	0.425	-0.212	-3.784	.001*

Dependent Variable: Obsessive Compulsive Disorder, Anxiety

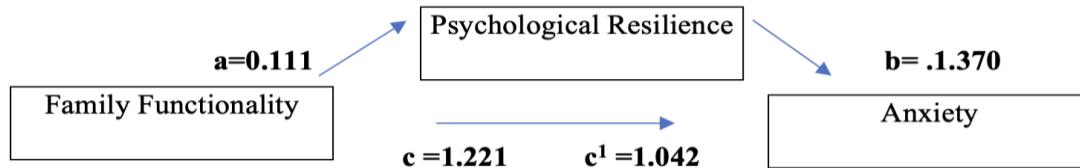
In the results obtained from the multiple regression analysis presented in Table 4, when examining the significance of the regression coefficients, it is found that the predictor variables, psychological resilience ($\beta = -0.185$, $p < .01$) and transferred psychological trauma ($\beta = 0.42$, $p < .01$), significantly predict the participants' anxiety levels.

When examining the multiple regression analysis results presented in Table 4, it is observed that the predictor variables, Transgenerational psychological trauma ($\beta = 0.471$, $p < .001$) and psychological resilience ($\beta = -0.100$,

$p < .05$), significantly predict the participants' levels of obsessive-compulsive disorder (OCD).

Moreover, the results also revealed that family functionality ($\beta = -0.212$, $p < .05$) and psychological resilience ($\beta = 0.212$, $p < .05$) significantly predicted anxiety levels. These findings suggest complex interrelationships among the variables; however, a formal mediation analysis would be required to determine whether anxiety mediates the relationship between family functionality and psychological resilience. Details regarding the regression coefficients are presented in Figure 1.

Figure 1. Model of the mediator's role of resilience in the relationship between Family functionality and Anxiety.



Path a: Family functioning significantly predicts psychological resilience ($p < .05$)

Path b: Psychological resilience significantly predicts anxiety ($p < .01$).

Path c: Family functioning significantly predicts anxiety ($p < .01$).

Since all three conditions proposed by Baron and Kenny were met, it was hypothesized that psychological resilience may play a mediating role in the relationship between family functioning and anxiety.

To assess this, the Sobel Test was performed. According to the results, psychological resilience plays a mediating role in the relationship between family functioning and anxiety ($z = 2.445$, $p < .05$). In this context, it can be concluded that psychological resilience has a mediating effect. When the bootstrap confidence interval was examined, it was observed that both the lower and upper bounds were significantly different from zero. Therefore, a partial mediation effect can be considered.

Table 5. Effect of Mediator Variable.

Psychological Resilience	Total Impact	Direct Impact	Indirect Effect	Bootstrap Confidence Interval BoLLCI-BoULCI	Mediation Effect Type
Family Functionality - Anxiety	1.227	1.0422	.185	0.4032-0.0349	Partial

When Table 5 is examined, it can be seen that the direct effect score has decreased. When comparing the direct effect and the total effect, it has been determined that the size of the indirect effect is 18. The presence and significance of the indirect effect were analyzed using the bootstrap confidence interval. In the obtained results, both the lower and upper bounds are above zero. Therefore, it can be said that psychological resilience has a partial mediating effect in the relationship between family functionality and anxiety.

Discussion

In this study, the relationships between Transgenerational psychological trauma, psychological resilience, family functionality, and anxiety were examined through multiple regression analyses and mediation tests. The findings revealed that psychological resilience and Transgenerational psychological trauma were significant predictors of individuals' anxiety levels. While psychological resilience showed an adverse relationship with anxiety levels, a significant positive relationship was observed between Transgenerational psychological trauma and anxiety. These findings indicate that individuals with higher levels of psychological resilience reported lower levels of anxiety and that the transmission

of traumatic experiences was significantly associated with anxiety.

The negative effect of psychological resilience on anxiety is a finding widely supported in the literature. Researchers such as Bonanno (2004) and Fredrickson (2004) have emphasized the critical role of resilience in enabling individuals to withstand traumatic or stressful experiences and reduce adverse psychological outcomes. This study contributes to the existing body of knowledge by demonstrating that psychological resilience is an important predictor in lowering anxiety levels. The protective effect of resilience on anxiety aligns with research highlighting the significance of coping mechanisms and psychological flexibility in managing stress (Masten, 2001; Rutter, 1987).

The findings suggest that psychological resilience plays a partial mediating role in the relationship between family functionality and anxiety. A review of the literature reveals that children raised with negative parenting attitudes tend to have negative relationships within the family and lower levels of psychological resilience (Açıkgöz, 2016). Therefore, in the context of family functionality, the inability to preserve family unity during the war and the potential development of negative beliefs toward Greek Cypriots through the family from early ages may result in

higher levels of anxiety among individuals with low psychological resilience. As expected and supported by the literature, many studies indicate that psychological disorganization predicts anxiety (Piryaei & Khademi, 2014; Ramos-Cejudo & Salguero, 2017; Poole et al., 2010).

Similarly, Transgenerational psychological trauma was found to be a positive predictor of obsessive-compulsive symptoms, while psychological resilience was found to be a negative predictor. This result suggests that traumatic experiences may be associated not only with anxiety but also with obsessive-compulsive symptoms. At this point, it can be stated that traumatic life events may play a role in the development of compulsive hoarding behavior in obsessive-compulsive disorder (OCD). A study in the literature reported that individuals diagnosed with OCD who exhibited hoarding behavior were significantly more likely to have experienced at least one traumatic event in their lives. Furthermore, it was noted that hoarders who had experienced trauma exhibited more severe hoarding symptoms (Cromer et al., 2007). Therefore, these findings suggest that psychological trauma is an important risk factor in the emergence and intensification of hoarding symptoms in OCD and support the effect of Transgenerational psychological trauma on symptoms in this study.

Additionally, analyses involving the variable of family functionality revealed that psychological resilience played a significant mediating role. Family functionality emerged as a significant predictor of both psychological resilience and anxiety levels. Likewise, psychological resilience was evaluated as a significant predictor of anxiety level. In assessments conducted in line with multiple regression analyses, psychological resilience was found to play a partial mediating role in the relationship between family functionality and anxiety. This was also supported by Sobel test and bootstrap confidence interval results. Overall, this study reveals that psychological resilience is a significant variable that predicts anxiety level both directly and indirectly. Particularly, the relationship between family functionality and psychological resilience provides a meaningful context in terms of individuals' anxiety levels. Accordingly, it can be said that preventive intervention programs focusing on family dynamics and individual resilience levels are important in supporting psychological well-being. A review of the literature shows that children raised with negative parenting attitudes tend to have negative relationships within the family and lower levels of psychological resilience (Açıkgöz, 2016). Therefore, in the context of family functionality, it is possible that the inability to preserve family unity during the war and the potential development of negative beliefs toward Greek Cypriots through the family from early ages may result in higher levels of anxiety among individuals with low psychological resilience. Daalgard and Montgomery (2017) stated that traumatic experiences in immigrant families affect the next generation, emphasizing that increased family functionality is associated with a decrease in psychological symptoms among second-generation individuals. They also noted that parenting styles may be influenced by parents' traumatic experiences. Derin and Öztürk (2018) suggested that parents may attempt to cope by reflecting their trauma onto their children. The literature highlights that low family stress, effective coping with difficulties, and adaptability are important factors in family functionality.

Considering the minority status of Turkish Cypriots, forced migration, and adaptation to new living environments as traumatic experiences, it is likely that research participants live under stressful conditions. Moreover, negative family experiences have been identified as a significant risk factor for psychological disorders in the second generation (Dekel & Goldblatt, 2008).

When discussing the limitations of the study, it should be noted that the data were collected online, and although the participants consisted solely of adults living in Northern Cyprus, the absence of a recent population census in the TRNC databases resulted in certain limitations. Specifically, it was not possible to determine the exact age range or the proportion of the adult population, which in turn limited the ability to definitively specify the total number of participants required for the study. Furthermore, since the core focus of the research was Transgenerational psychological trauma, the inclusion criterion required that participants' parents had been present on the island during the 1963-74 events. Participants whose parents were not both present on the island during that period and thus did not experience the war process were excluded from the study, as no war-related trauma could have been Transgenerational to them. For future studies on this topic, given the close relationship between Transgenerational psychological trauma and the phenomenon of migration, it would be beneficial to focus more extensively on the concept of migration and to approach the subject from a generational perspective. Additionally, instead of examining Transgenerational psychological trauma together with obsessive thoughts and behaviours, it is recommended that future research focus specifically on the relationship between Transgenerational psychological trauma and hoarding behaviour.

Declarations

Ethics Committee Approval

Ethical approval was obtained from the Scientific Research and Publication Ethics Committee of European University of Lefke, TRNC, Cyprus (2022/10 and ethics committee code BAYEK 015.05). Prior to participation in the study, all participants were provided with informed consent forms, and their approvals were obtained.

Consent for Publication

Not applicable

Availability for Data and Materials

Not applicable

Competing Interests

The author declares that there are no competing interests in this manuscript.

Funding

Not applicable.

Authors' Contributions

BE and CD developed the primary concept of the study. BE was responsible for collecting the data. Both BE and CD conducted the analyses and assisted in interpreting the results. They also played key roles in drafting the introduction and discussion sections of the manuscript. All authors have reviewed and approved the final manuscript.

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