Title of Paper: Rethinking children’s public health: the development of an assets model

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Abstract

It has been suggested that asset based strategies could provide an opportunity to rethink the approach to public health; however, this may not be a viable option unless there is clear recognition of specific individual assets. Although there has been some consideration of assets within a child health context, this is limited and previous studies have not sought to identify assets from the perspective of the child.

This paper reports on a study that drew on an ethnographic approach, using a photo-elicitation method, to facilitate the mapping of children’s internal and external assets from the viewpoint of children themselves. Two primary schools in the South-East of England were used to recruit 20 year five children (aged 9-11 years of age). The participants, 10 boys and 10 girls, were given disposable cameras and asked to take photographs of the activities that they enjoyed. The children’s photographs were used as prompts during individual semi-structured interviews.

A constant comparative analysis facilitated the mapping of the children’s assets as the children described them; this process revealed one overall stabilising asset (‘My Family’) as well as eight internal and three external assets. All of the assets are presented within an original model, ‘I’m good’: the children’s asset wheel [CAW], which was developed from the findings. It is suggested that the CAW could complement previous asset based work to facilitate the re-thinking of approaches to the enhancement of children’s public health.

Key words: assets; asset mapping; children’s public health

Introduction

There has been a recent growth in the literature that has focussed on assets, in other words emphasising positive attributes; this includes children and young people’s developmental assets (Search Institute 2007), community asset mapping (Kretzmann and McKnight 1993) and public health (Morgan and Ziglio 2007, 2010). Authors have now offered definitions of health assets, for example, commenting from a public health perspective, Morgan and Ziglio (2007, p. 18) suggest that:

A health asset can be defined as any factor (or resource) which enhances the ability of individuals, groups, communities, populations, social systems and/or institutions to maintain health and well-being and to help to reduce health inequalities.

There is a consensus that health assets are factors that can positively influence health and wellbeing; in addition, there have been suggestions that asset mapping can offer an innovative way forward in terms of re-thinking the approach to public
health (Morgan and Ziglio, 2007; 2010). However, there has been a lack of clarity in relation to the specific nature of assets and how they pertain to individuals, groups or communities. Without identification and consideration of these issues, asset based approaches may not provide viable future health promotion strategies.

Whilst a few studies (for example, Baker et al. 2007) have considered asset mapping within a child health context, these are very limited and have not sought the identification of assets from individual children. If asset-based approaches are to be proposed as an alternative to deficit orientated ones, there is a clear need to gather empirical data from children themselves since they ‘possess information and knowledge that policy makers require’ (Tisdall and Davis 2004, p. 140). If public health policy is responsive to the developmental needs and interests of children, they are far more likely to engage with its implementation.

The work of authors such as James and Prout (1997) has also been invaluable in raising the profile of children as participants who are capable of being involved in decisions that may impact upon their lives. The ‘emergence of ‘children’s voice” (Prout and Hallett 2003, p. 1), and the need to involve children in a range of issues, has grown in acceptance (Sinclair 2004). It is now widely established that the views and experiences of children should be taken into account wherever possible with key documents advocating their involvement (for example, United Nations Convention on the Rights of the Child 1989).

This paper presents a qualitative research study that drew on an ethnographic approach and photo-elicitation method that involved children in order to actively engage with them as social actors to facilitate the development of an assets model.

**Background**

The asset-based literature related to children has had a strong focus on developmental assets. The Search Institute (2007) in Minneapolis, USA identified forty developmental assets for each of four age ranges (3-5 years; 5-9 years; 8-12 years; 12-18 years). It is suggested that these developmental assets are necessary for the healthy maturation of children and young people (Benson 2003) and include
both internal and external assets. Internal assets are those that nurture internal growth (‘commitment to learning’, ‘positive values’, ‘social competencies’ and ‘positive identity’); external assets are influences that are outside of the person (‘support’, ‘empowerment’, ‘boundaries and expectations’ and ‘constructive use of time’).

A range of other work has been undertaken to ascertain the benefits of developmental assets (for example, Scales 1999; Scales et al 2006a 2006b). This body of literature suggests that the more assets that are attributable to the child’s internal and external world, the more likely the young person is to have a positive and secure start in life.

Although developmental assets have been discussed widely and have underpinned several studies (for example, Murphy et al. 2004, Scales et al. 2006a), there are aspects that should be reflected upon. Firstly, The Search Institute (2007) has provided a list of assets that children should ideally achieve; whilst this provides structure for families and professionals, many of the individual assets (for example, those within the ‘constructive use of time’ category) are reduced to specific behaviours (such as participation in co-curricular activities at least twice per week) which may limit their application. The Search Institute (2007) does recognise the value of internal qualities such as self-esteem, but this is relatively limited; the external assets do, however, offer areas of commonality with other asset based literature – the key aspect being the contribution of local communities to the overall health of individuals (for example, Baker et al. 2007; Rütten et al. 2008; 2009, Hufford et al. 2009).

The Search Institute’s (2007) framework of assets was developed from work undertaken with adolescents (as well as adults) - this has then been applied across different childhood age ranges, but the views of younger children do not seem to have been fully represented. In addition, the assets are identified as the ‘building blocks’ that are required for future healthy development - the focus is not on the assets that children themselves have identified as being important in terms of their current everyday lives. Finally, the Search Institute (2007) does not overtly recognise
the relationship that assets may have with each other; therefore an integrated approach towards development and future health is difficult to model.

The majority of health related research that has drawn on an asset based approach has mainly focussed on adolescents. The studies undertaken (for example, Evans et al. 2004; Murphey et al. 2004; Doss et al. 2006) have primarily utilised quantitative approaches and have concentrated on assessing the existence of specific assets within a given population - it could be argued that this mirrors some aspects of a deficit approach as there is the identification of ‘missing’ assets with the aim frequently being to work towards the establishment of those assets that are absent. However, whilst limited, some projects (Baker et al. 2007; Hufford et al. 2009) have considered the identification and mapping of assets for a specific community in order to promote the health of younger children. For example, Hufford et al. (2009) described the Communities and Physicians Together [CPT] programme that is based at the University of California Davis Children’s Hospital. CPT enables paediatric doctors to develop their skills as community advocates; evaluation of the initiative has demonstrated that families benefitted from the doctors’ more in-depth knowledge of the local area. The principles underpinning asset based community development (Kretzmann and McKnight 1993) are fundamental to the CPT project and emphasis is placed on working in partnership with residents in order to identify community assets that enhance the health of children.

In summary, there is a growing body of literature that has examined assets within a children and young people’s health context. However, research has not previously collated empirical data from children themselves in order to facilitate the identification of their collective assets; without this information, re-thinking public health policy from an asset-based perspective is likely to be problematic - the aim of the research presented in this paper was to address this issue.
Research Study

Participants and recruitment

The participants were children aged 9-11 years who were in year five of the English primary school system when the research was conducted; the study focused on this age group as there is insufficient empirical evidence identifying their perceived assets. Children within this age range have, however, normally developed good verbal communication skills and have the cognitive ability to understand the role and function of a study and are therefore capable of giving informed consent to participate in research (Alderson and Morrow 2011).

The majority of children in England have a middle to low socio-economic status [SES] (UK National Statistics 2009); this research sought to identify a sample of children who were representative of this SES. Two primary schools situated in similar middle to low SES areas in the South East of England were approached to facilitate recruitment. Following discussions with the Head Teachers, all of the children in year five (fourth grade) were visited in their classrooms and given verbal information about the study. Each child was also provided with a sealed envelope containing two information sheets, (one for their parent/guardian[s] and one for themselves), as well as a reply slip and a reply paid envelope. Following receipt of parental agreement for their child’s participation, each family was contacted and a visit arranged to the child’s home; the purpose of this was to further explain the research, gain consent (from both the child and parent), provide the child with a disposable camera and guidelines for use, as well as to arrange a date for the collection of the camera once the photographs had been taken. Ten girls and ten boys expressed interest in being involved in the research; all were subsequently recruited with no-one withdrawing at any stage. The study was approved by the University of Hertfordshire Research Ethics Committee for Nursing, Midwifery, Social Work, Criminal Justice and Counselling. Written informed consent was gained from each child and one of their parents; the children were all allocated a pseudonym to protect anonymity.
Methodology and research design

The research utilised an ethnographic approach and a photo-elicitation method that provided participants with the opportunity to take their own photographs and then discuss these within a one-to-one, face-to-face interview with the first author.

Ethnography provides the opportunity to ‘learn from (rather than study)’ groups of people (Offredy and Vickers 2010, p. 87). Authors such as Christensen (2004) very much support and value the use of ethnography with children and it is now acknowledged that ‘ethnographic work with children is largely concerned to explore children’s everyday social lives’ (James 2001, p. 250); it is a valuable methodology since ‘it allows children a more direct voice’ (Prout and James 1997, p. 8). An ethnographic approach offered the opportunity to build an individual and personal rapport with the children (Buchbinder et al. 2006) which valued their contribution as well as facilitating insight into their world (Corsaro and Molinari 2000).

A children’s reference group informed the planning of the research design; consultation with over 50 children from one of the participating schools confirmed that photo-elicitation was engaging, enjoyable and appropriate to the developmental stage of the children (aged 9-11 years). This approach also acknowledged that visual research with children can facilitate the communication of their thoughts and emotions (Leitch and Mitchell 2007) and can help to contextualise the activities that they enjoy (Moss 2008, Graham and Kilpatrick 2010).

Reflexive photography, a form of photo-elicitation in which participants take their own photographs and are then asked to reflect on these in an interview (Hurworth 2003), was utilised to not only facilitate insight into children’s lives, but also empower and value their contribution.

The photo-elicitation method was conducted in two key phases, from November 2008 – October 2009:

- Children were asked to take photographs of any activities that they enjoyed; this provided the opportunity to focus on positive aspects of their lives (an important consideration in terms of facilitating the later asset mapping process). The children’s photographs served as ‘triggers’ in subsequent interviews.
Secondly, children were individually interviewed in their own homes and asked to talk about each photograph and the context in which it had been taken – this stimulated further conversations in relation to the positive aspects of children’s lives.

Each interview lasted for between 22-54 minutes and was digitally recorded and then transcribed verbatim. The children were able to keep their photographs although one or two were given to the researcher for presentation purposes; they all received a ‘thank you’ letter and a small album in which to store their pictures.

**Data analysis**

A constant comparative analysis approach was drawn on in order to search for consistencies and inconsistencies in the data. Whilst this method is central to grounded theory (Glaser and Strauss 1967, Strauss 1987, Glaser 1992), it is also fundamental to other areas of qualitative research (Hewitt-Taylor 2001, Boeije 2002). The photographs themselves were not analysed.

The analysis was conducted in several stages by the first author. Firstly the transcripts were repeatedly read and the audio recordings listened to several times. The data were open coded according to the type of assets that started to emerge; no predetermined framework was used. This initial stage revealed both internal and external assets (these are discussed in more detail within the findings section).

Each transcript was then returned to and re-examined in relation to the two types of assets (internal and external). Once each transcript had been open coded, the transcripts were compared to identify and account for any in/consistencies. Further reflection and refinement of coding was undertaken, leading to the final establishment of 12 core assets. The main core asset identified from the data was that of ‘My Family’; although the nature of the family varied between the children, this asset was fundamental and pivotal to the life of each child. As a result, this asset was termed the stabilising asset.
Findings
Figure 1 depicts the ‘I’m good’: the children’s asset wheel [CAW] - a model that illustrates the findings from the study. The CAW encapsulates the child, the stabilising asset and eleven core assets (eight internal and three external), also demonstrating the connectivity that exists between the assets. In order to recognise the child’s voice, each element of the model draws on a phrase used by some the children.

**Core assets: Internal**
Eight internal assets were identified (Figure 1), none of which have previously been recognised as assets.

![Figure 1. 'I'm good': the children’s asset wheel [CAW]](image)

One internal asset that strongly emerged from analysis of data from each of the children was a sense of pride ('I'm Proud'). All of the children talked excitedly,
enthusiastically and with pride about their possessions, their families (including their pets) and their achievements, for example:

I’m really proud that I got to the top group in swimming, because I never, ever thought I’d do that and I did it. I’m good at swimming now. [Emma]

The children wanted to show the researcher their collections of certificates and badges that they had ‘earned’ (‘I’ve got loads of badges and certificates upstairs.’ [Elizabeth]). It was clear that items such as these were not just important to children, representing their accomplishments, but also enhanced their self-esteem and inspired them further.

It is important to comment on the internal asset of ‘I’m Growing Up’ since this particularly reflects the cognitive development and age of the participants. Two key aspects of the asset emerged:

- The increasing levels of responsibility and independence that the children were assuming
- The children’s perception of the world around them

These areas are almost the antithesis to each other - growing responsibility and independence being counterbalanced with the child’s immature perception of their surroundings. The children realised that they were growing up and spoke positively about their aspirations as well as about their current lives. They gave instances of how they were developing their independence, for example, they were increasingly allowed to play outside, walk home from school with friends or run small errands:

If my Mum lets me, we’re going to go out and play with my friends…we usually take our bikes and ride along the paths and stuff like that and go to the park. [Myan]

Well, every night we walk home together by ourselves and I go to her house… for about half an hour. [Hope]

However, children highlighted boundaries (such as being restricted to certain areas) that had been instigated by parents; these were viewed positively as they facilitated freedom – without them many children would simply not have been permitted to play outside.
At the same time as their growth in independence, there were constant reminders of the children’s underdeveloped perception of time, size/space and distance. For example, children would comment upon the ‘very long journey’ that was undertaken to visit a relative, when the distance travelled was only four or five miles.

The remaining internal assets, shown in Figure 1, are reflective of the children’s sense of fun and how much they enjoyed their lives, particularly time spent with their family and friends; despite this, the asset of ‘By Myself’ illustrated that children also appreciated having time alone, valuing private spaces, such as their bedroom:

I just lie on my bed by myself peacefully reading. It’s one of my favourite times [Emma; 251]

Children’s lives were strongly and positively influenced by friendships, with same gender groups being almost exclusively prevalent; this in turn impacted upon activities undertaken (many of which were of a physical nature), with children displaying a resourceful and independent approach to keeping themselves and their friends occupied.

**Core assets: external**

The CAW incorporates three external assets (‘My Friends’; ‘Loads of Stuff’ and ‘It’s Near’). The children appeared to form friendships easily, but highly valued them:

**LW:** When do you see your friend?
**Hannah:** All day, she always knocks for me, I’m her best friend.

Friends developed common interests (‘I go to Cubs with my friends’ [Paul]; ‘I ride my bike with my friends’ [Myan]) – this tended to be a world that adults were not part of. The positive relationships that children formed with their friends enhanced their confidence; they spoke about each other excitedly and with affection, their photographs further affirming the importance of friends.

The children’s lives were focussed within a relatively small physical area and this is reflected within the asset of ‘It’s Near’. Children had developed a network of
friendships via their local neighbourhood, schools and clubs. In addition, they demonstrated knowledge of their immediate surroundings:

You go down straight across there on that diagonal path [pointing], go straight on till you get going up the path, then you turn left and then you go down that path and then turn left again and then there’s a field in front of some houses, you go past that and there’s the park. [Joe]

This familiarity with their environment meant that the children had the confidence to travel independently and to meet friends.

The children’s lives were positively influenced by their many personal possessions, with children commonly stating that they had ‘Loads of Stuff’; possessions had an overt impact upon other assets, facilitating friendships and underpinning aspects of pride. Whilst parents were primarily responsible for financially driven purchases (for example, electronic games consoles, garden play apparatus and bikes), children were developing monetary awareness and self-funded some of their possessions; whilst these objects tended to be less expensive items (for example, stickers and art/craft materials), they were very much cherished.

**Stabilising asset: ‘My Family’**

The stabilising asset that emerged from the data was that of ‘My Family’ with all of the children identifying that their family was a key and fundamental element of their lives. The concept of the family is undoubtedly complex; it is therefore not surprising that this asset encapsulated four key areas:

- **Family Membership:** The children’s family structure
- **Togetherness:** Time spent together as a family
- **Family Influence:** The nurturing impact of the family
- **Being Busy:** The nature of family life

The children all gave examples of activities undertaken with their family, demonstrating how much they enjoyed time together:

Every Friday we have our nice sweetie family night or we go swimming. And my Dad brings a huge projector home and points it at the big wall and we watch a film together – I love it. [Elizabeth]
Although the families were busy, parents used strategies to maximise opportunities with their children:

Because my Mum’s really busy she says we’re going to spend an hour with you both separately and then we get to choose what we do in that hour. [Fleur]

A busy lifestyle also fostered a ‘teamwork’ approach to everyday demands - this, in turn, further strengthened family relationships.

Although the children in this study were from a range of structural family backgrounds, they had all experienced a consistent and nurturing environment; the family provided a fundamental stability, hence the term stabilising asset.

**Discussion**

The CAW is offered as the first model that has not only encapsulated the assets of children (aged 9-11 years), but one that has identified these through children’s involvement in the underpinning research process. Criticisms have been made about the Search Institute’s list of developmental assets in relation to, for example, their prescriptiveness (Howard et al. 1999); however, the CAW is not intended as a checklist; rather it represents assets and their potential relationships with each other. The model is designed to be viewed as a complete entity that is comprised of different inter-related segments that provide a range of professionals with insight into the assets in children’s lives.

The CAW has the potential to complement other work, such as the asset based public health model offered by Morgan and Ziglio (2007; 2010). In their work, Morgan and Ziglio (2007; 2010) integrated three key areas – salutogenesis; asset mapping and asset indicators. Morgan and Ziglio (2007) acknowledge that assets may be individual, community and organisational (or institutional), however, their discussion primarily focused upon the mapping of community assets, as outlined by Kretzmann and McKnight (1993). The emergence of children’s assets, as highlighted within the CAW, could facilitate further work in relation to the implementation of Morgan and Ziglio’s model and the development of an alternative approach to children’s public health.
Morgan and Ziglio (2007) describe individual level assets as personal internal factors such as self-esteem – in other words qualities that individuals may possess; however, Rütten et al. (2009) classify these assets as being specific individual people who are able to mobilise resources and influence policy. It is therefore evident that there is not yet full clarity in relation to the phraseology associated with assets. The core assets within this study were differentiated as either ‘internal’ or ‘external’; it is the internal assets that have most commonality with, and which complement, the interpretation of individual assets offered by Morgan and Ziglio (2007).

Internal assets are resources that exist within an individual; they are factors that result from the influences of both nurture and nature and which ‘reflect the value and belief systems of children about themselves and about the level of control they exert over events in their lives’ (Bowen et al. 1997, p. 8), a stance supported and reflected within this study. Earlier literature has acknowledged the value of the eight areas identified as internal assets within the CAW. For example, the Search Institute’s (2007) internal asset of ‘self-esteem’ makes reference to children being proud; despite this, there is no previous recognition of pride being an asset in its own right. Similarly, whilst children’s development has not been previously considered an asset, the fact that the Search Institute (2007) has produced a list of developmental assets, reinforces the importance of acknowledging the child’s developmental stage. Whilst this study involved a specific group of children, it is possible that the internal assets may be pertinent to children from other socio-economic backgrounds, cultures or ages, with any differences primarily relating to the interpretation of the asset. For example, the asset ‘I’m Proud’ may be applicable to both a 7 and 14 year old, but the focus would almost certainly relate to different aspects of their lives. Further research would facilitate the exploration of the internal assets and their relevance to different groups.

Garland (1999) explains that the Search Institute’s external assets are the support mechanisms that are available within the child’s environment that enable them to become responsible, healthy and caring people; examples include parents as well as the adoption of specific roles within their immediate community. This study interpreted an external asset as being any factor that was outside of the child, but
which made an important and positive contribution to their lives – this broader definition was important in order to allow an open receptiveness to the child’s voice.

Once again, the concepts underpinning the three external assets have all been previously discussed within the literature, but the recognition of their relevance as assets has not been wholly acknowledged. For example, a range of work has previously identified the value of children’s friendships (Nic Gabhainn and Sixsmith 2005, Fattore et al. 2009, Parry et al. 2010). Despite this, there is little consideration within the literature of friends as ‘assets’; they are briefly mentioned within the external developmental assets (Search Institute 2007), but they are not recognised within their own right. Other authors have also alluded to friends in an asset related context - Ridge (2002, p. 142) refers to them being a ‘social asset’ but this has not been further examined. The value of children’s friendships has also been explored within the wider literature (for example, Dunn 2004, Troutman and Fletcher 2010) with it being associated with positive attributes such as enhanced social behaviour (Cillessin et al. 2005).

Similarly, the significance of children’s personal possessions, particularly those with little monetary worth, has been commented upon by others (Fattore et al. 2009), but not within an asset context; the positive impact that the local community can have on children has also been discussed (Nic Gabhainn and Sixsmith 2005, Fattore et al. 2009, Parry et al. 2010) with the Search Institute (2007) also referring to it within an asset framework.

The term stabilising asset has not previously been presented within the literature; in the context of this study, it embraces four key areas which recognise different family attributes. Although the children in this study were from a range of different structural family backgrounds, they had all experienced consistent stability from one or more parents, as well as other family members (such as grandparents) - hence the term stabilising asset. The potential impact of the family on children’s growth, nurturing and development has been very well recognised (for example, Richards 1995, Bernaredes 1997, United Nations 1998). In addition, the Search Institute (2007) refers to the family, in particular the parents, in relation to both internal and external assets; despite this, the family has not previously been identified as an ‘asset’ in its own
right. More research is now required to further examine the role of the family as a stabilising asset and the impact that this could have on children, and their other assets, when it is not present.

In summary, whilst earlier studies have not specifically focused upon the mapping of children’s assets, there is commonality in the findings from other key research. Ipsos Mori and Nairn (2011, p. 73) concludes that:

It seems that children are more likely to thrive where the social context makes it possible for them to have time with family and friends, to get out and about without having to spend money, to feel secure about who they are rather than what they own.

Similarly, research funded by the Children’s Society (Rees et al 2010) found that family and friends were highly valued – it is crucial that the collective body of evidence, that embraces the child’s perspective, is used to inform future public health policy.

**Conclusion**

Asset mapping is a new approach that has not previously been clearly documented; it is recognised that there are some disadvantages to it (Rütten et al. 2008), for example, it is not feasible to know if all of the children’s assets were fully identified. Future research may help to further clarify the strengths and weaknesses of asset mapping and also to examine the relationships between assets and children’s health outcomes.

Addressing the public health needs of children is complex, but the availability of clear policies relating to children’s health and wellbeing is of paramount importance since it has been suggested that effective health provision in the early years of life can benefit later outcomes (Muhajarine et al 2006). Fattore et al (2009) recognise that there has sometimes been a reluctance to portray the child’s perspective within policy, however, it essential that this is incorporated to avoid inappropriate decisions being made.
The utilisation of asset-based initiatives, at both an individual and community level, offers an opportunity to re-think the approach to children’s public health and associated policy. The UK government has already recognised the value of community asset based strategies (Cabinet Office 2010, Marmot 2010); however, for initiatives to be successful, assets that are of value to children themselves need to be acknowledged - the CAW offers this insight and now provides the opportunity for health professionals to work with children, as well as policy makers, to build upon these assets and consider how they can be further enhanced. For example, the appreciation of the child’s local community as a fundamental asset could lead to the establishment of healthier communities that recognise the need for a more space orientated approach to child health policy (Gill 2008) which focuses upon the development of areas in which children can come together to socialise outside of their home environment. This approach, coupled with a traditional service orientated policy, that offers physical protection and security for children, has the potential to offer a more holistic public health perspective.

Whilst there is a need to test the CAW amongst a wider population of children, it is offered as a model that not only complements earlier work, such as Morgan and Ziglio (2007; 2010), but which can also be drawn upon by health professionals when working with specific individuals or groups so that further understanding of children’s assets and the promotion of health can be facilitated (Whiting et al. 2012). The CAW has the potential to assist the re-thinking of approaches to children’s public health so that it is more critically refined to meet the needs of this important population.

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