



# Article Survivors' Sociocultural Status in Mwenga<sup>†</sup>: A Comparison of the Issue before and after Rape

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- \* Correspondence: bmaisha@ustpaul.ca; Tel.: +1-613-236-1393 (ext. 6421)
- + Mwenga is a rural territory in the eastern region of the Democratic Republic of Congo (DRC) where the rule of taboo still dominates given the absence of adequate modern legal system infrastructure. Like in other rural territories, rape was used as an attack against cultural norms on which local communities are founded as an attempt to weaken these communities suspected of sympathizing with armed groups. As reported by Human Rights Watch, in 2000, then rebel group "Le Rassemblement Congolais pour la Démocratie (RCD), supported by Rwandan and Ugandan troops, raped, tortured and buried alive several women in Mwenga and other rural territories (Human Rights Watch 2000).

Received: 30 April 2017; Accepted: 12 June 2017; Published: 15 June 2017

**Abstract:** This article discusses psychosocial challenges faced by women survivors of rape in their families and communities based on the interpretation of rape as a sexual taboo and held beliefs that automatic transgression of taboo, through unwanted sexual contact, defiles and endangers survivors and those who associate with them. This article raises awareness on these challenges and provides contextualized useful knowledge for professionals in helping the relationship with survivors and for gender relations policy makers. Built on results from a doctoral qualitative, grounded theory-based research, the article presents survivors' stories from women who suffered rape and therapists who provided multidisciplinary services to them. Researchers have found that rape is widely believed to be a sexual taboo in Mwenga and other rural areas from the east of the Democratic Republic of Congo (DRC). The results suggest that efforts to support healing and social integration of survivors can be well supported by taking into consideration the contextual belief system around sexual defilement as this plays a significant role in post rape relations for survivors in their families and communities.

Keywords: women; sexual taboo; rape; sociocultural status

### 1. Introduction

For over two decades, the Democratic Republic of Congo (DRC) has been impacted by recurrent wars involving the national army against foreign armies as well as local and foreign militia (UN Security Committee 2012). As a result, there have been over five million fatalities as a direct consequence of the wars and their aftermaths. Several researchers and humanitarian organizations have argued that a non-conventional and very destructive weapon of war has been used in the DRC; the rape of women and girls driven by political gains as well as social and cultural destruction of communities which are systematically targeted for their kinship with tribally organized armed groups (Maisha 2016, pp. 224, 253; Brown 2012; Moufflet 2008). Rape is considered a sexual taboo in the eastern region of the DRC (Maisha 2016, pp. 101–3). In this context, taboo is a traditional legislative way of preserving life from unpredictable threats, preserving the "human condition" as described by Cazeneuve (1971); a condition free of fault-driven anxiety.

As a transgression of taboos, rape pits survivors against their own community; against their cultural identity. Under the reign of taboo, survivors are considered transgressors<sup>1</sup> of sexual taboo resulting in distorted images of self and other. It is believed that survivors are defiled and, consequently, lose status and consideration in their community. They are unworthy as daughters, spouses, mothers; even friends. Very often, they are rejected from relationships and communities based on beliefs that contagious sexual defilement presents a serious danger, including drought and death. Therefore, Survivor women's social status is such that no one (Maisha 2016, pp. 164, 199) wants to be associated with them; they are marginalized. It is worth noting that women in general do not enjoy the same social status and privileges as men in the eastern DRC. As participants to this research put it, culturally, a man is "the prince to be served [by a woman]"; while "an ideal woman is one who is qualified to be with a man, can fulfil a husband's sexual desires and bear children" (Maisha 2016, pp. 164, 199). Women's social status is hence inferior to that of men, and survivors' social status falls even lower; many women survivors feel like they are no longer considered worthy as regrets Wabiwa: "… people no longer see me as a worthy woman".

In a literature review (Maisha 2014), Maisha conducted an analysis of different typologies of sexual taboos in the Sub-Saharan Africa. The review reported multiple types of sexual taboos of which we are reporting some examples. In the DRC, it is prohibited to discuss sexuality in public, to have extramarital sexual encounters, to see one's parent's nude, especially the parent of the opposite sex and to have incestuous intercourse (Guinamard 2010, pp. 60, 87–97). In Cote d'Ivoire, it is forbidden to have sex in the bush as any contact between sexual liquid and nature can cause drought (Gottlieb 1982). Available literature had not explored the issue of rape as a sexual taboo; the research on which this paper is based does that. Rape provides ground for transgression of many of the above mentioned sexual taboos; it is therefore seen as a sexual taboo in itself as reported throughout this paper. In light of the research data, the authors suggest that such interpretation of rape exacerbates survivors' suffering by excusing their marginalization and cutting their social support network, which is crucial to their survival and healing from rape trauma. Readers are reminded that the current paper was presented at the conference on Global status of women and girls organized by Christopher Newport University (Newport News, VA, USA) in March 2017. In the following pages, we discuss our research methodology and results; we highlight psychosocial challenges pertaining to the interpretation of extra marital sex, including rape, as a transgression of sexual taboo, and the feared consequences of such an act from supernatural forces.

### 2. Methodology

The present article is based on empirical research conducted by the main author for his doctoral research, which was qualitative based on grounded theory (Creswell 2007). The researcher interviewed women survivors of rape in the Democratic Republic of Congo (DRC) and therapists who provide psychosocial services to those women. Nine survivors, all adult women, and six therapists—three women and three men—participated in the research project. All survivors were married or had children before rape. To be interviewed, therapists needed to have, at least, one year of work experience with survivors or hold a university degree in psychology, social work or a related field. Following the grounded theory approach, which allows for multiple phases of data collection and intermittent data analysis, the researcher collected data in two phases. The first phase consisted of semi-structured individual interviews of approximately 50 minutes each with all 15 research participants. The second phase, which was needed to clarify and validate emerging themes from data analysis, allowed the researcher to consult six participants: three survivors and three therapists. Data saturation<sup>2</sup> was

<sup>&</sup>lt;sup>1</sup> This is due to the fact that the state of defilement which results from transgressing a sexual taboo is contagious from the aggressor to the victim and beyond; any contact with the defiled leads to defilement.

<sup>&</sup>lt;sup>2</sup> According to Charmaz, data saturation is reached when new data adds nothing more/significant to the analysis (Kathy 2006).

reached after the two rounds of interviews. Data were analyzed following a three-level coding process: identification of units of meaning, grouping of units of meaning into categories and grouping of categories into themes. A rigorous protocol for verifying coding reliability was used during the data analysis. Two former PhD candidates<sup>3</sup>, Dr. Buuma Maisha and Dr. Stephane Joulain, as well as one of the thesis codirectors participated in this process. The protocol included random selection of 13% of the full sample<sup>4</sup> by Maisha, an independent coding of the selected sample in units of meaning by Maisha and Joulain, first and second assessments of coding reliability by Maisha and Joulain, and a final review of reliability by thesis codirector Dr. Karlijn Demasure. At the end of the coding process, liability assessment revealed a compatibility rate of 98%; well beyond the 70% benchmark recommended by Lombard et al. (2016). A 17-page full presentation of the methodology can be consulted in the doctoral thesis (Maisha 2016).

### 3. Results and Discussion

### 3.1. Women's Status before Rape

Participants to the research draw a portrait of what an ideal woman is based on: (1) her role as a family and community member and (2) her role as a loyal wife and guardian of sexual morality.

## 3.1.1. Her Role as a Family and Community Member

Four participants, two survivors and two therapists, all female, described an ideal woman as someone who is able to contribute to the wellness of the family and the development of her community. This sounds like a reasonable, collective expectation from responsible individuals in any society. However, when it comes to women in Mwenga, further exploration of the nature of their contribution to the family and community showed a lack of consideration for their agency; it is mainly dependent on men's views of women. For example, as reported in Maisha (2016), Furaha, a survivor participant, describes what it means for her to gain esteem in her family and community: " ... as a woman, I have to be married; my husband has to give dowry to my family, that's the value of a woman in my opinion. And I have to be in harmony with my husband". Elephant, a therapist participant reported in Maisha (2016), agrees with Furaha: "being married is a source of social esteem for a woman. She also must bear children, be submissive to her husband, work and report her harvest to the husband". Even though bearing children provides social esteem to a woman in Mwenga, it is more so if she bears male children as states David, a therapist participant also reported in Maisha (2016): "to be highly esteemed, a woman must be married. Also, she must bear children, especially male children". It is not uncommon that the family in-law or the husband considers marrying a second wife when the first cannot conceive or has only given birth to girls. The above accounts from participants, both therapists and survivors, present "relationship to men" at the center of women's self and social perceptions. They are indicative of a cultural system where being a woman means nothing much, unless you have a man to call husband or a son and thus contribute to the continuity of the patrilineal family lineage and identity.

### 3.1.2. Her Role as a Loyal Wife and Guardian of Sexual Morality

For their highest esteem, women in Mwenga are expected to have only one sexual partner throughout their lifespan, their one and only husband. As reported in Maisha (2016), a woman is highly regarded when "she has not been shared with another man", says David. "She cannot be sexually involved with a man, other than her husband", adds Justine, another therapist participant.

<sup>&</sup>lt;sup>3</sup> Dr. Maisha and Dr. Joulain were colleagues when this research project was conducted, they both agreed to exchange inter coding services on each other's projects.

<sup>&</sup>lt;sup>4</sup> Literature review recommended that at least 10% of the full sample be randomly selected for the coding process (See (Mouter and Noordegraaf 2012; Lombard et al. 2004)).

Mawazo, a survivor participant confirms the same condition: "in this area, it is forbidden for a woman to have sexual relations with any other man than her husband". It should be noted that men are also expected to abide by these social norms in regards to sexual morality. Under the rule of sexual taboo, however, families and communities can be lenient in judging men's sexual behavior. An explanation to such double standard can be found in the fact that, according to Douglas (2001), in patrilineal societies, women symbolize the door through which family and community identity is acquired (Douglas 2001). Therefore, it is critical that they allow no strange blood to infiltrate itself through outside marriage sexual activities. The double standard is then supported by the need to preserve family and community identity.

## 3.2. Survivors' Status

Participants, both survivors and therapists, paint a very dark portrait of women who have suffered rape in Mwenga. These women are viewed as defiled and dangerous for self and other, devalued as wives and mothers, marginalized and denigrated, and subject to social rejection. As stated earlier, transgression of sexual taboo through the sexual contact of rape causes automatic defilement and carries risks for self and other; the survivor and her entourage fear for their life and that of their livestock. It is believed that rape defilement brings a curse in the community and angers guardians of traditional norms who can unleash deadly punishment on all community members (Levi-Strauss 1970). "Someone who gets raped must be living under a curse", says Bitondo, a survivor participant. "They demanded that I go get treatment to get rid of the curse", also says Wabiwa. "When you have had an extramarital sexual relation, you may die while giving birth, or, if you give birth and look at the baby, it may die", continues Furaha. Participants' accounts show that the fear of curse from transgression of taboo is strong among communities in Mwenga, like in other communities where interpersonal relations and social harmony rely on the rule of taboo (Ricoeur 1967, p. 40). The community's reaction to rape is driven by this fear; survivors are seen as having lost any trust to be effective, safe wives and mothers; they no longer measure up to these important social roles. Worse, the state of defilement opens the door to social punishment such as public humiliation, blame, isolation, rejection and exile<sup>5</sup>. On top of explicit punishment from other community members, it is also believed that survivors and their entourage can suffer implicit punishments, those carried out by invisible guardians of cultural norms. Conditions such as disability, infertility, drought, epidemic and death can be interpreted as consequences imposed by spirits who are unhappy about the transgression of taboos; even when transgressors have not been identified (Demasure 2016, p. 6). "Survivors thought fistula was a result of transgressing taboos", says Anick about his clients' interpretation of their medical condition. For fear of explicit and/or implicit punishment, a husband will choose to divorce his wife, often with the support of his family. Five of the nine survivors we interviewed: Bitondo, Elaine, Jeanine, Leonidas and Wabiwa were rejected by their husband (Maisha 2016, p. 90).

#### 3.3. Cross-Cultural Impact of Rape: A Comparison

Anywhere in the world, rape survivors face social blame for perceived ways they might have influenced the aggressor's behavior: hanging out and getting themselves drunk with a bunch of guys, dressing provocatively, reporting the aggression late, sending mixed messages... Some survivors end up believing this as well and blame themselves. Issues such as low self-esteem, distorted concept of self and other are among the long-term effects of rape. Survivors are emotionally distressed; they live under fear of becoming victimized again, or loved ones such as children being victimized (Maisha 2016, p. 90). The DSM-V (2013) presents a list of sexual violence related symptoms of Post-traumatic Stress Disorder

<sup>&</sup>lt;sup>5</sup> These punishments can also be imposed in forms of fines or forcefully taking part in a ritual believed to eliminate the curse; the defiled community member can therefore regain their status as a valuable and safe member (See (Maisha 2016, p. 168; Cazeneuve 1971)).

(American Psychiatric Association 2013, pp. 271–74, 302). It is, therefore, a universal phenomenon that a rape survivor perceives herself or is perceived by others as different; someone whose old self has been negatively impacted; someone who feels ashamed with the new self. Our philosophy on rape is such that survivors are not to be blamed; they have to be acknowledged as free agents of their decisions whether through their choices of dress code or relationships. Blaming the survivor for the

and to make their own choices on ways they want to live their lives. In the cultural context of the eastern DRC, interpretation of rape as a sexual taboo worsens survivors' struggles. The social blame goes beyond the circumstances in which women are raped. In fact, on one hand, survivors are blamed or blame themselves for circumstances in which they are raped as reports Wabiwa bis: "If I had food in the house, I wouldn't have gone to the fields that day; therefore I wouldn't have been raped" (Maisha 2016, p. 100). For Wabiwa bis and others, she was raped because she went to the fields. The problem with such a conclusion is that it puts the blame on the survivor's decision to go look for food. It also ignores the fact that many rape situations happened when militia or army forces attacked villagers in their own homes. On the other hand, unlike in other places where the rule of taboo has lost its prevalence, survivors in Mwenga are blamed for potential losses and suffering related to the curse (Guinamard 2010, p. 37), which results from the transgression of taboo.

above reasons and others legitimizes violence and denies survivors' rights to be who they choose to be

### 3.4. Restoring Lost Self and Social Esteem: A Second Chance for Survivors

In response to fear of curse engendered by the notion that rape causes transgression of sexual taboo, survivors have to undergo a traditional treatment to regain their social status/roles and obligations as wives, mothers and relatives. The following Wabiwa bis' story is an example of the traditional process of reintegrating survivors in their communities.

I gave a hen, \$20, a gallon of hot alcohol, traditional alcohol, Plantains, salt, and oil; I brought the whole thing to them, to the *baraza* [Council of Elders]. They then invited families from the neighborhood; even passers-by were curious: 'What is happening?' They asked. 'They are talking about the situation of the woman who was kidnapped in the forest by the militia; that is what they are talking about, so that the woman can live in all dignity again' (Maisha 2016, p. 163), they were told.

Rites of purification are performed by traditional chiefs or other guardians of traditions with the ability to restore the power of life (Tempels 1959, p. 22; Defour 1982, p. 124) over that of death threatening the wellbeing of survivors, their families and their communities. In addition to traditional rituals, survivors turn to faith leaders such as pastors and priests and hope for purification through prayers to God. Those who are Christians believe purification of defilement can be obtained through the blood of Christ (Maisha 2016, p. 201).

These spiritual practices, either through faith or traditional beliefs, are believed to restore survivors' normalcy based on social norms and expectations. They are believed to restore safety in families and communities. However, a significant difference was observed between opinions of survivors and therapists who participated in the present research.

Most survivor participants showed openness or expressed having used traditional healers' services such as rites of purification; this was a vital decision for some who were thereafter able to stay in their marriages, families and communities. Mawazo was required by her family in-law to undergo a rite of purification. Despite the fact that her and her husband are Christians, and that their faith was crucial in their decision to remain married after rape, the couple restored their trust in the extended family and community by satisfying the traditional ritual condition. In the case of Bitondo, after she was freed from captivity and had returned home, she was offered traditional medicine to drink to be able to breastfeed her daughter without fear of losing her. As for Wabiwa bis, whose story is reported on the previous page, she underwent a public ritual for her reintegration in her community; her husband was already assassinated by her kidnappers. She spent six months in the jungle as a sex

slave to the interahamwe militia, yet her escape and return to her community was met with fear of who she had become as a rape survivor; a defiled woman and mother. Those among survivor participants, such as Wabiwa, who expressed rejection of traditional healing required for cleansing of defilement orchestrated by transgression of taboo, and those, such as Bitondo, who did not know much about the role of traditional healing through rites of purification were either Christians or of a younger generation. They have embraced modern lifestyle and are disconnected from traditional ways of life. All therapists acknowledged that many of their clients are either, in most cases, asked by family members to undergo traditional healing, or they have made such requests on their own. No therapist, however, expressed being convinced that rites of purification, as a remedy against sexual defilement, were therapeutic for their clients; most no longer hold beliefs in the mysterious universe of taboo. This therapist's attitude was mainly attributed to a higher level of education or belief in a more universal form of spirituality such as Christianity. In light of contextual challenges facing rape survivors and professionals who provide psychosocial services to them in the east of the DRC, Maisha (2016) has proposed an integrative framework where cultural specifics and empirically validated theories can be put to service. At the center of the framework is the social conceptualization of rape as a sexual taboo and its implications on post rape interpersonal relations and psychosocial wellbeing of survivors.

#### 4. Conclusions

Interpretation of rape as a sexual taboo is a difficult reality for hundreds of thousands of women and girls who have suffered rape for the past two decades in the DRC. It is an issue that cannot be ignored by researchers, policy makers and political as well as community leaders in this area where relatedness is paramount to the meaning of life. Being excluded from one's social group is often likened to death; many survivors who were interviewed for this research echoed such a feeling of being dead after husbands, families and other community members turned their back on them; or, as it is believed, decided to protect themselves and the vulnerable among them such as children from the threat-turned-member—the survivor. Much effort has been made to prevent massive rape by army personnel or militia members. In 2016, a UN mission (MONUSCO)'s news outlet reported a decrease by 34% of rape cases by military personnel<sup>6</sup>. However, there is still a long way to go to change the views of armed individuals on "women's bodies as a battleground" (Omanyondo et al. 2005). Also, when it comes to the fate of survivors in a society where they are viewed as a threat to self and other, where they are marginalized and rejected, the consequences of rape become more complex. This article presents an introduction to that complexity of survivors' social fate. From the results and discussion presented here, professionals providing multidisciplinary services to survivors can consider interventions on two levels: individual and relational. Having suffered rape directly, survivors present a great need for individual healing. Given the cultural context, however, any efforts to support such healing must take into consideration the broken/lost relationships due to beliefs surrounding sexual taboo, defilement and curse. A combination of contextual response, such as rites of purification, to fear of defilement and advanced scientific treatment models can be part of the healing process; especially on the relational level. Such combination can translate into actualization of traditional healing tools in such a way that they are understood and applied in the best interest of survivors. This might require a change in social views of survivors, which also may depend on a change/actualization of the belief system. We believe that more studies are needed to raise awareness about psychosocial implications of rape viewed as a sexual taboo on the lives of survivors and their families. We also believe that these studies can support initiatives of public education for social changes that will allow for a more embracing and healing environment for survivors.

<sup>&</sup>lt;sup>6</sup> The news outlet reported a decrease by 25% of overall number of rape cases reported to tribunals, and 34% decrease of reported cases where the perpetrators were military personnel (Radio Okapi 2016).

**Author Contributions:** This article is based on Buuma Maisha's doctoral thesis. His contribution includes designing and conducting the research project. Judith Malette and Karlijn Demasure contributed to the research work in their capacity as codirectors of the project: they provided intellectual and emotional support to then PhD candidate, Buuma Maisha. All three authors have agreed on co-publishing this article.

Conflicts of Interest: The authors declare no conflict of interest.

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