

26423-71085-2-PB

by Cek Turnitin

Submission date: 05-Aug-2023 10:04PM (UTC-0500)

Submission ID: 2141674315

File name: 26423-71085-2-PB.pdf (346.92K)

Word count: 6394

Character count: 36380



The influence of self-concept and peer support on social anxiety of stutter survivors in Indonesia

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Received: 12-06-2023

Revised: 04-07-2023

Accepted: 25-07-2023

KATAKUNCI

dukungan teman sebaya;
indonesia stuttering
community;
kecemasan sosial;
konsep diri;
stutter

ABSTRAK

Gagap adalah gangguan bicara ditandai dengan pengulangan bunyi suku kata atau perpanjangan suara. Individu yang memiliki gagap tahu persis apa yang ingin dikatakan, tetapi kesulitan untuk menghasilkan aliran bicara yang normal. Gagap, dapat disertai dengan perilaku seperti kedipan mata yang cepat atau bibir yang bergetar. Penelitian ini bertujuan untuk mengetahui keterkaitan mengenai konsep diri serta dukungan teman sebaya dengan kecemasan sosial pada penyintas gangguan wicara (*stutter*) di Indonesia. Sampel penelitian ini adalah anggota Indonesia *Stuttering Community* sebanyak 209 penyintas *stutter* dari populasi sebesar 537 anggota yang terdiri dari *stutter* dan *non stutter*, diambil menggunakan teknik *sampling purposive* dengan kriteria individu yang memiliki gangguan wicara dan tergabung dalam komunitas ISC. Pengumpulan data menggunakan tiga buah skala psikologi, yaitu skala konsep diri, skala dukungan teman sebaya dan skala kecemasan sosial. Teknik Analisa data yang digunakan pada penelitian ini adalah *multiple linear regression*. Hasil penelitian ini menunjukkan bahwa nilai sumbangan efektif sebesar 46,1%, artinya terdapat pengaruh antara konsep diri dan dukungan teman sebaya terhadap kecemasan sosial pada penyintas *stutter* yang tergabung dalam komunitas.

Pengaruh konsep diri dan dukungan teman sebaya terhadap kecemasan sosial penderita gagap di Indonesia

Stuttering is a speech disorder characterized by repeating sounds, syllables, or prolonging sounds. Individuals with a stutter know precisely what they want to say but have difficulty producing a regular flow of speech. Stuttering, which may be accompanied by behaviors such as rapid eye blinking or lip trembling. This study aims to determine the relationship between self-concept and peer support with social anxiety in stutter survivors in the Indonesia Stuttering Community. The sample for this study was 209 members of the Indonesia Stuttering Community out of a population of 537 members. The sample was selected using a purposive sampling technique with criteria of individual who have speech disorders (stuttering) and are part of the ISC community. Data collection uses three psychological scale, namely self-concept scale, peer support scale and social anxiety scale. The result of this study indicate that the effective contribution value is 46.1%. It can be concluded that there is an influence between self-concept and peer support on social anxiety among stuttering survivors who are part of the ISC community.

KEYWORDS:

indonesia stuttering
community;
peer social support;
self-concept;
social anxiety;
stutter

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Introduction

In essence, "no human is born perfect." Strengths and limitations will be permanently attached to every human being. Humans must manifest gratitude by accepting the conditions they have. Because, in truth, Allah SWT has created every human being in the best form, likewise for people with disabilities. According to the Ministry of Social Affairs, persons with disabilities experience obstacles or difficulties in interacting with the demands of the surrounding environment. Based on the Ministry of Social Affairs' disability management system, there are 65.517 physically disabled, 65.138 multiples impaired, 2.486 ex-leprosy/chronic illness, 26.580 mental disorders, 3.824 autism, 13.802 deaf, 5.584 speech impaired, 3.670 slow learners, 13.141 mentally impaired and 4,191 down syndromes (Kemensos.go.id, 2022). A person who faces disturbances or obstacles in terms of verbal communication is called speech impaired; speech impaired is divided into two categories, namely mute and stuttering (Firmansyah, 2020).

Stuttering is a speech disorder or disorder that causes repetition, lengthening of syllables, sounds, and phrases that interfere with fluency in speaking (Dewi & Saifullah, 2019). A study revealed that individuals who experience speech disorders or stuttering would face several obstacles, including difficulty starting words due to barriers that cause vocal repetitions and problems articulating sounds using the throat, palate, tongue, lips, and teeth (Sari et al., 2020). The stuttering disorder is divided into three types: repetition, prolongation, and blocking, accompanied by secondary behaviors such as blinking and jerking the head (Seitz & Choo, 2022). Several factors can cause an individual to stutter, namely 1) biological, caused by premature birth and there is a disturbance in the coordination of brain functions that affect the nervous and motor systems in the muscles; 2) sociological and psychological, caused by events or events that occur due to pressure from the surrounding environment, so that it will trigger a prolonged feeling of trauma (Hikmah & Mardiyah, 2022).

This research focuses on persons with speech impairments in the category of stuttering survivors who are in the Indonesian Stuttering Community (ISC) with members spread throughout Indonesia, including Java, Kalimantan, Sumatra, Sulawesi, Bali and Lombok. The Indonesian Stuttering Community (ISC) was established in 2009 through a Facebook group and officially became a community on January 13.2017. In 2009, this community was founded as a forum for stutter survivors to share and tell stories about survival experiences. Based on data from active members of the ISC community, there are currently 537 members, consisting of 52% or 280 non-stutters, namely individuals with a very high level of concern for stutter issues, such as speech therapists, psychologists, and doctors. In comparison, 41% or the equivalent of 209 members are stutter survivors. Furthermore, 7% or 48 individuals declared cured of stutter and contributed knowledge and information to the community. The focus of this study is based on the fact that adults who are stuttering are at high risk of experiencing social anxiety disorder; more than 60% of them seek treatment to reduce their level of stuttering (Lowe et al., 2021). Past research has found that increasing evidence has established that stuttering is often associated with social anxiety, based on previous studies regarding the prevalence of anxiety disorders between stuttering and non-stuttering survivors, it was found that 22% of adults with stuttering met the criteria for having social anxiety disorder (Tomisato et al., 2022).

Jantz and McMurray expressed that an abnormal fear or excessive anxiety in an individual's

mind causing painful pain is a definition of anxiety (Pratiwi et al., 2019). Meanwhile, social anxiety is a fear that arises due to worries of being judged by others, which causes nervous tendencies in social situations (Suryaningrum, 2016). Emotional discomfort in dealing with the demands of the surrounding environment, makes social interaction a significant source of anxiety for individuals who have social anxiety (Goodman et al., 2021). Furmark (2000) revealed the characteristics of social anxiety, such as 1) cognitive focus on worrying about what to think, 2) behavior focused on avoiding eye contact and slow speech, 3) body response focused on the face being red, sweating too much excessively, and , 4) emotions that focus on feelings of fear, anxiety, lack of confidence and feeling sad.

Meanwhile, La Greca and Lopez (1998) revealed that the aspect of social anxiety is divided into three parts, namely, 1) fear of negative evaluation, reflecting concern for a negative evaluation of the surrounding environment, 2) social avoidance of strangers, pressure in new circumstances or when building interactions with strangers, 3) social avoidance of familiar people, the pressure that is commonly felt on people who are not strangers (Hidayah, 2017). Social anxiety is classified into three, namely 1) thinking style (way of thinking), 2) focusing attention (the focus of attention), 3) avoidance (avoidance)(Ekajaya & Jufriadi, 2019). Several symptoms indicate that someone is experiencing social anxiety. Ingman (2003) explained that symptoms of social anxiety could be expressed in various ways, namely 1) physical symptoms, characterized by profuse sweating, abdominal pain, dizziness, and flushed face; 2) behavioral symptoms, characterized by anxiety, avoiding eye contact, and refusing to interact socially, 3) cognitive symptoms, characterized by excessive vigilance, where this vigilance survivor makes people around them feel that they are paying attention and evaluating themselves.

Butler mentioned that self-confidence plays a role in influencing a person's level of social anxiety. Self-confidence is formed through the development of a person's self-concept, where a positive self-concept has implications for a person's level of optimism (Nurika, 2016). In its development, the self-concept is closely related to the individual, even though it is not directly formed realistically as soon as the individual is born. In other words, self-concept is formed simultaneously with the individual's growth and development level. Fitts (1965) defines self-concept as a frame of reference when carrying out social interactions with the surrounding environment (Rezeki, 2018). Meanwhile, Burns argues that views about oneself, starting from beliefs, evaluations, and tendencies in behavior, are the understanding of self-concept (Annisa, 2018).

Self-concept is a representation that a person has of himself in physical and psychological conditions and interactions with the surrounding environment. Self-concept is classified into two types, namely, positive self-concept and negative self-concept. Positive self-concept is a condition in which an individual shows an attitude that he is good at understanding. This positive self-concept gives an individual a positive assessment of himself and interprets life as a process. Meanwhile, a negative self-concept is defined as an individual who sees himself as disorganized with unstable feelings. These negative concepts make an individual not recognize himself, such as being unable to explore his weaknesses and strengths (Sari & Khoirunnisa, 2021).

Fitts (1965) said that aspects of self-concept include, 1) self-identity, which is an individual's perception of physical conditions; 2) ethical-moral self, which is an individual's view of ethical and moral values; 3) personal self, which is a perception and understanding of himself, 4) family self, the feeling of worth it has as a family member, 5) social self, one's perception of one's ability to interact with others, 6) self-evaluator, which aims to observe and give an assessment to oneself and others. Self-concept forming factors are categorized into two, namely internal and external factors. Hurlock (1980) explained the external factors include 1) age of maturity, 2) gender suitability, 3) peer support, and 4) relationship with family.

Based on previous research, personal anxiety is influenced by peer social support; one's pressure will be reduced through the help of peers in the form of social support for survivors. Johnson stated that it is essential for a survivor of social anxiety to receive social support from

individuals or significant others who are well-connected and close to survivors (Misalia et al., 2022).

Social support is essential for someone with a disability, especially with peer support. Positive social support can provide a sense of security and confidence, which will affect self-concept. Self-concept can be formed positively if the individual has social support that is fulfilled. Social support is a form of concern and the need for constant feelings when interacting with others. The presence of peers plays an essential role in the stage of development toward maturity. This phase starts with establishing intimate relationships and committing to friendly relations so that peer support becomes something that individuals need when they enter adulthood (Wahyuni, 2016).

House (1988) suggests that there are several aspects related to peer support, which include 1) emotional support, namely an expression to show concern for someone, 2) appreciation support, in the form of positive expressions or encouragement to individuals, thereby helping individuals in forming self-confidence, 3) instrument support, providing direct support and assistance that is appropriate and according to individual needs, 4) information support, which can be expressed through various actions such as giving advice, suggestions, or feedback so that individuals can find solutions to overcome problems. 5) social network support, namely support that occurs through providing a sense of togetherness with group members (Hartati et al., 2022). Meanwhile, Myers argues that someone encourages the form of positive support based on three factors, namely 1) empathy, where a person also feels the difficulties that other people face; 2) social norms and values, which have an essential role in guiding individuals in carrying out their social responsibilities in everyday life, 3) social exchange, the exchange in question is an exchange in the form of reciprocal relationships between individuals regarding social behavior between love, services, and information (Hobfoll, 1986).

Based on previous researchers stated that a negative correlation was found between self-concept and social anxiety; the more negative the self-concept, the more social anxiety tends to increase. It was proven in the research of (Unni & Thomas, 2020). Another researches from Pickering et al. (2020) there was a negative influence between social support and anxiety; the higher the social support provided by the environment, the lower the social anxiety, and vice versa. Furthermore, research conducted by Rezeki (2018) revealed that an increase in self-concept variables would reduce social anxiety, and each additional social support variable would reduce stress.

Through positive support from peers, stutter survivors can hold a positive self-concept. Moreover, high positive peer reinforcement will make it easy for stutter survivors to adapt and interact with their environment. A self-concept that is formed positively can encourage the form of self-confidence and high self-confidence. Thus, social anxiety in stutter survivors can decrease. Conversely, low positive peer support can result in stutter survivors having a negative self-concept. A negative self-concept will affect survivors' stutter and difficulty interacting with their surroundings. In addition to problems interacting with the social environment, a self-concept that is negatively formed can also lead to low self-confidence among stutter survivors. This low self-confidence can also make survivors always compare themselves with others. This phenomenon makes stutter survivors have high social anxiety. Based on the explanation above, the hypothesis in this study shows a negative relationship.

Based on this phenomenon, the researcher intends to find out whether there is a relationship between self-concept, peer support, and social anxiety among stutter survivors in Indonesia. It is hoped that the theoretical benefits of this research will provide valuable information in the development of psychology, especially in social psychology, clinical psychology, and psychological studies in general. Research related to disabilities are expected to improve the welfare of people with disabilities especially for stutter survivors. Furthermore, there is a novelty in this research, which involves use of 3 variables; self-concept, peer support and social anxiety. So, it can inform stutter survivors about the relationship between self-concept and peer support for social anxiety. The ISC community is expected to be able to

contribute knowledge to members of the Indonesian Stuttering Community. It is hoped that readers can provide information about the science of stuttering.

Method

This research utilizes a quantitative approach, using data collection methods through questionnaires. All members of the Indonesian Stuttering Community, both male, and female, were the subjects of this study. Sampling was done through a purposive sampling technique because the subject in this have certain conditions and criteria, namely; individuals who have speech disorders and are members of the ISC. The members of Indonesia Stuttering Community consist of stutter and non-stutter survivors, not all of whom have speech disorders. Therefore, it can be conclude that there were 209 stutter survivor, who participated in this research, including 128 males and 81 females. The data that has been obtained is then processed through a Multiple linear regression analysis method. This analysis is an analytical method used to measure the influence of independent and dependent variables. The independent variable in this study is self-concept and peer support, while the dependent variable is social anxiety.

The self-concept variable was measured using the Tennessee Selfie Concept Scale (TSCS) developed by William H. Fitts. This variable measurement technique is the result of an adaptation from previous research by Hidayah (2017) consisting of internal and external aspects. The number of statement items to measure self-concept variables is 48 statement items. One example of the item in the statement is, "I always accept myself, even though I am different." A Likert scale of 1 to 4 is used to determine the answer. The self-concept variable in this study produces a reliability value of 0.951, with discrimination score range from 0.322-0.704.

The peer support variable can be measured using the peer support scale. The peer support scale results from adjustments from previous research conducted by Rahmanda (2020). There are 50-item statements contained in this peer support scale. The item statement is divided into five aspects, namely 1) emotional support aspect, 2) appreciation support aspect, 3) instrumental support aspect, 4) information support aspect, and 5) social network support aspect with value. One example of a statement item on this peer support variable is "My friend provides information such as training or therapy to reduce the level of stuttering and always appreciates me when I am talking." This study's peer support variable produced a reliability value of 0.921, with discrimination score range from 0,339-0,614.

Meanwhile, social anxiety variables are measured using the A Social Anxiety Scale developed by La Greca & Lopez (1998) the measurement of the social anxiety variable was adapted from previous research by Hidayah (2017). The measure of this social anxiety variable consists of 3 aspects. These three aspects are 1) negative evaluation aspects, 2) strangers, and 3) known people. The number of statement items for measuring social anxiety variables consists of 38. One example of this statement is, "I am always afraid that other people will notice that I stutter." The social anxiety variable in this study produces a reliability value of 0.965, with discrimination score range from 0.357-0.765.

These three variables, using response categories for each statement, include (1) strongly disagree, (2) disagree, (3) agree, and (4) strongly agree. Then the data obtained were then analyzed with the help of JASP software version 0.16. 2 for Windows using the Multiple Linear Regression.

Results

The Shapiro-wilk test for normality resulted in residual data with p-values of self-concept (0.232), peer support (0.350) and social anxiety (0.063). Similarly the normality test of the residual histogram shows a bell-shaped curved, indicating that the research data is normally

distributed based on Figure 1.

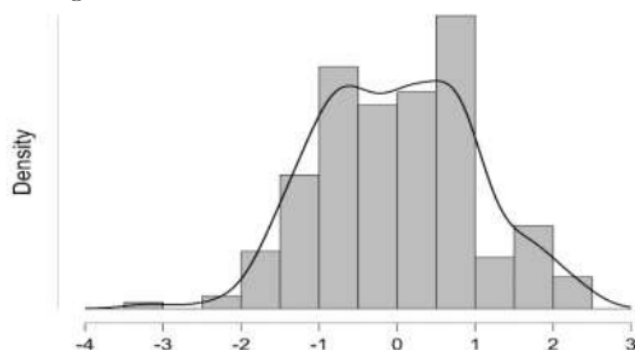


Figure 1. Residual Histogram

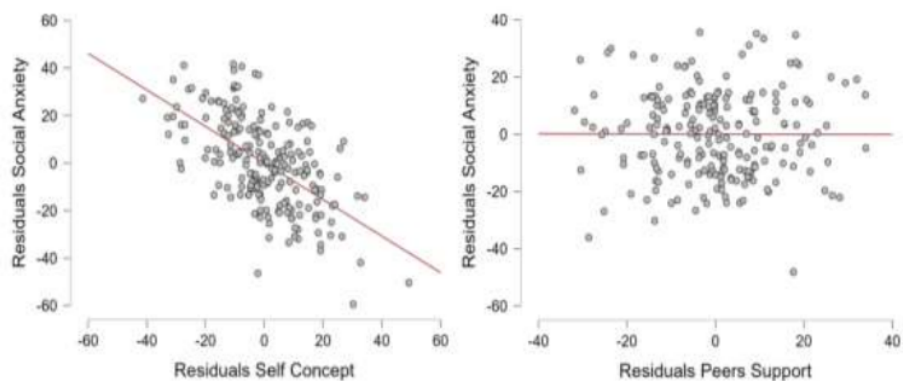


Figure 2. Linearitas

Figure 2, shows that the line in the graph moves in linear manner, and the scatter plot forms an approximate elliptical shape, indicating that the data from this study has a linear relationship

Table 1.
 Result of Anova

Model		Sum of Squares	Df	Mean Square	F	p
H ₁	Regression	40603.034	2	20301.517	88.217	< .001
	Residual	47406.841	206	230.130		
	Total	88009.876	208			

Based on Table 1, it shows the result of F-test=88.217, with a significance of $p < 0.01$. This result indicates that the calculated F-value is greater than the F-table value ($F=2605$), which means that the research hypothesis is accepted. It suggests that the variable self-concept and peer support, when considered simultaneously, have a significant effect on social anxiety.

Tabel 2.
Results of Correlation Tes

	r	Sig.
Self- concept* peer support	0.604	< .001
Self-concept*social anxiety	-0.679	< .001
Peer Support*social anxiety	-0.412	< .001

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Based on Table 2 shows a correlation value of $r_{x1y} = -0.679$ with $p < 0.01$ and the score $r_{x2y} = -0.4123$ with $p < 0.01$. Therefore, it can be concluded that self-concept variable and peer support variable have a negative relationship to social anxiety on social anxiety.

Table 3.
Effective contribution

Model	R	R ²	Adjusted R ²	RMSE
H ₀	0.000	0.000	0.000	20.570
H ₁	0.679	0.461	0.456	15.170

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Based on Table 3, it's explained that the R-square produces a value of 0,461. Therefore, it can be concluded that the study resulted in an affective contributive of 46.1 %.

Discussion

The researcher conducted a series of prerequisite tests before performing hypothesis testing. The normality test result indicate that the data is normally distributed, as shown in Table 1 and Figure 1. Meanwhile, the linearity test results indicate that the both the variabels of self-concept and peer support have a linear relationship with the variable of social anxiety, as shown in Figure 2. The results of the analysis using multiple regression analysis of the data obtained show that the value of $F = 88.217$ with a significant score of $p < 0.01$, and the results of the score $r_{x1y} = -0.679$ with $p < 0.01$ and the score $r_{x2y} = -0.4123$ with $p < 0.01$, so that it can be concluded that the hypothesis is accepted, meaning that the self-concept and social anxiety have a negative relationship, as well as the variables of peer support and social anxiety, which also have a negative relationship. Therefore, it means that there is a negative relationship between two independent variable; self-concept and peer support with dependent variable; social anxiety. It shows that the higher self-concept the lower the social anxiety, and vice versa. Other research also shows that the higher the peer support, the lower the social anxiety in stutter survivor in Indonesia Stuttering Community. It can be concluded that the higher self-concept and peer support, the lower social anxiety among stutter survivors, or conversely, the lower self-concept and peer support, the higher social anxiety among stutter survivors.

This study's results are supported by previous research by Fadhila and Pratiwi (2020) where the results explain that self-concept influences social anxiety in students. It means that the higher the self-concept, the lower social anxiety will be. The same results regarding the relationship between self-concept and social anxiety in prisoners (Putra & Adli, 2019). Also produces the same thing where there is a relationship between self-concept and social anxiety in new students (Hidayah, 2017). The findings of several researchers further strengthen the results that the higher the self-concept, the lower the social anxiety of stutter survivors in Indonesian Community Stuttering.

Self-concept is a self-representation that a person has about himself as a whole. This self-image includes physical, psychological conditions and interactions with the environment. Individuals with a positive self-concept are characterized by their skills in assessing themselves positively, physically, or socially. In addition to personal assessment, self-concept is supported by positive self-assessment obtained from the surrounding environment, such as

family or people who often meet other than family. Hence, conversely, a person's social anxiety is low for someone with a negative self-concept. This negative self-concept is characterized by a lack of self-confidence, an inability to explore weaknesses, and a feeling of a gap between oneself and others or comparing oneself with others so that one sees oneself as a different individual (Madhy et al., 2022).

It allows individuals to have high social anxiety. The results of this study also illustrate that there is a relationship between peer support and social anxiety. Kholifah (2016) said one of the external factors that influence anxiety is the role of peers. The results of the research also stated that there was a negative correlation between peer social support and student anxiety (Rahmanda, 2020). Meanwhile, another research on adolescents showed the same results. Namely, there is a relationship between peer social support and anxiety levels (Pebriyani et al., 2020).

The findings of several consistent research results state that someone who gets high peer support tends to feel more secure and confident. The sense of security and confidence is caused because individuals think their need for peer support is fulfilled. This support can be expressed in various forms, such as emotional, physical, material and informational.

Social anxiety is defined as a tendency to feel nervous (nervous) in social situations. The cause of this nervousness is triggered by a fear of negative judgment given by other people (Ekajaya & Jufriadi, 2019). Social anxiety is characterized by feeling emotionally uncomfortable, fearful, and worrying excessively regarding social situations (Suryaningrum, 2016). Furthermore, the American Psychiatric Association (2013) defines social anxiety as the emergence of abnormal symptoms of fear and worry when interacting with people around them. This abnormal fear and worry cause feelings of shame, discomfort, stiffness, and pressure among people, so that person prefers to avoid similar situations so that these feelings of anxiety and fear do not arise (Haq, 2023). The scores obtained from the respondents' answers show that, generally, stutter survivors who are members of the ISC community have moderate anxiety. However, there are still 34% of survivors who have anxiety at a high level. Individuals of the male sex may dominate more research subjects. Other findings, such as the study's results found that males were overwhelmed by 61% of stutter survivors. It is reinforced by the results of research, which states that male sex sufferers are reported to be 3 to 4 times more than women (Singh et al., 2019). Stuttering is more common in males which is related to genetic factors. Women can be more resistant to inherited stuttering and have a more optimal recovery rate than men. The link between stutter and genetic factors makes women have a better recovery rate than men (Nang et al., 2018). Based on the results of multiple regression analysis, the R² value was 0.461, meaning that self-concept and peer support had a 46% influence on social anxiety, and other factors influenced the rest. This is supported by research conducted that the authoritarian parenting style significantly correlates with social anxiety based on the rejection given by parents (Rachmawaty, 2015). Parenting style is another factor that influences social anxiety outside of self-concept factors and peer support.

Another study explains that a secure attachment can have positive social behavior, good emotions, and quality peer relationships, which provide overall positive emotional support. (Kholifah, 2016). Also explains that emotion regulations has a negative significance, which means that emotion regulations influence social anxiety (Akkus & Peker, 2022). Based on this research, only quality peer relationships can provide good emotional support. The results of other studies that affect social anxiety outside of the two variables in this study are research conducted by Pratiwi et al. (2019), where the research explains that self-esteem has a negative significance, which means that self-esteem influences social anxiety.

Conclusion

Based on the results of research that has been carried out using multiple linear regression analysis, it can be concluded that there is a negative relationship between self-concept and

social anxiety in stutter survivors in the Indonesian stuttering community, so the higher self-concept, the lower social anxiety personality will be. Also, another result there is a negative relationship between peer support and social anxiety in stutter survivors in the Indonesian stuttering community, it means that the higher peer support, the lower social anxiety will be. So it can be concluded that the higher the self-concept and the higher the peer support with the lower the social anxiety personality will be. Vice versa, the lower the self-concept and peer support, the higher the character of social anxiety in stutter survivors Indonesia Stuttering Community. Some examples of these influences in social anxiety, include self-esteem, emotions regulations, attachment style, self-confidence, and peer influence. The results of this study are expected to be taken into consideration by the government can provide policies or regulations regarding facilitating access for individuals with speech disorders, such as implementing educational policies, employment opportunities, and ensuring access to communities that can help stuttering survivor in self-improvement. Additionally, the government can also encourage professionals to contribute to the stuttering community by providing counseling services, psychoeducation, and educating the public how to live with individuals experiencing stuttering, with the aim of minimizing bullying incidents. For individuals who experience stutter to encourage themselves to be more proactive in getting peer support, one of which is through the community, to be able to help stutter survivors improve their self-concept by participating in self-development activities such as seminars and workshops. This research is also expected to contribute to the community in developing programs or activities that can be provided by community enhance self-concept include training, seminars, counseling and outbound activities involving all community members (stutter survivor and those who care about stutter). Encouraging stutter individuals to join the community and actively participate in community activities. Additionally, it is important to encourage stutter individuals to be more open to fellow stutter group members in order to help an support each other's personal development. Another thing that can be done by the community is to frequently voice the campaign of caring for stutter, so that individual with stutter are not marginalized. As for other researchers, it is hoped that this article can become a source regarding the relationship between self-concept and peer support for social anxiety in stutter survivors in Indonesia.

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