

Relational social work supporting family caregivers of older people in crisis: Comparative discussion in Ireland, China, and Namibia

Yaru Li

University of Eastern Finland, Finland

Janet Anand

University of Eastern Finland, Finland

Janet Ananias

University of Namibia, Namibia

Honglin Chen

University of Eastern Finland, Finland

CORRESPONDENCE:

Honglin Chen

e-mail: honglin.chen@uef.fi

Abstract

Relationships are embedded in the social work profession due to its nature of providing help and care. Both in theory and methodology, relational social work aims to build and strengthen supportive social networks around people. Professional relationships in social work practice contribute to service delivery and facilitate better quality care for older people. Older people live in a reciprocal relationship network where family relationships and environmental settings are all related to their well-being. In rapidly aging societies, the safety, health, and rights of older people are major concerns for families and states. Using case study methods and comparative analysis, we explore relational social work in family care settings at the micro, mezzo, and macro levels in different cultural contexts. Three sub-studies demonstrate that empowering individuals, peer groups, and communities can bring about social network change, highlighting the importance of relationships.

Keywords

Relational social work, family caregiver, social gerontology comparative analysis.

Introduction

Older people caregiving in social welfare systems

The number of people over 60 years of age will increase to 2 billion worldwide by 2050 (WHO, 2022) makes the care of older people a serious problem on the society. As the two major pillars of support for older people, the burden on family and state also increased. The responsibility arrangement of care for older people is greatly influenced by finance of state and culture in different countries (Li, 2018).

Ireland became a welfare state in 1952 with the Social Welfare Act. The Irish welfare system through the Health Services Executive, Dept of Social Protection, local authorities and voluntary services provides a wide range of services for people growing older and family caregivers in Ireland. Support specific to family caregivers includes services for protecting older people, home care packages, helpful information to caregivers and relative and means tested benefits and entitlements such as the Carer's Allowance payment and respite care grants (Teahan et al, 2021). The legislation pays particular attention to the welfare of informal caregivers which can indirectly benefit the older people.

In China's social welfare system, the government provides a universal pension subsidy for older people. However, the low level of financial subsidy is primarily used to guarantee basic living security and cannot support the purchase of care services (Peng, 2014). In terms of services, the allocation of low-fee service qualifications and lack of health professionals in public institutional care facilities makes older people who are in need often unable to get proper services. Moreover, legislation on the long-term health care system especially supporting fragile and disable older people in China hasn't well established (Qi & Xu, 2019). In conclusion, relatively insufficient supports from the government cannot respond well to the need of older people and their caregivers.

The law in Namibia stipulates that the state offer a decent standard of living for all people older than 60 years, through a national non-contributory social pension scheme, making Namibia amongst the few African nations that cater for social pension grants for its senior citizens. The policy discourses on registration, monitoring, and control of old age homes in Namibia are lacking behind. And institutional care for older people is a western concept, unfamiliar and unaffordable to the majority of older persons in Namibia. The fact of social welfare system to support older people and caregivers is non-existent, so the majority of older people in Namibia are living and being taken care of by their families.

Cultural context and caregiving for older people

The core values of individual self-realization and freedom of choice in Irish culture influence social welfare for older people (Daatland & Herlofson, 2003). The state and the

family share responsibility for the care of older people. Ireland shares with other developed countries the issue of rapid and sustained population aging (Kearney et al., 2011). In Ireland, the proportion of people older than 65 will rise to 19% by 2031 (Central Statistics Office, 2008). The greatest increase will be in the oldest group who exceed 80, expected to more than treble by 2036 (Cigolle et al., 2007). The trend in the demographic profile of the Irish population will lead to a greater requirement for caring services. Although government policy favors home and community care over long-term residential care, support provided to family caregivers is vital to ensure older people can live in their own homes and communities.

Filial obligation is a cultural norm in Asia, where family members are socially assigned, morally obliged, and intrinsically assumed to care for family members (Kong et al., 2021). Confucian beliefs of filial piety, duty, and support have shaped Chinese family and social welfare values, emphasizing family functions on intergenerational support (Hu, 2022). According to the 7th National Population Census in China, people aged 65 or above account for 13.5% of the total population. Additionally, with «one-child» policies and population mobility with urbanization, family structures are becoming smaller, which weakens the functions of care (Fan, 2012). It further exacerbates the conflict between family caregiving resources and caregiving responsibilities. Thus, the focus on supporting family caregivers has become an important issue.

Shaped by ubuntu philosophy, the obligation of care for older people by family members is an unspoken rule in African society (Rankopo & Diraditsile, 2020). Most older people in Namibian communities receive care from family, friends, and neighbors (Ananias & Strydom, 2014). The number of older people in Namibia remained constant at 7.1%, with a steady increase in the average age from 70 years in 1991 to 72 years in 2011 (Indongo & Sakaria, 2016). This increasing number of older people poses serious implications for caregiving of older people. However, few family members are available to provide care for older people because of migration from rural to urban areas. Changes in family structures make family solidarity and care functions towards older people under threat (Sibai & Yamout, 2012; Oluwabamide & Eghafona, 2012).

Family caregiver and challenges in caregiving relationship

Family caregivers are those «caring for a friend, family member or neighbor who because of sickness, frailty, or disability, can't manage everyday living without help or support». Caregiving provided by family members is not based on any formal agreement or services specifications but characterized by relationships and social expectations (Goodhead & McDonald, 2017). For caregivers of older people, caregiving commonly arises out of desire to continue the relationship, choices for the recipient's wellbeing and sense of duty and cultural, community, family expectations which the caregiver has internalized.

Family caregivers assist care recipients on daily activities, direct health care, complex social service systems management (Schulz et al., 2020). Although the caregiving process may be associated with positive feelings, such as sense of personal accomplishment and altruism (Doris, Cheng, & Wang, 2018), the body of evidence on negative effects is far larger than that on positive effects. Severe physical impairment as well as emotional impairment such as dementia may place more pressures on family caregivers which may result in poor caregiving conditions by the family caregiver. A prototypical longitudinal trajectory for older people's caregiver (Schulz & Tompkins, 2010) demonstrates that with increasing need for care, the caregiver's role becomes more labor and time intensive. Thus, stressful feelings such as anxiety or depressive symptoms increase. At the same time, moderately and highly stressed caregivers such as dementia caregivers are more suspectedly with risky biomarkers (Schulz et al., 2020). Because of care demands and lack of other support, caregivers also confront problems with social isolation and withdrawal from social activities. High level of activity restriction of dementia caregivers reports more depressive symptoms and negative emotion compared to other caregivers (Mausbach et al., 2011).

Caregiving demands can also negatively affect the quality of the relationship between the caregivers and care recipients. Patients' behavioral symptoms and negative emotional expression create difficulties for caregivers which decrease emotional and physical intimacy and deteriorate relationship satisfaction (Ascher et al., 2010; De Vugt et al., 2003; Simonelli et al., 2008). What's more, a potential effect of caregiving stress is elder abuse, such as mistreatment and neglect. Research suggests that family members commit most abuse, and rates of abuse are higher for older adults with dementia and/or who need physical assistance (Beach et al., 2005). These crisis and challenges which older people and family caregivers encountered requiring external support to facilitate the wellbeing of individual and caregiving relationship.

Relational social work with social gerontology

Relational social work is a practice paradigm that focuses on relationships as the basis for change at the individual, community, and structural levels. It adopts a strength-based approach to helping and focuses on individuals and their networks (Folgheraiter & Raineri, 2017). Relational social work emphasizes respect for clients' agency and empowers clients through reciprocal relationships. In these relationships, social networks and social capital can be created (Folgheraiter, 2004; Folgheraiter & Pasini, 2009). As a relational guide, the relational social worker gathers motivated people together and encourages them to interact and make decisions. Social gerontology requires an understanding of the social context of older people, and the «person in environment» framework provides a basis to assess the individual and the presenting problem. The well-being of older people is affected by environmental systems such as families, communities, culture, and social

welfare services. To improve the situation of older people, practitioners need a deep understanding of the dynamic interactions of these systems between people and their environment and then take action. Thus, the relational social work paradigm's emphasis on identifying and coping networks can serve as a useful approach in social gerontology that includes older people and their intimate and broader environment relation systems. In practice, this is often conceived as identifying relationships between people facing similar challenges, and then social workers work to enhance people's resilience and capacities for action at both the individual and collective levels.

Social work intervention in caregiving relationship

Literature review

Social work plays an important role in the provision of help in social gerontology. Researchers have pointed out the role of social workers in consultation, coordination, and management while working with family caregivers and frail older people (McCallion, Toseland & Diehl, 1994). Zhao (2013) has also emphasized the important role of social workers in empowering older people and providing peer group support for family caregivers. Regarding intervention, Toseland et al. (1990) found that combined individual and group interventions help caregivers to gain significant improvements in coping with caregiving stress. A social work liaison program has been proven to be beneficial to caregivers in terms of burden, satisfaction, and mastery outcomes (Albert et al., 2002). Ross, Holliman & Dixon (2003) have appraised that social workers' focus on the strength-based perspective, caregiving relationship interaction, and support group form, all contribute to caregivers keeping resilient in dealing with caregiving burden. A relationship-based caregiving empowerment practice was conducted within families, between families, and in the community, which changed the disabled older people's vulnerable networks (Deng & Li, 2021).

In conclusion, social workers hold professional values to respect the dignity and autonomy of individuals, provide emotional support, and link various relations around them. Based on the strength perspective, an individual's self-awareness can be enhanced. Social workers also act as facilitators to promote good communication between older people and family caregivers to alleviate tension in the caregiving relationship. In the role of educator and trainer, social workers help caregivers to be equipped with caregiving knowledge and skills, so that they can provide proper care for older people. Additionally, as deliverers of the social welfare system, social workers can advocate for social policy changes to seek more formal social support. Thus, with this fundamental «person in environment» perspective and relational approach, social workers can support individuals in need at the micro, mezzo, and macro levels.

Research gap

As mentioned above, relational social work plays a critical role in social gerontology. However, there has been limited exploration of its transnational and cross-cultural applicability. This paper therefore aims to explore relational social work practices in response to supporting family caregivers facing challenging circumstances that test family roles and responsibilities, such as abuse and dementia care, based on empirical findings. It also highlights issues concerning cultural dimensions of relational work, drawing upon examples from different countries and cultures: Ireland, China, and Namibia. The description of relational social work practice in these three different countries establishes a connection between the relational framework and diverse cultural practices.

Relational social work with family caregivers in various culture context

The relational nature of social work encompasses not only the relationships between clients, but also the relationships between social workers themselves and their clients. The quality of the relationship between practitioners and clients depends in part on the availability of coping social networks, and the contributions of those supportive relationships are essential for effective coping (Dominelli & Hackett, 2012). In China, Namibia, and Ireland, social workers intervene in issues affecting older people in difficult circumstances, often working with extended family members, friends, and neighbors, as well as social and community networks (Raineri & Cabiati, 2016). Facilitating these relationships requires humanistic and relational-sensitive practices in social services for older people. Relational social work approaches are shaped by specific cultural contexts and political practices.

Methodology

Comparative analysis and cases study method

Most research on relational social work in caregiving relationships has been carried out in a single country. This article reports findings from a comparative study conducted in three countries: Ireland, China, and Namibia. Comparative studies aim to identify both national distinctiveness and generalizations (Ragin, 1987). Relational social work theories and practices in caregiving relationship scenarios are applied to very diverse societal settings, and cross-cultural comparisons can shed light on differences and similarities.

The case study method was used to conduct a comparative analysis. According to Crowe et al. (2011), the case study approach is particularly useful when there is a need

to obtain an in-depth understanding of an issue, event, or phenomenon in its natural real-life context. In this paper, we offer several different case studies that illuminate the challenges of caregiving relationships and relational social work interventions in different countries. Thus, the case study design is consistent with the specific research questions explored and can help answer them.

The data sources are from different studies across Ireland, China, and Namibia. These three countries were chosen for several reasons. They are similar in that they all face an increasing aging population, which means a gradually heavier caregiving burden for the state or family. They all emphasize the importance of family settings in elderly care. However, they differ in that China and Namibia have insufficient public social welfare services, whereas Ireland is a welfare state and has a package of support for elderly care. The level of support needed for caregivers is different.

The relational social work practices in the three countries provide points of comparison and contrast, both by focusing on the challenges of caregiving relationships and on relational social work support for family caregivers. In Ireland, practitioners involve older caregivers in peer research groups to empower them on dignity and across jurisdictions. In China, peer support groups are built among family caregivers, social workers, and social support networks to empower caregivers by facilitating good caregiving relationships. Namibia's case adopts a community education model to raise awareness of elder abuse and to promote proper care at the family and community levels. All three cases are qualitative research, and thus observations from social workers and feedback from participants serve as the basis for our analysis.

Case studies in Ireland, China, and Namibia

Case in Ireland: Empowerment on dignity amongst older people

Cultural context and problem in caregiving relationship

The foundation of the Irish State in 1922 was significantly influenced by the Catholic Church, which had a strong cultural and political influence (Fanning, 2004) and was a major provider of social services, shaping social policy. In terms of caring for older people, policy has largely been focused on family or community-based care, without much statutory provision. Gender differences in life expectancy have also led to a higher proportion of women in the older family caregiver demographic, who have historically had limited opportunities to participate in the labor market (Barry & Conlon, 2010). Research has shown that many older people experience some form of oppression at some point in their lives,

and ageism is prevalent in our communities. Older people are particularly concerned about issues such as social exclusion, being denied human rights, having limited choices, and not being respected (Lafferty et al., 2012). It is important to consider older people's perspectives on dignity and their interactions with existing support services to address instances of disempowerment. Traditional generalist definitions and approaches to the rights of older people may be inherently oppressive and fail to fully understand the complexities of this social phenomenon (Anand et al., 2013), thereby disregarding the voices and experiences of older people.

Case Study in Ireland

A qualitative study involving 58 older family caregivers in six focus groups held across Ireland highlights the understanding of dignity across urban and rural communities on the island. Indigenous ways of knowing offer a broader and more inclusive understanding of dignity together with opportunities for the prevention of dignity denial and the empowering of older people across the jurisdictions. The design of the study reflects a relational social work perspective for its participatory, qualitative, multi-disciplinary, and cross-border relationship dimension. The reason for taking this approach was that wider societal issues at a macro level environment like the withdrawal of respect and recognition lead older people to vulnerable positions. From the perspective of older people, their inability to say no or to stand up for oneself against abusive acts, words, and pressures possibly from fear of negative repercussions such as withdrawal of contact and/or care.

The nature of dignity denial disempowers older people; it was, therefore, important that the relational social work intervention supported empowerment. Hence, older family caregivers were involved at both ends of the continuum, as research informants (through focus group participation) and as peer-researchers.

Following training in research methods, specifically in facilitating focus groups and data analysis, four lay people aged 60 years and over became part of the research team as *peer-researchers*. The active involvement of the peer researchers provided an additional richness to the design, data-gathering, and analysis. In the focus group sessions, by connecting with participants, they created informal spaces where participants felt free to speak their minds and share experiences. They gradually got to clear that societal attitudes affect their confidence, autonomy, and agency.

Ageism, social exclusion, and the denial of rights are social and psychological phenomena that are located, reproduced, and experienced through social structures and human relationships. Their reflections on what lay behind utterances highlighted social and cultural norms that influenced this cohort of older people.

The peer researchers and the group being studied shared common understandings and experiences specific to them, which are preventive and sustainable strategies

promoting older people's social rights. It also shed light on how older people understand dignity and personal rights. Older people identified main threats to their personal safety and utilized services in their communities to address cases of disempowerment.

Forms of community-based activities and peer supports through «having someone to talk to» help older people to be aware of their rights. Enhanced status, resources, and continued involvement in society supported older people and prevent dignity denial occurring at the individual and community level. The relationship embedded in social interaction can enable older people to share their concerns in an everyday setting and to gain informal support and confidence, seeking more formal interventions when necessary. The relationship between older people, their community, and social structure safeguards the empowerment of individual rights and dignity.

Case in China: An online intervention on dementia caregiving relationship

Cultural context and problem in caregiving relationship

Relationism has a strong affinity with Chinese culture (Yang & He, 2017). Cultural characteristics and social interaction in China are deeply rooted in Confucianism. In Confucianism, Chinese society follows a pattern of hierarchical relationships, where family relationships are considered the closest and most important social relations for a person (Fei, 2007). This shapes social work practice in China and emphasizes the need for a comprehensive understanding of individual demands and problems within multiple relational concepts. The intervention of social work in China is viewed not as an individual or societal effort, but rather as a network of relationships.

China is a country with a large elderly population and a relatively high number of dementia patients. Studies have shown that nearly 90% of dementia patients in China are cared for by their family members, which includes spouses, children, and other close family members (Xu & Liu, 2017). Rehabilitation institutions in the Chinese community and welfare system are not well-established (Liu et al., 2007), and social support for dementia care remains relatively low (Yang et al., 2013). The outbreak of the Covid-19 pandemic in 2020 led to lockdowns, shortages of nursing workers, and poor access to health care, intensifying caregiving stress and adding to work and life pressures for dementia caregivers. Thus, these caregivers require support.

Case study in China

Using relational social work, gerontological social workers in China conducted an intervention practice based on TSCP (Tele Savvy Caregiver Program) to support family

caregivers of dementia patients. This program includes training on knowledge and skills in dementia caregiving and self-care for caregivers. Based on caregivers' needs evaluation, practitioners designed eight themed sessions in six parallel groups. This intervention significantly reduced the self-developmental and emotional burden of family caregivers and constructed positive relationships between caregivers and dementia patients. Three layers of notable relationships changed as follows.

- Strengthened peer support relationships amongst caregivers. Through listening, communication, and interaction, family caregivers in the group found that others are facing the same problems and felt that they are not alone. The experience of coping with caregiving difficulties was also shared via group interaction, boosting caregivers' confidence to tackle the challenge. Caregivers sorted out their existing and potential social support through reflection and reference to the experiences of others. They found that they could seek access to formal support network resources in professional institutions, in addition to help within informal support networks such as family, friends, and neighbors. Relationships within the social support system increased information, action, emotional, and other social support amongst family caregivers.
- Social workers' professional relationships empower family caregivers. The physical and emotional pressure of caregiving makes family caregivers go through painful feelings. Social workers used reconstruction and narrative methods to give new meaning to events and help family caregivers reverse inappropriate perceptions of caregiving. It helped family caregivers discover their own importance through caregiving and raised their self-awareness to improve their own quality of life. Caregivers learned to use stress reduction techniques to adapt their caregiver role and release their negative emotions. On the other hand, as the leader of the group, social workers engaged caregivers in promoting a good relationship of trust and facilitating group dynamics to achieve the group goals. Acceptance and services provided by the social worker also gave great comfort to caregivers and met their needs.
- Improved interdependent relationships between caregivers and care recipients. The strength-based perspective helps family caregivers focus on positive aspects and treasure the personal value of dementia patients. Caregivers learned about the comprehensive knowledge of dementia disease and began to provide non-pharmacological interventions to slow down the progression of the disease. It not only benefits dementia patients' well-being but also reduces the caregiving burden of caregivers. Moreover, dementia was always regarded as a shame, leading to a low level of acceptance of the illness and the patients. Caregivers disregarded the stigma label and could talk about it openly with others and embrace help from others. These efforts all contribute to positive relationship construction.

Case in Namibia: Improving relationships between older people, family caregivers, and community

Cultural context and problem in caregiving relationship

Ubuntu philosophy deeply influence the form of African social work practice. The term ubuntu can be found in many African languages and refers to a collection of values and practices of perceiving an individual is part of a larger relational, communal, and societal world. Social networks are viewed as a connector and wealth of communities in African countries (Bohwasi, 2020). Relational social work in Africa is guided by the Ubuntu philosophy where values of collectivity, interconnectedness, solidarity, and care is upheld. Social service infrastructure to adequately serve the needs of older people is lacking in many African countries. Except for the family, community-based services are limited available to caregivers (Okoye, 2013). African families provide care to older people out of reciprocity, and regardless of stress of financial expenditures (Awuviry-Newton et al., 2022). According to the study, elder abuse is a concern in Namibia, which severely affects the lives of older people (Klie & Ananias, 2021). Elderly abuse that may occur in family settings is underreported, as older victims of elderly abuse may fear that reporting may result in breaking family ties. Hence education for caregivers to give proper care for older people at community level is of importance.

Case study in Namibia

The model of community education was implemented in a rural community in northern Namibia to raise awareness about elder abuse among older people, family caregivers, and the community at large. The first step in this community program was building professional relationships, which is a fundamental and critical factor in the effectiveness of services. Social workers got in touch with various members of the community, including older people, family caregivers, community leaders, social media reporters, and other concerned individuals, through visits and interviews. During this process, social workers collected information on the community's profile and resources, identified dynamic relationships in the community, and assessed the impediment of a lack of awareness of proper caregiving.

In the planning phase, social workers facilitated the selection of the committee on this issue. Key people in the community formed the action group, and they met regularly to discuss the planning of the event. On the community education day, social workers invited all guests to the event site. Special guests, including political, traditional, and community leaders who may play an influential role in the development of elder protection policies,

were invited to give presentations on topics such as care skills, rights of older people, and available social services on caregiving. It advocated participants' understanding of elder abuse, which may include physical, emotional, financial, sexual, and neglect among caregivers and older people. It also raised people's perception to seek social support to provide proper care.

In the form of education activities, religious leaders performed rituals for the opening and closing of the event, which is appropriate with the community's cultural tradition, making the whole education event easier to be accepted by local community members. Sociodrama brought a lot of insight to the audience about scenarios in the community where neglect may occur, enabling participants to recognize possible situations of elder abuse and how to provide proper care to older people. Singing songs with lyrics that focused on the theme deepened people's learning on the elder abuse issue. The good attendance of the event by both older people, caregivers, and community members from distant villages was noticeable. Community gatherings offered an opportunity for caregivers and older people to socialize and interact with others. During the conversation, they shared their own experiences and gave suggestions to others. Expanding social interaction also helped those participants with narrow social support networks reduce social isolation. Older people and family caregivers began openly discussing this sensitive topic and expressed their expectations of caregiving, which would lead to a good relationship.

The relational approach that social workers used in this community education program enhanced caregivers' and older people's perception of elder abuse and proper care. The empowerment of individuals was achieved through community education. Various relations ranged from the family context to neighbors, communities, and institutions where older people and caregivers live, which was linked and enhanced.

Discussion

Role of relation relational social work in response to family caregiver

Although the functions and roles of families vary across welfare systems and cultural contexts, the increasing aging population undoubtedly puts stress on the caregiving burden. It is a common preference to keep older people in their communities or families to reduce the public cost of the government and to meet the psychological needs of older people (Zhu, 2014). Balancing the contradiction between caregiving and personal development is a tricky issue for caregivers of older people (Tao & Shen, 2017). Therefore, it is particularly important to provide support for older people and their families in the social welfare system to enhance the well-being of the older people, strengthen family solidarity, and reduce state expenditures.

Three cases in this paper show that relational social work can support and empower family caregivers at different levels. At the micro level, relational social workers respect individuals' humanity and their agency identity and empower awareness of dignity and rights. At the mezzo level, the relational approach in peer groups helps clients to seek and expand their coping network. At the macro level, relational social workers link community resources to support client's associated and cooperative actions and advocate for societal environmental change.

Cultural nuances of relational social work in different culture

Central to relational social work is the meaning of culture, cultural ideologies, and social networks (Comstock et al., 2008). Interventions that promote empowerment by utilizing the cultural contexts of the clients and addressing the dynamic environment in which the older person functions can enhance the quality of life. Highly developed social welfare policies and services for caregivers and an independent culture value among older people in Ireland lead relational social work practitioners to focus on empowering individuals to prevent dignity denial. In China, limited but gradually developing social welfare services require relational social workers to focus on the family context and emphasize peer support while linking formal resources with families to enhance their resilience. In Namibia, the absence of state support in social welfare has led relational social workers to make efforts on awareness-raising at the community level. This top-down practice path has enhanced perceptions of care and constructed supportive relationships in the living environment.

Implications for relational social work

The conceptualization of «relationships» has been one of the core focuses of the social work discipline from the very beginning, and relational networks are the main object of study in social work. In current gerontological social work practice, older people are often faced with inadequate care and insufficient resources related to their intimate family and broader societal contexts. The crisis faced by older people and family caregivers can be resolved by using relational social work. The importance of self-value and social support in care is aligned with relational social work, which empowers individuals to develop interpersonal skills and build coping networks. To support family caregivers of older people in different welfare systems, it is necessary to utilize resources in the community, organization, and social systems. Various races, economic statuses, and health conditions of older people have different social networks and thus require distinctive intervention strategies. The success of relational social work depends on the practice wisdom in di-

verse cultural contexts. In a sense, relational social work can help people manage their relationships so that they can live in a caring, supportive, and harmonious environment.

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