



Factors Influence the High Rates on Teenage regnancy among the Public Secondary Schools Students in Butuan City, Philippines

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Abstract: The study investigated the determinants affecting the rise of pregnancy among secondary students in Butuan City. The researchers were able to collect 122 respondents, the results showed 76.2 percent are in junior high school and 23.8 percent are in senior high school. The inferential analysis showed that economic Factors have $p = .000$, Familial Factors has $p = .000$, and Educational Factors has $p = .000$ indicating linear and significant relationship with perception of the learners on teenage pregnancy. However, Peer Pressure Factors are not a significant predictor. The model correctly predicted 26.32 percent of the variation in the extent of the determinants that can explain the increase of teenage pregnancy among secondary school students in Butuan City. The results have added to our understanding of the key variables that lead to the high rates of adolescent pregnancy among students attending public secondary schools in Butuan City, Philippines. The authors recommend that the Department of Education (DEPED) and Department of Health (DOH) improve the campaign by creating more programs that can help most of the teenagers and parents to be aware how to prevent teenage pregnancy.

IndexTerms - Teenage pregnancy, economic, familial, educational, peer pressure

INTRODUCTION

Adolescence is part of a person's growth, moments like this inspire wonder, objectives, and wonders that have either been set or awakened. Teenagers in this time tend to experiment with everything. It considers a variety of elements that essentially affect their outlook on life for instance; several societal issues affected as well. One of today's most obvious trends is the increase in population brought on by teenagers and unwelcome conceptions (Zaky, 2017).

Girls aged 13 and 19 who participate in sexual behavior are adolescent or teenage mothers and accidentally or purposely become pregnant (Todd & Black, 2020). Because adolescent pregnancies are typically viewed as regardless of whether the youngster intends to become pregnant, the public will view her as selfish, uncaring, and immoral. It has been urged to take place in all excellent civilizations (Ogori et al., 2013).

The World Health Organization (WHO) estimated eleven (11) percent of all births worldwide occur to 16 million girls (aged 15 to 19) who give birth each year. Teenage pregnancies are linked to several unfavorable outcomes, such as lower levels of education, poverty, an increased risk of mother and infant mortality, and higher rates of child abuse and neglect. Additionally, each year in developing countries, about 12 million girls (aged 15 to 19) become pregnant and give birth to 12 million children.

Hor (2014) explain that teenage pregnancy is an issue that is prevalent in the Philippines. The result of the 2013 survey showed that one in five young Filipinas became pregnant before they were ready. Therefore, the government should make efforts to address this issue while collaborating with various non-governmental organizations. Social factors are usually connected to young pregnancies challenges with development such poverty, inadequate sex education, and lack of understanding about contraception (Magsino, 2020; Todd & Black, 2020). Typically, this results in single parenthood, which puts them in situations where they are irresponsible. It thus leads to societal disgrace in several nations and civilizations. The actual experiences during pregnancy and childbirth, as well as how they they prepare, they welcome their new obligations as mothers (Salvador et al., 2016).

Teen mothers who experience early pregnancy are very prone to discontinue their education due to their lack of aspirations and commitment to pursuing education (Zaky, 2017). Around 38% of female teenagers who give birth before turning 18 do so successfully at the age of 22; they will have completed high school. This indicates that a significant portion of teen mothers will

likely fail to complete high school (Ochen et al.,2019). The offspring of a teen mother is extremely likely to be poor due to its mother's lack of financial means. Fundamentally, this child's birth became, in many cases, the start of an endless cycle. The youngster will probably experience many of the same problems. Its mother engaged in it during her youth. Due to the absence of a father figure, they are more likely to have less positive role models and higher risk of confiding in other kids who are going through the same thing (Rowbottom, 2007).

NEED OF THE STUDY.

The Philippine Statistics Authority (PSA) reports that as of 2022, 5,531 girls between the ages of 15 and 19 had given birth, or 5.4%. In the Cordillera Administrative Region (CAR), teen pregnancy climbed by 2.6 percentage points from 3.5 percent in 2017 to 6.1 percent in 2022. The region with the highest percentage of teen pregnancies was Northern Mindanao, with 10.0 percent, followed by Davao Region (8.2), Central Luzon (8.0%), and Caraga (7.7%). Ilocos and Bicol areas had the lowest rates of teenage pregnancies at 2.4 percent. Teenage pregnancy was prevalent (19.1%) among women aged 15 to 19 who attained or completed primary education (Grades 1-6) in 2022, according to educational attainment. From 31.8 percent in 2017, this dropped by 12.7 percentage points. Grades 7 through 10's junior high enrollment dropped from 9.1 percent in 2017 to 5.3 percent in 2022. Senior high school levels (Grades 11-12) had a rise from 2.6 to 4.8 percent, nonetheless. The number of pregnant college women teenagers climbed from 1.4 in 2017 to 1.9 in 2022, the same as it did for seniors. In general, as the education level rises, the prevalence of teenage pregnancies declines. As of February 2023, the Obrero Main Health District—one of Butuan City's Rural Health Units—had recorded 14 teenage pregnancies in total. The researchers undertook this study to determine the factors affecting the high rates of teenage pregnancy of Secondary School learners in Butuan City.

RELATED LITERATURE

Teenage pregnancy, also known as adolescent pregnancy, is common among girls in the puberty stage who engage in cases of teenage pregnancy have been on the rise, especially in underdeveloped nations, according to the WHO. Early marriages, discriminatory gender norms, power disparities, and a lack of access to contraception were the main contributors to teenage pregnancy.

About 90% of girls between the ages of 15 and 21 were required to confirm their fertility. Additionally, girls have never had the opportunity to choose their sexual orientation in traditional African society. Most pregnancies among girls in poor and marginalized groups are known to occur during adolescence. Particularly in emerging nations, social, economic, political, and cultural variables are some of the causes of an increase in teenage cases. WHO claimed that every year around 21 million girls between the ages of 15 and 19 in developing regions give birth. Most of these pregnancies were unwanted, and more than half resulted in abortions, frequently under risky circumstances. The average worldwide is nearly doubled by this (Odimegwu, 2016).

Teenage pregnancy should be a top priority in every healthcare system since it can negatively affect girls' physical, psychological, economic, and social status over the long term and is a problem from both a human rights and public health standpoint (Eyasu, 2016). Ending avoidable maternal deaths, which aims for less than 70 maternal deaths per 100,000 live births globally by the year 2030, is one of the Sustainable Development Goals (SDGs) 3.1 targets (WHO, 2019). Since teenage pregnancy is linked to poor mother and child health outcomes and elevated risks of miscarriage, preventing it can aid in achieving this objective (Kalipeni, 2017).

Teenage pregnancy has a negative impact on future earning potential and makes people permanently poor. Such detrimental effects last a teen's entire life and trickle down to the following generation. Most importantly, it aids in rapid population increase, particularly in places where the use of contraception is not widely accepted and where it enhances a person's lifetime fertility (Suan, 2015).

According to several academic studies, residing in rural areas, not attending school, and being pregnant before marriage are all risk factors for teenage pregnancies (Kasa, 2018) marriage, a lack of SRH communication between parents and children, the adolescents' educational attainment (Garwood, 2015) and a history of teen pregnancies in the family (Soontrapirom, 2017).

In line with the Ethiopian Demographic and Health Survey (EDHS), the prevalence of teenage pregnancy in 2016 was 16%. The incidence was more prevalent in rural areas than in respectively, urban areas (15%) and (5%) (CSA, 2016). In Ethiopia's rural communities, teenage girls typically fall pregnant yearly outside of marriage. Teen pregnancy was also very common (28%) among individuals with no education, (12%) in basic education, and (14% in secondary education) educational level (3%) (CSA, 2016).

Adolescent pregnancies and deliveries might be affected by a variety of different conditions. Second, in many cultures, girls choose to become pregnant because their options for education and employment are limited, putting them at higher risk for pregnancy. Girls who marry earlier have limited autonomy to make decisions about deferring childbearing and utilizing contraception (Nwosu, 2017). Motherhood is generally valued in these societies, whether it takes place within marriage or union or elsewhere, making marriage or union and having children the only viable option for young ladies. Teenage mothers are more prone than women in their 20s and 30s to experience puerperal endometritis, eclampsia, and systemic infections, and their offspring are more likely to be born prematurely, with low birth weight, or with catastrophic neonatal problems if their mothers are teenagers (World Health Organization, 2022).

WHO (2021) reported that teens obviously got pregnant because they engage in sexual activity without utilizing adequate contraception. The percentage of teenagers who have ever engaged in sexual activity rises gradually with age in the United States.

Additionally, teens are more likely to engage in sex if they themselves: (1) struggle academically and have no plans for higher education; (2) abuse alcohol and drugs, engage in other risky or problematic behaviors, and are depressed; (3) start dating young, go steady young, have a lot of romantic partners; (4) have a romantic partner who is at least three years older; or (5) have been sexually abused in the past. When programs work to lessen teen sexual risk-taking and pregnancy, they endeavor to modify these individual and environmental, sexual, and nonsexual, risk and protective factors (Soontraprom et al., 2017).

According to Kukundakwe (2021), 10.5% of respondents believe that adolescent pregnancy causes students to drop out of school, while 9.5% disagree. Their bodily form is affected by teenage pregnancy, 9.5% believe that becoming pregnant as a teenager will lower their self-esteem, while another 9.5% believe to, among other things, drug, and alcohol abuse. According to the responses above, teenage pregnancy has profound implications on the health of the adolescent education and conduct.

Also, the literature discusses that formal schooling induces behavioral modification (Jukes, 2008). Attending school might offer periods of structure and supervision, which might reduce the likelihood of being exposed to sexual activities (Barnes, 2007). Additionally, teenagers who are not in school are deprived of access to comprehensive sexual education, the ability to navigate their sexuality, and contraceptive options (Loaiza, 2013).

Adolescents who receive education have greater understanding of sexual and reproductive health, including conception and fertility (Dulitha, 2013). Moreover, girls' ability to manage reproductive wants, such as when and how many children to have, depends on their access to education (Loaiza, 2013). Uneducated women are less able to negotiate with their partners about when to engage in sexual activity than educated women are, and they are more likely to experience gender-based violence and marry younger (Ayele, 2013). The ability to recognize the dangers connected with sexual conduct and childbearing decisions is enhanced by knowledge of fertility. Lack of understanding about fertility causes a variety of harmful health effects, including unintended or unplanned pregnancies in marriages and unsafe abortions among adolescent singles (Thijssen, 2015). According to the study's findings, teenagers who were unaware of the fertile period of the menstrual cycle had a 1.3 times higher prevalence ratio of teenage pregnancies than those who were recognized the ripe time (Geda, 2019). This is in line with earlier relevant research conducted in Ethiopia and other African nations, which demonstrated that understanding the ovulatory cycle lowers the risk of getting pregnant (Iyanda, 2020). Teens in the US receive conflicting signals regarding. They pick up sexuality from the neighbors and the institutions. These standards concentrate on various sexual practices, such as sex, abortion, pregnancy, or contraception. but sexuality standards are intrinsically conflicting when coming from the same people too (Molborn, 2017).

According to Nwosu (2017), poverty increases the likelihood of teen pregnancy. Young women from low-income families had a 26% chance of starting their family earlier. A similar study found that adolescent pregnancy is increasingly common among children who were burdened and poor during adolescence and who have low motivation for education or low expectations for a career. Children of young mothers are prone to problems and eventually turn into teen mothers, perpetuating the cycle of poverty (Odimegwu & Mkwanzazi, 2017). Teenage moms are certainly becoming more prevalent in poorer countries like Bangladesh and Niger than they are in financially richer countries like Switzerland and Japan. In the UK, just 14% of teen pregnancies occur in the 30% poorest community, but almost half occur in the 30% most marginalized population. For instance, in Italy, the youthful birth rate in the prosperous center localities is just one per 1,000, whereas it is 10.0 per 1,000 in the less fortunate Mezzogiorno. In the US, humanist Michael A. Guys discovered that destitution rates in California closely matched teen pregnancy rates (UNFPA, 2013).

According to the current study, young girls who lived without a parent were more likely to become pregnant throughout their adolescence, which is consistent with other studies (Santos, 2011.) According to two systematic evaluations, the lack of parental supervision, control, or guidance may increase the likelihood of teenage pregnancy by reducing family communication, particularly addressing sexual and reproductive concerns (Kassa, 2018).

The finding of studies showed that 27% of young people in the Philippines wanted to discuss sexual and reproductive issues with their mothers. Contrarily, less than 10% of respondents stated that sexual subjects had been discussed in the home (Salvador et al., 2016).

According to World Health Organization (WHO), teenage pregnancy was discovered to be 8.2 times more likely in adolescent women living with neither parent compared to adolescent women living with both parents, and it was found that teenage pregnancy was 1.6 times more likely to occur in adolescent women living with a single parent. Assefa et al., (2015) expound that teenage women with large families had a comparatively increased propensity to become pregnant as young adults. Adolescent women are less likely to become pregnant the older the head of the family.

A statistically insignificant reduction in the incidence of teenage pregnancy was seen with higher educational attainment (Ayele et al., 2017). Teenage pregnancy was less common in the richest and higher quintiles; however, it was more common among adolescent women in the poorest wealth quartile by 1.8 times. Comparing women who were relatively knowledgeable about contraception methods to those who were not indicated a 1.2 times stronger connection with teenage pregnancy.

Teenage pregnancy was found to be substantially more common among adolescent women "who lived with neither parent" and those who belonged to the "poorest wealth quintile" than in other parent structure-wealth quintile combinations. This shows that even worse outcomes could follow from the interaction of parental and financial factors. Also, in line with findings from earlier literature, we discovered that the likelihood of teen pregnancy increased with family size (Anifah, 2018).

Teenagers with divorced parents were shown to be more likely to become pregnant than those with married parents. This finding is consistent with research from Malaysia (Abdullah, 2014), South Africa (Odimegwu, 2018) and Northeast Ethiopia (Habitu, 2018),

which found that, in comparison to teenagers from married. Teenagers with divorced parents were more likely to become pregnant as teenagers.

According to Ochen et al, (2019)., A girl with less education has a five times higher chance of being a mother than a woman with more education. Girls who are pregnant usually stop attending school, which lowers their prospects of eventually obtaining employment and keeps them mired in a cycle of poverty. Moreover, Rosenberg et al., (2015) expound further that girls commonly think that getting pregnant is better than continuing their education. Additionally, girls are more likely to become pregnant during emergencies due to the unique dangers they face. Some of the contributing causes include psychological effect for losing of a child, contraception, lack of access to education, and an increase in sexual assault. Pradhan et al. (2015) performed a thorough analysis of the literature to ascertain factors affecting teenage pregnancies in other countries with low- and lower-middle-income. Finding having a risk factor for adolescent pregnancy was having little to no schooling; the likelihood of pregnancy was at least increased by double for both those with greater education levels and those with merely lower levels of schooling decreased the possibility of getting pregnant.

In addition, Dulitha et al. (2014) expressed that females were not as common as boys were when their parents were sometimes more likely to put off getting married and having children. Habitu et al. (2018) discovered that girls who had more formal education means greater familiarity with healthy sexual behavior, contraception, and pregnancy. Similar research was done by Akella & Jordan (2015) to identify risk factors for teenage pregnancy in Socioeconomic position, educational attainment, cultural background, and family structure were all identified as risk factors. According to the authors education could boost a young girl's self-esteem and delay her marriage and first sexual experience.

Teenagers should behave differently while around or with their friends compared to when they are by themselves because of the peer influence tendency that has been described. As a result, the risk-taking of other youths is greatly influenced by their social environment. According to research, the phrase "peer influence" was coined since teenagers are known for engaging in dangerous, incentive-driven behavior. This behavior is most usually a response to social reward, which typically takes the shape of peer situations that are filled with intensely pleasant feelings (Ambrosia, et al.,2018).

In addition, they involve doing common thrill-seeking activities like reckless driving, having sexual relations without using condoms, and using drugs, as well as avoiding preventive activity that could improve health and safety like wearing seat belts or bicycle helmets. According to the term used in this study, peer influence refers to teenagers' propensity to directly or indirectly, positively, or adversely, influence one another's choices and actions. According to Liao, et al., (2013), peer influence, particularly for risk-taking behaviors, becomes a more significant motivator than parental influence or individual decision-making at this age. This explains why teenagers are so sensitive to peer situations that are rewarding.

Parents restrict their child's friends and access to them, but in adolescence, friends become more independent. Teenagers start making their own friends and spending a lot of time with them, all without parental supervision. Research demonstrates that during adolescence, teens start to form increasingly close relationships with friends, connect with individuals who are experiencing similar issues or circumstances and express your innermost thoughts and feelings to get acceptance (Indongo, 2016).

Theoretical Framework

This study anchored to Hierarchy of Needs theory and Albert Bandura's Learning Theory. According to the social learning hypothesis, environmental, behavioral, and cognitive factors all influence how people behave (Bandura, 1977). Four guiding principles—difference, association, reinforcement, and imitation—form the foundation of the theory. People copy and emulate the behavior of individuals in their social circle or of those in their age group whose influence matters socially. The finding concludes that teenagers tend to identify with groups that establish the norms and behaviors that are followed, such as engaging in unprotected sexual activity.

In his hierarchy of wants, Maslow's Theory of Hierarchy of Needs (1970) places love before self-esteem. He asserts that people grow and achieve a certain level of self-completion, particularly if natural circumstances enable some vital needs to be satisfied first. Maslow emphasized that people try to first satisfy their physiological demands for endurance, feeling right, their need for love, their need for trust, and their desire to learn and acquire it.

Conceptual framework

Figure 1 shows the research paradigm, both Maslow's Theory of Hierarchy of Needs (1970) and Bandura' Learning Theory were included in conceptual framework of the study in which the independent variables include: economic factors, familial factors, educational factors, and peer pressure factors.

The dependent variables are level of perception that includes the teenagers' health, teenagers' behavior, and teenagers' education (Kukundakwe, 2021).

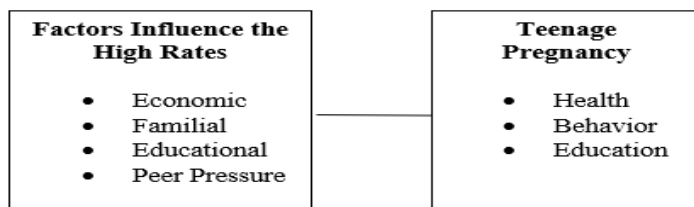


Figure 1 – Research Paradigm

RESEARCH METHODOLOGY

The study adopted the research design of (Romano & Castro Jr, 2022) to investigate the phenomenon of high rate of teenage pregnancy among secondary students in Butuan City.

Sampling

The study employed convenience- sampling technique to the total public secondary schools population of the fifteen (15) schools districts in Butuan City.

Data Collection

The research instrument was adapted from a survey questionnaire developed by Mangaoil (2021). The target respondents were provided with link of google form that contains survey questionnaires.

Ethical Considerations

The respondents were not forced to complete the survey. A letter of intent will be included in every questionnaire so that respondents will be able to know the reason for the survey. The names and identities of the respondents will be held confidential. Written consent for parents will also be included in the questionnaire to ensure they have knowledge about the study.

RESULTS AND DISCUSSION

This section elaborates the proper statistical/econometric/financial models which are being used to forward the study from data towards inferences. The detail of methodology is given as follows.

The descriptive analysis shows the data in frequency and percentage of the profile of the respondents.

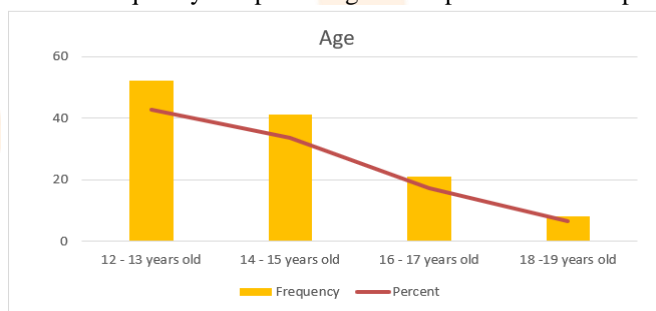


Figure 2- Profile of Respondents in terms of Age.

As presented in Figure 2; in terms of age of respondents, out of 122, there are 52, or 42.6 percent are aged 12-13 years old; 41, or 33.6 percent are aged 14-15 years old; 21, or 17.2 percent aged 16-17 years old; and 8 or 6.6 percent are aged 18-19 years old. The data indicated that there are high rates of teenage pregnancy aged 12-13 years old. The finding is at par with previous study from varied location. Considering this, the proportion of adolescents 2.4% of 13–14-year-old teenagers reported being pregnant, as opposed to those who are between the ages of 18 and 19 (74.5%). Like this, 5.1% of adolescents aged 13 to 15 were married compared to 69.8% of those aged 18 to 19.

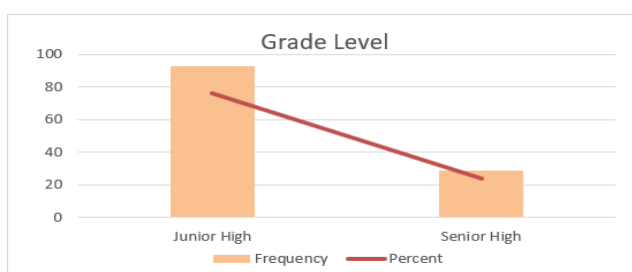


Figure 3- Profile of Respondents in terms of Grade Level.

Figure 3 exhibits the Profile of Respondents in terms of Grade Level. Data shows that out of 122 respondents, there are 93, or 76.2 percent are in junior high school and 29, or 23.8 percent are in senior high school in terms of the grade level of teenage pregnancy.

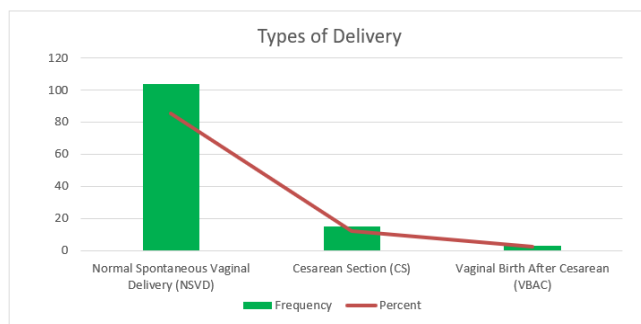


Figure 4- Profile of Respondents in terms of Types of Delivery.

Figure 4 represents the profile of respondents in terms of Types of Delivery. Data shows that out of 122 respondents, there are 104, or 85.2 percent delivered a baby in Normal Spontaneous Vaginal Delivery; 15, or 12.3 percent delivered a baby in Cesarean section (CS), and 3, or 2.5 percent delivered a baby in Vaginal Birth After Cesarean.

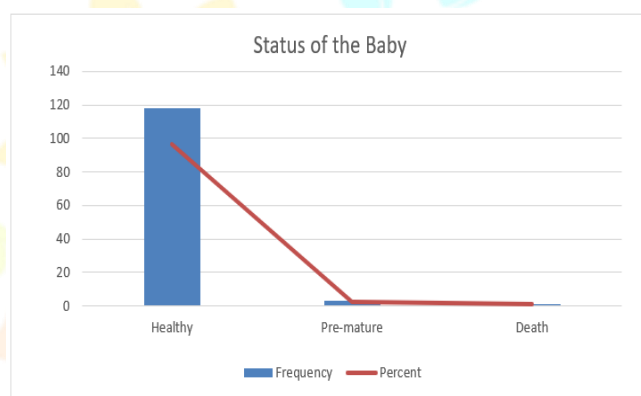


Figure 5- Profile of Respondents in terms of Status of the Baby.

Figure 5 shows profile of respondents in terms of status of the baby, the finding indicates that out of 122 respondents, there are 118, or 96.7 percent are healthy, 3, or 2.5 percent are pre-mature, and 1, or 0.8 percent dead as to the status of the baby.

Table 1. Factors influencing teenage pregnancy.

Factors	Mean	Verbal Description	Verbal Interpretation
Economic	3.84	Agree	Large Extent
Familial	3.22	Neutral	Moderately Extent
Educational	3.45	Agree	Large Extent
Peer Pressure	3.28	Neutral	Moderately Extent
Overall	3.45	Agree	Large Extent

Table 1 shows the factors influencing teenage pregnancy among the secondary students in public schools of Butuan City with an overall mean score of 3.45 interpreted as “Large extent” implying that some of the respondents agreed that this has influence for high rates of teenage pregnancy. The Economic factor got a highest mean score of 3.84, verbally interpreted as “Large Extent” while the Familial factor has the lowest mean score of 3.22, verbally interpreted as “Neutral.”

Table 2. level of perception on teenage pregnancy

Level of Perception on teenage pregnancy	Mean	Verbal Description	Verbal Interpretation
Teenagers’ Health	3.46	Agree	High
Teenagers’ Behavior	3.21	Neutral	Slightly High
Teenagers’ Education	3.32	Neutral	Slightly High
Overall	3.33	Neutral	Slightly High

Table 2 show the degree of perception on adolescent pregnancy among secondary students in public schools in Butuan City with an overall mean score of 3.33, orally translated as "Slightly High" and indicating that few respondents have awareness and information about teenage pregnancy. The category with the highest mean score, "Teenagers' Health," has a verbal interpretation

of "High," indicating that some respondents believe that health is one of the key variables that influences teenage pregnancy. The lowest mean score is 3.21 for teenagers' behavior, which is read as "Slightly High" in spoken language.

Table 3. Test of Significant Relationship between the Factors Influencing High Rates of Teenage Pregnancy and Level of Perception on teenage pregnancy.

Factors influencing high rates of teenage pregnancy	Perception of the learners on teenage pregnancy		5% Level of Significance H0 is	Conclusion
	rho value	P value		
Economic Factors	.508	.000	Reject	Significant
Familial Factors	.401	.000	Reject	Significant
Educational Factors	.456	.000	Reject	Significant
Peer Pressure Factors	.068	.454	Accept	Not Significant

Table 3 displays the results of inferential analysis: Economic Factors has $p=.000$, Familial Factors has $p=.000$, and Educational Factors has $p=.000$ indicating that the determinants have linear relationship $r=.513$, and significant relationship $p=.000$ with Perception of the learners on teenage pregnancy. However, Peer Pressure Factors are not a significant predictor. The R-squared of .2632 exhibits that the correlation model predicted 26.32 percent of the variance in extent of factors that can explain high rates of teenage pregnancy among the secondary school learners in Public Schools in Butuan City. The finding of study has contributed to the body of knowledge for identifying significant factors that influence high rates of teenage pregnancy among the public secondary school learners in Butuan City, Philippines.

Conclusions

The study focuses on investigating the teenage pregnancy among the secondary students at public high school in Butuan City, Philippines. The finding showed that respondents' profile high rates of teenage pregnancy aged 12-13 years old. Most of them are from the junior high school level with normal spontaneous vaginal delivery and having a healthy baby as to the status. In terms of descriptive analysis, the economic factors got the highest mean score which implied that the factors as to economic status have a large extent for students in teenage pregnancy. The respondents achieve their basic needs in their daily lives because their parents manage to share. The familial factors have the lowest mean score, could be interpreted as neutral one of the factors influencing teenage pregnancy. The results of inferential analysis showed that factors: economic, familial, and educational are significant predictors, while peer pressure is not a significant predictor.

Recommendations

Based on the findings, the researchers humbly recommend the following:

The Department of Education (DEPED) and Department of Health (DOH) to improve the campaign by creating more programs that can help most of the teenagers and parents to be aware how to prevent teenage pregnancy.

The school administrator to revisit the module of population control and create more symposium that can help students to be aware of teenage pregnancy.

To collaborate with social worker for the inclusion of teenage mothers in their Sustainable Livelihood Program (SLP) which proven to improve the socio-economic of household (Romano, Castro Jr, Lozano, Sitones, & Borbon, 2022)

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