Physical Education and Health: Global Perspectives and Best Practice draws together global scholars, researchers, and practitioners to provide a review and analysis of new directions in physical education and health worldwide. The book provides descriptive information from 40 countries regarding contemporary practices, models, and challenges facing the physical education and health professions globally. This exchange will offer a basis to inform and improve current practices throughout the world. This book is endorsed by 80 organizations throughout the world.

For a complete list, please see page 559.

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Christopher R. Edginton

Global Perspectives and Best Practice

Physical Education and Health: Global Perspectives and Best Practice offers a global view of contemporary practices in health and physical education. The book provides a 21st century learning strategies that will enable children and youth to gain knowledge, skills, and competencies to operate effectively in the future. A broad global international perspective of health and physical education pedagogy is presented and fully described in the book.

Physical Education and Health: Global Perspectives and Best Practice is authored by 109 leading educators, researchers, scholars, and professionals representing 67 universities, institutions, and schools. Each of the authors has been carefully selected, and chapter contributions have been reviewed by a blind review process. Unique curricular models are captured in each chapter, reflecting the contextual fabric and uniqueness of each country.

Physical Education and Health: Global Perspectives and Best Practice will enable the understanding of professional practices in one part of the world and provides the promise that such practices can be applied locally in a contextual context. Each chapter is introduced with an overview of the content to be discussed, followed by a history of health and physical education practices in the authors’ country and an analysis of the current state of well-being in children in the country described. This is followed by a discussion of current practices, unique curricular models and community programs, and a presentation of visions for the future.
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Abstract

Twenty-first century formal and informal learning environments found in schools and in the community must be crafted to inform, inspire, and transform individuals to enhance their lives, work, and play. The world is increasingly interconnected and such learning environments will, by necessity, require a more global perspective, yet will be required to be crafted in a fashion that is culturally and contextually relevant. Technology will provide a means to transport nearly instantaneously information from one part of the world to another. In this chapter focusing on the topic of physical education and health: practices around the world, several themes have been emphasized. Two of the most important topics are that of globalization and promoting best practice. Globalization refers to the connection of ideas, concepts, and thinking and is greatly influenced by the rapid transfer of information that occurs in our society today. Best practices are programs, processes, and/or procedures that continuously and regularly produce superior results. In addition, this chapter provides background information regarding obesity and overweight; school health and physical education curricular challenges; the importance of connecting to the community; technological applications; and an overview of the Global Forum for Physical Education Pedagogy (GoFPEP).

Keywords

Health, physical education, globalization, best practice, obesity, overweight, curriculum, community, technology, pedagogy, Global Forum for Physical Education Pedagogy (GoFPEP)
Introduction

Health and physical education programs throughout the world are challenged to provide meaningful and relevant learning experiences for children and youth. In the 21st century, learning strategies will be dramatically different, requiring children and youth to gain critical thinking and problem-solving skills; operate with agility and adaptability; effectively analyze information; communicate in various oral and written forms; reflect greater curiosity, imagination, and innovation in their thinking; and develop healthy active lifestyles (Gut, 2011; Kay & Greenhill, 2011).

As the world is ever changing, a broader global/international perspective of health and physical education pedagogy is needed. It is self-evident that we can and need to learn from one another from throughout the world. An increasingly globalized and technologically connected world culture enables outstanding professional practices in one part of the world to be reviewed and adopted locally where appropriate. Without question, knowledge of global/international practices can assist in advancing health and physical education pedagogy worldwide.

This edited book has emphasized two important subthemes: global perspectives and best practice. We live in a world today wherein we are increasingly connected with one another. Globalization has promoted a way of integrating ideas and concepts from throughout the world. Educational practices in one country, like other processes in business, government, or other venues, can be shared in another with adaptations to the local cultural context. Edginton and Chin (2012) wrote, “We can think of best practice as a program, process and/or procedure that continuously and regularly produces superior results when compared with other strategies” (p. i). In part, Physical Education and Health: Global Perspectives and Best Practice has been a search for best practices in the area of physical education and health pedagogy.

Several significant developments worldwide have contributed to the timeliness of this publication. First, conscientiousness of the interconnectedness of physical education and health educators is growing on a worldwide basis. Increasingly, technology provides opportunities to share information and to establish networks with our colleagues throughout the world. What constitutes best practice in one country may be adapted easily in a culturally relevant context in another country. Second, obesity and overweight are being acknowledged as a worldwide epidemic. More obese and overweight individuals live in the world than malnourished individuals, creating serious challenges to the health of individuals and to the health care system (Sanders, Baum, Benos, & Legge, 2011). Health care costs are escalating, and unless preventive health care measures are undertaken, there will continue to be a threat to the health and well-being of individuals worldwide (Cecchini et al., 2010; Wang, McPherson, Marsh, Gortmaker, & Brown, 2011). Third, the provision of physical education programs as a part of the school curriculum is diminishing on a worldwide basis (Hardman, 2011; Hardman & Marshall, 2000, 2009). At the time when the health and well-being of children and youth is being challenged, sources and solutions to such concerns are being eliminated from the basic school curriculum.

This chapter is subdivided into seven subsections. The first deals with the phenomena of globalization and the universal connectivity that now exists throughout the world. The second section focuses on the topic of best practice, providing a definition and three-step process for validating best practices in programs, processes, and/or procedures related to health and physical education pedagogy. The third section discusses the prevalence of obesity and overweight and its worldwide implications. The fourth section focuses on the topic of the challenges faced in planning and implementing the school health and physical education curriculum. Connecting health and physical education to the community is the next section discussed. This is followed by a section focused on the application of technology in physical education and health.
Globalization

It is often said that increasingly we live in a globally or universally connected world. What happens in one part of the world has the direct potential to significantly impact other areas. For example, 7.1 billion people live on planet Earth today (Livi-Bacci, 2012). Of great interest are the number of cell phones that nearly complement this growth-oriented population. In fact, it is increasing so much that, as Silicon India recently reported, the number of active cell phones will reach 7.3 billion by 2014 (Pramis, 2013). Truly, we live in a universally connected world.

The idea of globalization was first advanced in 1983 by American economist and Harvard University professor Theodore Levitt and refers to the idea where people, countries, and economies are interdependent and connected (Tedlow & Abdelal, 2004). Initially, the idea of globalization was spread through the expansion of business enterprises on a worldwide basis. The concept was originally shaped by the process of colonization and industrialization in the 19th century and focused primarily on economic transaction.

Today, globalization also involves the connection of ideas, concepts, and thinking. Furthermore, globalization impacts individual and cultural identity. A rapid transfer of information is occurring as a result of the use of Internet and other forms of technology. Ideas, perspectives, attitudes, images, and other phenomena such as fashion, music, art, and other ways in which individuals express their identity are increasingly subject to the processes of globalization. Globalization is reflected in the spread of popular culture via the mass media and even more so today through the connectivity brought about as a result of the Internet and the application of social media (Castells, 2011). Moreover, social connections are increasingly influenced by the processes of globalization. Social connections and rewards are governed through the process of “social structuring,” which draws individuals into a more personalized form of interaction on a large scale.

In education, the increasing connection of learning resources, environments, and experiences is leading to a global learning ecosystem. Mass teaching platforms are revolutionizing education. Such teaching platforms are providing greater accessibility to knowledge, information, and the learning of skills and are spanning international boundaries (Quinton, 2012). A global open learning system is emerging that will lead to the unraveling of traditional top-down frameworks of authority, knowledge, and power. Thus, as individuals at the local level are able to connect with one another sharing best practices, education will be rethought, reformed, and renewed globally.

Promoting Best Practice

As noted, a major theme of this book is to accentuate and emphasize the importance of best practice in the crafting of learning environments in the area of health and physical education. Edginton and Chin (2012) wrote,

[in order] for health and physical education programs to effectively inspire, motivate and prepare learners for the 21st Century, it will be incumbent for those who design and facilitate the creation and delivery of learning environments to gain knowledge of programs that have demonstrated superior results. (p. i)
Such programs reflect best practice and, in general, are a “program, process, and/or procedure that continuously and regularly produces superior results when compared with other strategies” (Edginton & Chin, 2012, p. i).

According to the U.S. Department of Health and Human Services (2003, 2011), best practices can be validated through a three-step process:

1. **Identification of a Promising Practice.** The first step in the process involves identifying a program activity or strategy that has emerged within an institution and shows promise for becoming a best practice with long-term sustainable impact.

2. **Field-Tested Best Practice.** The next step in the process is to demonstrate that the program activity or strategy has produced successful outcomes and has been supported to some degree by subjective and/or objective data analysis.

3. **Research-Validated Best Practice.** The final step is to validate a practice using various measures including (1) demonstration of positive outcomes, (2) confirmation in a study using an experimental or quasi-experimental design, (3) publication in a peer-reviewed journal or professional publication, and (4) the creation of resources and quality assurance procedures.

The literature points to the need for the identification and validation of best field-based practices. A gap exists between what occurs in the field and what is studied in the laboratory. This gap has produced a disconnect that impacts the preparation of physical education and health teachers and the provision of more effective forms of health and physical education pedagogy (Burgeson, Wechsler, Brener, Young, & Spain, 2001). As the body of profession knowledge is, in fact, a blend of practice and theory, it is important to reveal best practices for this information base to advance effectively.

Korthagen (2001) affirmed, “There is a gap between theory and practice and that this impacts on teacher education in a significant fashion” (p. 1). He noted that there is an equity as abstract knowledge is considered to be of greater importance and standing than the demonstration of skills and information, especially when reflecting outstanding performance. In teacher education, it has been thought that students should gain a theoretical perspective first and then apply such an understanding to the classroom setting. However, is there an alternative?

Should practice precede theory, not the reverse? Korthagen and Kessels (1999) argued that the “technical-rational model” of teacher education separates the theoretical information from its connection to practice. Furthermore, they noted that models of teacher education should find ways to more effectively embed practice within theory. The imposition of top-down standards and guidelines often fails to account for the exciting developments that are occurring at local levels. Such models of best practice should offer a framework for the development of these standards. Too often, the development of standards and guidelines framed by experts lacks grounding in actual practice. *Physical Education and Health: Global Perspectives and Best Practice* has been crafted to discover and reveal successful practices that are being implemented in the field.

**Obesity and Overweight: A Worldwide Epidemic**

The incidence of obesity and overweight has reached epidemic proportions on a global basis (Hossain, Kawar, & Nahas, 2007; Lobstein, 2011). As children and youth represent the largest portion of the world’s population today and in the history of humankind (Government of Canada, 2012), they are particularly susceptible to the consequences of obesity and overweight
(Gupta, Goel, Shah, & Misra, 2012). Often, the diets of young children are processed foods
that are high in fat, sugar, and sodium (Chopra, Galbraith, & Darnton-Hill, 2002; Kleiman,
Ng, & Popkin, 2012). To address issues related to obesity and overweight, programs in schools
and found in community life need to be developed that reinforce a child's interest in making
physical activity a lifelong pursuit. Also, increased screen time plays a role in promoting physi-
cal inactivity. Watching television or videos, playing video games, and using computers also
contribute to diminished physical activity (McCormack, Giles-Corti, Timperio, Wood, & Vil-
lanueva, 2011). The promotion of healthy active lifestyles in a holistic fashion is essential in pro-
moting the welfare of children and youth. The entire community needs to be involved in order
to address such concerns. For example, policies aimed at promoting the development of both
social and physical environments can greatly influence the formulation of positive attitudes and
behaviors that advance healthy, active lifestyles for children and youth, as well as adults (Gupta
et al., 2010; Sallis, Floyd, Rodriguez, & Saelens, 2012; Wridt, 2010).

Ban Ki-moon, Secretary General of the United Nations, has focused the attention of the
world on the need to address the increased incidence of noncommunicable diseases, including
the prevalence of cardiovascular disease, stroke, cancer, chronic respiratory diseases, and dia-
abetes. In an address offered to members of the UN General Assembly on September 19, 2011,
Ki-moon discussed the impact of noncommunicable diseases and strategies for addressing such
challenges. He emphasized the importance of regular exercise, a nutritious diet, improving eat-
hing habits, limiting alcohol consumption, reduction of stress, and the cessation of smoking as
important ways to address the rising tide of these types of diseases. This was only the second
time in UN's history that the Secretary General addressed this body on a health-related issue.

Social marketing programs may stem the tide of obesity and overweight in the same fashion
that tobacco has been diminished in select countries on a worldwide basis (Wakefield, Loken,
& Hornik, 2010). If this is to be in the near future, then the importance of encouraging individuals
to move with opportunities for moderate to vigorous levels of physical activity must be
reemphasized and encouraged as both a short-term strategy and a long-term strategy (Chin,
Edginton, Fleming, Flack, & Ruan, 2013). According to the Mayo Clinic (2011), physical activ-
ity provides a pathway for individuals “to feel better, have more energy and perhaps even live
longer” (para. 1). Furthermore, physical activity can enhance one's health by improving cardio-
vascular endurance, muscular endurance, muscular strength, flexibility, and body composition,
as well as by promoting greater agility, coordination, speed, power, and reaction time (Corbin,
Lindsey, Welk, & Corbin, 2010; Hoeger & Hoeger, 2010). Edginton and Chin (2013) wrote that
we must rediscover the joy that comes from physical activity and noted that “...we must find a
way to provide greater meaningfulness, relevancy, and, in fact, joy through physical activity in
the lives of individuals” (p. ii).

In addition to addressing the needs of individuals to engage in physical activity, there is also
a pressing need for individuals to understand and more effectively monitor their nutritional
habits. Diet, along with the lag or reduction of physical activity, has also contributed signifi-
cantly to the epidemic of obesity and overweight (Sallis & Glanz, 2009). Assessing research, the
World Health Organization (WHO, 2013) offers guidelines regarding human nutrient require-
mements. They report that “nutritional problems in adolescents start during childhood and con-
tinue into adult life” (para. 2). WHO has established standards including recommended daily
allowances and tolerable intake allowances for essential nutrients.
School Health and Physical Education: A Challenged Curriculum

At the same time obesity and overweight is rising, school health and physical education programs are diminishing. Edginton (2007) asked the question, has physical education failed? Clearly, the amount of time dedicated to physical education has been diminished in school curricula throughout the world. Hardman and Marshall (2000, 2009) noted that physical education programs are being deemphasized. Perhaps a greater emphasis placed on accountability and high-stakes testing has resulted in a reduction in coursework related to health and physical education (Edginton, Chin, & Naul, 2012). On the other hand, physical education curricula may lack currency and are mainly offered in an irrelevant fashion, failing to inspire and motivate young people.

School administrators evidently have not linked the increase in obesity and overweight to the diminishing of physical education programs (Edginton et al., 2012). Physical educators have failed to ensure that the linkage between their efforts in the classroom and the health and cognitive development of their students is understood. The responsibility rests directly on the shoulders of physical educators to ensure that the importance of their subject matter is understood and embraced as a part of their schools’ overall curriculum. Today, more than ever, the physical education curriculum needs to be linked to the overall well-being of children and youth as they matriculate through the curriculum. As has been noted, lessons learned at an early age carry into adult life.

Furthermore, the importance of physical activity as a way of creating greater attentiveness in the classroom has not been recognized. The opportunity for schools to provide Brain Breaks, which stimulate students and reenergize their efforts, has largely been ignored in the overall curriculum. Brain Breaks stimulate an individual’s potential to access and process new information (Davis et al., 2011; Hillman, Erickson, & Kramer, 2008; Ratey, 2008).

Connecting to the Community

Linkages to community-based organizations, agencies, and institutions are an essential component of the 21st century health and physical education curriculum (Pate et al., 2006; Sallis, Floyd, et al., 2012). Schools often work with community agencies in all sectors of society—private and commercial, nongovernmental and government organizations—to plan and develop programs on a cooperative basis. An important component in developing the joint use of resources is the establishment of a program of communication and interaction. As the joint use of resources implies a sharing of human fiscal and physical resources, it requires that the leaders of cooperating organizations develop close relationships and partnerships among people, agencies, and institutions. A key factor in building cooperative relationships is the importance of leadership that is willing to overcome issues related to territoriality, inertia, legal mandates, tradition, fear of the loss of power, feelings of ownership, the misunderstanding of programs, and others. Such cooperative activities improve the accessibility to programs and services, as well as areas and facilities.

Connecting to the community is important for several reasons. First, and perhaps most important, is that of suggested daily physical activity, school physical education programs may only provide between 8% and 11% required for students (Tudor-Locke, Lee, Morgan, Beighle, & Pangrazi, 2006). This means that other resources and programs during a child’s or adolescent’s leisure must be made available for individuals to gain necessary amounts of daily physical activity. Children and youth spend much of their leisure time engaging in sedentary activities such
as watching television, playing video games, or using their computers. The need for programs and areas and facilities that promote healthy, active lifestyles beyond the school setting and in the community is evident (Melkevik, Torsheim, Iannotti, & Wold, 2010).

The second reason is that community provides a rich base of resources that can be used to augment and support a school-based curriculum. Certainly, many unique areas and facilities are available that can be accessed by school-based physical education programs that may serve to enrich the overall offerings to students. Not all schools have all of the resources that are required for a fully developed physical education program, yet a community may be able to supply more opportunities to implement a fully developed curriculum.

Last, and also important, is the notion that individuals throughout their life span will spend more time engaging in physical activity in the community in their adulthood than when compared with their childhood or adolescence. Thus, it becomes important to introduce students to community-based resources that they may access during their life span, but especially after they depart from the school setting.

An excellent example of a cooperative relationship is one that has been established by the Baptist (Sha Tin Wai) Lui Ming Choi Primary School (LMC), Hong Kong, China (Chin, Edginton, & Tang, 2012; Chin, Yang, Edginton, Tang, & Phua, 2010). This primary school, with a strong desire to extend its resources, developed a unique partnership with a private swimming school to assist in the development of the facility. Following a successful fund-raising program that included parents and community members, $1.3 million USD was raised to build the facility. This public–private swimming pool development represents a historic first in Hong Kong and provided opportunities for students to gain valuable water safety skills and knowledge. This private–public model has now been extended to 10 additional schools in Hong Kong.

## Technology in Physical Education and Health Pedagogy

Children born in the early part of this millennium are known as the “iGeneration” (Rosen, 2010, 2011). This group of individuals has access to forms of technology unheard of just two decades ago. Mears (2012) offered, “They have never known life without wireless high-speed internet connections, cellular phones with data connections, texting or video gaming consoles” (p. 2). He further noted, “Most are very familiar with technology interfaces, using apps and social media on a regular basis” (p. 2). The implications of such dramatic changes in access to technology among children and youth should be self-evident in all learning areas.

Applications in health and physical education pedagogy are available and can be applied to enrich and enhance curricular offerings in most school settings. Numerous technological applications focused on promoting physical activity and fitness are available and easily accessible. However, application of various technologies will require new student and teacher competencies and practices. Students will be required to demonstrate competency in basic motor skills and also competence in using technology. In addition, such technology will enable individuals to learn in a student-centered self-directed fashion; students will be required to gain greater time management skills in order to enable appropriate time on a task. Teachers will also be required to gain knowledge of contemporary, technology-based instructional strategies. Furthermore, teachers will need to gain a greater awareness of teaching strategies that support anytime, anywhere learning and leverage technological applications (Herring, Edginton, Geadelmann, & Chin, 2012, p. 22).

In their book *Contemporary Uses of Technology in K–12 Physical Education: Policy, Practice and Advocacy*, Sanders and Witherspoon (2012) have summarized important considerations that must be undertaken to use technology in physical education. They noted that (1) funding
for technology can be a challenge; (2) professional development to train physical educators in the use of technology is important; (3) a budget for classroom technology that includes physical education must be a priority; (4) policy for age-appropriate and safe use of technology in all physical education settings must be established; (5) regular updating of equipment must be included in the budget process; (6) university teacher preparation physical education programs must include technological applications; (7) technology should be used in the assessment process; and (8) technology should be used to share information with teachers, administrators, students, and parents. Technology holds promise for the way that students learn and also for the way in which teachers teach. Physical and health educators are challenged to become more responsive to a technology-driven environment that provides enhanced opportunities for learners well beyond the walls of the traditional classroom setting (Papastergiou, 2009).

The Global Forum for Physical Education Pedagogy (GoFPEP)

The Global Forum for Physical Education Pedagogy (GoFPEP) was established in 2010 to address issues emerging as a result of globalization, the explosion of knowledge, and changing demographics that influence health and physical education worldwide (Edginton & Chin, 2012). Edginton, Chin, Geadelmann, and Ahrabi-Fard (2011) offered that such challenges will require a more personalized or individualized connection between the learner and the teacher. In the future, the ability to think critically, problem solve, innovate, operate with agility and adoptability, and communicate effectively, as well as employ technology efficiently, will predominate the crafting of educational environments. Twenty-first century learning environments must include (1) increased capacity and efficiency to promote learning for a relatively large number of students at one time; (2) improved effectiveness by promoting deeper learning approaches and linkages to real-world settings; (3) accessibility by removing barriers; (4) generation of a competitive mind-set with greater choice and convenience for the student; (5) promotion of a resource-based emphasis that provides a more student-centered process; and (6) the enabling of a personal touch between students and teachers.

GoFPEP has framed itself as a social movement and seeks to network colleagues from around the world to advance 21st century health and physical education programs, as well as the way that teachers are prepared (Edginton et al., 2012). Originally established as a think tank, GoFPEP today is increasingly viewed as a social movement working to promote collective action focused on the social issues faced by physical education and health educators. Edginton et al. (2012) stated, GoFPEP is directed at bringing about social change to “create new ways of thinking, perspective and solutions to existing problems” (p. 34).

First implemented in Grundy Center, Iowa USA in 2010, GoFPEP 2010 was focused on the theme of “Revitalizing Health and Physical Education Through Technology.” This forum generated many outcomes including a consensus statement (Edginton et al., 2011), publications, and a book series. The event hosted 70 invited delegates from 30 countries. GoFPEP 2012 was held in Velen, Germany, as the Sportschloss Velen and was organized by the Willibald Gebhardt Research Institute. The theme of the second forum was “Revitalizing Health and Physical Education Through Community-Based Networking.” The primary outcome of this event was the crafting of strategies to greater promote community-based networking. GoFPEP 2012 was attended by 80 distinguished delegates from more than 50 countries and received from 50 national, continental, and global organizations. GoFPEP 2014 will be held at the North-West University – Potchefstroom Campus, South Africa. Over 100 invited experts from 60 countries have accepted invitations to participate in the event, and the forum has received endorsements...
from 110 regional, national, and international organizations. The theme of this global forum, “Physical Education and Health: Promoting Global Best Practice,” is timely for the launching of this new book.

Summary

Health and physical education programs throughout the world are challenged to provide meaningful and relevant learning experiences for children and youth. As the world is ever changing, a broader global/international perspective of health and physical education pedagogy is needed. It is self-evident that we can and need to learn from one another from throughout the world. Increasingly, we live in a time where exchanges of information are instantaneous and models of best practice can be accessed through global networks designed to share such programs. The rapid movement of ideas, concepts, and successful models of best practice is a reality of living in a globalized society.

As the incidence of obesity and overweight continues to escalate on a worldwide basis, there is a need to seek out preventive strategies to address this challenge. Clearly, well-designed physical education programs that promote healthy, active living patterns throughout the life span can dramatically reduce obesity and overweight. If this problem is not addressed, the quality of one’s life will be dramatically impacted and, in fact, shortened. Health care costs will continue to rise and burden the economic well-being of individuals, communities, and nations as a whole.

School health and physical education curricula need to be rethought and refocused to promote new concepts that can be gained from understanding worldwide trends. Such practices need to be contextually framed to have the maximum impact at the local level. Furthermore, it is important for the school health and physical education curriculum to be linked to community resources. This is imperative to expand schools’ resource bases and also to situate learning in the actual environment where individuals spend their adult lives. Clearly, there is a need during children’s or adolescents’ school years to find ways to complement physical activity found in the school with opportunities in the community.

Technology will also play an important role in crafting the future health and physical education curriculum. Use of technology can make learning environments more engaging, dynamic, meaningful, and relevant for students. Furthermore, technology increases the opportunity for greater accountability by providing ways of measuring and monitoring individual gains. Technology can enable the personalization of an individual’s performance in such a way as to enable a more specific design of methods and lessons to suit his or her requirements.

Living, working, and playing in the 21st century will provide numerous challenges and opportunities. It will be necessary to reach out to colleagues from throughout the world to develop and adopt new strategies, methods, procedures, and programs to address emerging needs. In many respects, health and physical education pedagogy will have to be rethought and perhaps reinvented. The exploration of new and different models of best practice can serve as a starting point for the rejuvenation and renewal of health and physical education on a worldwide basis.

References


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