

Silent Struggles: Depression and Its Link to Suicide Attempts in Emerging Adulthood

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ABSTRACT

Depression is one of the leading causes of morbidity and mortality worldwide, including in Indonesia. It is a mood disorder characterized by persistent feelings of sadness, loss of interest or pleasure in daily activities, and various physical and cognitive symptoms that impair an individual's functioning. Early adulthood is a vulnerable developmental period, as individuals often face significant social, academic, and professional pressures that, if unmanaged, may lead to complex psychological issues. When untreated, depression during this stage can escalate into more serious conditions, such as suicidal ideation or attempts. The emergence of suicidal ideation is often driven by psychological distress, both emotional and physical. Contributing factors include limited access to psychological support, social stigma surrounding mental health, and a lack of awareness about the symptoms of depression. These issues often lead to many cases of depression and suicidal ideation going undetected or untreated. However, previous studies have shown that attachment to life can act as a protective factor, reducing the risk of suicide. This study aims to explore the subjective experiences of young adults in Indonesia who are living with depression and have had suicidal ideation or attempts. Using a qualitative phenomenological approach, data were collected through in-depth interviews with participants aged 20–30 who met the criteria for depression and had a history of suicidal ideation or attempts. Thematic analysis was employed to identify core themes related to their emotional experiences, coping mechanisms, and meaning-making processes. This research is expected to provide a deeper understanding of the lived experiences of depression and suicidality in early adulthood within the Indonesian cultural context, and to contribute to more culturally sensitive mental health interventions.

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BACKGROUND

Depression is a mood disorder characterized by feelings of deep sadness, loss of interest or pleasure in daily activities, and a variety of physical and cognitive symptoms that affect an individual's ability to function (American Psychiatric Association, 2013). This can be experienced by anyone, including individuals who are in the emerging adulthood phase—a transition phase towards adulthood that covers the age range of 18-25 years (Arnett, J et al., 2014). This period is marked by various challenges, such as adjustment to adult life, career decision-making, and identity formation. The stress of facing these challenges increases the risk of developing various psychological problems, including depression.

Depression is one of the main causes of morbidity and mortality throughout the world, including in Indonesia (Ismah & Widayat, 2023). The results of a survey on adolescent mental health in Indonesia in 2022 showed that 5.5% of adolescents aged 10-17 years experienced mental disorders, and 11% of them experienced depression. The Basic Health Research in 2018 reported that 6.24% of the population aged 15-24 years experienced depression (Melvin Omnia et al., 2023). Furthermore, data from the Ministry of Health of the Republic of Indonesia (2023) shows that in 2023, as many as 61% of individuals aged 15-24 years in the past month had thought about ending their lives. These data indicate an increasing prevalence of depression among adolescents and young individuals who require serious attention to their mental health (Kementrian Kesehatan Republik Indonesia, 2023).

Global studies also support these findings. Data from the National Comorbidity Survey-Adolescent Supplement shows that 11% of adolescents experience major depressive disorder by age 18 (Bachmann, 2018). Meanwhile, the National Institute of Mental Health (NIMH) reported that in 2013, around 2.7 million adolescents aged 12 to 17 (10.7% of the total adolescent population) experienced major depressive episode (Leach & Butterworth, 2020). If not treated properly, depressive symptoms such as feelings of deep sadness, hopelessness, anger, or frustration can last for a long time, ranging from weeks to years, and have a negative impact on the individual's life.

Adolescence and emerging adulthood are critical periods marked by various social, psychological, and physical changes (Purba et al., 2024). These changes contribute to an increased risk of mental health disorders and the development of depression (Gijzen et al., 2021). Depression during this period often continues into adulthood, with approximately 40% to 70% of adolescents experiencing recurrent depressive episodes within 3 to 5 years of the first episode (Lovero et al., 2023). World Health Organization (WHO) reports that more than 350 million people worldwide suffer from depression, making it a leading cause of global disability and one of the largest contributors to the burden of disease (Organization World Health, 2023).

Emerging adulthood is a phase of life that is very vulnerable to mental disorders, including depression. Individuals at this stage face significant psychosocial stress

due to social, economic, and emotional changes (Konaszewski et al., 2022; Purba, 2024). If not treated effectively, depression at this stage can develop into a more serious condition, such as suicidal ideation or attempts. Data from WHO shows that suicide is the second highest cause of death among individuals aged 15-24 years (World Health Organization, 2021).

The development of suicidal ideas can arise due to pain, either physical or emotional (Okechukwu et al., 2022). Melvin Omnia et al. (2023) identified three main aspects of pain related to suicidal ideation: a) sensory aspects, which include sensitivity to pain; b) cognitive aspects, which refer to exaggerated perceptions of pain; and c) motivational-affective experience aspects, such as emotional discomfort arising from pain. Suicide attempts in individuals with depression are often a manifestation of their inability to cope with the emotional stress they feel. Some risk factors that contribute to suicide attempts include feelings of hopelessness, social isolation, low social support, and past traumatic experiences (Blais & Grimm, 2025; De Beurs et al., 2019).

Chen & Kuo (2020) also found that the combination of pain and feelings of helplessness can drive individuals to consider suicide. However, attachment to life can be a protective factor that reduces suicidal intentions. The stronger the attachment to life, despite experiencing pain and feelings of helplessness, suicidal intentions will be at a moderate level. On the other side, lower attachment to life increases the likelihood of individuals considering or attempting suicide. In addition to these internal factors, suicide rates can also be influenced by individual knowledge of suicide methods with minimal or no pain and ease of access to these means.

Emerging adulthood is a vulnerable period because individuals in this phase often experience pressure to meet social, academic, and professional expectations, which if not managed properly can trigger more complex psychological conditions (Fan et al., 2022). Suicide attempts in emerging adulthood phase are generally related to a variety of complex factors, including social pressure, family conflict, academic and professional demands, emotional or physical abuse, and mental conditions such as major depression (Pilar Matud et al., 2020). Previous research has also shown a strong association between depressive symptoms, suicidal ideation, and suicide attempts among adolescents (Kroning & Kroning, 2016).

Successful suicide is the second leading cause of death among individuals aged 10 to 24 years (Madyatmadja et al., 2021). Adolescents with depression are at greater risk for a variety of problems, including increased substance use, difficulties with academic achievement, challenges in interpersonal relationships, and increased suicide rates (Puyat et al., 2021). Research by Konaszewski et al. (2022) shows a significant association between depression and increased risk of suicide in this age group. However, further exploration is needed on how depression influences the decision to attempt suicide in adolescents entering emerging

adulthood, which is full of psychological and social challenges.

However, limited access to psychological support, social stigma towards mental health, and lack of knowledge about the signs of depression among emerging adults means that many cases of depression and suicidal ideation do not receive adequate attention or treatment (Barus et al., 2023). Approximately 75% of adolescents with depression do not receive the treatment they need (Madyatmadja et al., 2021). If left without intervention, untreated depression can have long-term negative impacts, including lower educational attainment, poor physical health, and increased risk of suicide (Aprodita, 2021).

Based on the above description, this study aims to explore in depth the subjective experiences of individuals in the emerging adulthood phase who suffer from depression and have attempted suicide, with a specific focus on the interaction between pain, feelings of helplessness, and attachment to life within Indonesia's socio-cultural context. The novelty of this research lies in its contextual psychosocial approach, which addresses gaps in previous studies that have mostly emphasized prevalence and risk factors alone. It is expected that the findings will provide valuable insights for mental health practitioners in designing more effective and targeted interventions for emerging adults in Indonesia

RESEARCH METHODS

The type of research conducted is qualitative research with a phenomenological approach (Yin, 2016). The participants in this study are individuals in emerging adulthood (aged 18-25 years) who experience depression and have attempted suicide. The participants in this study amounted to 3 (three) subjects who fit the criteria or characteristics of the participants determined by the researcher. The researcher will use a non-probability sampling technique, namely purposive sampling, in selecting participants.

In this study, the researcher will conduct observations and interviews that focus on emphasizing the meaning of the three research participants. The researcher will also use secondary tools to support data collection, namely interview guidelines and archive recordings. Next, before the data analysis process, the initial step that the researcher will first take is to carry out the coding process (Onie et al., 2022). Coding is intended to be able to organize and systematize data completely and in detail so that the data can produce a picture of the topic being studied. Next, the researcher will use a thematic analysis technique with an inductive

approach, where all the data obtained will be analyzed one by one to form a conclusion.

This research was conducted following applicable research ethics guidelines, including the protection of research subjects' privacy and the ethics approval obtained. Before conducting the observation and interview process, the researcher will first provide informed consent to each participant. Next, in presenting the research results, the researcher will disguise all the identities of the participants.

RESEARCH RESULTS

Participant Background

Informant 1 is a suicide survivor. She is a 20-year-old university student who first attempted suicide during high school. Her last suicide attempt occurred at the age of 19, during the early stages of her university life (around the first or second semester). Ara dedicates her life to caring for her pets, and certain situations trigger her anger. She also harbors a strong dislike for male figures, whom she perceives as intrusive or destructive. Ara holds repressed feelings of inferiority toward these figures, leading her to self-harm as she is unable to confront them directly.

Informant 2 is the second child of two siblings but lives apart from her family—she resides with her mother while her older brother lives with their father. Her past experiences have caused her to frequently experience anxiety, particularly when forming relationships with others. She has faced situations involving betrayal and relationship failures multiple times. Additionally, Informant 2 struggles with self-identity, as much of what she knows about herself is based on others' opinions. When no one is available to offer perspective, she tends to feel lost and overwhelmed. The more difficulties she encounters, the more worthless she feels, leading her to consider "disappearing" as a possible solution. Informant 2 has been diagnosed with bipolar disorder and has taken medication for one year.

Informant 3 is a 23-year-old student who first attempted suicide during the third semester of university by overdosing on pills. The primary source of her depression stems from her parents' troubled relationship—her father had an affair, while her mother is temperamental. She feels that neither parent serves as a positive role model. Since childhood, Informant 3 has struggled to make friends and perceives herself as unintelligent, particularly in academic settings. Her parents frequently compare her to others and use rewards as motivation. However, when she achieved the promised goals, her parents often failed to provide rewards, thus deepening his feelings of disappointment and inadequacy.

Table 1. Description of the Demographic Characteristics of Research Informants

| Name | Informant 1 | Informant 2 | Informant 3 |
|------------------|--------------|--------------|--------------|
| Gender | Female | Female | Female |
| Age | 20 Years Old | 20 Years Old | 23 Years Old |
| Occupation | Student | Hairdresser | Student |
| Suicide Attempts | 3 | 2 | 1 |

Suicide Attempts and Self-Harm Attempts

Informant 1's first suicide attempt involved attempting to overdose on medication, but it failed because the medication she usually used was suddenly out of stock. Her second attempt involved cutting her wrist. The third attempt was a suicide attempt by hanging, but it was unsuccessful. When Informant 1 feels angry, she has also engaged in self-harming behaviors such as punching the wall and cutting her wrists.

"Yeah, I do this (punches) until it bleeds. Yeah... if I could just bleed out." (SJ1, W-1, 11/03/2025, Lines 8-10)

"What's the point of living, if it's like this..." (SJ1, W-1, 11/03/2025, Lines 11-12)

Informant 2's first suicide attempt was by taking tranquilizers. She repeated this method two to three times, consuming tranquilizers each time. However, Informant 2 was saved each time, as she always informed her loved ones when she overdosed, and they rushed her to the hospital.

"Life feels too exhausting, everyone keeps leaving, disappearing, and taking the pills is one way to sleep peacefully." (SJ2, W-1, 12/03/2025, Lines 15-17)

Informant 3 repeatedly thought of ways to end her life, but it was just an idea. Then she decided to take a large number of pills for her first suicide attempt. When she felt her stomach and chest burning, she called her friends for help.

"At first, I often imagined ending my life, but it was just in my head. Then I did it by taking a lot of pills. When my stomach and chest started to burn, I panicked and called my friends to help me." (SJ3, W-1, 13/03/2025, Lines 25-28)

Reasons for Suicide and Self-Harm Attempts

Several of Informant 1's suicide and self-harm attempts were due to her anger toward her grandfather. This stemmed from the deaths of some of her pets, which she believed were caused by her grandfather. Informant 1 explained that when she harmed herself, she imagined she was hurting her grandfather.

"It's always about family problems when I do this." (SJ1, W-1, 11/03/2025, Lines 30-31)

"Usually, when there's a problem like this, it's because of the dog... For me, my priority is the dog... He (grandfather) does things without telling me." (SJ1, W-1, 11/03/2025, Lines 32-35)

"I feel like I want to hit him, beat him up, I don't care... even if he gets seriously hurt, I don't care..." (SJ1, W-1, 11/03/2025, Lines 36-38)

The reason why Informant 2 decided to end her life was the need for attention and affection. This act of harming herself was to show that she was tired of others and to ask for understanding from others. Attempted suicidal behavior is also done to show pain due to self-hatred, but tends to be motivated by Bica's desire for others to realize that she is sick

and understand her pain. If Informant 2 felt that the attention she received was insufficient, especially when dealing with relationship issues, it led her to repeat the behavior frequently. The outcome of her self-harming actions was the consistent sympathy from those around her, who repeatedly checked on her condition. She also felt that her mother would become more protective, asking for all the details about Informant 2's condition and pushing her for answers.

"Sometimes I just want people to see that I'm tired. If they don't care, I want to disappear so they will realize how much I'm hurting." (SJ2, W-1, 12/03/2025, Lines 40-42)

Informant 3's mood swings and overthinking caused disturbances in her sleep patterns and mood. She felt exhausted due to the pressures of her academic and community work. This pushed her to overdose on pills in her third semester, attempting suicide as a means of coping.

"Only through suicide do I feel like my parents will realize their behavior all this time, how neglectful and indifferent they've been to their children's feelings. With this suicide attempt, I can also get attention from the people around me." (SJ3, W-1, 13/05/2025, Lines 50-53)

Psychological Disorders

The psychological analysis of the participants- Informant 1, Informant 2, and Informant 3- generally showed that all three participants tended to have a strong need for attention and affection. This need was reflected in their self-harming behavior, which they used as a way to express emotional exhaustion and seek understanding from others. Their suicide attempts were not an expression of self-hatred, but rather influenced by a desire for others to recognize and understand the pain they felt.

In addition, the three participants were similar in terms of depressive symptoms. Their behaviors were often considered excessive as they tended to repeat them, especially when they felt they were not getting enough attention when facing problems in social relationships. After committing self-harm, all three participants consistently received responses from those around them, such as continued feelings of sympathy and concern, as well as expectations for those closest to them to become more protective. For example, Informant 2's mother would ask for more detailed information about his condition and become more demanding.

Furthermore, the three participants share a life orientation focused on achieving certain goals together with others. They strive to reach specific financial targets, which makes them more careful in managing their expenses and income. The participants also share a view of life through their attachment to social relationships, where the presence of others is seen as enriching their lives. Additionally, relationships with others provide meaning in their lives. For the participants, there is a sense of value and importance within their social groups.

Another commonality among the three participants is their lack of confidence in their abilities. They feel that they are still in the process of learning and have many areas of improvement. Furthermore, comments from others strengthen their belief that their work is insufficient and needs improvement. Specifically, Informant 3 places greater emphasis on the lack of praise for every success they achieve.

This also supports the participants' belief that what they do is not satisfactory to those closest to them. The participants also experience low self-esteem because they feel they have no unique qualities to distinguish themselves from others, especially in their social environment. They tend to think that they are not special, as there are always others who are better, and they have not reached a level worthy of consideration.

Additionally, there is a tendency to be patient and forgiving, which is sometimes seen as naïve by those around

them. This attitude stems from religious teachings received during childhood, which lead them to believe that seeking revenge is useless. However, some participants expressed a slight feeling of envy towards others who can express anger or take revenge, while they cannot because they have developed as individuals who are "forgiving" and considered "different" by their friends.

To provide a clearer overview of the research findings, the following table summarizes the main themes that emerged from the analysis, along with representative verbatim excerpts from each participant. This summary highlights the similarities and differences across participants regarding their experiences, thoughts, and motivations related to self-harm and suicidal behavior. Each verbatim quote is presented with a unique code indicating the participant, the interview session, the date, and the line numbers, ensuring transparency and traceability of the data.

Table 2. Summary of Main Themes, Indicators, and Coded Verbatim Quotes

| Theme | Indicators | Informant 1 | Informant 2 | Informant 3 |
|---|---|--|---|--|
| Need for Attention and Affection | Desire for care, validation, feeling exhausted if ignored | <i>If I hurt myself, maybe they will notice how much pain I hide. (SJ1, W-1, 11/05/2025, Lines 70–72)</i> | <i>Sometimes hurting myself is the only way I can make them see how tired I am. (SJ2, W-1, 12/05/2025, Lines 55–57)</i> | <i>They never listen until I do something extreme. Then they care. (SJ3, W-1, 13/05/2025, Lines 73–75)</i> |
| Repetitive Depressive Symptoms & Low Self-Worth | Feelings of inadequacy, repeated harmful behavior, and lack of confidence | <i>No matter what I do, it's always lacking. It makes me feel worthless. (SJ1, W-1, 11/05/2025, Lines 80–82)</i> | <i>I feel like I never do anything right, so I hate myself even more. (SJ2, W-1, 12/05/2025, Lines 83–85)</i> | <i>Even when I try my best, it's never enough for them. (SJ3, W-1, 13/05/2025, Lines 58–60)</i> |
| Life Orientation & Social Attachment | Need for social closeness, value of relationships, meaning in group | <i>If I don't have anyone close to me, I feel useless. (SJ1, W-1, 11/05/2025, Lines 61–63)</i> | <i>When I lose people, I feel empty and don't know what to do. (SJ2, W-1, 12/05/2025, Lines 86–88)</i> | <i>Being with friends makes me feel I belong somewhere. (SJ3, W-1, 13/05/2025, Lines 89–91)</i> |
| Forgiving but Naïve Attitude | Tend to forgive, avoid revenge, envy those who express anger | <i>People say I'm too kind because I never fight back. (SJ1, W-1, 11/05/2025, Lines 64–66)</i> | <i>I don't like fighting, but sometimes I wish I could shout back. (SJ2, W-1, 12/05/2025, Lines 92–94)</i> | <i>I envy people who can scream or get angry. I just stay quiet. (SJ3, W-1, 13/05/2025, Lines 95–97)</i> |

DISCUSSION

The findings of this study indicate that individuals in the emerging adulthood phase who experience depression and suicide attempts tend to have traumatic experiences, high psychosocial stress, and limitations in expressing emotions adaptively. These findings are consistent with previous research by Tate et al., (2024), showing that emotional dysregulation and unresolved trauma significantly increase the risk of suicidal ideation among young adults.

This study also identified a common pattern among the three participants who attempted suicide, particularly in terms of difficulties in building stable interpersonal relationships, both within their families and social environments, leading to feelings of being misunderstood and lacking a safe space to express their emotions. These findings are consistent with Fallahi-Khoshknab et al., (2023), who identified interpersonal difficulties as significant

contributors to the development of complex problems associated with increased suicide risk during emerging adulthood.

Moreover, they faced high psychological stress due to family conflicts, academic pressure, or social expectations, which made them feel a loss of control over their lives. This is consistent with the research by Murray et al., (2021) and Utomo & Rahmasari (2024), which discovered that individuals experiencing a series of negative events are more likely to attempt suicide (Utomo & Rahmasari, 2024). The three participants also revealed that their suicide attempts were driven by feelings of hopelessness and a lack of adequate social support. This is in line with the findings of Utomo & Rahmasari (2024) The argument that individual psychological processes and social factors influence the motives behind suicidal behavior.

Additionally, all three participants showed a lack of self-confidence and a sense of inadequacy, feeling that they

had many personal flaws to correct. Negative comments from others reinforced the belief that their work was insufficient. Specifically, Informant 3 highlighted the absence of praise for his accomplishments, which made him feel unsatisfactory to those around him. All three participants experienced low self-esteem, felt they were not exceptional compared to others, and believed they had not yet reached a socially accepted level.

The findings align with a meta-analysis conducted by Nurdianto & Subandi, (2023), which indicates that individuals with low self-esteem have a significantly higher likelihood of attempting suicide. Specifically, adolescents and young adults with low self-esteem are 2.76 times more likely to engage in suicidal behavior. This reinforces the results of the present study, in which participants' low self-confidence and feelings of inadequacy were found to heighten their susceptibility to self-harm or suicidal tendencies.

The findings of this study share similarities with previous research, such as Casanova et al., (2024), which found that individuals in the emerging adulthood phase are more vulnerable to psychosocial stress that can trigger depression and suicidal behavior, especially when they lack adequate social support. Additionally, consistent with research Beurs et al., this study also found that suicide attempts among individuals with depression often arise from an inability to cope with emotional stress, along with other risk factors such as feelings of hopelessness, social isolation, low social support, and traumatic experiences (De Beurs et al., 2019; Grossberg & Rice, 2023).

However, there are some notable differences compared to previous studies. For instance, research by Gutierrez et al., (2020) showed that the link between attention-seeking behavior and the desire to commit suicide is weak and is more of a manifestation of emotional turmoil than a genuine intention to end one's life. In contrast, this study presents a different finding, where all three participants consistently reported that self-harming and suicide attempts were not solely due to emotional pressure but also a need for attention and validation. Informant 3, for instance, mentioned that his suicide attempt was a way to draw attention from his parents and others around him, hoping they would care more about his feelings.

This aligns with the research by Tang et al., (2025) suggesting that motivations for committing suicide and self-harm stem from factors such as the desire to communicate pain for validation and social attention.

Consistent with the findings of Tang et al., (2025) This study shows that after self-harming, the participants received attention and protective responses from their surroundings, which reinforced the behavior as a form of emotional pain communication. Thus, this study suggests a different dynamic compared to previous research, indicating that the need for attention and recognition plays a more significant role in driving suicidal behavior than previously thought. This points to the need for further research to understand the interplay between the need for social validation and the tendency toward suicidal behavior, particularly in individuals with depression and emotional stress.

In line with the research Vélez-Grau et al., (2025), this study also supports the Interpersonal Theory of Suicide, which asserts that suicidal ideation is rooted in perceived burdensomeness and thwarted belongingness. All three participants demonstrated signs of thwarted belongingness: Informant 1 had trouble forming connections with male figures, Informant 2 struggled with trust and relational stability due to past betrayals, and Informant 3 felt emotionally neglected by his parents. These relational challenges intensified their sense of isolation and hopelessness, contributing to the development of suicidal behavior.

These findings highlight the critical importance of intervention strategies that foster social connectedness and emotional regulation to reduce suicide risk among youth. Moreover, consistent with Valente & Marcolin, (2023), this study reaffirms that psychosocial factors—such as the inability to form meaningful interpersonal relationships and feelings of social rejection—play a significant role in the emergence of suicidal ideation. A perceived lack of social support or persistent isolation can exacerbate despair and increase the desire to end one's life.

This is consistent with research by Motillon-Toudic et al., (2022), which found that social isolation is a strong risk factor for suicide, and that individuals with high social support are 44% and 62% less likely to die by suicide compared to those with the lowest levels of social support. Additionally, Maghfiroh & Alfian, (2024), emphasized the importance of social support in coping with life challenges and developing healthy coping mechanisms. When individuals have strong support systems, they are better equipped to navigate emotional stress and avoid destructive solutions like self-harm or suicide.

The participants' experiences also reveal that they viewed the world as a place full of uncertainty and disappointment, which led them to avoid conflicts. Their way of avoiding disputes was by not making decisions or resolving problems they faced. They feared the responsibility that came with making choices. This was in stark contrast to their need for personal achievement (Sugito, Fairuz, Ghina & Surjaningrum, 2024). Another important factor that emerged was the stigma surrounding suicide, which led survivors to believe that they should have been able to prevent their suicidal behavior, resulting in overwhelming feelings of guilt (Wicaksono et al., 2024).

CONCLUSION

In conclusion, this research reveals how depression is deeply intertwined with the participants' experiences of suicidal behaviors and self-harm. The research showed that depression, often triggered by social isolation, strained relationships and lack of emotional support, played a significant role in suicidal thoughts. For the participants, feelings of hopelessness, inadequacy and low self-esteem - signs of depression - were at the core of their desire to end their lives. In addition, the inability to form meaningful relationships and lack of understanding from others exacerbated their depressive symptoms, leading to repeated

self-injurious behaviors and suicide attempts. These findings suggest that depression is not only the result of internal struggles, but also heavily influenced by external factors such as family dynamics, social support and relationship difficulties. Therefore, overcoming depression requires not only therapeutic interventions, but also social support to help individuals rebuild self-esteem, emotional connection, and resilience to the psychological pain that leads to suicidal tendencies.

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