



BUILDING STRONG FOUNDATIONS: Advancing Comprehensive Policies for Infants, Toddlers, and Families



ZERO TO THREE
Early connections last a lifetime

From the Ground Up: Establishing Strong Core Policies for Infants, Toddlers, and Families

Because the earliest years of life are a period of incredible growth, they present an opportunity to shape strong and positive development. Good health, secure and stable families, and positive early learning environments are necessary to foster children’s physical, intellectual, and social-emotional development during this significant period.¹ Yet many young children and parents in the United States lack the needed resources to thrive, putting them at greater risk of material hardship, chronic stress, and poor health.² Federal and state policies can support vulnerable families and provide a buffer against stress and instability, but most existing programs lack sufficient resources to reach the large numbers of families who could benefit. Federal and state policymakers must be mindful of the unique needs of infants, toddlers, and families as they consider the policies and investments necessary to change the trajectories for our youngest children.

Current policies—and investments—fall short for infants, toddlers, and families

Early experiences matter—a lot. A child’s brain grows faster during the first three years than any other time, with more than a million new brain connections forming each second.³ Babies’ earliest experiences shape their development, creating a foundation on which future learning unfolds. Healthy development in the early years necessitates stability,⁴ particularly through positive, supportive relationships with trusted adults. Consistent access to safe housing, nutritious foods,

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adequate clothing and diapers, and medical care also provide young children with a sense of security, helping them to learn and grow.

But it's an uphill battle for many parents to provide their infants and toddlers with the stability they need. Parents of young children are especially vulnerable to financial insecurity, and they have lower household incomes than their peers without children or those whose children are 5 years or older.⁵ This is true, in part, because parents of young children are typically younger and earlier in their careers, with relatively lower earnings and less workplace flexibility. The lack of family-friendly policies in the United States also affects financial wellbeing. Only 14 percent of workers have access to paid family leave after a child is born, adopted, or newly fostered,⁶ leaving parents with the difficult choice of returning to work far too quickly or forgoing wages for an extended period of time—potentially even risking job loss. Nearly one-third of new mothers return to work within six days of giving birth.⁷ Parents who re-enter the labor force often face a shortage of available child care providers in their neighborhoods and a staggering price tag if slots are available.⁸ Many parents also lack paid sick leave, which is particularly challenging because infants and toddlers require frequent visits to the pediatrician for well-baby visits and are especially susceptible to colds and other minor illnesses.⁹ The responsibility of caring for sick children commonly falls on mothers, and a majority report having to take unpaid time off.¹⁰

The stressors that parents of young children face are significant enough to cause turmoil in any household. A large number of parents struggle with balancing the demands of work and family, and many—especially moms—report not getting enough support when they are stressed or overwhelmed.¹¹ While any parent would likely say that parenting is never easy, the economic burdens for those with infants and toddlers are unique, as they are earning the least at a time when their caregiving responsibilities—and related costs—are the most demanding.

Millions of children face significant adversity during a critical developmental period

Too many young children and their families face significant adversity during these early critical years. Roughly 41 percent of all infants and toddlers live in households earning at or below 200 percent of the federal poverty threshold, equivalent to \$38,156 or less for a family of three with one child in 2016.¹² Infants and toddlers are among those most likely to live in poverty.¹³

The vast majority of these parents are working—more than 80 percent of low-income children live in a household where at least one person is employed—but low-wage, low-quality jobs hold families back in a number of ways.¹⁴ On top of wages that will not support a family, most low-wage jobs lack employer-sponsored benefits such as health insurance and paid time off. When health issues arise, parents are left to choose between their own or their children's wellbeing and bringing home a paycheck.¹⁵ Irregular, unpredictable hours also characterize low-wage jobs. The vast majority of workers in hourly jobs experience fluctuations in the number of hours they work each week, and 41 percent don't



Who are infants, toddlers, and their families?

11.6 million children under age 3 live in the United States

- Roughly half are White, non-Hispanic, 26 percent are Hispanic or Latino, 13 percent are Black, and 4 percent are Asian
- 24 percent live in immigrant families in which one or more parents was born outside of the United States

Infants, toddlers, and families have high rates of economic hardship

- 2.3 million or 20 percent of children under age 3 live below the poverty threshold (\$19,078 for a family of three with one child)
- An additional 2.5 million live in households earning between 100 and 200 percent of the Federal Poverty Line (FPL) (\$38,156 for a family of three with one child)
- One in five young parents (under 30)—many of whom are parents of infants and toddlers—is poor

Most parents of infants and toddlers are working, but they are held back by low levels of education and poor quality jobs

- 62 percent of mothers with an infant or toddler participate in the labor force, and a majority work full-time
- 36 percent of parents with an infant or toddler have a high school diploma or less; 23 percent completed college coursework but have not earned a degree
- One in five mothers with an infant or toddler works in low-wage jobs, typically earning \$10.50 or less per hour

Children of color are a growing population and are overrepresented among children in poverty

- Between 2000 and 2010, people of color accounted for more than 90 percent of the U.S. population growth
- 69 percent of Black and 63 percent of Hispanic infants and toddlers live in low-income families, compared to just 33 percent of White infants and toddlers
- Women of color face significant wage gaps and are less likely to have access to paid family leave and paid sick leave

Source: CLASP analysis of 5-year ACS estimates (2011-2015); CLASP analysis of 2016 Current Population Survey, March Supplement; Bureau of Labor Statistics, "Table 6. Employment status of mothers with own children under 3 years old by single year of age of youngest child and marital status, 2015-2016 annual averages," U.S. Census Bureau, 2017, www.bls.gov/news.release/famee.t06.htm; Author's analysis of IPUMS-USA, University of Minnesota, www.ipums.org; Karen Schulman, Jasmine Tucker, and Julie Vogtman, *Nearly One in Five Working Mothers of Very Young Children Work in Low-Wage Jobs*, National Women's Law Center, 2017, <https://nwl.org/wp-content/uploads/2014/04/Nearly-One-in-Five-Working-Mothers-of-Very-Young-Children-Work-in-Low-Wage-Jobs-2017.pdf>; Jeffrey S. Passel, Gretchen Livingston, and D'Vera Cohn, *Explaining Why Minority Births Now Outnumber White Births*, Pew Research Center, 2012, <http://www.pewsocialtrends.org/2012/05/17/explaining-why-minority-births-now-outnumber-white-births/>; Zoe Ziliak Michel and Liz Ben-Ishai, *Good Jobs for All: Racial Inequities in Job Quality*, CLASP, 2016, http://www.clasp.org/resources-and-publications/publication-1/Race-and-Job-Quality-Brief-3_30ar.docx-FINAL.pdf; ZERO TO THREE, *National Baby Facts*, 2015, <https://www.zerotothree.org/resources/369-national-baby-facts>.

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know their schedules more than a week in advance.¹⁶ When parents cannot plan when and how much they will work, it is nearly impossible to budget for regular expenses, participate in additional training or education, or work a second job—much less devote stress-free, concentrated time and attention to babies' development.¹⁷ The burden of finding and affording reliable child care is even more pronounced for parents whose schedules fluctuate from week to week.¹⁸

Yet this is the reality for the 1.3 million mothers of infants and toddlers who work in retail, food service, hospitality, home health, child care, and other predominantly low-wage industries.¹⁹ Mothers of young children are overrepresented in low-wage work, earning \$10.50 or less per hour or \$21,840 per year if full-time. They are also disproportionately single, women of color, and immigrant women.²⁰

Low wages, volatile schedules, and a lack of paid time off both undermine parents' ability to care for their young children during a critical period of development and trap these families in a pattern of economic instability that echoes throughout their lives. Without adequate and consistent wages, low-income families are particularly vulnerable to experiencing food insecurity, being homeless or moving frequently, having their utilities shut off, and forgoing medical care due to costs.²¹ These stressors are often compounded by broader neighborhood disadvantage. Low-income families are more likely to live in neighborhoods with highly concentrated poverty, poor-quality housing, high rates of neighborhood violence, and few safe outdoor spaces for children to play.²²

Economic instability interferes with young children's development

The chronic, unrelenting stress and instability associated with immense financial hardship has immediate and lasting consequences on children's health and development, beginning even before a child is born.²³ Low-income women typically have poorer nutrition and greater stress, which can impair fetal brain development and health during pregnancy.²⁴ Economic stressors, combined with inadequate prenatal care for low-income pregnant women, are associated with higher rates of pre-term births and infant mortality.²⁵ Low-income children are more likely to experience obesity, asthma, developmental delays, and poor mental health.²⁶ Disparities in cognitive and social-emotional skills between low- and higher-income children are evident as early as 9 months of age. By age 2, low-income toddlers have smaller vocabularies and demonstrate poorer skills in early literacy and numeracy.²⁷

At the same time, low-income parents also face challenges with their own health and wellbeing. Mothers in particular are more likely to experience high levels of stress, depression, and other mental health problems, which can impair their ability to develop strong, positive bonds with their babies.²⁸ Irregular schedules make it difficult for parents to implement consistent household routines and leave less time for parents to devote uninterrupted time to activities that foster parent-child relationships

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and benefit babies' learning and development.²⁹ Moreover, when wages are hardly enough to make ends meet, parents have little left to spend on developmentally appropriate toys, books, and other materials frequently found in middle- and high-income homes.³⁰

These early disadvantages persist—and in some cases worsen—over time. Low-income children enter kindergarten up to a full year behind their higher-income peers in math and reading, and consistently score lower on measures of achievement and social-emotional skills over their academic careers.³¹ They are less likely to graduate from high school, to enroll in postsecondary education, and to earn a college degree.³² As adults, they experience greater unemployment, have lower incomes themselves, and experience poorer mental and physical health.³³

Many low-income children also face other risk factors, including living with a teen mother, in a household without English speakers, or with parents who lack a high school diploma.³⁴ Children affected by several adverse circumstances—three or more risk factors—are the most likely to experience school failure and other negative outcomes, including behavioral challenges.³⁵ Sixty-one percent of low-income infants and toddlers have one or more risk factors that increase the chances of poor outcomes later in life.³⁶

While the effects of poverty and instability are especially detrimental for infants and toddlers, targeted interventions during the first three years can mitigate or even eliminate negative outcomes and change the course for young children. These interventions should ensure that families with young children have a safe place to live, enough food to eat, and a stable income—and that parents are equipped with the skills necessary to develop strong bonds with their children and support their learning and development.

Economic hardship disproportionately affects young children of color and children in immigrant families

Children of color are a rapidly growing segment of young children in this country. In 2015, just over half of babies younger than 12 months were babies of color, and the Census Bureau projects that the United States will have no majority racial or ethnic group within the next several decades.³⁷ These shifting demographic trends are largely due to the rising number of millennial mothers—who themselves represent a more diverse population than the baby boomers before them—and the higher rates of childbirth among immigrant mothers from Mexico, South and Eastern Asia, Central America, and Africa.³⁸



Core Policies for Infants and Toddlers

CLASP and ZERO TO THREE identified 13 core policies that are foundational to the wellbeing of infants, toddlers, and families. These policies are rooted in evidence and allowable under current law. Each core policy addresses the needs of infants, toddlers, and families within a particular sector of our framework.

Healthy Bodies, Healthy Minds, and Healthy Parents

1. Low-income infants, toddlers, parents, and pregnant women should have **quality, affordable, publicly financed health insurance**.
2. Infants, toddlers, parents, and pregnant women should receive appropriate **health screenings, preventive primary care, and medically necessary treatment services**.
3. Infants, toddlers, and parents should receive appropriate **screening, diagnosis, and treatment services** to meet their **mental health needs**.
4. Low-income families with infants and toddlers and pregnant women should have access to **nutrition support programs**.

Economically Stable Families

5. Low-income parents of infants and toddlers should have access to **affordable education and training** to improve their employment opportunities.
6. Families in poverty with infants and toddlers should get **cash assistance and refundable tax credits** to supplement their earnings.
7. Parents with infants and toddlers should have **paid sick leave** from work when they are ill, when their child or a family member is ill, or to obtain preventive care for themselves or their families. Parents should have **paid family and medical leave** when a child is born, adopted, or newly fostered.
8. Low-income families with infants and toddlers should have **affordable, safe, and stable housing**.

Strong Parents

9. Families of infants and toddlers should have access to a continuum of **parent support services and resources** to support their child's development.
10. Infants and toddlers in the **child welfare system** should receive **developmentally appropriate supports** responsive to the needs of the child and family.

High-Quality Child Care and Early Education Opportunities

11. Low-income families with infants and toddlers should get **child care assistance** to afford safe, stable, high-quality child care that promotes child development and parents' education, training, and work.
12. Vulnerable infants, toddlers, pregnant women, and families should have access to **comprehensive early childhood services through Early Head Start**.
13. Infants and toddlers with developmental delays or disabilities should be **identified** and receive **early intervention services** in a timely manner.

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Children of color will soon comprise a substantial portion of our nation's future students, workers, and parents—as will children in immigrant families, who already comprise one-quarter of children under the age of 5.³⁹ Yet decades of discriminatory policies continue to present barriers to quality educational opportunities, good-paying jobs, home ownership, and broader financial stability for families of color and immigrant families.⁴⁰ Black and Hispanic infants and toddlers are roughly twice as likely to live in low-income households compared to their White peers, and they are also more likely to experience poverty for longer periods over the course of their lives.⁴¹ While the median annual household income for a White couple with one or more young children is over \$84,000, similar Black and Hispanic couples earn just \$53,200 and \$45,000, respectively.⁴² More than half of all children in immigrant families are low-income.⁴³

Consequently, children of color and children in immigrant families disproportionately experience living with food and housing insecurity, in unsafe neighborhoods, and without access to health insurance.⁴⁴ Their parents are under greater stress as well. Parents of color are more likely to report they are in fair or poor health and that it is very or somewhat often hard to get by on their income.⁴⁵ Immigrant parents face additional challenges related to language, access to public programs, low levels of education, and authorization status.⁴⁶ These economic and family stressors have significant consequences for children's health and development. The infant mortality rate for Black babies is twice that of the national average, and in 33 states over 10 percent of Black infants die before they reach age 1.⁴⁷ Parents of Black and Hispanic children—especially boys—also report concerns about their children's development that put them at greater risk for developmental delay.⁴⁸ While immigrant parents are less likely to report that their child has a chronic health or developmental condition, they are more likely to report that they lack access to preventive care services and that their child is in poor health.⁴⁹

The extraordinary prevalence of poverty, economic insecurity, instability, and stress in the lives of young children and their families places America's future directly at risk. Decades of developmental research tell us that the earliest years of children's lives are especially critical. By neglecting the needs of vulnerable infants and toddlers, we are squandering an opportunity to ensure all children have a strong foundation in life.

Federal and state policies make a difference for infants and toddlers—but there is much more to do

This grim picture of the lives of millions of low-income infants and toddlers—and the lifelong consequences of poverty—suggest that it's time for a bold policy agenda that invests in and optimizes proven core programs and seizes new opportunities to make policies work better for families and reduce disparities among them.

With funding from the W.K. Kellogg Foundation, CLASP and ZERO TO THREE are leading an initiative to identify federal and state policy actions that advance the field in addressing the wellbeing of infants, toddlers, and families. *Building Strong Foundations: Advancing Comprehensive Policies for Infants, Toddlers, and Families* is guided by a framework that outlines the needs of infants and toddlers, recognizing that all children benefit from healthy bodies, healthy minds, and healthy parents; economically stable families; strong parents; and high-quality child care and early education opportunities.

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Within this framework, ZERO TO THREE and CLASP identified 13 core policies we consider foundational. Each has the potential for long-term positive impact on children and families. Moreover, each policy meets one or more of the following criteria:

- Positively affects a significant portion of infants, toddlers, and families;
- Helps to level the playing field for the most vulnerable infants and toddlers; and/or
- Addresses disparities faced by racially and ethnically diverse infants, toddlers, and families.

Core policies have a strong research or evidence base and target the needs of infants, toddlers, and families within one sector or area of our framework. Moreover, these core policies are allowable under current law—and the groundwork of many policies has already been laid at the local, state, or federal level. Strong core policies are necessary to build comprehensive systems of support for infants, toddlers, and families.

Healthy Bodies, Healthy Minds, and Healthy Parents

Good physical and mental health is one of the most important factors for babies' and their parents' overall wellbeing. Infants and toddlers need to be in good health to learn and grow properly. Parents need to be healthy, too, in order to provide for their families and spend quality time with their children.

Publicly financed health insurance is a critical gateway to support babies' and parents' access to health care services. Children and parents with insurance are healthier overall and more likely to receive preventive health care and medically necessary treatment when sick or injured.⁵⁰ Presently, Medicaid and the Children's Health Insurance Program insure more than 45 million children in low-income families and are the largest insurance providers for children with significant health and developmental problems. Thanks to recent expansions in the Medicaid program among 32 states and the District of Columbia through the Affordable Care Act,⁵¹ more parents obtained public insurance coverage, which in turn has led to more children enrolling in Medicaid.⁵² Growing evidence shows that children enrolled in Medicaid in their early years not only do better than children without health insurance in childhood, but also have better health, educational, and employment outcomes in adulthood.⁵³

Affordable, comprehensive health insurance plans help to remove the financial barriers to health services and increase the likelihood that parents and children will get the medical care they need.⁵⁴ But health insurance coverage alone isn't enough to ensure access to necessary services and treatment. Children and families need the full range of preventive, acute, and specialty health care services — ideally in the context of a medical home — to ensure they grow healthy and strong.⁵⁵ Public investments



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in state health care systems and local service providers help to ensure that infants, toddlers, parents, and pregnant women have access to medically necessary treatments, reducing costly services later and improving overall health outcomes.⁵⁶

Similarly, children and families need access to appropriate services to support their mental health. Positive social-emotional development—synonymous with infant and early childhood mental health—is foundational for children’s learning and relationships with adults and peers.⁵⁷ Mental health supports in early care and education and pediatric settings can help promote positive social-emotional development, and age-appropriate treatments can address mental health problems in young children.⁵⁸ Because infants and toddlers have unique needs, public policies should focus on building

a strong infant-early childhood mental health system to prevent, identify, and treat mental health problems in infants and toddlers. Public investments in mental health care can also increase adults’ access to screenings and services, improving the wellbeing of parents and young children alike.⁵⁹

Nutritious foods are also essential for good health and strong development. Nutrition assistance programs help families afford food, thereby reducing food insecurity and increasing healthy eating. Access to healthy foods is associated with lower incidences of low-birth-weight babies and infant mortality, as well as positive developmental and educational outcomes for children.⁶⁰



Economically Stable Families

Economic instability is often at the core of other challenges faced by young children and their families. The volatility of low-wage work—including unpredictable scheduling and a lack of paid leave—means that many working parents are not able to count on a steady paycheck. This makes it hard to comfortably afford even basic necessities like groceries, utilities, and rent. It also means that even minor shortfalls, such as a need for gas to get to work, can further destabilize families. Infants’ and toddlers’ parents need good jobs in responsive workplaces with fair scheduling, paid sick days, and family and medical leave.

Universal paid leave is critical to reduce instability for all families, particularly those in low-wage jobs. Paid family and medical leave allows workers to take time off without worrying about lost wages or job loss so they can care for themselves and their family members after a child is born, adopted, or newly fostered, as well as during medical incidents. In addition to supporting the health of new moms and babies, paid family leave promotes strong parent-child relationships and provides a foundation for positive development in the first few months of babies’ lives. Research consistently demonstrates that paid sick leave has important benefits for adults’ and children’s health—and also improves workplace productivity and employers’ retention rates.⁶¹

Increasing the economic security of families over the long term also requires improving parents’ employment opportunities. Education and training programs provide working parents with important skills, opening doors to better quality jobs and more stable income. Participating in workforce development programs is linked with higher levels of employment, greater earnings, and lower levels of public assistance.⁶² Programs are most effective when they provide workers with employable skills, when they lead to a credential recognized by employers, and when financial support is coupled with wraparound services to help students address barriers to completion.⁶³

When workers’ wages are not sufficient to make ends meet, income supports including cash assistance and refundable tax credits are critical to bridge the gap. Families who receive cash assistance

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and refundable tax credits use the benefits to purchase basic household necessities they otherwise could not afford. These programs reduce the number of families in poverty every year.⁶⁴ Boosting income is particularly beneficial during the early years of children's lives, when instability is most harmful to developing minds and bodies.⁶⁵

Finally, housing assistance helps families obtain safe and stable housing by offsetting the cost of rent or by providing them with temporary housing during periods of homelessness.⁶⁶ Families who receive housing assistance are less likely to experience homelessness, to live in overcrowded housing, and to move frequently.⁶⁷ Housing assistance can also help families live in safer neighborhoods, where infants and toddlers are less likely to be exposed to crime and violence.⁶⁸ Consequently, children who receive housing assistance are more likely to have a healthy weight and to be rated higher on measures of wellbeing.⁶⁹ Moreover, with support to offset the cost of housing, families have more resources to purchase nutritious food, health care, and other necessities⁷⁰ that further support children's health and development.

Strong Parents

Infants and toddlers need strong parents who are adequately supported and have effective parenting skills. All parents want to give their children the best start in life, but many lack the capacity and resources to fully nurture their children's development. Parenting support services, which range from informational resources to more intensive interventions, can help fill these gaps. Evidence-based interventions—such as home visiting programs—that focus on educating and empowering parents are proven to improve parenting skills, support parent-child relationships, and promote children's health and development.⁷¹ Making these interventions available while mothers are still pregnant or shortly after babies are born can help to reduce the likelihood of problems later.

A well-functioning child welfare system attuned to developmental needs is critical for those children who experience abuse or neglect. Infants and toddlers are in a rapid period of development, and those who are victims of maltreatment benefit from a system that prioritizes establishing permanency, identifying and addressing developmental needs, and promoting strong relationships between children and their caregivers. Yet few states differentiate their policies and procedures or equip child welfare staff with the necessary skills to meet the unique needs of infants and toddlers.⁷²





High-Quality Child Care and Early Education Opportunities

Families with infants and toddlers need high-quality, affordable early care and education programs that support child development, promote parents' engagement in children's learning, and allow parents to work or go to school. Government investments in early care and education systems ensure these services are available to those who need them most but face the biggest barriers to access, including families in poverty, low-income working parents, and children with special needs.

High-quality early care and education starting in infancy provides children with a strong foundation, creating a base for all learning that follows. High-quality early learning environments address the needs of the whole child by providing responsive, skilled caregivers; safe and healthy environments; and connections to supports in the community. Access to these services starting in infancy is linked with children's school readiness, academic achievement, and wellbeing in adulthood.⁷³

These programs also have important benefits for parents. When parents have access to subsidies that offset the cost of child care, they are more likely to purchase reliable, higher-quality care, which in turn supports stable employment.⁷⁴ Early childhood programs that address family engagement and provide parenting support also affect such parental behaviors as heightened engagement in activities that support children's learning and development, increased attention during play, reduced spanking, and improved involvement in school.⁷⁵

Some infants and toddlers need specialized interventions in order to thrive. Infants and toddlers experiencing developmental delays or disabilities need targeted services to meet their developmental milestones, and parents and caregivers need extra support to understand how to best meet their children's unique needs. Early intervention can reduce or even eliminate the need for more intensive services later.⁷⁶

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Now is the time to act

Defending, supporting, and improving existing core programs are of utmost importance for our nation's economic wellbeing. When infants, toddlers, and parents have the supports they need to succeed, families are stronger and more stable. This not only creates safer and more productive communities, but also helps build the nation's economy by empowering our future workforce. While the evidence is abundant, it must now be translated into action. The United States has an existing framework of supports and services for families with young children, but too many of these programs are working under severely limited budgets and are not responsive to families' growing needs. What's more, the unique needs of infants, toddlers, and families go unrecognized, which limits their effectiveness for our nation's youngest children, who are often also the most vulnerable. While there is no universal strategy for addressing these challenges, investments that address the interconnected needs of young children and their families are likely to achieve the greatest outcomes.⁷⁷ Public support for many of these policy solutions is strong.⁷⁸ The time to act is now. Our nation's future depends on it.

**Authors: Rebecca Ullrich,
Patricia Cole, Barbara Gebhard,
Hannah Matthews, and Stephanie Schmit**

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