Expressions India

The National Life Skills, Values Education & School Wellness Program

Healthy Schools ...... Healthy India

Education is not preparation for life..
Education is life itself
- John Dewey

Table of Contents

EDITORS' MESSAGE

One of the main aims of education is the holistic development of an individual, which includes the development of mind and self. How this development unfolds is influenced by the internal endowments of the individual on the one hand, and draws from the culture and context in which he/she lives and grows on the other. Developmental Psychology, Childhood and Adolescence Studies, in contemporary times have highlighted the co-existence of multiple childhoods and adolescences, emanating from a pluralistic and diverse social landscape, as also from the uniqueness of individual experiences. Recent researches in Psychology and Cultural Anthropology point to the cultural rootedness of cognition and emotions. There is thus a need to build meaningful discourse about the interface and intersections between education, mind and culture. This becomes all the more crucial since the universalistic and a-cultural understandings of mind and education continue to be questioned. In this light, there is also a need to revisit understanding as related to childhood and adolescence from the purview of developmental psychology and mental health.

Of equal importance is the framework provided by the contemporary rights-based perspective in which child rights, human rights, and the right to education have become extremely significant. An understanding has to be built about both the global and local scenario in this regard. The meaning of childhood seems to change with the contours of the social, cultural, economic, and political ethos of a society, as is reflected in contemporary research writings and cinema. The various socio-cultural processes, like modernisation, globalisation, westernisation, industrialisation, marketization, and cybernation are known to impact institutional life - be it family, school, or college, in varied ways. This needs to be a key area of research exploration.

Another aspect that needs focus is the promotion of mental health in schools and colleges, which can enable the younger generation to deal with the various life challenges related to growing up in a fast- changing world. This would require the development of life-skills, self-awareness, knowledge of self-directive methods and strategies, and awareness of one's rights and legal provisions. Further, issues related to mental health, such as bullying, cyber-crime, internet addiction, selfie addiction, pornography, masking of the self through social networking, and the like, transcend barriers of age and context. These issues place a large onus of responsibility on family as an institution, and on the educational institution which a child attends, for the protection of rights and promotion of mental health and wellbeing.

Mental health of children has never been considered as an essential concern, despite it being one of the most significant rights of a child. Sound health has been understood in terms of physical health, freedom from disease; whereas mental health has been as associated with mental illness, which is stigmatised and hence ignored, even when parents and family are aware of the problem. It is critical for the healthy development of children that all the stakeholders - parents, family, community and the state, both realise and take all the essential steps for ensuring the holistic mental health and well-being of children.

With this understanding, the present volume brings together papers and reflections that depict the vast expanse of the ideas of childhood(s) and adolescence(s) in India and the issues that concern them.

Dr. Vikas Baniwal   **Namita Ranganathan**
Post-Doctoral Fellow   Professor
Indian Council of Philosophical Research   Department of Education,
                                                                                    University of Delhi

MESSAGE

I am excited to know that the Expressions India is publishing the latest issue of the Indian Journal of School Health. Journals in general have been one of the most potential means of sharing research based scientific knowledge and experiences not only with the larger groups of specialists, experts and activists working in the concerned area, but also with all the persons having interest in that area at large. The Expressions India has been doing pioneering work since long in the field of Health Education under its banner of "Holistic Health and School Wellness Programme" to enable

the school education and teacher education systems to realize the goal of Health Education in Schools. The present publication is a momentous indicator of this initiative I congratulate the Advisory group, Members Editorial Board and the entire team of Expressions India on publication of the Journal. It is a universally accepted fact that the precondition for all development is healthy physical, mental, emotional development, especially in young children, as it supports their cognitive development and enrichment of their holistic health and wellbeing. Which is why, right from the Report of the Bhore Committee (1946), followed by the Reports of all the Education Commissions and Committees have recommended the integration of Health Education in the School Curriculum. The National Curriculum Frameworks 1975, 1988, 2000 and 2005 also have made it a compulsory subject up to secondary stage. But the ground realities have been categorically demonstrating since long that the transaction of this subject area in schools has been far from satisfactory. So far so, that it has not even been treated at par with the core subjects. The major bottleneck in the way of realization of the objective of Health Education has been the particularistic conceptualization of its transaction process. Even though the National Curriculum Framework 2005 made a paradigm shift and recommended multidimensional pedagogy for transaction of this curricular area, it is being transacted by adopting only scholastic approach. The goal of development of holistic health and wellbeing of young learners cannot be attained by making them gather certain information and rote-learn those. It can be attained only by laying more focus on co-scholastic methodology that ensures active participation of learners and substantially contributes to the

development of life skills which enables young children to manage their lives more competently and grow as truly empowered human resource of the nation and of the human society at large. To facilitate this process it is very critical to encourage and empower the teachers, so that they act like facilitators and mentors. It is in this context that the formal school education system needs to look towards taking the support from the initiative like the one taken by Expressions India under its National Life Sills Education & School Wellness Programme aimed at realizing the Goal of HEALTHY SCHOOL ...... HEALTHY INDIA.

I am more than confident that the present issue of the Journal will strengthen this grand endeavour and empower all who are creatively engaged in the promotion of Health Education in Schools. It is urgently needed to employ the transaction methodology well tested through the pioneering pursuits being made by Expressions India. "If there is will, there is way, and if the will is reinforced by enlightened path-breakers, the way would lead to the destination at the earliest ".

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Prof. Jawahar Lal Pandey,
Professor & National Coordinator,
NPEP & Adolescence Education Programme (Retd.)
National Council of Educational Research and Training
Sri Aurobindo Marg, New Delhi

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MESSAGE

For a nation in transformation, education and health care are dynamic indicators of progress. Studentscan learn well in a healthy and safe environment. Looking into the wide spectrum of comprehensive education the schools need a serious and closer appraisal. United Nations Convention on the Rights of the Child (1989) to which India is a signatory, prescribes that, every child has the inherent right to life, survival and development, including the right to the highest attainable standard of health and to facilities for, the treatment of illness and the rehabilitation of health.

The committee on school health (popularly known as the Renuka Ray committee), set up in 1960, recommended that "Health education should be included as part of general education in the primary, middle and secondary school." The report of the committee provided guidelines and recommendations for both content and appropriate inclusion of health at various stages of schooling. In the wake of National Health Policy, 1983, and the National Policy on Education, 1986 (Revised 1992), steps were initiated to look at school health in a more comprehensive manner.

With higher school enrollments and the Right to Education in place , schools have become nodal centers for heath education programmes . It has also been noted that schools are the key forums for acquisition of health related knowledge , attitudes and life skills . They are indeed the wealth of the nation, enriching the empowerment of children towards responsible citizens.

Schools have an important role to play in equipping children with the knowledge, attitudes, and skills they need to protect their health. Skills-based health education should be part of the curriculum frame work. Its purpose is to strengthen efforts to implement quality life skill-based health education on a national scale worldwide.

Therefore a strong need is being felt for a Comprehensive School Health journal that scientifically reinforces the vision of Health Promoting Schools and subsequently gets integrated within the education system in India. The Indian Journal of School Health & Wellbeing is a step in this direction. I have the pleasant task of recording my deep appreciation for and thanks to all the Advisory group, Editorial Board and Members of the Executive Editorial for their valuable contribution, ungrudging cooperation and keen interest taken. I must also thank the Members for making available the benefit of their rich experience and knowledge.

I conclude with the note that, there has to be a ground swell of commitment from the parents, teachers, Government authorities, civil society organizations and students so far as the creation of a healthy, safe and cosseted environment in the school is concerned. It has been rightly and very aptly stated, "If there is to be a light at the end of the tunnel, it is our responsibility to hold the torch high enough to provide a beacon of light bright enough and strong enough for our children to follow." Schools, educators & practisioners are cordially invited to contribute their good practices, research, training & specific programs for publication in this pioneering Journal.

Dr. Jitendra Nagpal, M.D., D.N.B.
Program Director–'Expressions India'
The National Life Skills, Value Education &
School Wellness Program
Sr. Consultant Psychiatrist & Incharge
Instt. of Child Development & Adolescent
Health Moolchand Medcity, New Delhi

GUIDELINES

Submission Guidelines

➤ All submissions should follow the APA 6th Edition style.

➤ All submissions should have an abstract summarizing the main points.

➤ The submission should have a clear and informative title.

➤ The submission should be original and should not be in the process of consideration by any other publication at the same time.

➤ The submission should have rigorous and reliable information and provide a deeper level of understanding.

➤ Submissions should be engaging and accessible to non-expert readers as well.

➤ Brief information and a line of works of the author should be sent as a separate cover note.

➤ Initial acceptance of any submission does not guarantee publication. The editorial board shall do the final selection.

➤ If necessary, the editors may edit the manuscript in order to maintain uniformity of presentation and to enhance readability.

Types of Manuscripts and Word Limits

1. Original Research Papers: These should only include original findings from high quality research studies. The word limit is 5000, excluding references and an abstract (structured format) of not more than 250 words.

2. Brief Research Communication: These manuscripts, with not more than 1 table/figure, should contain short reports of original studies or evaluations and service-oriented research which points towards a potential area of scientific research or unique first-time reports. The word limit is 1500 words and an abstract (structured format) of not more than 150 words.

3. Case Reports: These should contain reports of new/interesting/rare cases of clinical significance or with implications for management. The word limit is 1500 words and an abstract of not more than 150 words.

4. Review Articles: These are systemic and critical assessments of the literature which will be invited. Review articles should include an abstract of not more than 250 words describing the purpose of the review, collection and analysis of data, with the main conclusions. The word limit is 5000 words excluding references and abstract.

5. Grand Rounds in child psychiatry/ psychopathology (Case Conference): This should highlight one or more of the following: diagnostic processes and discussion, therapeutic difficulties, learning process or content/technique of training. This may be authored by an individual or a team, and may be an actual case conference from an academic department or a simulated one. The word limit is 1500 words.

6. Viewpoint: These should be experience-based views and opinions on debatable or controversial issues that affect the profession. The author should have sufficient, credible experience on the subject. The word limit is 3000 words.

7. Commentaries: These papers should address important topics, which may be either multiple or linked to a specific article. The word limit is 3000 words with 1 table/figure.

8. Literary/ Child Psychology / Developmental

studies/ Psychiatry/ Disability studies/ Education for mental health: Original contributions are welcome which cover both literature as well as mental health. These can be in the field of poetry, drama, fiction, reviews or any other suitable material. The word limit is 2000 words.

9. My Voice: In this section multiple perspectives are provided by patients, caregivers and para-professionals. It should encompass how it feels to face a difficult diagnosis and what this does to relationships and the quality of life. Personal narratives, if used in this section, should have relevance to general applications or policies. The word limit is 1000 words.

10. Announcements: Information regarding conferences, meetings, courses, awards and other items likely to be of interest to readers should be submitted with the name and address of the person from whom additional information can be obtained (up to 100 words).

NB - Specific innovative/new ideas or newly emerging concepts for the sections are actively encouraged.

**Sending the Manuscripts to the peer-reviewed and refereed
Indian Journal of School Health and Wellbeing (IJSHW)**

Entries are to be submitted via e-mail to:

Dr. Jitendra Nagpal – MD, DNB
Program Director "Expressions India"-
The National Life Skills, Values Education & School Wellness Program
Sr. Consultant Psychiatrist & Incharge
Instt. of Child Development & Adolescent Wellbeing
Moolchand Medcity, New Delhi

Web: www.expressionsindia.org,
Email: contactexpressions.india@gmail.com.   expressionsindia2005@gmail.com,

Research Articles

Nurturing and Supporting Children with Intellectual Disability: Implications for Education

Ms. Charu Sharma* & Ms. Ravneet Kaur**
*Assistant Professor, University of Delhi
**Assistant Professor, University of Delhi

Abstract

In this paper, the conceptual foundations of intellectual disabilities and their implications for education have been discussed by laying emphasis upon the nature and needs of children with this disability. The paper is an attempt to critically analyse the provisions and measures for the wellbeing of children with intellectual disability. The paper presents intellectual disability in an integrated manner together with the search for its implications in education. It can be reiterated that parents as well as teachers make a tremendous impact on the lives of children, especially those with intellectual disability. There is a significant need to intervene in the circumstances of such children in order to emerge as "better teachers", by evaluating the gross realties of the educational systems. The paper highlights the challenges and difficulties encountered by children with intellectual disabilities in inclusive settings, the implications for teachers, and the role of pre-service and in-service teacher preparation programs.

Keywords: Children with special needs, disability, inclusive education

Introduction

A person and his/her cognition consists of intellectual or cognitive processes which make the person understand their inner and outer world, emotions, aspirations, psychological needs, temperamental inclinations, habits and behaviours. Cognition refers to the psychological processes of acquiring knowledge and understanding through thought, experience, and the senses. The seven basic processes underlying cognition involve attention, perception, memory, concept formation, concrete and abstract thinking, planning and problem solving, and meta-cognition; which should be developed and enhanced in an individual (Auluck, 2007).

There is a strong inter-relationship between an individual's cognition and intelligence. General intelligence refers to the capacity arising from the effectively working cognitive processes. According to Thorndike (1920), intelligence can be categorized into three major types - concrete, social and abstract intelligence. Concrete intelligence refers to the ability of an individual to comprehend actual situations and to react to them adequately and social intelligence involves the 'ability to understand and manage other people to act wisely in human relations' (Thorndike, 1920). On the other hand, abstract intelligence is human enquiry at the levels of neural, cognitive, functional, and logical from a bottom-up processing approach.

Another eminent psychologist, Howard Gardener (2006), evolved a multiple intelligence theory which proposes that intelligence in any individual is multi-faceted and involves linguistic, bodily-kinaesthetic, spatial, musical, interpersonal,

intrapersonal and naturalist intelligences. Logical-mathematical intelligence refers to the ability to detect patterns, reason deductively and think logically. Linguistic intelligence involves the ability to effectively manipulate language to express oneself rhetorically or poetically. Spatial intelligence is the ability to manipulate and create mental images in order to solve problems. Musical intelligence encompasses the capabilities of recognizing and composing musical pitches, tones, and rhythms. Bodily-kinesthetic intelligence is the ability to use one's mental abilities to coordinate one's own bodily movements. Interpersonal intelligence refers to the ability to understand and discern the feelings and intentions of others. Intrapersonal intelligence refers to the ability to understand one's own feelings and motivations.

Since the intelligence of children with an intellectual disability is impaired to different degrees, their cognition gets affected according to their specific difficulties. Parents and teachers need to be mindful of this fact when interacting with children with intellectual disability. Intellectual disability refers to the condition of an extremely diverse group of individuals, which range from children with severe developmental disabilities to young adults with mild delays, who are sometimes indistinguishable from others. Intellectual disability is characterized by specific limitations in general mental abilities and adaptive functioning whicht emerge during the course of children's development (APA, 2013). Such limitations are evident in comparison to others of the same age, gender, and social-cultural background. All individuals with Intellectual disability show significantly low intellectual functioning. These individuals have problems perceiving and processing new information, learning quickly and efficiently, applying knowledge and skills to solve novel problems, thinking creatively and flexibly, and responding rapidly and accurately. In children approximately five years of age and older, intellectual functioning is measured using a standardized, individually administered intelligence test, popularly known as Intelligent Quotient (IQ).

Individuals with Intellectual Disability show identifiable deficits in adaptive functioning. Adaptive functioning refers to how effectively individuals cope with common life demands and how well they meet the standards of personal independence expected of someone of their particular age group, social-cultural background, and community setting (American Psychiatric Association, 2013). While intellectual functioning refers to people's ability to learn information and solve problems, adaptive functioning refers to their typical level of success in meeting the day-to-day demands of society in an age-appropriate manner. DSM-V Manual identifies three domains of adaptive functioning: conceptual, social, and practical. These domains were identified by using a statistical procedure called factor analysis to determine groups of skills that tend to co-occur in individuals with developmental disabilities. To be diagnosed with Intellectual Disability, individuals must show impairment in at least one domain (Weis, 2013). Usually, children with Intellectual Disability experience problems in multiple areas, described below:

- Conceptual skills which includes understanding language, speaking, reading, writing, counting, telling time, solving math problems, the ability to learn and remember information and skills.
- Social skills involving interpersonal skills, following rules, social problem-solving, understanding others, making and keeping friends.
- Practical skills, which includes activities of daily living like personal care, safety, home activities, school/work skills, recreational activities, and using money.

It is pertinent to keep in mind that Intellectual Disability is characterized by low intellectual functioning and problems in adaptive behavior. Many people erroneously believe that Intellectual Disability is determined solely by IQ testing; but deficits in adaptive functioning are equally

necessary for the diagnosis. For example, a child with an IQ of 65 but with no problems in adaptive functioning would not be diagnosed with Intellectual Disability. Finally, all individuals with Intellectual Disability show limitations in intellectual and adaptive functioning early in life. Although some people are not identified as having Intellectual Disability until they are adults, they must have histories of intellectual and daily-living problems, beginning in childhood. This age-of-onset requirement differentiates Intellectual Disability from other disorders characterized by problems with intellectual and adaptive functioning, such as Alzheimer's Dementia (i.e., cognitive deterioration seen in older adults).

Specific Needs of Children with Intellectual Disability

There are some predominant features of the functioning of the mind which can be identified in 'Children with Intellectual Disability' (CWID). Children with intellectual disability have difficulty in learning because their intellectual functions show incomplete development in terms of everyday behaviours; such as observation, memory, analyses and generalised thinking. They show concrete thinking, rather than abstract thinking, and possess simpler world views rather than complex ones. The mistake we commit is of dragging them into our own world. Since parents and other family members play a very important role in their education, they should avoid imposing their standards of judgments on CWID. Furthermore, CWID take more time than others to move from others' regulation to self-regulation and therefore we must patiently give them that time to make the transition.

Another significant issue is in understanding the barriers to growth and a fuller life of children with intellectual disability. Such barriers include a lack of appropriate interventions, education and training, work opportunities, impoverished social learning situations, non- understanding of psychological needs including social and emotional needs, and non-expectations of their role and responsibilities. There is also an immense stigma attached to Intellectual Disability which leads to faulty attitudes towards CWID; arising due to a lack of knowledge regarding CWID in society at large. The attitudes towards CWID are manifested explicitly in the non-acceptance, neglect and marginalization of individuals with intellectual disability. The utilitarian notions of the larger society, including their own family, grossly undermines their potential and abilities.

Sinclair and Franklin (2000) provide a very helpful explanation of the primary reasons for, and the benefits of, including children with intellectual disability in decision-making. It is essential that children with intellectual disability be provided opportunities to participate meaningfully, for the enhancement of their intellectual development and to build adaptive skills and independence. It is advisable to conceive of the participation of children with intellectual disabilities in factors that influence their lives, on three different levels. First, children must be given the right to make decisions about the most basic aspects of their lives, such as their preference of food, clothing and so on. This lack of everyday decision-making can contribute to developmental delay, lethargy and greater levels of dependence in children with intellectual disability. Without regular opportunities to make basic decisions, children with an intellectual disability will not be prepared for making more challenging decisions about their lives and will therefore continue to be dependent on others.

Another level of choice-making involves their participation in major decision-making that can have a lasting impact on their lives, such as undergoing medical treatment, and choices about schooling. During a process of de-institutionalization, these decisions might include where they would like to live and with whom. Ensuring that parents/caretakers have the skills to assist children rather than make decisions on their behalf, is especially important when children reach an age at which they would typically take increasing responsibility of their own lives (WHO, 2010).

The progression of involving a child in these levels will not only improve the quality of life for that individual child and his or her family; it will also ensure the development of daily living skills and independence, thereby ensuring that these children are able to be productive members of their families and wider society. The skills needed to make choices and decisions regarding one's life are dependent as much on experience as they are on age and ability, including any impairment.

Children with Intellectual Disability in Inclusive Settings

The persons with intellectual disability encounter immense challenges. Some of these challenges include inadequate conceptual learning, which creates confusion in comprehending the demands of living and one's environment. Furthermore, the piling up of experiences of failure kills the initiative for learning, building up a resistance towards it instead. Frequent rejections of parents and others, and a lack of positive experiences in general, creates severe blows to the self-image of CWID; causing many emotional and behavioural difficulties. They are forced to have to deal with serious deprivations and insults as well. The majority of children with intellectual disability have no access to education, training, employment and other opportunities that help us live a life of dignity. They are denied the normal pleasures of life and constantly have to cope with their dependency on other people. There is a lot of social stigma, isolation, neglect and ridicule, a lack of learning opportunities, schooling and productive work that accompanies a learning disability (UNESCO, 2009).

The parents of children with intellectual disability deal with a loss of self-image and the consequent grief, sadness and frustration which is a long internal struggle. They often lack proper understanding about intellectual disability and its impacts on the person. They have a need for building up psychological and physical resources, and to manage the demands of time and energy with patience. The parents often struggle, due to lack of required support services.

There are several misconceptions about persons with intellectual disabilities prevailing in our society. One such misconception is that they always remain as children; stubborn and aggressive in most circumstances. Another misconception is that they cannot understand what is being told to them, so other individuals tend to treat them as objects. It is also wrongly believed that they are unable to control their impulses, and hence they cannot learn self-discipline and self-regulation.

Inclusive Education: Implications for Different Stakeholders

In inclusive school settings parents, teachers, school authorities and other community members have more significant roles to play by providing more efforts to guide children with intellectual disability. Besides, parental care and a conducive school culture are all beneficial to the development of children with intellectual disability and their integration into society. Auluck (2007) has recommended some provisions for different stakeholders working for the betterment of children with intellectual disabilities, as summarised below:

Role of the Parents: Parents should explain the needs of their child to teachers the while or before admitting the child in the school. Parents should consider discussing their child's abilities, difficulties, strengths, needs, and past performance regarding learning, while communicating with school authorities. Parents should inform teachers about certain precautions and measures to be taken while interacting with their children during co-curricular activities, and about particular areas for their child's improvement. The parents can serve as volunteers in the school so as to get to know the school practices and be familiar with the teachers, as well as to support the school to promote a culture of mutual care and support.

Role of School Authorities: The school should adjust their demands and expectations according to the abilities of children with intellectual disability and align them with the expectations of parents.

The child's study should be arranged in a quiet and undisturbed area by setting up a regular school-home schedule which would allow for reasonable breaks in between tasks. The child should be reminded of the activities of the day before she/he attends school and be reminded of the required behaviours and be praised in order to reinforce good behaviours.

Role of the Teachers: Teacher must adopt the same strategies to help children with intellectual disability. The child should be guided to repeat the learned contents of the day in order to facilitate thinking and memory. Every opportunity should be captured in daily life to teach the child. For instance, by directing the child's attention to words on signboards, encouraging child to calculate change when making purchases, reading descriptions on packages, and reading subtitles when watching television. The learning matter should be broken down into smaller tasks with steps and the child should be able to learn at his/her own pace. The child should be helped by using concrete examples and materials to understand abstract concepts. The lessons should be revised and demonstrated for the child by providing examples before working on exercises. The child can be requested to repeat the instruction in order to ensure that he/she understands the demands of the task. Teachers should make use of multi-sensory learning materials to enhance learning; such as pictures, music, stories, charts and so on. Teachers should also make use of different computer software for practice with such children.

Role of Peer Support Systems: The family and school should try to create a strong peer support system for the child in the classroom, while doing activities. The school should also arrange a patient and helpful peer to sit next to the child and to offer help when needed (Auluck, 2007).

Implications for Teacher Education

First of all, we should begin by discussing the broad aim and purpose of education. Education should not to be equated with academic learning.

It has a larger purpose encompassing all aspects of one's being, by building upon the vast repertoire of knowledge. Education adds complex concepts and abstraction, enhancing the richness of our imagination and thinking, and sharpens our intellectual functions. If parents and teachers keep reminding themselves about the above, it will change their whole approach and interactions with a child / adult with intellectual disability. While helping individuals with intellectual disability, our own approach towards teaching and learning should change depending upon the needs and requirements of the child.

Education, when conceived holistically, can contribute immensely to the overall development of a child, which includes cognition, emotion, and behaviour. It involves better self-direction and self-regulation, emotional and social well-being, sense of self-worth, and thereby enables the individual to become a better learner. It would enhance flexibility of mind, widen the horizons of thinking, and enhance one's capacity for adaptation and an enhanced quality of life

Auluck (2007) suggested that the need for a paradigm shift is required in the minds of professionals and parents, from the prevalent medical to social model; from Welfare to Rights perspective and the shift from disability to diversity, in order to understand persons with intellectual disability. The implication of this shift would be to divert attention from the disabilities and problems of the children with intellectual disabilities. There are professional and vocational programmes which can be initiated for children with intellectual disabilities - adult training and employment, family support services, adult residential facility, awareness and advocacy.

There are some conflicting views between parents and schools with regard to the learning abilities of children with intellectual disabilities. The parents often suffer deep emotional conflicts due to the deplorable conditions of their child, which gets further aggravated due to a lack of acceptance and sensitivity of other people towards him/her. There should be a better sense social responsibility

towards individuals with intellectual disability. The role of teachers becomes highly significant then, as they should give due respect and recognition, and be able to attend to the needs of all special learners in the schools. There must be "inclusion" in regular mainstream schools as well as special schools, as a matter of public policy. There should be an inclusion curriculum for various Teacher Education programmes in the country. All such changes would help in bringing about meaningful improvement in the mind-sets and attitudes of all individuals towards persons with intellectual disabilities in the society at large.

The teachers of persons with intellectual disability tend to struggle and face challenges as well. They require inner transformation in terms of attitudes and values. They should be able to understand and manage the developmental levels and needs of each student in the class. Teachers must try to design appropriate goals, programs, and assessments for each individual student. They should maintain motivation despite encountering a very slow process of change and development. Teachers frequently face a lack of participation and support from parents, which makes it difficult for them to reach out to students with intellectual disability.

Concluding Remarks

Nurturing and supporting children with intellectual disability is a great learning and transformational experience for all the individuals who consistently work with them. It is a rare opportunity to have insights into the functioning of the human mind, and for inner growth. Any attempt to bring about change can be successful only when there is a paradigm shift from a self-centric approach to a other-centric view. We must value, understand and appreciate persons with intellectual disability completely. We need to accept less-than-perfect ways of doing and being, develop patience and perseverance, and nurture more respect for them. There should be an availability of growth opportunities in the form of appropriate education, work, friendships, recreational facilities and support services for

families. What needs to be highlighted is the fact that the society at large fails to see the strengths of children with intellectual disabilities and focuses primarily on their limitations instead. The point is that CWID possess enormous strengths – a capacity for love and joy, freedom from biases and prejudices, purity of mind and freedom from egoism, warmth in relationships and perseverance despite difficulties in learning. These strengths must be upheld and nurtured by other significant members of society, including parents, teachers, the community and so on.

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Understanding Childhood through Conversations with Young Children

Ms. Vishakha Kumar

Ph.D. Scholar, CIE, University of Delhi

Abstract

This paper, explores the possibility of understanding childhood from the perspective of young children. The participants of this mini study were children from two and a half to six years of age group. The findings are based on informal interaction with them while they were engaged in play in a park located in their vicinity. The paper draws from anthropological and sociological researches with children which make a strong plea to give space to children's voices. In the course of this mini study, it was found that children not just observe other children but they also observe adults and can understand the complexity of the differences. They make a lot of effort to make sense of the world around them and try to provide probable explanations for what they observe.

Keywords: Gender, childhood studies

My two-year-old son was asked by a visitor whether he was a boy or a girl? At first, he ignored the question, pretending to be disinterested. When the same question was repeated, he stared back at the gentleman and said 'baccha hoon' (I am a child). This response stunned all of us because we did not realise when he had acquired such an understanding. He often looks at infants and toddlers younger than him and refers to them as 'chota baby' (small baby). Now he is two and a half years old and I often pose this question, 'bache kya karte hai?' (what do children do?) and he replies 'shaitani karte hai, rote hai, mumma ki godi mein jaate hai' (children are naughty, they sit in their mother's lap and they cry). I also see that he wants to play with children of varying age groups ranging from one to six years. He gets very excited when he sees other children in the park and prefers their company to the company of adults. Some of these responses propelled me to delve deeper into the experience of being a child.

This paper is inspired by anthropological and sociological researches with children. Towards the end of 1980's there was a movement to document authentic experiences of a child and to understand what it means to be a child. There are two instances that made me ponder whether adults can ever understand the epistemology of children. The first is of a three-year-old child, Vasistha, who is my neighbour. He is a very energetic child who plays enthusiastically in the park located in our vicinity. He has a seven-year-old brother who plays in the same park. The elder brother is entrusted with the task of taking care of the younger one. One day, as the elder brother was busy in his play he forgot to take notice of his younger brother. Vasistha ran outside the main entrance of the society towards a busy road. He was caught just outside the gate by some resident of the society. They tried to deter him from venturing out but the moment he was brought in, he swiftly ran out again leaving the others in a fix. Finally, after much effort he was caught and

lifted in order to get him back to his mother. He howled and cried as he was forced to go inside. He was resisting adult authority and raising his voice against, what seems to be, his deep desire to see for himself the world outside the enclosed space of his 'society'. These are the everyday occurrences where adults enforce embargos on young children in the name of ensuring their safety. It is parents who make all major decisions for children including what they should wear, eat, play, when they should sleep, when they should wake up and when they should get ready for school.

The second instance was when I was playing with my two-and-a-half-year-old son and a five year old girl in the corridor of our flat. While they enthusiastically threw a ball in all directions, I was more concerned that the ball should not go anywhere near the staircase. I did not want them to run down the stairs, fearing that they might topple. Despite the fact that all three of us were engaged in play, I was mostly worried and cautious while the other two were laughing with joy and excitement. I felt that as an adult I failed to participate in their sense of joy and happiness. I began this study as a response to one large question: how can adults study children and their understanding of the world?

Recent anthropological and sociological researches conceptualise the child as a social actor who has much to say about the world around them. Like women's voices, the voices of children and their representation has largely been ignored in research. Anthropology suggests that children can be encouraged to speak using ethnographic and participatory methods of research. At the same time, it is also emphasised that merely allowing children to speak may not be enough. Children's perspectives may also contribute to an understanding of the social world. The biggest question is then, who is a child? Very often the usage of terms like child and childhood is done to represent a cohort. Heather Montgomery (2009) argues that for any anthropologist studying childhood there can be no universal child. Child and childhood must be understood within their own contexts. She refrains from offering any definition for childhood and states that it is a very diverse and pliable construct. Montgomery is criticised for treating childhood as a social construct; denying it the material substrate. Her work denies childhood some universal features which cut across cultures. Despite criticism, she offers a socio-cultural perspective that makes a strong plea to understand the child in context, and acts as a caution against overgeneralisation.

Other researchers working in the sociology of childhood have also argued that, while conducting research and approaching the topic of childhood, we have to also understand multivocality that emerges from the diversity of class, gender, culture, caste etc. (James, 2007; Mayall, 2002). This paper draws its basic framework from James Alison's paper 'Giving Voice to Children's Voices: Practices, Problems, Pitfalls and Potentials.' He argues that in the quest to give voice to children, anthropologists have ignored some conceptual and epistemological problems concerned with authenticity and the diversity of children's experiences.

Background of the Study:

This paper is a result of my continuous engagement with children ranging from ages two and a half to six, especially from the park located in our society. I take my two-and-a-half-year-old child to the park. While overseeing him I also observe other children at play and interact with them, and sometimes on their insistence, I also participate in their play. I also interact occasionally with the children of domestic helpers who work in the same society. During these conversations, I contemplated the fact that these children stay in a similar locality but are separated from one another by social class, interwoven with age, religion and gender differences. This study was planned to present the perspectives of these children, ranging from ages two and a half to six years, about the world around them. To initiate conversation, I asked some basic questions such as, 'Who is a child?' or 'What does it mean to be a child?'. I also asked them what they enjoy doing, how they are different from grown-ups, what is it

that they can do and adults can't do and what do they think they will do when they grow up.

Sample:

I engaged in conversation with fourteen children. Four of them were not very communicative and just spoke in monosyllables, whereas ten of them were able to articulate their ideas more clearly. Out of these fourteen, eight were from the upper middle and middle classes and six children were from a lower socio-economic level, whose mothers worked as domestic helps in the same society. All these children reside in East Delhi, separated from each other by merely a road, but they live in totally different conditions. The children from the lower socio-economic level resided in one room rented homes located in a Gujjar-dominated village.

Introduction of the Participants

Participant 1:

He is a four-and-a-half-year-old boy who is an only child. His father works in Gurgaon in a multinational company and his mother is a web content developer. Over the last one year I have observed this child grow to be a very talkative and energetic child, who enjoys music, cricket and all forms of outdoor activities. His parents take a lot of interest in his upbringing. He also suffers from enlarged adenoids. Due to his propensity for catching a cold and cough frequently, his mother keeps him from venturing outside the house. She feels that he catches infections faster than other children. I conversed with him while he was engaged in painting with water colours.

Participant 2:

She is a five-year-old girl who is an only child. She lives with her extended family in a two-bedroom house. She is a talkative girl who frequently picks fights with boys in the park. For the last two years, I have observed that her mother sends her to the park alone in the evening since she takes tuitions. The girl seems to be comfortable with being alone

in the park, while other children are accompanied by nannies, grandmothers or parents.

Participant 3: She is a five-year-old girl who is an only child. She lives in a joint family with her parents and grandparents. Her parents are software developers and her mother left her office job after P3 was born to take care of her. P3 is a very playful girl who can be seen running around the park. She has several friends in the housing society.

Participants 4, 5 & 6:

They are six sisters and one brother. The eldest of them got married last year and stays close by. Now the younger two sisters work as domestic helps. Their mother also cleans utensils in a few houses and also makes garlands out of ribbon, flowers and pearls, at home. When I visited their home, there were five children, ranging from four to six years of age, playing together. One was a five-year-old male child, Participant 4 (P4), who was playing there with the other children of this family. P4 had just come from a village (he could not recall the name of the village) and was not registered in any school so far. His mother had arranged for some tuition nearby so that he can adjust in school once his name is registered. The remaining children were comprised of four-year-old twins, who were youngest in the family. The youngest girl (P5) was talkative and eager to share her views. Her twin brother was also part of this discussion though he was busy playing, laughing and running around. He spoke intermittently. Their elder sister (P6) who is five years old was also present in this discussion. She was extremely quiet and only spoke when she was asked something in particular. She stood still, next to me, throughout the conversation.

Participants 7, 8 and 9

P7, 8 and 9 are a six year old girl, four and a half year old girl and three year old boy respectively. Their mother works as a domestic help in the same housing society. The eldest daughter studies in a neighbourhood Government school, the second girl will also go to the same school eventually, but the mother wants to send her son to a private

school. The mother leaves for work early in the morning while her younger son is still asleep. The elder girl leaves for school in the morning. P8, the younger daughter, is assigned the task of caring for her younger brother while their mother is at work. She gives him food when he wakes up and plays with him till their mother gets back. When the elder daughter comes home she takes care of her younger siblings.

Participants 10 & 11

The two girls in conversation are both six years old and are close friends. They go to different schools but they met in park when they were almost a year old. Since then they, as well as their mothers, became friends. They both attend elite schools in Delhi and participate in various activities. The parents of Participant 10 and the mother of Participant 11 are from the National Institute of Design. Besides school, the two girls also go for various other activities such as football, music, dance etc. Both of them are very passionate about football and often discuss it.

Participants 12 & 13:

Participant 12 is a five year old girl who has a three year old younger brother (Participant 13). She always accompanies her brother to the park and ensures that he is engaged in play with her. She is protective about him. Her parents also ensure that the brother never ventures out of the home unaccompanied, because according to them he is more prone to getting hurt. The brother is a very energetic and enthusiastic child. The girl is usually quiet and speaks only to people she is familiar with.

Participant 14:

She is a five year old girl, who is an only child. She does not come to the park very often but sometimes comes along with her grandmother. Both her parents work in a multinational company and come home late in the evening.

Data presentation and Analysis:

I engaged in conversation with my participants in the park located inside the housing society in East of Delhi, and at their homes. I also visited the homes of some of the children who resided in the nearby village. Some of them had visited the housing society earlier. Domestic helps do not bring their children along with them on a regular basis. To initiate discussion I raised some questions. They were asked to describe what the term 'child' meant to them. On the basis of their responses they were asked whether they see themselves as a child. They were also asked to express their views on what differentiates children from adults. Finally, they were asked what is it that they enjoy doing and what is it that they would like to do when they grow up? The children were also curious to know about the purpose behind my asking them such questions. This curiosity was more evident in children from upper-middle class, as compared to those from lower classes; though all children who participated in this study seemed curious. I took children from varied socioeconomic classes to capture the influence of social context on the experiences of children. The themes that emerged from the children's responses are as follows: -

A. Notion of who a child is: -

Most children considered the ones younger to them as children. One participant also described children in terms of physical attributes, such as children are chubbier and eventually when they grow up they become thin. In the course of conversation most children jumped from the notion that they have grown up to the view that they are still children. The three and four year olds were more prompt in saying that they are children and children are mainly engaged in play. They all explained their experiences in terms of what children do; such as play, eat food, help their mothers at home, etc. Girls who were above five years of age from lower socioeconomic families said that they help their mothers at home.

Participant 1 (P1): *'Bache bahut golu hote hai aur baad mein jab wo baat nahi sunte toh wo patlu ho jate hai'.* (Children are very fat and later when they don't listen they become thin).

Researcher (R): *'Tum bade ho ya bache ho?' (Are you a child or a grown up?)*

Participant 1: *'Main bada ho gaya hoon. Main four and a half ka hoon aur ab five ka ho jaonga. Mera budday aa raha hai.'* (I have grown up now. I am four and a half and now I will turn five. I will soon celebrate my birthday).

Researcher: *'Ab hum tumhe bada kahenge ya bacha kahen?'* (Should I call you a grown up or a child?).

Participant 1: *'Aap bacha keh sakte ho.'* (You can call me a child.)

Participant 1: *'Bache jaise one year'* (Children are one year old).

Participant 1: *'Chote bache cartoon dekhte hai.'* (Young children watch cartoons).

Participant 3(P3): *'Bache hum hote hai'.* (We are children).

Researcher: *'Kya karte hai?'* (What do you do?)

Participant 3: *'Khelte hai, padhai karte hai aur kya, park mein khelte hai'.* (Wwe play, study and play in the park.)

Participant 2 (P2): *'Bache kaam karte hai, khelte hai, padhte hai, nahate hai, khate hai.'* (Children work, play, study, bathe and eat).

Researcher: *'Kya aap bacha ho?'* (Are you a child?).

P2: *'Nahi.'* (No).

R: *'Aur kya aap bachi ho ya bade ho gayi?'* (And are you a child or have you grown up?)

P6: *'Abhi main choti hoon.'* (I am still a child).

Children who were three to four years old discussed children and adults in terms of the activities they performed. The activities included playing, sleeping, going to school, doing their homework etc. Four to six years olds discussed the issue of gender as well. Two of the participants, participants 2 and 10, posed a question upon being asked who is child, whether I was talking of a male child or a female child. When I asked them whether the two are different their response was affirmative. Then they described how boys and girls play different games. Participant 2 also said that she is a girl. When I further inquired whether boys and girls are different she said yes they are different. However, when I tried to probe into the differences, she got a bit confused. First, she said boys play football and girls play badminton. Later she said some girls also play football and boys play both. Probably, she had some thoughts which she found difficult to articulate. She also stated that her mother told her that the two are different.

P2: *'Main toh badi hoon. Main yeh bhi seekh gayi hoon.'* (I am a grown-up. My name is P2. I am a girl).

R: *'Kisne bataya?'* (Who told you?)

P2: *'Mumma ne.'* (My mother).

R: *'Ladke ladki mein kya farq hota hai?'* (What is the difference between a boy and girl?)

P2: *'Khelte hai, doodh peete hai, football khelt hai.'* (Boys play football, they drink milk and play).

R: *'Aur ladkiya?'* (And girls?)

P2: *'Badminton khelti hai.'* (They play badminton)

R: *'Ladke nahi khelte?'* (Boys don't play badminton?)

P2: *'Ladke khelte hai par who football bhi khelte hai.'* (Boys play but they also play football.)

P4: '*Bache school jaate hai, khelte hai, khanna khate hai.'* (Children go to school, play and eat food).

R: *'Aur kya karte hai?'* (What else do they do?)

P4: *'Pani peete hai, khees khate hai , cartoon bhi dekhte hai.'* (Tthey drink water, eat bovine colostrum and watch cartoons.)

R: *'Tum bacha ho?'* (Are you a child?)

P4: *'Haan.'* (Yes).

R: Who is a child?

Participant 10: There is a boy and there is a girl… you know…just like grown-ups. Even grown up have boys and girls. Like you are a girl.

Participant 10: Girls play Barbie, they also play Elsa games. Boys play football. Both of us also play football. I go to music class.

Participant 11: I go for gymnastics and ballet; I play chess, theatre, football.

Researcher: So are you a grown-up or a child?

Participant 10: We are big girls and children also.

Children from lower socio economic levels did not explicitly say that girls and boys are different but some of them exhibited resentment against the differential treatment. A girl exhibited aggression towards her younger brother by physically beating him, till someone intervened. Participant 5 confessed that she feels bad that no one brings gifts for her but they get flowers or a small toy for her twin brother. She also feels that her brother gets more love and affection from their mother as compared to her. After making a lot of effort to sleep next to her mother she has started sleeping next to her elder sister because the brother gets that privileged place. Participant 5 is more vociferous and also expresses her anger. But Participant 6, who is one year older than the twins, does not express what she feels. She said that though she wants to sleep next to the mother, she has resigned to sleeping with her elder sister or her paternal uncle whom she refers to as 'ma'. She feels closer to her uncle because he plays with her and also brings things to eat from the market for them. The expression of disgruntlement in these young girls can be seen as an indication of voice. The elder sister told me that participant 6 often fights with her to get her attention. With the help of her anger she is able to express that she does not agree with what her elders are doing. However, this voice is ignored by the elders who dismiss it as a joke.

The participants also described what they like doing in their spare time. From their responses it was evident that children from lower socioeconomic families exhibit a stronger sense of exploration as compared to that of children from middle class families. The former reported that they climb stairs and go to the terrace. Despite getting hurt by tripping over stairs, they continue to explore. One of the reasons could be that adults are not present throughout the day and thus chances of constant monitoring are comparatively less.

B. Notion of Work:

Most children differentiated adults from children by stating that the two engage in different activities. While children primarily go to school and play, adults go out for work outside the house, either to offices or to people's homes to do chores or to work in shops or to do domestic work such as cooking, cleaning etc. Participant 1 most explicitly described how children and adults are both engaged in some form of work. He includes all that he does in school such as prayers, reading writing in the domain of work, which exhausts him. The differentiating point is that his father goes to office, and he has to go to school. Second difference is that his father comes late and he returns before him in the afternoon. He also associated school with children and says that he goes to school because he is a child.

Girls from lower socioeconomic families stated that they help their mothers at home in such activities as mopping the house, washing dirty utensils, making the bed and also bringing food from nearby Anganwadi. Children who have younger brothers, irrespective of whether they are from the upper or lower class, are assigned the task of taking care of the younger siblings, especially if the younger sibling is a male child. In cases where the mother works as a domestic help, girls usually feed their younger brother and take care of him till their mother returns home.

Children also acknowledged that besides playing they also have to go to school. One five year old said that when she grows up she will understand why she has to go to school. She conveyed that at present going to school does not make sense to her but she expressed the possibility of understanding its significance in future. Most children said that they did not like going to school every day, though there are times that they like going to school also. Boys are more frequently sent for additional tuitions as compared to girls. P4 said that P5 and P6 are good in studies but they are not sent for tuitions.

Participant 1: *Papa office jate hain. Main school jata hoon kyunki main chota hoon.* (Papa goes to office. I go to school because I am younger.)

Researcher: *School kyun jaate ho?* (Why do you go to school?)

Participant 1: *Taki main padhoon, kheloon, prayer karoon, seekhoon, itna sab karna padta hai. Ek baar maine itna kaam kiya ki main thak gaya. Saari hawa meri phus kar di.* (So that I can study, play, learn to pray, learn. I have to do so much work. One day I worked so much that I got tired. I got totally drained.)

Researcher: *Kya kaam kiya?* (What kind of work?)

Participant 1: *Papa seedhe raat tak aate hai itna kaam karte hai. Main bhi bahut kaam karta hoon par main shayam tak aa jata hoon.* (Papa comes home at night. He does so much work. I also do a lot of work but I come home in the evening.)

Participant 13: *Bade kaam karte hai.* (Grown ups do work.)

Researcher: *Bache kaam nahi karte hai?* (So you mean that children do not do any work?)

Participant 13: *Karte hai, shaitani karte hai.* (They do, they are naughty.)

Participant 12: *Bache khelte koodte hai bade nahi khelte hai.* (Children play and grown ups don't play).

Participant 13: *Bade kaam karte hai Bache khana khate hai.* (Grown-ups work and children eat food.)

Participant 2: *Bache khelte hai aur jo first class mein hote hai who padhai bhi karte hai, nursery class ke nahi padhte.* (Children play and the ones

who are in class 1 they study. But if you are in nursery you don't have to study.)

Participant 14: *Bade hokar humein pata chalega ki school kyun jaate hai.* (When I will grow up then I will know why we go to school.)

Researcher: *Abh acha nahi lagta?* (You don't like going to school now?)

Participant 14: *Acha lagta hai kabhi kabhi.* (I like it sometimes.)

R: *Bache kya karte hai?* (What do children do?)

P3: *Kaam karte hai.* (They work.)

R: *Kya kaam karte hai?* (What kind of work?)

P3: *Likhte aur padhte hai, Isko 3 good hai, usko 2 good aaye.* (They read and write. He has got 3 times good in his copy and he got twice.)

R: *Asking the girl. Aur tumhe kitne good aaye?* (What about you?)

P3: *Main bas school padhti hoon tuition nahi padhti. Nepali jaata hai aur yeh jaata hai.* (I just go to school. I do not go for tuitions. Nepali goes for tuitions and the other boy also goes.)

R: *Aapko kya pasand hai karna?* (What do you like doing?)

P6: *Class mein jaana pasand hai, padhna aur khelna, pakadam pakdai aur chupan chupai.* (I like going for the class, I like studying, playing hide and seek.)

C. Notion of adult authority:

Participants of this study, during the conversation, expressed that adults have the authority to scold and hit them when they do not comply with their instructions. They also reasoned that when they do something naughty elders scold them and even beat them but they cannot do vice versa. It was also evident that besides parents; elder sisters, uncles, aunts and teachers also assert their authority in different ways. Expressing anger by scolding or beating them is one such way. School teachers also assert their authority by distributing rewards and punishments in accordance with the performance of the children. Sometimes children also retaliate, but elders are able to subdue them because of greater strength, and by threatening them with withdrawal of certain benefits. Children from the lower classes reported more incidents of physical aggression and anger in comparison to middle and upper class children.

Children also see adults as those who assign them tasks to be performed. These tasks could be to clean up their room or help in household chores or taking care of their sibling.

Participant 1: *Mumma daat sakti hai woh main nahi kar sakta.* (Mummy can scold me but I can't do that.)

Researcher: *Kyun nahi daat sakte?* (Why can't you scold her?)

Participant 1: *Badmashi bache karte hai toh mumma ko nahi daat sakte.* (Children are mischief makers so they can't scold mummy.)

Researcher: *Agar mummy badmashi karein?* (What if mummy does something mischievous?)

Participant 1: *Mummy koi badmashi nahi karti.* (Mummy never does anything mischievous)

Researcher: *Papa kartein hai?* (What about papa?)

Participant 1: *Haan karte hai.* (Yes he does.)

Researcher: *Unko daat padti hai?* (Does he get a scolding?)

Participant 1: *Husband ko toh itni daat padti hai. Main aur mummy mil kar daatte hai, itna daatte hai. Itni shaitani karte hai papa.* (Husbands get so much scolding. I and mummy scold him a lot. Papa does so many mischievous things.)

Researcher: *Bade ho kar kya kya karooge?* (What will you do when you grow up?)

Participant 1: *Mumma ka kaam.* (I will do mumma's work.)

Researcher: *Kya kaam?* (What work?)

Participant 1: *Jaise ki mumma kahe ki papa ke saath khel sakta hoon. Mumma kahe ki jamao toh jaama sakta hoon. Jab main bada honga toh main magic karoonga.* (Such as mummy will tell me to play with papa then I will with him. Or mummy will tell me to arrange my things and I will be able to do that. When I grow up I will perform magic.)

Participant 1: *Bache bikhera karta hai aur bade jamaa ke rakhte hai.* (Children dirty the room and elders clean it up.)

P4: *Maarti hai madam.* (My teacher beats me.)

R: *Maarti kyun hai?* (Why does your teacher beat you?)

P3: *Mujhe bas ek baar mara par isko toh bahut maarti hai. Yeh 1-2 nahi sonata.* (I got beaten only once. But he gets frequent beatings because he does not remember counting.)

P4: *Yeh didi daat-ti hai aur ma bachati hai. Yeh maarti hai.* (My sister scolds me and my paternal uncle saves me. She also beats me.)

R: *Kaun data-ti hai?* (Who scolds?)

P4: *Didi aur mummy daat-ti hai. Main pau se maarti hoon bhai ko.* (My mother and sister scold me. I also hit my younger brother with my feet.)

P4: *Isse ma acha lagta hai, mujhe bhi ma pasand hai. Wo maarta hai mujhe.* (She likes our paternal uncle, I also like him. He beats us.)

R: *Phir bhi pasand hai?* (But you still like him?)

P4: *Woh cheez lata hai. Kurkure bhi lata hai. Biscuit bhi lata hai.* (He brings sweetmeats and savouries for us such as 'kurkure' and biscuits.)

R: *Kya karte hai bache?* (What do children do?)

P 12: No response

R: *Aap kya karti ho?* (What do you do?)
P12: *Jo mummy kahe wo karti hoon.* (I do whatever my mother asks me to do.)

R: *Apne man se kuch karti hai?* (What you do on your own?)

P12: *Haan jab ghar pe hoti hoo kabhi bistar bicha deti hoon ya jhadoo kar deti hoon.* (Yes when I am at home I make beds or broom the floor.)

R: *Aur kya karti hai?* (What else do you do?)

P12: *Aur kabhi gas dho deti hoon.* (I also clean the cooking gas.)

D. Notion of who are adults :

Children see adults as different from them. They see them organising the home, cooking, and going out to work. Children also observe that adults and children have different modes of entertainment; such as children enjoy watching cartoons while adults like going to theatre, watching daily soaps or films. Most children observed that adults do not play like children. One of the participants said

that adult women apply lipstick and that probably changes the way they think. Once girls become aunties they stop playing like children. Adults prefer to sit and talk, which children find boring.

Participant 1: *Bache bikhera karta hai aur bade jamaa ke rakhte hai.* (Children mess up things and grown-ups organise things around them).

Participant 11: They go for theatre.

R: Who is grown up?

Participant 10: Like you?

R: Like me!

Participant 10: Girls can't play football. Like kicking around. Big girls can't play football…Big aunties can't play football.

Participant 11: My mumma can't play football.

Participant 10: Because they are aunties.

Participant 11: She is not an aunty she is my mumma.

Participant 10: Because they put lipstick and in the body lipstick goes in their head and their mind goes change.

Participant 11: My mumma does not put lipstick. She was a tomboy.

R: What do grown-ups do?

Participant 10: They just walk and talk, eat and sang and do boring things. Nothing that you like.

R: Children do interesting things?

Participant 10: Yes.

R: What else do grown-ups do?

Participant 10: They eat lots of food because they are so big.

E. Role they envision for themselves when they grow up:

The participants in this study envision different roles for themselves. Most children saw themselves taking on the roles that their parents performed, such as cleaning the house or cooking food. Boys as well as young girls saw themselves taking on similar roles when they grow up. At this stage there seemed to be greater identification with the mother. Boys as well as girls said that they would do what their mothers do. Secondly, children also felt that they will gain proficiency in whatever they are interested in doing, such as playing football, cricket or skating. Finally, they also had dreams to take varied roles such as that of a doctor, rickshaw puller, magician etc. Some children also expressed that when they grow up they would eat and do whatever they feel like. It was evident that children saw adults as those who take their own decisions and act in any way they want to. In contrast, children find themselves in a subordinate position where they have to follow the instructions of adults. In this power play children also assert their will by crying, hitting younger siblings or throwing a tantrum.

Researcher: Bade ho kar Participant 1 kya kya karoonge? (What will you do when you grow up?)

Participant 1: Mumma ka kaam. (The work my mother does.)

Researcher: Kya kaam? (What work?)

Participant 1: Jaise ki mumma kahe ki papa ke saath khel sakta hoon. Mumma kahe ki jamao toh jaama sakta hoon. Jab main bada honga toh main magic kaoonga. (Like mumma will tell me to play

with papa and then I will play. When mumma will say that organise your things I will do that.)

R: Jab bade hogi toh kya karoogi? (What will you do when you grow up?)

Participant 3: Khana banaongi. (I will cook.)

R: Abhi kya kaam karti hai? (What work do you do now?)

Participant 3: Padhti hoon.Hum log kapde nahi dho sakte, unka job nahi kar sakte. (I study. We can't wash clothes and we can't do their job.)

R: Aap kya bana chahogi? (What will you like to do when you grow up?)

Participant 6: Doctor.

R: Kya karte hai doctor? (What do you think doctors do?)

Participant 6: Ilaaz. (Treatment)

R: Aap jaati ho doctor ke paas? (Do you visit a doctor?)

Participant 6: Sui lagate hai. (Yes, he gives an injection.)

R: Tumhe dar lagta hai? (Are you scared?)

Participant 6: Nahi. (No.)

Conclusion:

This small study brings forth the lived experiences of the children. It also breaks the myth that children are unable to articulate their experiences. Children not just observe other children; they also observe adults and can understand the complexity of the differences between the two. They make a lot of effort to make sense of the world around them and try to provide probable explanations for what they observe. For instance, a six-year-old girl explained that her brother clings to the mother and is shy because he cannot remember faces that he sees less frequently. Another girl said that the reason why adults cannot play football is because they wear lipstick. These naïve explanations indicate that children hypothesise about why things are the way they appear. It also opens up the possibility of using children as research participants and representing their voices in theorising. When children are probed and asked certain questions they express deeper understandings of the social world around them, than what people expect. They are capable of expressing those feelings and thoughts, provided they are heard.

This study also indicates that the terms child and childhood are contextual. They cannot be used as overarching terms for all those who are in a certain age bracket. Some children are assigned responsibilities very early and they become caretakers. Others enjoy extended time and opportunities for exploration. These varying opportunities may augment or impede their process of development. What is more pressing is that children must be heard and understood from their perspectives. Irrespective of their social class, the young children who participated in this study have a voice that makes them cry, yell, shout and beat others to express their anger. However, the social processes may supress this voice later and socialise them comply with the norms.

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Procuring Healthy Society Through Education

Dr. Meenakshi Girdhar

Assistant Professor, G.D. Goenka University

Abstract : *The present research article explores the concept of health and the role of education (focusing on school as a mediator of formal education) in achieving a healthy personality and healthy society. The article reflects a part of the work done by the author for her doctoral studies regarding mental hygiene. The present study extract summarizes the themes and concepts woven around 'the healthy human' and looks at the efforts made by the Indian Government to encompass it, through the mode of formal education.*

Keywords: health, education, Indian school education

Introduction

The Indian population has crossed 1.3 billion (May, 2016) and is increasing almost at a 2% annual rate. This increase in population can be partly addressed by a decline in the rate of infant mortality (the rate of infant mortality has lowered down to 38 from 44 deaths for every 1000 live births in 2015 in comparison to 2011), an increase in life expectancy, and as the result of better health care facilities. India's total expenditure, though lesser than many developed countries, has increased to 3.9% of GDP and total expenditure on health per capita is $141. In a report by 'The Economic Times', the field of healthcare in India is blooming at a rate of 15% Compound Annual Growth Rate (CAGR) and elevated to $78.6 billion in 2012 in comparison to $45 billion in 2008 and predicted to touch USD158.2 billion by 2017 and USD 280 billion by 2020 (an increase of 22.9% CAGR). Also, a sharp increase of expenditure (203.5%) has been observed on goods related to healthcare. With growing exposure and awareness about good health, the Indian market of over-the-counter (OTC) vitamins and mineral supplements is growing rapidly from USD 563.2 million in 2008 to USD 749.4 million in 2013.

The above data reveals the increased health consciousness among Indians, however there is another aspect of declining health among the population. Simultaneously, the reports by National Institute of Health and Family Welfare (2013) suggest that India is witnessing a sharp increase in lifestyle diseases, like hypertension, diabetes, irritable bowel syndrome (IBS), cancer, obesity, sleep disorders, heart diseases and digestion problems. With increased financial status, increased levels of work stress, a faster pace of life, dispersed floods of information and technology, high population and pollution levels, and cut-throat competition, there is an increase in lifestyle disorders ordiseases. It is estimated that India is second after China in the number of diabetic patients. The International Diabetes Federation states that every 6th diabetic in the world is an Indian, and by the year 2025 India will be the diabetes capital of the world, with around 73.5 million patients (World Health Organization, 2007). Not only diabetes, India has the highest rate of depression in the world and in one of the reports of World Health Organization (1999), depression is declared as one of main three causes of disability and morbidity in the developed world.

Along with an increase in lifestyle diseases, there is a sharp increase in the number of cases of suicide, teen pregnancy, broken marriages, and drug abuse in last few decades. Statistics released by National Crime Records Bureau (2013) show that 1,35,445 number of people committed suicide in country in 2012. In a report by National Institute of Health and Family Welfare (2013), over 16,000 students committed suicide in the past three years. Out of every three cases of suicides, reported every fifteen minutes in India, one is committed by a youth in the age group of 15-29 years. Every 90 minutes a teenager tries to commit suicide in India. In a report by United Nation Office of Drug and Crime (2009), one million heroin addicts are registered in India, and unofficially there are as many as five million. A study done by Sagarkar et al. (2013) in India states that 36.9% of children begin smoking before the age of ten years. Almost 4.2% of students smoke cigarettes, while 11.9% of students use other tobacco products.

Health

With a huge rise in the healthcare sector and in lifestyle diseases, a focused and detailed understanding of the term 'health', and the means to achieve that health is important. A report by International Market Bureau (April, 2010) highlights that in India the increased emphasis on a healthy lifestyle is part of a trend to look fitter and well-groomed. However there exist more viewpoints regarding the definition of 'health'. For example, a woman's concern for her diabetic husband is a pointer towards his physical ill-health, but when an employee working in inhumane conditions talks about the pressure and stress related to his job, he or she certainly lays down individual's mental health conditions. Also, the term 'health' is used outside the medical panorama, where healthy connotes healthy conversation, a healthy economy and so on.

Meaning of health

In the discourse about well-being, health has been conceptualized in three ways. First is the pathogenic approach, derived from the Greek word 'pathos', which means suffering, or an emotion evoking sympathy. According to this approach health is the absence of disability and disease. The next approach is the salutogenic approach, which can also be found in early Greek writings and was popularized by Antonovsky (1979) and pioneers of humanistic psychology (Maslow, 1954; Rogers, 1961). Basically the salutogenic approach originates from the word 'salus', meaning health, indicating the presence of positive states of human capacities and functioning in thinking, feeling, and behaviour (Strümpfèr, 1995). The third and the youngest one is a complete state model, which derives from the ancient word of health 'hale', meaning 'wholeness, being whole, sound or well' (Daniel, 2010) . Hale is derived from the Proto-Indo European root Kailo, meaning 'whole, uninjured, of good omen' (Marks et al., 2011). After numerous research on all three paradigms of achieving health, it can be said that the third one, the whole state approach, is the only paradigm that can achieve population health (Keyes, 2007).

A historic definition of health given by WHO, made as early as in 1946, clarifies that human health cannot be fragmented into domains of isolated physical health or social health. There has to be an integrated approach where all aspects of personality must be targeted simultaneously. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Most of the times, health is understood more as a physical entity; but it also connotes an intra-psychic balance, the balance of the psycho-social structure (Husain & Khan, 2006).

The National Council framework for Teacher Education (2010) has stressed on the "development of health, elaborating it as an important part of the core curriculum at the primary, secondary, and senior secondary school levels. The area needs

to be considered in the framework of the overall development of the child and the adolescent – physical, social, emotional, and mental. The aim of health education is not just to attain physical health but also sound psycho-social development. The subject covers personal health, physical and psycho-social development, movement, concepts and motor skills, relationships with significant others, and healthy communities and environments. The interdisciplinary nature of the area requires integration and cross-curricular planning. The major components of the school health programme include medical care, hygienic school environment, school lunch, physical education and emotional health" (p. 27).

Health being a psycho-social component contributes to one's mental as well as social development. Murray and Lopez (1996) remarked that mental health problems would contribute significantly to the global burden of disease in the 21st century, particularly for adolescents, as mental health hurdles are already as common as some physical health problems such as asthma. A report by the National Institute of Mental Health and Neuro- Science (2011) illustrates that five crore Indians suffer from mental illness.

With the huge shift in societal norms, its thought processes, its value system, and its structure; the term 'health' has additional new wings to it. Literature points out that since historic times, health care philosophy and science have concentrated more on disease than on health. Whilst attending to the aspect of care and cure for disease, there is also a dire need to understand what makes us healthy human beings and under what conditions does the life of a human being flourish. Bem (2011) proposes that as we have the biosciences, there must also be biophilosophy (philosophy of life), and biopolicies (life and health enhancing policies). Moving beyond simple reductionist and empiricist methods, the time has come to embrace the complexity of the living world, and to move from looking at particulars to understanding the larger picture.

No doubt, some people need extra precaution, care, and medical help; but simultaneously there should be a parallel system to concentrate on producing a healthier general population. It can be said that an individual's health constitutes of physical, mental, emotional, as well as social aspects. Therefore, there is an increased awareness to be more cautious in nature, with an integrated approach towards health. The purported outcome is a healthy persona, a healthy society, and a healthy nation, which can be made possible through educating society.

India falls under the list of countries which spend the lowest on healthcare in the world (though increased in recent years), ranking 171 out of 175 countries in terms of healthcare expenditures (NIHFW, 2012-13). Within the present panorama, a system must be developed where the roots are made strong enough to fight any challenge. The youth of society must be equipped with life skills based education, where they are made to learn skills for living a happy and flourishing life. There is a need to wage an educative war against disease, deformation, illness and sufferings; tobuild a strong, growing, progressive and healthier society.

Education: A Key Factor

A UNESCO (2013) report titled, 'Education for All' states that, in general, education helps in improving the prosperity of individuals, families, and societies - "... education has a vital contribution to make. Education, if delivered well, enables people to fulfil their individual potential and to contribute to the economic, political, and social transformations of their countries" (p. 3).

In addition, the report states that "education boosts up individual's earning capacity and ability to uplift households out of poverty. It helps to equip the individual with skills needed to obtain work and allowing them to lead a dignified and comfortable life. Education contributes for social mobility and national growth. Education can empower such vulnerable groups, including those disadvantaged

due to their gender, wealth, ethnicity or language, and help them share the benefits of positive development outcomes" (p. 3).

Furthermore, "… it promotes social as well as political growth. Education is a key agent to the value system of any society, a purveyor to social cohesion and societal development. "Quality education promotes tolerance, peace and security, and can support good governance and broader democratic outcomes" (p. 4).

The Canadian National Population Health Survey (1996-1997) alsostates that:

"Educational attainment is positively associated both with healthy status and with healthy life styles... from a health determinant perspective, education is clearly good investment that can reduce long term health care cost" (pp. 37-38).

According to National Policy on Education (1986, p.3)

- In our national perception, education is essentially for all. This is fundamental to our all-round development, material and spiritual.
- Education has an acculturating role. It refines sensitivities and perceptions that contribute to national cohesion, a scientific temper and independence of mind and spirit-thus furthering the goals of socialism, secularism and democracy enshrined in our Constitution.
- Education develops manpower for different levels of the economy. It is also the substrate on which research and development flourish, being the ultimate guarantee of national self-reliance.
- In sum, education is a unique investment in the present and the future. This cardinal principle is the key to the National Policy on Education.
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In particular, education helps in generating and promoting the curative vision of health in our population, along with acquisition of knowledge for seeking appropriate treatment. "Rapid urbanization is accompanied by threats from economic recession, environmental degradation, climate change, food insecurity and other factors ... Learning is essential if young people are to acquire the skills they need to get work in a changing world ... Education improves health and livelihoods ..." (NPE,1986, p. 4). The research data reveals that levels of education are directly proportional to decreased morbidity and mortality rates, and increased nutrition intake among the population.

A statement given by Organization for Economic Cooperation and Development (2010) states that education would be a major catalyst in enhancing well- being and social progress, being cost effective. Education empowers individuals, making them knowledgeable, competent in decision making, well equipped with cognitive skills, and strengthening their socio-emotional capacities such as resilience, self-efficacy and social skills. Also, education helps in improving habits, values and attitudes towards healthy lifestyles and active citizenship.

A study done by Ross (1997) elaborates that well educated people have lower levels of emotional distress (including depression, anxiety, and anger) and physical distress. Kubzansky et al. (1999) have noted that more qualified individuals are significantly less at risk of bad mental health outcomes or long term stress. Kenkel et al. (2006) studied the causal effect of education on smoking behaviour; and a positive effect of education on the health outcome is noticed. Chevalier and Feinstein (2006) state that education has substantial effects on the probability of being depressed, reducing the average risk by 50% for the highest qualifications, and particularly for women, each qualification reduces the risk of becoming depressed. Wilson et al. (2009) studied the mental health of Canadianswith self-reported learning disabilities and found that persons with a learning disability (PWLD) were more than twice as likely to report high levels of

distress, depression, anxiety disorders, suicidal thoughts, visits to mental health professionals and poorer mental health; than were persons without disabilities. In a study done by Hales (2001), raised levels of anxiety and apprehension and reduced levels of self- confidence and stability have been reported among adults with learning disabilities. Also, higher scores on inventories measuring depression have been found in children with learning disabilities as young as eight years of age (Strawderman & Watson, 1992), in younger adolescents (Maag & Behrens, 1989), and in older adolescents (Dalley et al. 1992).

School: A Platform of Formal Education

In one of reports by World Health Organization in a United Nations Inter-Agency meeting in 1999 (p. 5), the importance of schools in enhancing life skills among adolescents is as follows:

Every school should enable children and adolescents at all levels to learn critical

health and life skills: ………Such education includes: .....comprehensive,

integrated life-skills education that can enable young people to make healthy

choices and adopt healthy behaviour throughout their lives

Since school is one of the most formal mediums of providing education in India, the responsibility of nourishing future generations generally rests with it. School is one of the most important functional agencies in guiding young peoples' lives, and can be a key source in developing the skills and competencies that support their capacity for successful adaptation (Hamilton & Hamilton, 2009). Furthermore, schools provide accessible and relatively stable sites within which to locate interventions to promote well-being (Bond et al., 2007); and represent a common setting for children and adolescents, facilitating universal promotion-based intervention (Short & Talley, 1997). Schools

are one of the most important developmental contexts in students' lives (Gilman, Huebner, & Furlong, 2009) alongside their homes. Evidence suggests that relationships with peers and school staff (Chu, Saucier, & Hafner, 2010; Hawker & Boulton, 2000) and the overall school climate and culture, (Way, Reddy & Rhodes, 2007) influence students' well- being and mental health outcomes. Since schools are central to students' physical, mental, emotional, and social health, a whole school commitment for creating a nourishing environment and cultivating well-being is imperative. Educators and philosophers have repeatedly argued that schools must educate the hearts as well as minds of children (Dewey, 1909; Pestalozzi, 1818).

Current Status of Health Promotion in Indian School Education

The school bears the maximum share of responsibility in the development of healthy citizens therefore various initiatives have been taken by the Indian Government towards this cause. Right from the first draft of National Policy of Education (1986) to the latest policy documents, the need for health-maintaining activities in schools has been highlighted. In the light of various recommendations by different educational committees and commissions, activities like National Service Scheme (1969), Bharat Scouts and Guides, and various programs like National Population Education Project (NPEP), Adolescence Education Program (AEP), and Comprehensive School Health Program (CSHP), have been initiated and given a full-fledged space in Indian education for the overall healthy growth of children.

National Policy on Education, 1986; as revised in 1992, recognizes the "holistic nature of child development, which is, nutrition, health, social, mental, physical, moral and emotional development. The policy emphasizes that Early Childhood Care and Education (ECCE) needs to receive a high priority and be suitably integrated

with the Integrated Child Development Services Programme (ICDS), wherever possible" (p.13). "Health planning and health service management should optimally interlock with the education and training of appropriate categories of health manpower through health related vocational courses. Health education at the primary and middle levels will ensure the commitment of individual to family and community health, and lead to health related vocational courses at the +2 stage of higher secondary education" (p.17).

The National Curriculum Framework (2005) states that "Health is a critical input for the overall development of the child" (p. 56). The National Curriculum Framework developed since 1975 has emphasized the issue of health and the development needs of school-going children at regular intervals. National Curriculum Framework (2005) provides an integrated and holistic definition of health within which physical education and yoga contribute to the physical, social, emotional, and mental development of the child. It (NCF, 2005, pp. 56-58) emphasizes :

- The recognition of Health and Physical Education as a core subject, and this must continue to be a compulsory subject from the primary to the secondary stage and as an optional subject at higher secondary stage. However, it needs to be given equal status with other subjects, which is still lacking at present.
- A 'needs based approach' which may guide the dimensions of physical, psycho-social and mental aspects that need to be included at different levels of schooling. The development of health, skills, and physical well-being can be enhanced through practical engagements such as play, exercises, sports, and practices of personal and community hygiene.
- There should be a provision to organize the utilization of the school space at least at the block level, for a special sports programme,

both before school hours and after school hours, to enable children with a special talent for sports to go there for special training.
- Essential physical space and equipment must be available in every school. Doctors and medical personnel should visit schools regularly.
- School health programmes must be an integral part of Health and Physical Education.
- Increased realization of adolescents' health needs in an age-appropriate context and specific intervention should be provided regarding adolescents' reproductive and sexual health concerns.
- Children must be ensured with opportunities to construct knowledge and acquire life skills under Health and Physical Education.

The idea of a **Comprehensive School Health Programme**, conceived in the 1940s, included six major components, viz., medical care, hygienic school environment, school lunch, health and physical education. These components are important for the overall development of the child, and hence need to be included in the curriculum. The vision is towards a comprehensive health and physical education curriculum, replacing the fragmentary approach prevalent currently in schools. The concerns of this programme include:

- Medical check-ups of children
- Tackling under-nutrition and malnutrition among children
- Promotion of the state of the health and physical well-being of children through physical and activities like yoga sports and games and maintenance of personal as well as community hygiene
- Strengthening of the area of Health and Physical Education in school education and teacher education.

National Population Education project (NPEP) focuses on a number of activities to develop an understanding of the criticality of essential conditions of population-stabilization for achieving better quality of life for present and future generations, aiming at:

- Population and sustainable development.
- Gender equity for empowerment of women.
- Adolescent reproductive and sexual health.
- Health and education being key determinants of population change.
- Population distribution, urbanization, and migration issues.

The Adolescent Education Programme (AEP), launched by Ministry of Human Resource and Development, GOI, in 2005 has been implemented by national agencies like Central Board of Secondary Education (CBSE), Kendriya Vidyalaya Sangthan (KVS), Navodaya Vidyalaya Samiti (NVS), National Institute of Open Schooling (NIOS), and Council of Boards of School Education in India (COBSE). The ultimate goal of the programme is to empower adolescent learners to have knowledge of their needs and concerns related to the period of adolescence, and to develop in them life skills that will enable them to practice informed and responsible behaviour. Children need to be provided with opportunities to construct knowledge and acquire life skills, so that they cope with concerns related to the process of growing up. The focus is to provide adolescents with accurate, age appropriate, and culturally relevant information to promote healthy attitudes and develop skills to enable them to respond to real life situations effectively. The life skill education programme would allow the learners to be better decision makers and problem solvers, to get equipped with critical and creative thinking, to improve their communication and interpersonal relationships, to develop empathy and self- awareness among them, along with strengthening their capacity to cope with stress.

Conclusion

The Indian constitution too talks about the protection, and development of child's health. There are constitutional provisions provided for the protection of child's rights stating:

'I have the Right to good health care, and everyone has the Responsibility to help others get basic health care and safe water' (Article 24)

'I have the Right to be loved and protected from harm and abuse, and everyone has the Responsibility to love and care for others' (Article 19)

'I have the Right to live without violence (verbal, physical, emotional), and everyone has the Responsibility not to be violent with others' (Article 28, 37).

The constitution gives each child the right to live a life devoid of any sort of abuse and violence. To summarize the above, the constitution has equipped each child of India to avail of, and promote a healthy life. According to a report by United Nation Development Programme (2013), India ranks 136th among 186 countries in the human development index (HDI), lagging far behind many countries, including Nepal and Pakistan. The figures show clearly that, for India, there is long distance to cover and it is possible only through education.

As stated by Irina Bokova, Director-General of UNESCO (2012),

Education is the most powerful path to sustainability. Economic and technological solutions, political regulations or financial incentives are not enough. We need a fundamental change in the way we think and act.

So keeping pace with the newly emerging challenges, our education system must be strong enough to face them, and to provide for the overall healthy development of children.

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A Study of Adolescents' Engagement with Reality Shows on Television

Swati Sharma

Assistant Professor, Lady Irwin College, University of Delhi

Abstract

This paper focuses specifically on adolescents' engagement with reality television and tries to examine various psychosocial concerns about reality shows and the spectrum of deep-seated issues that underlie them. Included are both children's and adolescents' perspectives, a participant's lived experience, and an audience's passionate or objective engagement, all of which interpolate to build attitudes and views about reality shows. The findings reveal that television presently is used for recreational purposes and hence lacks an educational element (Hancox et al., 2005; Nabi et al., 2005). Reality television shows are common among children and adolescents (Patino et al., 2011). The present study highlights the assumption that reality television does not attract public school and academically motivated students, intrinsically or extrinsically. Government school students who watch reality television are doing so for socio-economic reasons. This gives them the opportunity to discuss the shows with their classmates and the prize money that one receives after winning the show has the potential to change their lifestyle as well as economic status. This claim is supported by the varied genres of reality shows most frequently viewed by students. The wiewing preferences of public school students were found to differ significantly.

The responses of teachers also seemed to vary greatly. Barring one teacher, most of the teachers believed that reality shows have both positive and negative influences on the students, and were therefore not in favour of banning them completely. They also presented the view that some of the shows provided students with opportunities and enhanced their learning. They unanimously agreed that the shows have a strong influence on the students, although they presented varying views about the nature of this influence. Most teachers were not in favour of shows presented on MTV and Channel V, as well as the show entitled Bigg Boss.

There appears to be a concern among adolescents about the authenticity of television shows. Reality shows by their very nature require them to be real for the audience, yet contestants usually compete in them for fame and money. This dichotomy raises issues related to the authenticity of reality shows.

Introduction

In today's world, media has become as vital as food and clothing (Das, 1997). It is also accepted that media plays an important role in solidifying society; through enhancing knowledge and awareness, providing sensitization to a number of issues, informing and educating people on a variety of themes as well as providing recreation and entertainment. In the words of Sinha (1998), media shapes our lives and creates public opinion. Baehr (1995) adds that it strives to show us the bare truth and harsh realities of life.

Acknowledging the significance of the mass media in individuals' lives, their socialisation processes and in their personality and identity development, this paper is concerned with studying adolescents' engagement with television, which is acknowledged to the most widely used instrument of mass media. In terms of outreach, scope, and audience coverage, television is seen as having the maximum potential to cater to the socio-cultural diversities that characterise India. Television programmes vary immensely in terms of what they purport to achieve. For instance, some programmes are intended for knowledge dissemination, others for talent exposition and development, and some for direct engagement, entertainment and a sense of thrill.

From the initiation of television itself, India has depended heavily on family dramas. Alternative television programme genres like reality shows, sitcoms and game shows have only recently become popular. A large chunk of the viewership is still accounted for by melodramas and daily soap operas. However in contemporary times, Reality Television shows have higher TRP ratings; hence it is the new mantra of television producers and channel executives to outdo the other channels with 'similar-but-tweaked-here-and-there' shows. This genre of reality shows are so embroiled in competition that every channel boasts of at least two to three reality television shows. Some of them are based on similar shows running abroad, or are cheap counterparts of the shows abroad.

In India, the era of reality shows was ushered in through Channel V's talent hunt for the formation of a musical band, in 2002. This show enjoyed popularity for a brief period of time and led to the onset of reality television programmes in India. Another major milestone which led to the popularity and dominance of the reality show genre was superstar Amitabh Bachchan's 'Kaun Banega Crorepati'; it was a major hit with Indian audiences. What followed next was a plethora of reality shows, most of them being adaptations of already running Western versions.

I want to examine the nature of engagement that adolescents have with reality television; to see whether as viewers, they are sensitive to the problems and dilemmas related to those participating in the programmes, or whether there is a dispassionate entertainment-viewing approach that exists. Furthermore, how role models are drawn from these shows, how far they are followed or imitated, how young adolescents' views and attitudes are impacted by these shows and how their viewing habits have affected other aspects of their lives; were the other questions that drew me towards this research.

This study also rests on the assumption that television is a very significant agent of socialisation in the lives of children and adolescents, and within this, since reality television gives them an opportunity to participate and interact either directly or vicariously in what they are watching; a study of this kind will be able to highlight some dimensions and trends which are relevant to the discourses of Child and Adolescent Development and Educational Psychology.

Further, it is only after knowing what the pattern is that the next set of steps, about what needs to be done, can be visualised and taken. The constant complaint from schools and from parents about the overarching influence that television has on their children may also get addressed by some of the findings of this study. The need to develop critical

thinking and sound caution about virtual worlds are very much a part of the curriculum of most schools. A study of this kind can provide meaningful inputs in this regard. It is specifically hoped that this study would contribute to the existing literature on Child and Adolescent Development, to an understanding of television as a socialisation agent, and provide insights on the new wave of reality television and its impact on adolescents and children. It is hoped that some direction on what the role of home and school should be in regard to the emerging trends would also be given.

The Research Questions that the study addresses are as follows:

- How much time do adolescents spend watching television daily?
- What is the proportion of reality television that they watch with respect to their larger television viewing trend?
- Which are their favourite programmes?
- Why do they watch reality television?
- What draws them towards it?
- What is the impact that it has on them?
- What have they learnt from it?
- In what ways has it influenced their lifestyle and pattern of family and peer engagement? How has it impacted their aspirations?
- What are the reflected views of teachers on all the above, particularly students' behaviour in schools?
- Does the type of school that an adolescent goes to affect the pattern and nature of their engagement with reality television?
- Specifically, how do government school students and those studying in elite public schools differ in this regard?
- Is gender a significant factor that affects adolescents' engagement with television.
- What are the age-related trends which are visible in adolescents' engagement with reality television?

The research questions of the present study have been located in two theories and also draw upon the nature of adolescence in India. The two theories are the 'Uses and Gratification Theory' and the 'Social Cognitive Theory' of Albert Bandura.

The Uses and Gratification theory (UG) lays emphasis on the motives of television as a medium of entertainment value, the psychological and social traits examining the nature of audience involvement and gratification obtained from viewing television, and behaviors or attitudes that develop as a result of the combined influence of motives and traits.

According to Denler (2014), Social Cognitive Theory (SCT) "refers to a psychological theory of behaviour that emerged primarily from the work of Albert Bandura". This theory emphasized the acquisition of social behaviours highlighting the idea that learning occurs in a social environment and during observation.

It is hoped that this study would help to develop an in-depth understanding of how reality shows influence the perceptions and attitudes of the adolescents under study.

Design of the Study

The study was conducted in two phases. The first phase aimed to tap the viewpoints of students about reality television shows and their impact on the students' lives, views, and attitudes. In the second phase, an attempt was made to tap the opinions of school teachers on students' viewing habits of reality shows.

Phase - I

As has been mentioned above, the purpose of the first phase was to tap into students' television viewing habits, specifically with reference to reality shows. Further, this phase also addressed the students' engagement with the shows and the impact of reality shows on them. In order to address these concerns, a questionnaire on reality television shows was developed for the students. The questionnaire was distributed to eighty adolescent students from one government

school and one private school. The students were from classes nine and eleven. The conceptual framework and review of studies presented in the second chapter highlighted that adolescence is the stage where identity formation and consolidation take place. It is also the age at which students are most influenced by media. Besides, it was felt that adolescents, having entered Piagetian Formal Operations, will be able to reflect critically and articulate their views on reality shows. Thus, although young children form a large audience of reality shows, it was felt to be more worthwhile to tap adolescents' views on reality television.

The data for the first phase was collected through administering the questionnaire to the students in both the sample schools. Questions were framed in both English and Hindi. The data for the second phase was collected through conducting thematic interviews with the teachers. Although questions were framed in English, they were translated in Hindi whenever necessary. Permission from the respective schools and the students themselves were sought before gathering data. The students were informed about the purpose of the research and their willingness to partipate was sought. The questionnaire was personally administered by the researcher. Thus, any clarifications sought by the student respondents were answered by the researcher herself.

The questionnaire developed for the present study attempted to address the research questions that have been spelt out earlier. It included both open-ended and closed ended questions which basically focused on television viewing habits, reality show preferences, and their specific impact. The questionnaire contained fifteen items, in addition to biographical details of the students.

Phase - II

The second phase attempted to address the views of teachers about reality shows. Since teachers spend a considerable time in close association with

the students, it was hoped that they would be able to provide insights about the patterns of influence of reality shows on students' behaviours and attitudes. In order to tap the views of the teachers, in-depth, structured interviews were conducted with school teachers. Ten teachers from both the Government and Private schools were contacted for data collection.

In the second phase, prior permission was sought from the teachers and appointments were taken with them. Each interview session took around an hour. The interviews began with rapport-building sessions. The purposes of the research, as well as the interviews, were explained to the respondents. This was followed by the actual interviews.

It was decided to use a thematic interview schedule so that all the teacher respondents presented their views on the same set of themes, thus helping with comparability of responses. However, an interview is never unidirectional, and one theme or question typically leads to another. Keeping this in mind, open response spaces were provided within the thematic structure. The themes developed for the interview schedule are as follows:

- Views of teachers regarding children watching reality television shows
- Impact of reality television on the behaviour of children
- Role of reality shows in the development of children's personality
- Views about children's participation in reality shows
- Views about educational values in reality shows
- Suggestions for improving reality shows
- Views about banning reality shows
- Teachers' views about specific reality shows

In both the phases, the participants were assured of confidentiality. They were told that their responses would be used for research purposes only and

that their identities would not be revealed at any stage. It would be appropriate to mention here that the two phases of the study were conducted three weeks apart.

KEY FINDINGS OF THE STUDY

PHASE 1: QUESTIONNAIRE WITH STUDENTS

- **Tele-viewing Pattern of Adolescents**

The responses to the questionnaire revealed that most of the students spend three to four hours per day watching television. Data also revealed that the number of hours spent in watching television everyday appears to be somewhat lesser in the case of students from the Public school. This trend was observed because Public school students have other ways of spending their time, such as surfing the internet, attending dance classes, music classes and spending time with friends, etc., whereas Government school students seemed to have television as their only source of entertainment. This difference reflects the influence of their socio-economic background. Public school students could spend more on sources of entertainment where as Government school students have limited resources.

Tele-viewing patterns of Adolescents in Relation to Social Class and Gender

Data in the study was gathered across two schools. The Government school catered to students belonging to the lower middle and lower economic classes. The Public school catered to students from the upper middle and upper classes. Thus, the data gathered across the two schools could provide a peek into the patterns of engagement with television across the social classes. Further, questionnaires were answered by both boys and girls, providing a gender-based perspective. The number of hours of television viewing varied amongst boys and girls. Boys in class nine appeared to be spending more time in watching television in comparison to the

girls – three to four hours in the Public school and four to five hours in the Government school. The trend was slightly different in the higher class. In class eleven, in the Government school, the number of hours spent in watching television was less. This was particularly true for the girls. In contrast, in the Public school, most girls reported spend more than four hours watching television daily, whereas boys spent considerably lesser time. Thus, patterns of television viewing appear to vary across both gender and social class.

This trend was observed because class ten Board examinations have been cancelled, thereby reducing the pressure on the students of class nine. The pressure of academics is considerably higher on students of class eleven as they have to prepare for 12th Boards and perform better. Moreover, class nine students are evaluated on the basis of continuous, comprehensive evaluation, which has also considerably reduced the pressure of studies.

Views about Reality Television Shows

The questionnaire administered to the students covered several aspects related to reality television shows. These included their entertainment value; themes, visual appeal, anchors, extent of identification with the participants, showcasing and talent promotion, and the audiences' involvement in the voting process. Most of the Government school and Public school students held that the prime reason for watching reality shows was their entertainment value. Sitcoms were the most popular theme amongst Government school students whereas talent shows, and adventure-based reality shows were popular among Public school students. When asked about visual appeal, most of the Government school students responded that they liked the sets and costumes of the contestants as well as of anchors, whereas Public school students responded by saying that reality shows do not have pleasing visual appeal, as the contestants and anchors all appear in real life

settings. Both the Government and Public school students found the format of reality shows to be easily understandable. They also shared that they watch some of the reality shows because of their anchors. However, most students reported that they did not participate in reality shows regularly through SMSs. Some of them felt that most reality shows are pre-planned, and winners are also decided in advance. As a consequence, they were not motivated to participate. The discussion above reveals that students from both the schools engage with reality shows and are avid followers of the same. However, they view the shows with scepticism. They are unsure of the authenticity of the shows and thus, do not take the shows' results seriously.

Public school students watch reality shows for its entertainment value, gossip and catfights, whereas Government school students watch reality shows because they promote talent, appeal visually, and they can identify with the contestants.

Role Models whom the Participants Identify with and Imitate

Ranvijay, the host of Roadies, was reported as the most popular television show anchor and role model by the students. Students said that they were able to identify with him. Government school students also mentioned Kiron Kher as their favourite role model. In addition they named contestants like Bharti, Ragini Khanna, and Shweta Tiwari as their role models. Thus, students seemed to look up to both hosts and participants in reality shows. All the role models mentioned by the students are film and television celebrities, and not participants representing the general public. Although reality television aims to bring an element of real life into television, adolescents tend to view it as any other scripted show with celebrities.

During the questionnaire administration, many students of the Government school did not make distinctions between reality shows and daily soaps. Thus, while mentioning their role models, they turned to actors of daily soaps. This also indicates that daily soaps have as much influence on the students of Government school as reality shows do. In terms of socio-economic class, it appears that the students of the higher economic group preferred reality shows to daily soaps that are based on family relationships.

Preferred Reality Shows

When students were asked about reality shows that they would like to watch in future, a maximum number of Public school students reported that they would like to watch reality shows like Big Boss, Beg Borrow Steal, Pawn Stars, So You Think You Can Dance, Dancing with the Stars, Wipe Out, Master Chef, American Idol and Extreme Make Over, as such shows are entertaining. Government school students reported that in future they would prefer to watch shows like India's Got Talent, Dance India Dance, Surkshetra, Gumrah, Savdhaan India, Jhalak Dikhla Ja, Fear Files and Sa Re Ga Ma Pa, as such shows promote talent. Students were also able to relate to the contestants and liked the shows since there was prize money involved in them. A clear distinction is evident in the preferences of students from the Public and Government schools. Most of the shows mentioned by the Public school students are those that are telecast on international channels and are in English. Students from the Government school preferred shows that are based in India and are telecast on domestic channels, with the medium of communication being Hindi or 'Hinglish'.

Government school students like sitcoms like comedy circus and talent shows like India's Got Talent mainly because of its sets, anchors, judges and costumes, whereas Public school students like adventure shows like Roadies and dating shows like Splitsvilla because they are able to better identify with the contestants and their lifestyles.

The contestants on these shows generally represent the upper middle class and upper class; in terms of their lifestyles, aspirations, and relatively liberal value structures.

Personal Meanings which Respondents Attribute to a Model.

According to Bandura, a model is anything that conveys information. So, newspapers, magazines, films, television and videogames are all models. Of these various models, the most popular model among both Government and Public school students is television, followed by films. Television itself showcases many models like actors, performers, artists, heroes, heroines, stars, anchors, judges, contestants of the shows, whom students observe and imitate. Government school students described the desirable qualities of a model as honesty, talent, good character, and empathy, while Public school students said that a model should have qualities like good looks, and be entertaining and adventurous.

Thus, the influence of economic class could be seen in the responses of the students. Students from the lower socio-economic background preferred intangible, covert qualities in a model. Those from the upper middle class did not look for such qualities in their models. Instead, they might be looking at these models in the media for their entertainment value and not as their role models.

Reality Shows and Adolescents' Virtual Worlds

The results of the study show that adolescents' engagement with reality shows is guided more by a perception of them as television programmes with entertainment value, that are rated by some of them as being interesting and informative while for others they are dull and uninspiring. A very potent adolescent need is the construction of a utopian world, where vicarious fulfilment of a number of psychosocial needs is sought. Reality television programmes seem to offer such potential to some

adolescents. While watching programmes like Big Boss for instance, many emotions and human relations are played out. Likewise in dance and music shows, the elements of competition, winning, being emotionally charged,etc, are felt as real. Further the needs for risk, adventure, excitation, recognition, and self-expression are also fulfilled.

PHASE 2: INTERVIEWS WITH TEACHERS

Views of Teachers Regarding Children Watching Reality Television Shows

When teachers were asked about their views about students' habits of watching reality television shows, all the teachers acknowledged that the shows could have both positive and negative impacts on children. The positive aspects included learning new things from shows such as Kaun Banega Crorepati, Master Chef, etc. In contrast, the teachers also felt that the shows encouraged students to mindlessly imitate the behaviour and fashion styles of the actors and actresses. They considered this as a waste of time. Further, they felt that shows like Roadies and Splitsvilla also influenced the students negatively by propagating aggressive behaviour.

Impact of Reality Television on the Behaviour of Children

When teachers were asked about the impact of reality television on the behaviour of children, most of the teachers responded that reality shows have a negative impact on children's behaviour. Giving examples of the influences that they had observed, the teachers cited the use of foul language by school students and demonstration of aggressive behaviour. Only two of the teachers interviewed pointed out the positive impact of reality shows on students, which is to serve as an inspiration for students to showcase their hidden talents.

Role of Reality Shows in the Development of Children's Personality

When teachers were asked about the role of reality shows in the development of children's personality, almost all of them acknowledged that it plays a significant role in their personality development. Further describing the nature of influence, they cited both positive and negative examples. These included children learning to use abusive words openly, indulging in violence and unnecessary fights or arguments, demonstrating adult-like behaviour from an early age, etc. On the other hand, one of the teachers also said that the shows help children to become more aware of social problems and to develop empathy. A few teachers expressed that the shows influence the identity development process of the students. A few teachers also expressed the need to exercise caution in choosing the reality shows that children watch. They felt that the nature of the influence of reality television on the students would depend on the type of shows being watched by them.

Views about Children's Participation in Reality Shows

When teachers were asked whether reality programmes in which children are participants should be discontinued, a majority of them said that they should not be discontinued. Those in favour of discontinuing the shows said they believe that such shows lead to unhealthy competition and adversely affect children's mental health. However, most teachers were in favour of continuing the shows, with a certain amount of censorship at the level of the media and the families.

Views about Educational Values in Reality Shows

When teachers were asked whether reality shows have any educational value almost all teachers,

except one, replied that some reality shows like quiz shows provide educational values. They were critical of dance and song-based reality shows, which they felt forced children to act like adults and played with their emotions to gain higher TRPs. Only one teacher mentioned that reality shows do not have any educational value.

Suggestions for Improving Reality Shows

When teachers were asked about suggestions for improving reality shows so that children could learn something valuable from them, most of them said that the shows should not have any abusive words and obscene scenes. They further argued that the shows should have some positive educational values for children. Some teachers also felt that reality shows should be brought under the purview of censorship. They expressed that it was important that these shows should have a positive value and that the negative aspects in them be banned.

Views about Banning Reality Shows

When teachers were asked about their views on whether reality shows should be banned or not, the majority of them said that they should not be banned. Certain shows, in their view, could provide meaningful learning experiences and knowledge, thus they needed to be promoted. The held that such shows make us aware of the alternative realities of the world and hence should continue. Only two of the teachers felt that reality shows should be banned completely since they have a negative influence on children and society at large.

Teachers' Views about Specific Reality Shows

When teachers were asked about existing reality shows which they approve of, and the ones that they feel need not be screened, most of them felt that reality shows like Little Champs, which boost the confidence of children and provide them with

the opportunities to showcase their talent, should be encouraged. In contrast, shows that focus on stunts, dating, and portray the use of abusive language, like MTV Roadies or Bigg Boss, should be banned. Teachers presented opposing views. While one of the teachers said that none of the reality shows should be watched, another said that something good could be learnt from every show.

Conclusion

Although the thrust of the present research was on investigating the nature and form of adolescents' engagement with reality television, many larger concerns emerged in the course of completing the research, which are of relevance to education. To begin with, the fact that children become hapless victims of adult greed and are often manipulated to fulfil adult expectations was a disturbing trend which appeared. This certainly merits discussion for preventive action.

Further, the early adultification and commercial monetisation of children's talents and abilities were also issues of grave concern that were visible. They were seen to create high-performance pressure and anxiety for children, making them vulnerable to stress. This is against the basic nature of childhood as a life stage which, across cultures and communities, is celebrated for its naturalness, spontaneity,and width of learning experiences, etc. The invasion of reality television also carries the impending danger of trapping adolescents in virtual and make belief worlds, in the ways in which all electronic media seems to do. Safeguards and cautions thus need to be built, and critical thinking as a major life skill needs to be infused in them. Reality television can also become a major distraction in adolescents' studies and tasks and lead to, at times, different obsessions and conflicts. What is also very disconcerting is the treatment that participants are subjected to at the hands of judges and voters. Often the experience parallels public shaming. The pain that a participant goes

through in such a scenario, such as being rejected, are issues of immense concern in the domains of human rights and humanistic education.

A somewhat larger issue in this regard is whether it is ethical to subject young children to a public platform of such severe competition, which their psyches are not ready for or prepared to absorb or face. The indelible impact that these experiences have and their consequences for life of the child have to be considered. They are serious matters to be contemplated in child rights and child development discourses.

Many adolescents are known to face a multitude of cultural conflicts stemming from television watching, since the projections in the programmes are usually very different from their lived realities. This danger extends to reality television as well. Thus a thorough debate on the consequences of reality television is required before any decision about its continuation or withdrawal can be taken.

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Exploring the Experiential Dimensions of Psychological Stress from the Lens of the Science Student

Gagandeep Bajaj

Assistant Professor, SPM College, University of Delhi

Abstract

The present study revisits the world of school science. It looks at the factors leading to stress amongst 11th standard science students and their ways of coping with it. The paper explores varied dimensions of their experience of studying science at the senior secondary level. This includes curricular content and its transaction, vocational aspirations and achievement-related dimensions. The study involved students from a cross section of mainstream schools. The first phase of the research work was rooted in identifying the magnitude of stress, while the second phase focused on the articulation of students' experiences, through open ended interviews. An in-depth analysis of the narratives brings forth compelling implications for rethinking the issues involved in science education, in schools, from the vantage point of the science student.

Keywords:

Theoretical Dimensions

Science is an integral part of our day to day lives. On one hand are the rapidly expanding boundaries of knowledge, represented by research in frontier areas, such as robotics, genetic engineering and artificial intelligence; while on the other hand is the face of science which is visible in every sphere of our life. An effective education in science is essential if one wishes to pursue a career in science and perhaps more importantly, if society hopes to develop an enlightened and empowered commune of people who are capable of understanding the scientific issues of the 21st century and making informed decisions. In this context, Prof. Yashpal (1992), is of the opinion that instead of considering science as an extraneous activity or as a tool for providing the means to a good life, we should treat it as a part of the culture of society - integral to our living and thinking, and connected to the deepest questions we ask in regard to who we are and where we come from. The positivist view

of learning assumes that knowledge is received from the teacher and interpreted in the same form by students. On the other hand, there is the view of knowledge acquisition being a constructive process. Learners come into the classroom with their own preconceptions and interpret the classroom experience through their own coloured lens. The result of this, as many researchers (Driver, 1985, 2013) have shown, is that the meaning that students derive from their instruction is different from what the teacher intended. Increasingly theorists like Holton, Karl Popper and Thomas Kuhn have been moving towards fluid conceptualizations of science which emphasize its dynamic nature, rather than seeing it as a static entity of universally validated, objective knowledge. This nature of the discipline needs to be reflected in the manner of its teaching. However, the science taught in schools tends to promote a rigid view of science, leading students to look at the scientific theories they study as the final truth.

A paucity of opportunities in the school to question

and discover new horizons of knowledge, diminish the sense of wonder and curiosity that students have about the natural world. Instead, anxiety, fear of science and of under-achievement in science subjects are common issues at the senior secondary level. The article looks at how psychological stress can be understood from the lens of the science student by giving credence to the experiential dimension. Stress is a global phenomenon that includes physiological, psychological and social variables. According to one view, psychological stress involves a particular relationship between a person and their environment, which is appraised by the person as taxing or exceeding his resources or endangering his well-being (Lazarus & Folkman, 1984). Researchers have classified stress in three ways, namely:

a) Stimulus-based definitions of stress, which equate stress with the external force acting on the individual. This finds a parallel in the physical science paradigm.

b) Stress as a response defines stress as the individual's reaction to environmental situations. This may be in the form of emotional or bodily manifestations.

c) The interactionist perspective is concerned with stimuli and reactions, as well as the coping resources which people use as they attempt to combat their difficulties. Stress, from this perspective would mean a significant excess of pressures over coping resources which results in reactions such as anxiety and frustration. The third perspective underlies this study. Thus, the study looks at the subjective evaluation of stress in terms of the manner in which it is perceived and experienced by students of science.

Research Design

The study was designed in two phases. It encompassed quantitative and qualitative aspects which attempted to construct a holistic picture of the phenomenon through triangulation. The first phase of the research work was located in identifying the magnitude of psychological stress among the science student population. After understanding the macro picture, a second phase focused on the articulation of students' experiences through open ended interviews. This phase delved into the nuances of their experience of studying science at the senior secondary level. There was an effort to take cognizance of the students' interface with various components of the school system, their interactions with teachers and peers, their perceptions about science, and future trajectories.

Participants

The focus of the study was senior secondary science; hence 301 students from 11th standard were selected. These students were studying science across various categories of schools, such as, Kendriya Vidyalayas, Government schools, Religious Trusts and Public Schools. Schools were randomly selected from each category and the entire science group of that school was included in the study. For the second phase of the study, eight students were chosen. Four of these students were identified as being highly stressed through the first phase of the study, and the rest as exhibiting low stress.

Research Tools

A questionnaire and open-ended interviews were the main research tools for data collection. The questionnaire was developed by the researcher after consulting the repertoire of psychological testing instruments available. It was finalized with the help of extensive inputs from science students, school teachers, administrators and science educators. This exercise brought forth a number of issues about science education which were of concern to the stakeholders and were thought relevant for inclusion in the questionnaire. The questionnaire was instrumental in mapping the macro-level picture of stress. Open-ended interviews were used in the second phase of the study, in order to understand the dynamics of psychological stress based on the articulation of the lived experiences

which science students perceived as stressful.

Thematic Analysis of Narratives

The present section looks at the interpretation of the data. The overall picture that emerged about the magnitude of stress experienced by science students did not show any statistically significant difference across schools. Students were found to be experiencing a moderate level of stress. 122 out of a total of 301 students studied were from the 'high stress' category. The interviews which constituted the basis of the second phase of the study were analyzed so as to delineate the narratives into the form of significant themes. Both the high and low stress groups were studied through a cross-case analysis to identify the factors causing stress. These have been explicated below. The presentation is interspersed with first-person narratives in order to bring forth the vividly rich tapestry which forms the mainstay of the study.

Achievement Related Experiences

An analysis of the narratives revealed that many students felt stressed because of the decline in their performance levels from 10th to 11th standard. This has been attributed to the discontinuity between the 10th and 11th courses, a disproportionate increase in difficulty level, and a lack of awareness about the kind of preparation required in 11th standard. Getting low marks is seen as a major setback in terms of career goals and one's reputation in the eyes of their significant others. Some narratives exemplifying these are given below:

"Coming first in the class is a good feeling, since the family feels happy. It boosts your confidence and the teachers are also impressed by you."

"Suddenly there was so much to do, that I could not understand where I was going wrong and what I needed to do to improve."

Another issue that was foremost in children's minds was the pressure related to achieving high marks in science. The reasons for this were highlighted in their responses. Some of these were regarding the terse and voluminous course, the increased workload, and unrealistic expectations of teachers and parents in terms of achievement. A few responses typifying this are:

"I live in dread of the thought that, what will happen if I do not get good marks."

"The other students get marks for steps and for grammatical mistakes while our marks are deducted because we are expected to be perfect."

A comparison of the two groups revealed an interesting insight into their perceptions and how these result in a greater ability to cope with difficult situations among the low stress group. The highly-stressed students attached considerable importance to coming first in class. The high stress group reported negative reactions due to reasons like the inability to live up to parental expectations, lowering of prestige in class, and a diminished possibility of advent into a "good" career. However, the low stress group had not allowed it to become an overriding concern and showed a more positive perception of the situation. They felt that marks were not the sole indicator of intelligence and potential. Few students from the low stress group articulated this in the following manner:

"I am not concerned about coming first because marks are not everything. You can get more marks by cheating. You might get less marks if you get confused during the exam or if you are expecting an easy question paper but you get a very difficult paper."

"I feel it is unfair to equate brilliance with marks. You might be brilliant in day-to-day application based things but you might not do very well in exams."

"To do well in an exam, you need to do additional brushing up, practice numerical etc. which I did not get time to do. You can study science in two ways:

a. Studying to gain something, by clearly understanding the topic in depth, consulting extra books and doing detailed study.

b. Studying only to score marks by memorizing, without trying to understand the reasons behind things and reproducing it in the exams.

I preferred the first method. But if you study in this way, you start lagging behind in class."

Curriculum and its Transaction

Curricular content and its transaction emerged as stultifying experiences causing stress amongst science students. Students reported an inability to cope with the vastness and difficulty level of the course. They found the course bookish, lacking applicability to the real world and irrelevant in terms of their later life. The unrelated nature of the 10th and 11th courses was another factor leading to non-comprehension and disinterest. School textbooks were perceived as insufficient and reference books along with tuitions, were the norm across both groups of students. Other areas related to subject-specific difficulties, especially in the numerical based and memorization oriented portions of the course. The necessity of using additional reference books was seen as another source of stress. Some narratives are given below:

"I don't understand why the science course is so difficult. Do they feel that today's children are super intelligent?

"Physics is bane of my life. Although people say that it has many uses and is interesting, I cannot understand it. Even if I try and do the theory after spending a lot of time, when it comes to numericals, I get confused."

"Learning scientific names is difficult. They tell us about micro-organisms which we cannot see or feel. So, we have to simply learn their names and characteristics. We have to memorize each and every detail because questions can be asked from the smallest topic."

Pedagogy emerged as a major factor in the causation of stress. Students largely reported negative experiences when asked about their science classes, with a few notable exceptions. Their perceptions about their science class revolved around feelings of boredom and disinterest. Teachers did not alleviate this burden; rather, they were seen as unhelpful and critical. The teaching-learning strategies adopted by most teachers were textbook-oriented with little regard to the exploratory and discovery-related aspects of science. Although practicals were seen as enjoyable, extensive tabulation, documentation, the disconnected nature of theory and practice, and the importance given by teachers to the "expected result", seemed to add to the students' burden. The following comments by students substantiate the above:

"When I took up science in 11th, I thought that we will get an atmosphere to ask our doubts and problems. I felt it will be exiting to know and discover new things but nothing of the sort is happening and it has become a burden."

"I hesitate to ask when I do not understand a point in class. They say that we should ask questions, but when we do we are ridiculed. The teacher usually says, why don't you open your books? If you had revised your notes properly, you would not be facing this problem."

"They think that we should be able to understand whatever they are saying in a minute. But all this is not possible. A child might be intelligent but he is learning a new thing and will definitely have problems sometimes. The teachers want that they should get a 'ready-made', well-read child."

The workload emerged as another area causing

excessive stress. This was manifested in daily assignments, practical work and frequent project submissions. The students were distressed by the drastic changes in their lifestyle. Continuous study, to the exclusion of all other activities, was taking its toll. They felt overwhelmed by the quantum of load. Along with the extra work in science, tuitions and entrance exam preparations were perceived as cumulatively leading to stress. Their responses about this aspect are as follows:

"We are preparing for our annual function and everybody except the science students are participating. We ourselves say that we are not interested because if we miss the practical periods, it is our loss, practicals are not repeated."

"I try to complete my practical files in the break, so that at home I can spend time on studying. But the work is so much that despite studying every day, something or the other gets left out."

Ameliorative strategies used by the high stress group center around studying for longer hours while the low stress group focus on a more organized and target-oriented use of time. Thus, the low stress group is seen to use more integrative strategies to combat this situation, in terms of pre-preparation for the class, soliciting the tutor's help, self-study and planned work schedules. A few responses of low stress students regarding this are:

"If we do the topic in the tuition classes before it is taught in school, it helps in understanding the topic easily."

"The teachers in school can't solve the problems of each one of the fifty students. It is much easier to understand in the smaller groups that we have in tuition classes."

Future Trajectories

Future trajectories were uncertain and therefore stress-inducing. Students across both the groups reported feeling stressed because of the dual pressure of the necessity of a vocational pursuit, along with the demands of the school curriculum. The necessity of a vocational pursuit has emerged as another area causing stress due to the stiff competition for admission into medicine or engineering fields. The limited knowledge of students about other feasible career options and the simultaneous need for preparation for the board exams and entrance tests can be stressful. However, the low stress group seemed relatively more flexible in terms of future career options. This is exemplified in the following responses:

"Although we do have a guidance counsellor, she is hardly ever available. I read careers supplements in newspapers and realize that there are many other options available, but I don't know how to go about it."

"After the boards, there will barely be any time to revise before the entrance exams. Simultaneous preparation is essential for achieving the target."

"It won't affect me much, since the main thing is to express myself. It does not matter in which way; whether through medicine, music, dance or social work. If I fail in one, I can do well in some other way."

Discussion

This study helps us to understand the world of science students and constructs an understanding of the phenomenon of psychological stress through their experiences and perceptions. A number of implications for science curriculum planning emerge from the experiences shared by the science students. Content has emerged as a major problem area, both in terms of its quantum, and its relevance. Thus it is important to rationalize the process of curriculum development. The newer advances in science, and future areas of development should

be reflected in the curriculum. The burden on the students needs to be reduced. A reduction of irrelevant, outdated material in school textbooks, as well as the incorporation of highly detailed and specialized knowledge at the post-school level, might be helpful. These issues need to be carefully debated in appropriate forums, keeping the practicality of the situation, especially in terms of time constraints, in mind. This is extremely important so as to reduce the pressure faced by science students at the senior secondary level.

As there is a disproportionate increase in the syllabus from 10th to 11thstandard with respect to volume as well as level, hence a construction of better conceptual links of the basic knowledge taught in 9thand 10th standard, with more advanced areas, might be appropriate; with the emphasis being on a gradual gradation from one level to the other. Redistribution of topics to avoid repetition and an identification of topics which lend themselves to integrated teaching, are other possibilities which can be thought about in order to reduce the stress experienced by students. Although the curriculum revision exercise following the publication of the NCF 2005 has tried to address many of the concerns, the ground-level realities need to be taken into account in order to accomplish the paradigm shift from rote learning towards equity, inventiveness, inquiry and creativity.

Other strategies in connection with this area include a greater role for aptitude testing and pre-preparation of the students at the time of opting for different streams. This should not only be in terms of assessing their proclivity but also in terms of reality orientation regarding the nature and amount of work required, so that they can anticipate the time and energy that they will be expected to devote to studies, thereby consciously arriving at a decision.

An upgradation of existing curricular material, as well as an expansion in the range of curricular

material available for science teaching and learning, has emerged as another major implication. The NCF 2005 recommends the incorporation of teaching-learning material apart from the school textbook, in the form of encyclopaedias, popular science books and alternative workbooks based on observation and experimentation. This could be done keeping in sight the time available and the abilities of the students, and should include frequent revision of books, incorporation of more real life examples, a more comprehensible and lucid style of presentation, publication of separate books on numericals, practicals etc. and most importantly, inclusion of material based on the criterion of concept clarification rather than only on the provision of information. Other audio-visual material which is in consonance with the students' needs could be provided especially with regard to an improvement in the standards of laboratory equipment.

Although process based interactive pedagogic strategies have been universally accepted as essential for developing problem-solving abilities, providing opportunities for creative expression, and providing a meaningful learning environment for students; they are yet to be used in schools on a continuous, ongoing basis as feasible alternatives to conventional methods. This has implications for both the pre-service and in-service teacher training levels. Perhaps these programs need to be geared towards providing greater practice in innovative techniques. A reduction in the teacher-student ratio in schools is needed to ensure a more fulfilling interaction. This would be helpful in exposing the learners to an inquiry-based environment where they can express their views, opinions and difficulties without fear of reprimand. Learning science might then become an enjoyable experience, rather than the threatening and nightmarish experience that it seems to have become.

An activity-based ethos also implies an increase in the number of practicals as well as a change in their

nature. Students need to be given the freedom to "explore" labs and attempt genuine investigation rather than only verification. Project work also needs to be re-thought, with the focus being on projects as a process rather than as a one-time activity. Projects and practicals can provide suitable opportunities for co-operative peer group learning. Extension activities related to science also need to be strengthened and consciously woven into the school science curriculum. These include science clubs, excursions, interactions with scientists etc.

Another implication which emerges forcefully is about the nature of the student-teacher interaction. Instead of having a working relationship with students, teachers should move in the direction of having a more humane relationship. Students are in the developmental stage of late adolescence, where they face a number of challenges. The tasks related to crystallization of identity, goal planning, as well as the resolution of specific subject difficulties, require the presence of an empathic teacher with active listening skills.

The lack of awareness among science students about vocational options other than medicine and engineering, implies the need for provision of counselling from an early stage, aimed at exposing students to a variety of science related professions as well as giving them information about the specifics of various professions i.e. the nature of competition, level of difficulty, a realistic appraisal of the probability of securing admission, the nature of work involved and the kind of jobs available in that area. Also, instead of having a multitude of entrance exams after 12th standard, each requiring a different pattern of preparation, centralized tests could be conducted for different professional courses based on a common syllabus. Science students need to feel included as a part of the school. They should be involved in the various school activities and also be able to take up leadership roles. This is important so that students do not feel marginalized and isolated from the mainstream.

Stress is sometimes portrayed as being only about the personal failure of a few individuals to cope. It is seen as a pathological state where there is something "wrong" with the individual who experiences it. Awareness needs to be generated about the phenomenon of stress as being neither a personal failure nor a pathological state. A positive attitude should be cultivated towards science, which involves looking upon the study of science as a worthwhile pursuit. This can be achieved by positive outlook training and talks organized by guidance and counselling services. It might also be implicitly communicated through the attitudes of science teachers.

Group guidance talks and individual counselling could prove effective in providing an education for healthy, adaptive study habits; for instance, how to deal with the workload, prioritization and time management. These could also help in building self-esteem and provide training in effective coping. This would include training in simple strategies which the students could practice themselves, like disputing irrational beliefs, counting one's blessings, dispelling beliefs that science is very difficult etc. Self-expression group sessions could be organized which might serve a cathartic function for students. Other stress management techniques like relaxation training, yoga and meditation can be included in the school program. The National Curriculum Framework 2005 provides a refreshing insight into the dynamics of science education but an active engagement of all the participants, as well as a critical understanding of the structural hierarchies of the school as an institution, is required to transform the vision into a reality. The upcoming New Education Policy hopes to provide a platform for discussion on such issues. A concerted effort needs to be made by all stakeholders, to initiate a debate at the national level in order to review the existing system of science education.

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"Bias": A Conceptual Overview

Aditi Gupta

Scholar, Central Institute of Education, University of Delhi

Abstract

A prosperous future, in terms of issues addressed by inclusion, relies on a perspective shift that nurtures differences, and views success through a lens of diversity. Each person can be distinguished from others in one or another trait. The need is to have equilibrium between viewing people as a 'whole', and each individual distinctly. Sometimes this quest causes the concept of bias to creep in. The word 'bias' is a commonly used term and has different meanings according to different people and contexts. Its impact could be malignant or progressive, depending on the identities and aspirations of those involved. A bias may have its origin in psychological ideas or sociological ideas (that have an explicitly visible existence, like caste). Different forms of biases exist. This paper wishes to view the concept of 'bias' theoretically.

Keywords:

In educational institutions like schools one may often observe an instance such as one where a girl, dark in color andhailing from southern part of the country, studying in a school in one of the northern states, is singled out by her classmates and teased because of her color, name or accent. Another case may be where a child coming from an economically poor Sikh home is teased for wearing a turban; or simply a child is teased because he is shy and sensitive or an introvert who wishes not to be actively involved with rest of the class. Other instances may be those where a certain group of students studying in a class are over-friendly with a particular child because he* is similar to them (wears nice clothes, carries a nice bag and is average in studies), while being disrespectful and mean to another child for being different from them perhaps due to the type of clothes he wears (not washed properly or ironed) or a weakness in academics, which he is always getting rebuked for. In the first example, the child who is favored by other fellow students will enjoy high confidence due to the positive atmosphere encompassing him. He may develop certain negatively oriented attitudes as well. However, in the second example, the child who is being teased or singled out by the fellow students, may suffer from a serious degradation in motivation, lack of concentration, lack of confidence and other such psychological problems. There are numerous such situations where a student in the school either is favored, by fellow schoolmates or by the teacher, or is denied respect and opportunities that are meant to be available to all students.

This paper discusses a concept that encompasses all the aforementioned instances and provides

* NOTE: Words like he/him/his are meant to denote all genders and are not to be considered as discriminatory in nature.

relevant terminology while bracketing ideas to facilitate their analysis, study and research. It is the concept of bias. While listing the possible viewpoints available to study and analyze bias, the inevitable link between bias and the human mind has been critically viewed in this paper. Further, through this paper, an attempt has been made to engage the reader in the forms that bias may take and its origin in concepts of diversity inclusion.

When attempting to define the term bias, there is no starting or end point. As vast as this concept is, it is not unknown to a layman as he* uses it in his everyday language. The dictionary defines the word 'bias' as "a tendency to believe that some people, ideas, etc., are better than others, that usually results in treating some people unfairly" (Merriam-Webster Dictionary) or "a partiality that prevents objective consideration of an issue or a situation" (p.9). If we look at its subjective meaning, it varies according to people and contexts. In other words, in a racially-diverse country racism may be prevalent thus rendering race as a source of grave bias; while in another less racially-diverse country bias may not have the same connotationIn a country like India where caste is a prevalent social reality, the meaning of the term bias acquires a different connotation altogether. In the latter context, the caste of a person becomes the source of either undeserved disadvantage or advantage. Hence the source of partiality varies according to place and time also. For instance, at one point in history, bias may be a result of a person's caste or creed, irrespective of their educational or economic status; while at another point bias may be due to his economic status or both.

Bias has been analyzed both anthropologically and sociologically. Nevertheless, each specific incidence of bias may be seen to have a subtle psychological origin, observable at various levels. In fact since the 1900's, psychologists have worked on understanding bias and biased behavior, with more disciplines attempting to study it more recently.

If one is studies bias from the purview of a particular discipline, the set of assumptions and concepts seminal to that discipline would result in a particular way of viewing bias. While the thrust of sociology is on the idea that the smallest unit of study is to be a set of individuals, psychology also lays emphasis on the existence, subjectivity and uniqueness of each individual.

The concept of bias is inseparable from that of 'diversity'. To understand diversity as a concept, one may take various approaches: referring to biological sciences, where diversity is represented through organisms being divided into various categories on the basis of some common and differentiated biological features; or one may understand it through mathematical figures – such as all closed figures with three sides are 'triangles'and so on. Similarly, diversity in humans stems from social aspects such as religion, culture, caste, race, creed, gender, language, economic status, differential physical abilities (visual, hearing and so on); or those emerging from each individual's psyche: attitudes, beliefs, dreams, aspirations, faith and so on.

However each discipline, be it psychology, sociology, philosophy, anthropology, education and so forth, seems to emphasize firstly that 'diversity' of the human does not come appended with a baggage, be it social or individual (even biologists have said that diversity is the reason why life propagated and is still in existence); secondly, to describe how views and internalizations of the concept of diversity is indeed a source of bias, which in turn manifests both as malignant and progressive influence on humans; thirdly, to suggest preventive measures and remedies. They further highlight that it is only humans who have attached baggage and meaning to diversity, be it social or individual.

However, if in a broader sense, diversity should

imply a peaceful synchronous co-existence rather than a melancholic, harmful source of difference and negativity, then what is it that causes hurdles in attaining these abilities? What is it which makes a person or a group favor someone and be against someone else? How does the concept of bias arise and how far can it be traced back to? One may attempt to answer these questions at two levels – one which views explicit causes, and another

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However, if in a broader sense, diversity should imply a peaceful synchronous co-existence rather than a melancholic, harmful source of difference and negativity, then what is it that causes hurdles in attaining these abilities? What is it which makes a person or a group favor someone and be against someone else? How does the concept of bias arise and how far can it be traced back to? One may attempt to answer these questions at two levels – one which views explicit causes, and another which goes deep into the implicit causes of bias. Explicit causes include those social ideas or constructs which seem to hve existed for a very long time. Caste, religious orientations, language and the like are some examples. Yet another may be biological differences, giving rise to differences in freedom, social image and self-image; like gendering, physical disability (visual, hearing and so on). Conversely, there might be some implicit causes which result in biased behavior. These may include the psychological health of an individual, personal motivations, or disappointments being linked to a certain trait in people; and then favoring or being against those possessing those qualities.

Many theories in psychology draw attention to the common grounds on which one can study the human mind, human nature, human growth

and development, cognition and personality. For instance, the Information Processing Model, Piaget's theory of Cognition, theories of Behaviourism, and so on. There are however, many theories in psychology which celebrate the individuality of each person and recognize that each individual is different from other despite undergoing the same processes and stages of growth and development; for instance, Vygotsky's theory, which takes note of the culture of a child; or the theories of Carl Rogers and Maslow celebrating the humanity and individualities of human, or theories of Gordan Allport, Cattell and Eysenck which explicitly study bias . Cattell and Eysenck have theorized that each person is different from the other in various traits. One may see the differences in people on the basis of traits, as another manifestation of diversity. Clearly, bias comes into existence in the conscious or sub-conscious mind of an individual when a person's mind takes note of, or is made to take note of, the differences that mark the sameness or difference of one person from another.

The fact that each individual is different from another and hence unique majorly impacts and supports the existence, manifestation and sustenance of bias. One can see this impact in a dual manner. First, when bias is arising not on the basis of a social construct like caste, religion, language or gender but on the basis of the individuals as they are. In this case, the source of bias becomes the "type" (Hjelle, L. A. & Ziegler, D. J., 1992) of person. Second, is the fact that individuals differ in traits and, "types" become the source of the difference in the manner in which an individual perceives a set of people. In other words, the difference in individuals on the basis of their attitudes, how they think, feel and perceive, causes difference in how they would act in favor of or against a person or set of people.

The term 'set of people' has a special meaning in the context of bias, in this paper. It comprises some people having certain same characteristics which

the concerned person (making the bias) is in favor of or against. Another 'set of people' are those who possess the bias. The term is therefore simply a way to represent two groups of individuals involved in the bias, at a particular point of time.

The reasons which provoke a person to be biased may be a result of the homogeneity or heterogeneity of two sets of people. First, the situation where bias exists on the condition of homogeneity, that is - one set of people favoring the other set having the same traits as themselves. Second, the situation where bias is made on the basis of heterogeneity, where one set of people are biased against the another set who differ from themselves on the basis of certain traits.

Other forms of bias may be visible at individual level or at more complex levels like organizational or institutional levels. Bias at an individual level is when a single person indulges in biased behavior, like unduly favoring or supporting one and/ or restraining others from otherwise commonly available opportunities. Bias at an institutional level implies that an entire organization indulges in biased behavior for or against a certain group of people who possess certain characteristics. For instance, depending on the mission statements of certain organizations like a school or college, the conditions of work develop and these may include the rules and regulations laid out for work, the recruitment process of that particular institution (for instance certain institutions inquire about the religion ormarital statusof an individual which plays a role in recruitment), the opportunities provided and the like.

In educational organizations like schools, institutional bias may be recognized through the recruitment process, non-administrative instructions to the teaching staff, the work culture of the school, disciplines and their arrangement in time tables, the location of staff rooms, and so forth. These are conspicuous ways in which institutional

or organizational bias can be seen.

What then, is the impact of institutional bias on the behavior and psychological makeup of the employees of that organization? While an employee works under biased conditions, or a student studies in a school, he internalizes the cues that finally lead to internalization and propagation of the institutional bias. This can be seen as an indirect form of institutional bias.

There is an immense difference between individual and institutional forms of bias. While individual bias is directly manifested through a human being, institutional bias is often manifested through intangible means. When bias is the result of the prejudices, stereotypes, ideologies and attitudes of a person towards life based on his own aims, aspirations, past experiences, learnings and world view; this kind of bias is different from the one taking place at an institutional level. When a person or group of people start exhibiting biased behavior due to their beliefs and experiences, intuitions, personal inconspicuous likes or dislikes, attractions or repulsions, towards the target of bias, then it is categorized as individual bias. However, if the reason underlying the bias is not personal but rather an organization's rules or regulations and propagation of that organization's culture, then it may be categorized as organizational bias. One may bring up here the cases where individuals (such as institutional employees) are under consideration, even while the bias seems to be 'organizational', the employee or employer or even the policy makers might sustain it due to personal aims and aspirations. In contrast, ultimately this behavior can be traced back to the organizational set-up and hence, the organizational bias.

Another category is social bias. For instance, if one is biased on the basis of religion, then all who have the same line of thought, though not necessarily acquainted, socially also form a set of people. Three forms of social bias towards a group can then be defined - prejudice, stereotyping and discrimination.

Prejudice is an individual-level attitude, whether subjectively positive or negative, towards a group and its members, that creates or maintains hierarchical status relations between groups (Glick P. et al, 1996, p.7). It is perceived as having three components - beliefs about a target group (cognitive); dislikes (affective component) and a predisposition to behave negatively towards the target group (connative component). Allport defines prejudice as "antipathy based on faculty and inflexible generalization. It may be felt or expressed. It may be directed toward a group as a whole, or toward an individual because [sic] is a member of that group." (Gordan Allport, The Nature of Prejudice, p.9) .

Mostly prejudice is considered as a negative attitude. Psychologists describe it as a process that takes place within one's psyche (intra-psychic). Nevertheless, it can be viewed in the reverse manner also - it is the social which develops the attitudes of an individual, and henceforth it is a process that takes place outside of the mind of a person and only later influences it. However, it is hard to neglect the fact that the prevalent social ideas are perpetuated across time and place only because they have been found to exist in the psyche of people; in the form of belief, reason, faith, attitude or knowledge. Continuing with the discussion on prejudice being an individual attitude, one may say that an individual's reactions contribute to this process, with individual views of deviation from a group eliciting a negative response, and those reinforcing the status quo, eliciting a positive response (Eagly & Deikman, 2005). A person from a disadvantaged group can also hold prejudices towards advantaged groups and their members. This is mostly reactive in nature, with anticipation of being discriminated against by the majority group's' members (Lecci & Johnson, 2003).

Next is stereotype. Simply put, whenever a person first meets someone or some group, he relates them to some previously existing category in his mind. These categories are based on his belief that if a person/group of people possess certain set characteristics (which may include a dress code, a way of talking, type of knowledge etc.) then they would also possess a certain other set of characteristics. This latter set of characteristics (assumed to be possessed) is also listed in the mind of the person under the category holding the corresponding former set of characteristics (observed by him or her). This is called stereotyping and these categories are called stereotypes. Stereotypes also anticipate the behavior of group members in a particular situation. This is so because a person/group of people may also stereotype themselves under certain schema in mind and behave accordingly, so they then meet all the criteria that enables them to be categorized under that particular stereotype. Hilton et al (1996) defines 'stereotype' as cognitive schemas used by social perceivers to process information about others.

Another concept which is irrevocably associated with bias is discrimination. It is mostly seen as a manifestation of biased behavior, but it can equally be viewed as a precursor to bias, prejudice or stereotyping. Discrimination Is an everyday word but here it needs to be understood as a terminology. It implies more than simply distinguishing amongst social objects; it also refers to the inappropriate and potentially unfair treatment of individuals due to group membership. Inter-group bias refers to the systematic tendency to evaluate one's own group memebers (the in-group) more favorably than a non-member (the out-group) (Glick et al, 1996). It involves both active negative behavior, and less positive responses than those towards 'in-group' members, under the same circumstances.

Discrimination can occur toward a specific member of a group or the group as a whole, but stereotypes

and prejudice are intra-psychic in nature (Glick et al 1996). Further, the prejudices and stereotypes held by a person may or may not be visible to others and the person may or may not be aware of them. Hence, bias may be explicit or implicit; that is, stereotypes and prejudices may involve explicit responses like beliefs and attitudes, or implicit processes like lack of awareness (of a particular person about the existing prejudices and stereotypes in his psyche) and unintentional activation (meaning that his behavior becomes biased subject to the prejudices and stereotypes he holds unconsciously or sub-consciously). Some argue that implicit biases are habitual cultural associations that are over-learned, rather than attitudes (Karpinski, 2001). These associations become so strong and grave that they may take the form of a stereotype. Others argue that implicit and explicit measures assess a single attitude measured at different points in the process of expression, with social desirability concerns more strongly shaping overt expressions (Jackson et al, 1995). Others consider implicit responses as often representing 'older' attitudes and stereotypes that have been 'overwritten' by new explicit forms of bias or incompletely replaced by individuals who strive for egalitarian beliefs (Glick et al, 1996).

Generally, the term 'bias', has negative connotations and negative impacts. However, in rare cases when bias leads to an advantage of one over another, it may help to achieve equity (focusing on providing equal opportunities to all, even if it means special provisions for the disadvantaged), rather than focusing on unbiased equality.

We may attempt to see the role of bias in altering the mental functions in individual and social behaviors. Perceptions, motivations and interpersonal relationships are impacted by bias, including individual psychological resilience. Psychologists have talked about the unconscious and sub conscious mind. Freud's description of a person's dark unconscious (Hjelle, L. A. & Ziegler, D. J., 1992), as a storehouse of one's unfulfilled

desires, also held "sexuality" as a means to project or manifest the bias on the basis of freedom. Researches in cognitive sciences have led to the conception of a subtle invisible personality, on the basis of the unconscious and subconscious mind, as described by eminent neurologist and founder of psychoanalysis, Sigmund Freud and Carl Rogers and Carl Jung, in their respective theories of personality.

Prevention of bias may be possible by aiming to facilitate the child's possession of techniques and dispositions to be a psychologically-sound, critical and reflective individual, who is able to maintain his humanity while striving to exist in a contemporary, commercial world. Hence psychological techniques come into the picture. Means to achieve this end include cognitive constructs, social ideas, philosophical ideas and ideological shifts, which help one to evade the initiation or promotion of bias. Remedial techniques may include awareness about the existence of such bias, sensitizing people on being humane and teaching them to respect diversity. These also require changes in the attitudes and dispositions of people. These are suggested for pre-existent deeply rooted biases, stemming from strong social constructs and beliefs like religion, caste, language, gender and others, which are hard to eradicate completely. As all these are internalized through intra-psychic processes, the psychological makeup of individuals plays a major role in how they react to biases against or for them, or how they act when being the propagator of bias. The decisions and behavior of an individual entirely rest upon his thought process, attitude, nature, and in general his psyche. Other than that, the stage of psychological maturity he is in is another factor to be taken into consideration as his dreams and aspirations also depend on these. One aspect of an individual's personality is how others perceive him, and his awareness of it. Clearly when he is biased, against or in favor, this knowledge of his - 'how others see me and value or devalue me' - may change drastically. Do the traits of a person get affected by or affect his decision to pursue biased behavior? Is personal disposition changed by bias, or is it a source of bias?

Consider a hypothetical case of a boy of, say 8-9 years, who takes admission in a new school where he does not have friends and is shy, sincere and sensitive. He is then easily prone to being teased, typecast, laughed at, or (if strongly biased against) he may face bullying from his classmates or seniors. In this tense atmosphere where he realizes his peers do not value him, his performance may suddenly decrease or he may lose interests in hobbies. Another contrasting case may be of a vibrant, light hearted, extroverted child. He, in the new school situation, is likely to find peers to interact with, adjust with; and if he is faced with any situation of bias he may not be deeply impacted or he may not succumb to these biases by getting negatively affected by others' opinions. Rather, he may adjust to the situation and his performance and interests may not change.

Yet another possibility is that in a new school, the child may be valued, for some reason or another, by peers as well as the teacher. This bias in favour of him may occur on account of his friendly nature, or strength in academics, sports or any another talent, or even from a financially sound background. This type of bias might positively impact his attitude and perception of himself or how others view him. In these specificaions, attention can be drawn to two facts; first, that bias may affect or be affected by one's psychological makeup and dispositions, but in turn may affect the psyche and dispositions of the person targeted also. Secondly, the impact bias has on the one being encountering bias may be positive or prove to be of a malignant nature. If educated regarding this, even parents can help the child and contribute in preventing the harmful impact of bias on children.

Psychology may address the issue of bias by sensitizing people to respect diversity, to not use bias as a means to give one an undeserved

advantage at the cost of others, and to be able to move beyond self-concern and progress in a collaborative rather than competitive atmosphere. While discussing these issues, it is inevitable to mention that contemporarily, this is addressed by the term 'inclusion'. It is a concept which addresses diversity arising from ability, family background, social class, gender, language, class, culture and many other similar sources of diversity and aims, ultimately to enable each individual (be it a child studying in school) to realize his potential despite variations due to diversity. It entails a rejection of discrimination.

The essence of inclusion is to let diversity be and not to cut the corners of a figure to make it fit while constantly challenging the individual to move slightly beyond comfort limits in order to progress. Coexistence of the 'normal' and the 'majority' with the 'abnormal' or the 'minority', and non-discriminatory provision of opportunities for all so that each realizes his/her true potential; is the basic idea of inclusion. A prosperous future in terms of inclusion relies on a perspective shift that nurtures differences and enables one to view success through a lens of diversity. Globally and in recent times, in India also, there is a thrust towards realizing inclusion in educational setups, be it at elementary, primary, secondary or senior secondary levels, or higher education. This entails a crucial change in the perceptions of people and that of a child, which would enable them to respect diversity amongst themselves and respect fellow human beings while progressing in a competitive, commercialized world. Psychology and inclusion seem to meet on these lines.

To sum up, diversity gives rise to a consciousness of 'same-ness' or 'different-ness' which in turn gives rise to changes in individual dispositions, hence allowing biases to creep in, which are mostly malignant in nature. Discrimination then also comes into the picture on the basis of prejudice, stereotyping and bias. This discrimination gives way to the undeserved advantage of one over the other. This partial treatment acts as a hurdle to those disadvantaged for no fault of their own. Rather, it is discrimination rooted in bias which does not allow thos discriminated against to reach to their utmost potential; not by creating a visible hurdle but by focusing on equality rather than equity, and hence not making provisions for the 'disadvantaged' to achieve their potential. Sensitizing people and changing their attitudes pertaining to these issues may be taken up by psychological methods. As Sigmund Freud said, "Men are more moral than they think and far more immoral than they can imagine."(8).

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Psycho-Social Impact of Breast Cancer on Patients, The Role of Family Behavior in Coping and Rehabilation.

Prantika Chatterjee

Abstract

The research is based on the qualitative and quantitative study of women who are suffering/diagnosed with breast cancer. Sampling was done from one Private Hospital and one Government Hospital in Pune. It is a study that reveals the psychological and social impact on their health, behavior, treatment and rehabilitation. It describes and discusses the common emotional problems, treatment patterns and their coping mechanisms to combat the disease. Factors such as diagnosis, treatment, awareness of self and the role of family and support groups are outlined. Appendices include literature on the risk factors, awareness of early signs of breast cancer, factors in delay of treatment and the various patterns of rehabilitation.

Keywords: *Psychosocial Impact, Coping, Health-seeking behavior, Breast cancer, Treatment, Awareness, Stigma, Support Groups.*

Introduction

Breast cancer is one of the rising causes of mortality among women all over the world. In India there has been a marked increase in incidences of breast cancer in the last decade. Prevalence of breast cancer is highest in the metropolitan cities in India. Breast cancer is the second leading cause of cancer-related deaths (after lung cancer) and is the most common cancer among women, excluding non-melanoma skin cancers. According to the World Health Organization, more than 1.2 million people will be diagnosed with breast cancer this year, worldwide. Breast cancer is the second most prevalent cancer among Indian women, the first being cervical cancer. One in fifty eight women are affected by breast cancer in the age group of 30-70 years; predominantly in urban areas. Breast cancer accounts for 20% of the total cancer-related diseases, and 75,000 new cases occur in Indian women every year (Delhi Breast Unit, 2000).

Breast cancer imposes considerable psychological stress and trauma on the patients. The initial diagnosis and preparation for surgery can induce a period of emotional turmoil during which rapid mood swings cause immense disruption to the woman's lifestyle. By contrast, the patient may be euphoric during the immediate post-operative period, possibly due to relief from uncertainty and anticipation of a return to normal life. This initial reaction, however, is transient, and many women experience a period of shock and denial, followed by anxiety, about 2–3 months after surgery. Most women eventually develop coping skills, enabling them to live a normal lifestyle. Women's responses to the fact that they have a life threatening disease and that they must cope with unpleasant treatments, vary enormously. For some, the diagnosis in itself is a major emotional catastrophe; for others it is simply another problem to face, alongside the many other social difficulties in their lives. Volunteer groups, composed of women who have had breast cancer themselves, self-help groups, and

national cancer charities, can also offer valuable help and advice to breast cancer patients and their families. The role of family in the patient's coping mechanism will be studied. Included in the arena of study is the relation of awareness about the disease and the attitudes of family members of the patients, with the treatment and rehabilitation of the patient. Over half of the drop in mortality in women under the age of 65 years seems to be attributed to early detection of tumors, which has been observed since the mid-1980s. This could be a result of an increase in breast cancer awareness, predating the start of the breast screening programmes (Stockton D., 1997).

Review of Related Literature

It was concluded that the awareness regarding breast cancer was very high in the general population (Camilleri-Brennan J., 1999). From this study, the conclusion was made that evaluating the potential for program adoption offers insight for tailoring preventive health interventions and their implementation strategies to improve diffusion in the field of practice (Halverson P.K., 2000). Awareness was not related to satisfaction, emotional distress, or quality of life (Iconomou G., 2002)

Women from the low coping cluster also preferred more active involvement in treatment decision-making (Hack T.F., 1999l). Coping through emotional processing was related to one index of greater distress over time. Analyses including dispositional hope suggested that expressive coping may serve as a successful vehicle for goal pursuit (Stanton AL, 2000). The findings support the view that changes of both benefit and harm are present in the experience of breast cancer (Arman M., 2001) Cognitive appraisal, coping strategies, and levels of emotional distress should be considered in designing programs for enhancing adherence to early detection procedures (Cohen M., 2002).

Study conclusions suggest that it is important to intervene for traumatic stress symptoms soon after the diagnosis of breast cancer. Furthermore, women at greatest risk are those who are younger, those who receive post-surgical cancer treatment, those who are low in emotional self-efficacy, and whose lives are most affected by having cancer (Koopman C., 2002). The correlation of coping mechanisms at the beginning of radiotherapy with low quality of life and high psychosocial stress at 2 years could help to identify patients at risk for low psychosocial adaptation (Sehlen S., 2003).

Under the conditions of cancer diagnosis, patients do not tend to assign responsibility to themselves possibly due to a need to avoid guilt, low self-esteem, and social distance (Anagnostopoulos F., 2004).

Patients should be offered the opportunity to attend support groups, as they provide additional and necessary assistance; especially in the areas of new information on cancer and coping with its psychosocial sequel (B.S, 1993).

Breast cancer and its treatment may cause ongoing sadness, fear, anxiety, and anger. Primary care physicians, because of their close relationship with patients, are often in a position to notice when natural and reasonable emotional reactions go to an extreme. Sensitive support and education of patients who are trying to choose a treatment method may minimize anxiety (Williams T.R., 1995).

Social support may shield women with metastatic breast cancer from the effects of previous life stress on their emotional adjustment. Also, pain is greater among women with greater life stress, regardless of social support (Koop man C., 1998).

The main reasons listed for women participation in psychosocial support were mental distress, a desire to obtain help, and the wish to cope with the illness. The main reason for not participating was

insufficient support from family, friends or doctors (Plass A., 2001).

The findings of this prospective study suggest that participation in cancer support groups could have a long-term effect in reducing anxiety and depression in breast cancer survivors (Montazeri A, 2001).

Although strong evidence suggests that coping and psychosocial intervention can improve psychological outcomes for breast cancer patients, potential effects on physiological outcomes remain speculative (Luecken L.J., 2002).

Relationships between anxiety, social support, coping, and defence, in connection to mental health, were studied among patients with suspected breast cancer, awaiting diagnosis. The results showed that patients reported elevated levels of anxiety and required high levels of social support. Social provisions were somewhat related to 'instrumental coping', but sparsely related to 'emotion-focused coping'. Hence, social support and 'emotion-focused coping' did not in themselves repress anxiety. 'Instrumental coping' did; even in a situation where nothing could be done. Social support is suggested to be the product of an 'instrumental coping style', not necessarily contributing to it (Drageset S., 2003).

A review of literature was done on the relationship between stress and the development of breast cancer, which investigates the immune system as a possible mediator. Personality traits, response to stress, and stressful life events are considered.

Although the difficulty of measuring stress makes it difficult to demonstrate a tangible relationship between stress and breast cancer development, studies reveal that stress is related to breast cancer in various ways. Dealing positively with stress may improve the quality of life of patients with breast cancer (Bryla C.M., 1996).

A study was done to find out the relation between cancer and depression. Half of all cancer patients have a psychiatric disorder, usually an adjustment disorder, with depression. Anxiety about illness, such as cancer, often leads to delay in diagnosis, which has been estimated to reduce prospects of long-term cancer survival by 10-20%. Effective psychotherapeutic treatment for depression has been found to affect the course of cancer. Psychotherapy for medically ill patients results in reduced anxiety and depression, and often pain reduction. In three randomized studies, psychotherapy resulted in longer survival time for patients with breast cancer (18 months), lymphoma, and malignant melanoma. Thus, effective treatment of depression in cancer patients results in better patient adjustment, reduced symptoms, reduced cost of care, and may influence the course of the disease. The treatment of depression in these patients may be considered a part of medical as well as psychiatric treatment (Spiegel D., 1996). A pilot study was conducted on depression and anxiety symptoms in women at high risk for breast cancer. The objective was to study the effects of group intervention in high-risk relatives of breast cancer patients. Results showed that there was a significant reduction of depression symptoms as reported on the Center for Epidemiologic Studies Depression Scale. Similarly, there was a significant reduction of anxiety symptoms as reported on the State-Trait Anxiety Inventory state scale. They concluded that the group intervention model was effective at reducing symptoms of depression and reactive (not chronic) anxiety (Wellisch, D.K., 1999).

A qualitative met synthesis was done on the hidden suffering amongst breast cancer patients. The aim of this study was to review literature on how the lived experience of breast cancer and suffering was described, and to interpret and discuss the result from the perspective of suffering. When findings were interpreted from the perspective of suffering and an ontological health model; actions, values, and existential concerns were understood as both

expedients for alleviating suffering and a sign of the patient's inner struggle (Arman, M. 2003).

On the whole, cancer patients with children experience lower mortality than the childless, though without a special advantage associated with adult children. This suggests a social effect, perhaps operating through a link between parenthood, lifestyle and general health. Women who had never married did not have the same disadvantage (Kravdal, 2003), so they suggested that preventive care and medical services should therefore be directed to in public and financially disabled classes of patients. (De Cuyper L et al, 2003,Nov-Dec). They concluded that , the lack of differences in certain psychosocial aspects may indicate a generally good adjustment in the TM(Total mascectomy) patients after their surgery. Psychosocial disruption in the patients' families is reflected in the study where patients' husbands in the TM group were significantly more disturbed. (Yeo, W. 2004 Feb)

Methodology

The study was conducted in two hospitals in Pune city.
- A Private Hospital (under the Apollo Group of Hospitals).
- A Public Hospital (Public General Hospital).

These hospitals were chosen due to the fact that they have a higher number of breast cancer patients. On an average, there are 5-6 patients per day in the Out Patient department and Day Care Units combined. Efforts were made to compare the difference between private and government hospital set ups.

Sample Size- The sample size for the study was 30.

Out of 30:

20 patients were interviewed from the Private Hospital.

10 patients were interviewed from the Public Hospital.

Inclusion criteria:

All the women were diagnosed with breast cancer and undergoing treatment in both hospitals between 16th November 2014 and 30th December 2014. The sample also included recurrent cancer cases and follow-up cases. The main instrument used for data collection was informal patient interviews. These patients came to the hospital for their chemotherapy sessions. The interview was carried out on the basis of a pre-formulated questionnaire. The interview was a semi-structured one which comprised of both quantitative and qualitative questions. At first, an informal visit to the hospital was made. The persons concerned, e.g. the Head of the Oncology Department, the Medical Director of the hospital and the Head of the Mammography Clinic were met with and were informed about the research objective. They were asked about the official procedure of approaching the patients in order to carry out interviews with them.

Permission from all concerned authorities was taken to carry out the different procedures i.e. of interviewing the patients, and gathering technical information from the doctors, nurses and other administrative officials. This was done with the help of an official letter from the School of Health Sciences. In this way, a good rapport was created in the hospitals. Initial contact with the patients was made through the nurses in the OPD and Day Care Unit. They introduced the patients to the researcher. After getting introduced the patients and their accompanying relatives were told about the objective of the research. They were assured that the information received from them would only be used for academic purposes and for further research. While asking some personal questions, assurance regarding confidentiality was given to the patients. Language was not a problem, as all the patients understood Hindi and Marathi.

Results

The following table shows the different reactions of patients after getting diagnosed with breast cancer.

Hospital	Fear of the death/cancer	Worried about children	Confused/ No Reaction	Accepted	Unaware of their cancer
Private	12 (60%)	2 (10%)	2 (10%)	2 (10%)	2 (10%)
Public	6 (30%)	0	3 (30%)	1 (10%)	

Reactions varied among the 40 women who were diagnosed with breast cancer. 60% were traumatized and shocked due to having a fear of death, 10% were more concerned about their children and their future (these were the young women who had small children), 10% were quite confused as they were not aware about cancer so they were in a passive stage, and 10% of the patients took the illness as an event which was destined for them, and thought that "thinking about the disease in a negative way won't cure the illness". They had a strong belief that they would be cured of the disease very soon and would be able to lead a normal life. 10% of the patients did not know that they were suffering from cancer.

Uncertainties faced by the patients after being diagnosed with Breast Cancer

There were different types of uncertainties faced by the different patients. The following table gives an account of them:

Worried about childen	Fear of reoccurrence	Fear of Operation	NO uncertainties	Other
2 (10%)	2 (10%)	2 (10%)	10 (50%)	4 (20%)
Nil	Nil	Nil	6 (60%)	4 (40%)

Among the 20 women interviewed in the Private Hospital, 50% of the women were very positive about life and did not have any future uncertainties, 20% did not know that they were suffering from cancer, and also some of them were cured, but they were the follow-up cases. 10% of the women were worried about their children, 10% were fearful of recurrence of the cancer in the same or the other breast, and 10% feared the operation (mastectomy).

Among the patients interviewed in the Public hospital, 60% of them were very positive about life and did not have any future uncertainties, and 40% were uncertain regarding the duration of treatment and wanted it to finish soon.

The following graph shows the help received by patients from different sources, enabling them to cope:

Help from others to cope
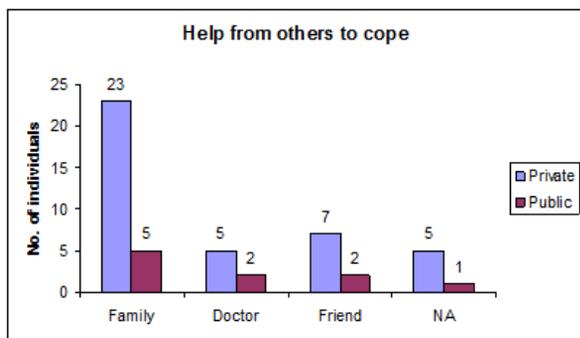
Among the 20 women interviewed in the Private hospital, 55% could cope with their illness due to the support of their family members, 10% could cope with their illness due to the support of their respective doctors, 25% were helped by their friends and 10% did not know that they were suffering from cancer.

Among the 10 patients interviewed in the Public Hospital, 50% could cope with their illness due to the support of their family members, 20% could cope with their illness due to the support of their respective doctors, 20% were helped by their friends and 10% did not know that they were suffering from cancer.

In both the samples, it was observed that family plays a major role in supporting the patients and helping them cope.

The following graph shows the influence of different sources of support on the patients:


Help from others to cope
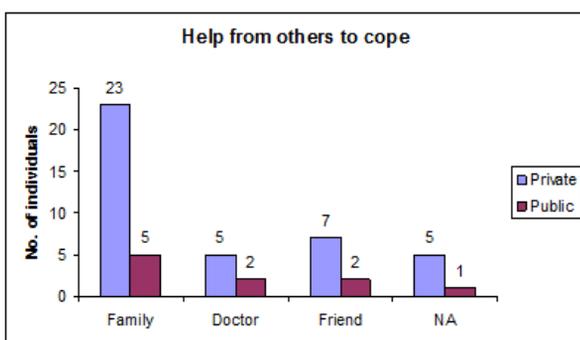
NB-These are the individuals who were unaware that they had cancer.

Among the 20 women interviewed in the Private hospital, 35% of the women were very confident that they would get cured very soon and would be able to lead a normal life. 25% held that their doctors were responsible for boosting their morale and helping them cope. 25% said that due to their family members' support, they could cope. 15% were still in doubt and were very uncertain about their futures.

Among the 10 women interviewed in the Public hospital, 20% of the women were very confident that they would get cured soon and be able to lead a normal life. 40% said that due to their family members support they could cope. 20% were still in doubt and uncertain about their future.

Impact of family behaviour on coping:
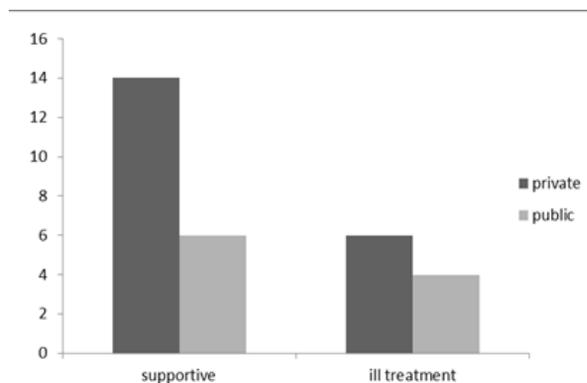
Out of the 20 patients in the private hospital, the graph depicts that 14 (70%) had a supportive family which helped in coping while 6 (30%) were not treated well by the family and in–laws, so the coping process had either not started or had been delayed.

In the Public hospital, out of 10 patients, only 6 (60%) had supportive families while 4 (40%) were not treated well and were neglected by their family members.

Workload given to the women by the family members after detection of the disease:

Hospital	Less Work	No Change
Private	13 (65%)	7 (35%)
Public	5 (50%)	4 (40%)

Most of the women received proper care and attention from their family members and were not allowed to do any work after they were diagnosed with cancer.

In one case, the woman was ill-treated by her parents-in-law after getting diagnosed with breast cancer. Some women were perceived as burdens by their family members; this made them more pessimistic and they wanted to die soon. A sense of guilt also gripped many women; they thought that they were wasting the hard-earned money of their children.

Impact of attitude of family members towards the disease on promptness of treatment:

From the above graph, it can be deduced that out of 20 patients in the private hospital, 12 (60%) received immediate treatment due to supportive family members who also took the course of treatment seriously. They also were aware that cancer can be cured completely if detected and treated promptly. 2 (10%) patients received late treatment due to either financial problems, or a lack of seriousness from the family members. 6 (30%) of the patients' families were absolutely ignorant about the disease and the course of treatment; hence they were delayed in receiving medical help. In the Public hospital, immediate treatment was received by 6 (60%) of the patients while there was a delay in the treatment of 2 (20%) patients, who were neglected for quite some time before they were brought to the hospital.

Changes in social interactions of the patient after getting diagnosed with breast cancer

The following table shows the differences in the social behavior of the patient after being diagnosed:

Among the 20 patients interviewed in the Private hospital, 45% had lesser interaction with friends and neighbors. 5% had increased interaction with their friends, as their friends came to meet them more regularly. For 42.5% of the women, there was no change in their social interaction patterns.

Among the 10 patients interviewed in the Public hospital, 50% of the women interacted less with their neighbours and friends, and for the other 50% there was increased interaction with friends.

This shows that the majority of the patients from the Private Hospital remained isolated and had less social interaction, as compared to the patients from the Public Hospital who received support from their friends; relating to their ability to cope as well.

Impact of breast cancer on the professional life of the women

The following table shows the changes faced by patients of the Private Hospital after getting

Hospital	Less Interaction	More Interaction with friends	No Change
Private	9 (45%)	2 (5%)	9 (45%)
Public	5 (50%)	5 (50%)	Nil

diagnosed with breast cancer:

Left Job	Take more leave	No change
1	2	4

NB - All the women interviewed in the Public Hospital were unemployed.

In the Private hospital, it can be seen from the above table that among the 20 women interviewed, 7 were working women and amongst them 1 had to leave her job as she was unable to attend, due to physical weakness. 2 had to take more leaves to attend their treatment sessions like chemotherapy and radiation. 4 of the women did not take their disease as obstacles, and continued to be regular at their workplaces.

Impact of acceptance of the disease on rehabilitation
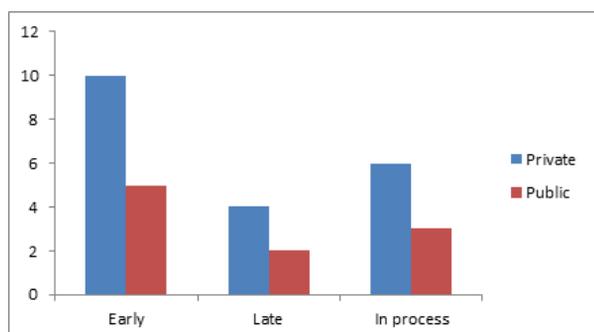
Out of 20 patients in the Private hospital, 10 (50%) had early rehabilitation while 4 (20%) took some time to accept the fact that they were suffering from cancer and hence there was a delay in rehabilitation, though eventually they came to terms with the disease. 6 (30%) patients were under the process of getting rehabilitated.

Discussion

The objective was to do a qualitative study on the psycho-social impact of breast cancer on patients and to explore the health-seeking behaviour of breast cancer patients. The study explained the different types of psychosocial impact of breast cancer on the patients and their families. Aspects such as the coping mechanisms for mental trauma, social isolation, the role of family members and society in aiding coping, treatment, and rehabilitation are also explored. Focus was also given to the impact of the disease on the professional and social lives of patients.

Psychosocial Impacts of Breast Cancer

Breast cancer has many sociological impacts on the patient. It brings a lot of changes in the patient's family life, her social life and her professional life. Different members of the family had differing attitudes towards the patient. In the Private hospital, most of the patients (70%) had a supportive family environment which helped them in coping, while others were not treated well by their family members. The latter seemed to be quite disturbed and said that their family members wanted them to die so that they would not have to spend heavily on their treatment. Some of them who were young were also told by their parents-in-law that they would like their son to be remarried, and therefore would not take any financial responsibility for their treatment.

Social life

There were different types of changes in the social life of the patients. Most of them (45%) had lesser interaction with the friends and neighbours. Among them, a few were so depressed and anxious about the disease, that they could not talk to anyone and wanted to stay alone and isolated. For few, the reason for less interaction with friends was because they were ashamed to appear before their friends, due to developing alopecia as a side effect of chemotherapy. They preferred staying at home, but liked to interact if any of their friends came to meet them. 45% of the patients felt that there was no change in their social life and the interaction level was the same as it used to be before the disease occurred. These were generally the working ladies who perceived the disease as a "part of life" and not as disease. Some of the ladies had a positive frame of mind and did not consider the disease as a hurdle in their life.

In the Public hospital sample, it was observed that for 50% of the patients, there was lesser interaction

with the society, and for the rest there had been an increase in their interactions, as more people came to meet them.

Professional life

Among the working women, many faced some changes in their professional lives. Very few of the patients had to leave their jobs; being unable to take the strain of handling their job as well as home. Moreover, the treatment schedule was so long and it produced so many side-effects that it was difficult for them to continue with their jobs. For a few of the patients the significant change was that they had to take more leaves from their duties. They mentioned that their colleagues were considerate and were more co-operative after knowing about their illness. Most of the women said that they did not face any changes in their professional life, and would never allow the disease to interfere with their daily routine.

Rehabilitation

It is evident from the results that most of the patients have been able to cope well and get rehabilitated, while few were under shock and it took some time for them to accept that they were suffering from a terminal illness. Amongst the ones who are in the process of rehabilitation, there are a few who are panicked about the whole situation, and some have gone into depression. They are anxious about the future of their children and families.

Summary and Conclusion

In this study the different psychological and sociological impacts of breast cancer was studied. It was observed from the study that more than the pathological severity of the disease, it was the psychological setbacks which gripped the patients and reduced their quality of life. The access to health care was also studied in this context.

This study covered all aspects including the trauma or depression that patients went through after their final diagnosis. It also explored the different mechanisms that patients adopted in order to cope, and how different people helped in coping with the ensuing trauma and anxiety. Cancer in one family member upsets all the members in a family and they also suffer from some form of depression and anxiety as an element of uncertainty grips the whole family. Along with family, there is a change in societal perspective towards the patient. One of the major changes in the lifestyles of the working women was that they had to leave their jobs due to long treatment schedules .This led to social isolation of some, which had a psychological setback on them.

Overall, the study revealed the attitudes, perceptions and the approaches of the patient towards the disease, the changing relationship with family due to the disease, and the communication between the patient and others, like health care professionals and family members.

The findings of the study can be summarized in the following points:

- No correlation was observed between the general education level, working status of women and awareness regarding cancer.
- Awareness and responses of family members, plays a role in early diagnosis and treatment.
- Counseling from the other patients (who are cured or whose treatment is ongoing) helped to build confidence in the newly diagnosed patients.
- Counseling of health care professionals like doctors and nurses played a major role in the coping process of patients.
- There is a direct correlation between the behaviour of family members in the coping and rehabilitation of patients.
- Apart from the above findings, some observations were made which aided in the early detection and diagnosis of the patients and also improved the coping strategies

adopted by the patients; they are as follows:

• Different Support Groups were formed by the breast cancer patients themselves to help counsel the newly diagnosed patients. This plays a vital role in helping patients cope faster and think positively.

• The study of psycho-social impacts of breast cancer on the patient, their family and society has brought out some hidden lacunae. It has helped to highlight aspects related to the coping mechanisms of the patient, the support they get from different sources and their future uncertainties while they are suffering from the disease. It has also elucidated the impact of the behaviour of family members on treatment, coping and rehabilitation.

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Abstract

"परिवेश" व्यक्ति के व्यक्तित्व निर्माण को प्रभावित करने वाला सबसे प्रभावकारी कारक है । शिक्षा–शास्त्र बच्चे के परिवेश को, उसके सीखने–पढ़ने तथा उसकी आशाओं–उम्मीदों को निर्धारित करने वाले, महत्वपूर्ण अव्यव के रूप में चिन्हित करता है । किंतु "परिवेश" से हमारा तात्पर्य क्या है इसको लेकर कोई एक राय नहीं है । क्या परिवेश से हमारा अर्थ घर और आस–पड़ोस से है? या कि एक वृहत्तर क्षेत्र जिसमें मोहल्ला, गाँव और गाँव के पार के समुदाय भी शामिल हों? परिवेश की क्या कोई सीमा है, कब हम अपने परिवेश से निकलकर बाह्य परिवेश में क़दम रख देते हैं ? यह लेख, प्रसिद्ध समाजशास्त्री एम एन श्रीनिवास के " भारत के गाँव", श्रीलाल शुक्ल के लोकप्रिय उपन्यास 'रागदरबारी' तथा एस. सी. दुबे की पुस्तक 'भारतीय समाज' से प्रेरित हो, परिवेश को मानवशास्त्रीय (एथोनोग्राफ़िक) तरीक़े से समझने का एक प्रयास है । वस्तुतः इसमें एक गाँव का बिंदुवार अध्ययन करके यह जानने का प्रयास किया गया है कि गाँव का परिवेश क्या है । यहाँ यह भी समझने की कोशिश कि गयी है कि क्या एक परिवेश विशेष की अपनी कोई निश्चित सीमा है, जिसके बाहर के अव्यय इसे प्रभावित नहीं करते? हाँ और न, उत्तर की इन दोनों ही परिस्थितियों में परिवेश की समझ और बेहतर होने की आशा बनी रहती है ।

Keywords: शिक्षा–शास्त्र, एथोनोग्राफ़ी,

"परिवेश" व्यक्ति के व्यक्तित्व निर्माण को प्रभावित करने वाला सबसे प्रभावकारी कारक है । शिक्षा–शास्त्र बच्चे के परिवेश को, उसके सीखने–पढ़ने तथा उसकी आशाओं–उम्मीदों को निर्धारित करने वाले, महत्वपूर्ण अव्यव के रूप में चिन्हित करता है । किंतु "परिवेश" से हमारा तात्पर्य क्या है इसको लेकर कोई एक राय नहीं है । क्या परिवेश से हमारा अर्थ घर और आस–पड़ोस से है? या कि एक वृहत्तर क्षेत्र जिसमें मोहल्ला, गाँव और गाँव के पार के समुदाय भी शामिल हों? परिवेश की क्या कोई सीमा है, कब हम अपने परिवेश से निकलकर बाह्य परिवेश में क़दम रख देते हैं ? यह लेख, प्रसिद्ध समाजशास्त्री एम एन श्रीनिवास के "भारत के गाँव", श्री लाल शुक्ल के लोकप्रिय उपन्यास 'राग दरबारी' तथा एस सी दुबे की पुस्तक 'भारतीय समाज' से प्रेरित हो, परिवेश को मानवशास्त्रीय (एथोनोग्राफ़िक) तरीक़े से समझने का एक प्रयास है । वस्तुतः इसमें एक गाँव का बिंदुवार अध्ययन करके यह जानने का प्रयास किया गया है कि गाँव का परिवेश क्या है । यहाँ यह भी समझने की कोशिश कि गयी है कि क्या एक परिवेश विशेष की अपनी कोई निश्चित सीमा है, जिसके बाहर के अव्यय इसे प्रभावित नहीं करते? हाँ और न, उत्तर की इन दोनों ही परिस्थितियों में परिवेश की समझ और बेहतर होने की आशा है ।

गोकुलपुर, भोपाल से जयपुर की ओर NH–12 (जयपुर–जबलपुर) पर लगभग 51 किलोमीटर की दूरी पर स्थित एक कस्बा है। सामान्यतः भोपाल से गुना, कोटा, राजगढ़ एवं बाँसवाड़ा (राजस्थान) जाने वाली सभी गाड़ियों का यह सवारी ढिकाना है। साथ ही यहाँ के 'पालक के पकोड़े' एवं 'पान' मशहूर हैं, तो लोग यहाँ सफर के बीच सुस्ता लेते हैं। जहाँ

आपकी बस आपको उतारती है वहाँ खड़े होकर चारों तरफ नजर दौड़ाने पर आपको चाय–नास्ते की दुकानें, एक पेट्रोल पंप, पान की गुमठियां (छोटी पत्तरे की बनी दुकाने), एक मज़ार, मोटर–गाड़ी के गैरेज, हवा भरने के पंपों की गुमठियाँ एवं दो बड़े–बड़े विज्ञापन के 'कट–आउट्स' दिखाई देंगे। बस–स्टैण्ड कहलाने वाला इस स्थान पर आपको बस का स्टैण्ड कहीं नज़र नहीं आयेगा। होटलों के सामने सड़क से समानांतर ही बसें खड़ी हो जाती हैं, ऐसे में जब एक से दो बसे 'बस–स्टैण्ड' पर आ जाती हैं, सड़क के इस पार से उस पार कुछ दिखाई देना दुर्भर है। ये 'बस स्टैण्ड' लगभग 500 मीटर NH–12 के समानांतर सिमटा हुआ है। जमीन पर गुटखे के पाउच, कुरकुरे के खाली पैकेट, अन्य प्रकार के कागज एवं थैलियां जगह–जगह बिखरे पड़े नजर आते हैं। इस नज़ारे के मध्य सबसे सुकुन वाली कोई चीज़ नज़र आती है तो वह है दो बड़े–बड़े मिट्टी के घड़ों वाल 'निःशुल्क प्याऊ'! गिले–लाल कपड़ों से ढके ये घड़े ईंट–सीमेंट से बने पक्के चबूतरे पर रखे रहते हैं। पास में रखे होते हैं काँच के दो गिलास एवं घड़े से पानी उलीचने का बर्तन। इनमें पानी कौन भरता है, यह किसी को स्पष्ट पता नहीं, परन्तु जब कभी वह खाली हो जाते हैं, प्याऊ से जूड़ी पीछे वाली दुकान वाले ही इनमें पानी डाल देते हैं।

NH-12 पर गोकुलपुर आने की खबर तब लगती है जब बस का कंडेक्टर पीलूखेड़ी आने की आवाज देने लगता है। यह गोकुलपुर से लगभग 4–5 किलोमीटर की दूरी पर स्थिति है। यहीं बस पार्वती नदी का पुल पार करती है। लोग जेबों सिक्के निकालकर नदी में फेंकने का प्रयास करते हैं एवं कुछ बसें तो अगरबत्ती लगाने के लिए 2–5 मिनट रुकती भी हैं। यहाँ बीयर फैक्टरी, मैदा फैक्टरी, जिसे 'हिंद स्पीनर्स' के नाम से जाना जाता है, सबसे बड़ी संख्या में लोगों को रोजगार देती है। एक अजीब तरह की सुगंध

(दुर्गंध) से पीलूखेड़ी के आने का संकेत खुद–ब–खुद मिल जाता है। फिर, पीलूखेड़ी से गोकुलपुर के मध्य इक्के–दुक्के पक्के मकान, एक सतसंग भवन, दो पक्के (खेल के मैदान सहित) स्कूल, एक सुसज्जित टेलीफोन एक्सचेंज भवन, एक पेट्रोल पंप एवं लगभग हर कंपनी के मोबाईल नेटवर्क वाले टावर दिखाई पड़ते हैं।

बस के गोकुलपुर 'बस स्टेण्ड' पर रुकते ही आस–पास की होटलों से कुछ बालक (8–16 वर्ष) पालक–पकोड़े, चाय, पानी–पाउच, मूँगफली हाथ में लिए बस में चढ़ जाते हैं। गोकुलपुर राजगढ़ एवं शाजापुर जिले के लिए राजधानी (भोपाल) पहुँचने का 'गेट–वे' है अतः यहाँ से शाजापुर जिले की दो तहसीलों शुजालपुर एवं कालापीपल के लिए गाड़ियाँ चलती हैं। ऐसे में दिन के हर पहर आवाजाही बनी रहती है।

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बसाहट के अनुसार गोकुलपुर को चार भागों में विभाजित किया जाता हैः बस स्टेण्ड, मण्डी, गाँव एवं खेड़ी। गाँव की बसाहट लगभग 700–800 वर्षों पुरानी है। वही मण्डी, खेड़ी एवं बस स्टेण्ड ने अपना वर्तमान स्वरूप पिछले 150 वर्षों के दौरान प्राप्त किया है। गाँव राजपूत मोहल्ला, कुम्हार मोहल्ला, चुमलिया की बाखल, मण्डलोई की बाखल, दला की बाखल एवं हरिजन मोहल्ला में विभक्त है। परन्तु स्वरूप में परिवर्तन आया है। 'बाखल' की चारदीवारी अब स्पष्ट नहीं रह गई है। एक मोहल्ला दूसरे में कब तब्दील हो जाता है इसकी स्पष्ट पहचान करना मुश्किल है। कहा जाता है कि यहाँ एक कबिलाई बस्ती के तौर पर पानी की उपलब्धता वाले इलाके की तलाश में भटकते हुए लोग नदी की समीपता के चलते बस गए।

अंग्रेजी हुकूमत के समय यह 'नरसिंहगढ़ रियासत'

का अंग रहा। जागीरदार पप्रसिंह यहां के पहले जागीरदार रहे। रियासत का थाना भी यहीं था, जिसे रियासतों के विलय के समय 20किलोमीटर दूरी (NH–12 पर नरसिंहगढ़ की ओर) पर स्थित एक गाँव कोटरा में स्थानांतरित कर दिया गया था, चूँकि कोटरा मुख्य सड़क से भीतर है अतः कुछ ही समय में थाना यहीं पुनर्स्थापित कर दिया गया। जो अब लगभग आज गोकुलपुर 70–80 गाँवों का थाना है। 1935–40 में स्वतंत्रता आंदोलन के दौरान ही 'ग्राम स्वराज्य' की लहर में यहाँ भी ग्राम–पंचायत की स्थापना की गई जो आज जिले की सबसे बड़ी ग्राम पंचायत है। इसे नगर पंचायत बनाने के कई प्रस्ताव आए पर कुछ स्थानीय समूह इसका विरोध अपने निजी स्वार्थों के चलते करते रहे हैं।

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भोपाल से जयपुर की तरफ जाते समय गोकुलपुर में जिस तरफ बस आपको उतारती है ठीक वहीं से अंदर की तरफ एक सड़क जाती है। इसे कालापीपल सड़क कहते हैं। वहीं सीधे हाथ पर (कालापीपल सड़क के सामने) मज़ार के पास से एक सड़क उधर अंदर को जाती है, वह है 'लसूल्या रामानाथ पहुँच मार्ग'। गोकुलपुर की अधिकांश (95») बसावट कालापीपल सड़क के आस–पास या उसी पार है, उसके सामने वाली तरफ कुछेक बस्तियाँ हाल के कुछ वर्षों में बसी हैं पर वे NH–12 के सामानान्तर ही भोपाल की तरफ बढ़ती जा रही हैं न कि सघनता से फैल रही हैं। उस तरफ जो सघनता है वह 'लसूल्या रामनाथ' गाँव की ही है।

काला पीपल सड़क की तरफ रुख करते ही फलों के ठेले कतार में खड़े दिखाई देते हैं, शाम होते–होते सब्जियों के ठेले भी आ जाते हैं। लगभग 25–30 मीटर पर ही सीधे हाथ की तरफ एक पतली परंतु कांक्रीट की बनी सड़क अंदर की ओर जाती है,

यह सीधे अस्पताल पहुँचती है। इसके समानान्तर नए घरों की कतार लग चली है। यह पिछले 10 वर्षों का ही परिणाम है। अस्पताल सड़क (गली–1) जहाँ समाप्त होती है वहाँ कालापीपल सड़क के समानांतर एक सड़क कालापीपल की ही तरफ बढ़ती है (गली–2)। गली–2 एवं कालापीपल सड़क के मध्य भी एक समानान्तर गली है (गली–3)। गली–3 के समानान्तर अभी कुछ नए पक्के मकान खड़े हुए हैं साथ ही खेत भी बचे हुए हैं जिनके बीच कहीं–कहीं पक्की कोठियाँ दिखाई पड़ जाती हैं। गली–3 का मार्ग बीच–बीच में अनियमित निर्माण से अवरुद्ध होता है, परन्तु यह अन्ततः कालापीपल मार्ग और गली–2 से कुरावर मण्डी की समाप्ति पर जाकर मिल जाता है।

पुनः यदि बस स्टेण्ड से प्रारम्भ किया जाए तो उल्टे हाथ की तरफ हर 10–15 मकान छोड़कर अन्दर की तरफ कुछ गलियाँ जाती हैं, परन्तु ये काफी अन्दर को न जाकर 2–4 मकानों के बाद खेतों में मिल जाती हैं। बस स्टेण्ड से लगभग 200मीटर अंदर निकल आने पर जो गलियाँ अंदर को जाती हैं वे कुछ सघन होने लगी हैं। लगभग 500मीटर (कालापीपल सड़क पर बस स्टेण्ड से) की दूरी तय करने के बाद जो गली उल्टे हाथ को अंदर जाती है वो काफी सघन बस्ती तक ले जाती है। इसी बस्ती से होकर पुनः एक गली कालापीपल सड़क के समानांतर चलने लगती है एवं मण्डी की समाप्ति पर अन्य गलियों कें घुल–मिल जाती है। (गली–4) बस स्टेण्ड से लगभग 1 किलोमीटर अंदर आने पर एक चौराहा पड़ता है। इस चौराहे से उल्टे हाथ पर जो कांक्रीट की 10 फीट चौड़ी गली अंदर जाती है वह गली–4 को चीरती हुई NH–12 से जाकर मिलती है।

मण्डी के अंत पर जहां गली–1, 2, 3, 4 मिलती

हैं वहां एक नाले पर पुल बना है। जिसे पार करते ही दो–राहा आता है। सीधे हाथ का रास्ता 'गाँव' को जाता है एवं उल्टे हाथ को सीधे आगे बढ़ने पर कालापीपल मार्ग पर ही 'खेड़ी' आती है।

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यदि बसाहट के अनुसार लोगों की मुख्य आर्थिक गतिविधियों एवं सामाजिक स्थिति पर नजर डालें तो एक रोचक पहलू उभर कर सामने आता है। कृषि ही जीविका का मुख्य एवं एकमात्र आधार है। गाँव में मुख्यरूप से काश्तकार ही बसते हैं। स्त्री एवं पुरुष दोनों ही साल भर कृषि संबंधी गतिविधियों में संलग्न रहते हैं। काश्तकारों की प्रमुख जातियाँ खाती एवं देशवाली है। यह जातिगत विभाजन जितना सामाजिक है उतना ही राजनैतिक भी। पिछले 30 वर्षों में से 20 वर्ष सरपंच पद पर खाती समाज का ही सदस्य चयनित हुआ है। अन्य जातियों जैसे कुम्हार एवं हरिजन की भी मुख्य बसाहट गाँव में ही है। कुम्हारों का दर्जा चमारों, भंगियों (स्थानीय भाषा में हरिजनों के लिए प्रयुक्त शब्द) से ऊँचा है, एवं शादी–ब्याह में उनका विशेष सम्मान भी होता है। धोबी गाँव की मुख्य बसाहट का अंग नहीं रहे। चौरसिया (पान–कत्था का धंधा करने वाले) एवं बनियों तथा ब्राह्मणों के कुछ घर गाँव के बीचो–बीच स्थित है। कुछेक घर कायस्थों के भी हैं।

खेड़ी भी मुख्य रूप से काश्तकारों की ही बसाहट है, परन्तु ये काश्तकार गाँव के काश्तकारों की तुलना में ज्यादा समृद्ध हैं। वस्तुतः गाँव के वो काश्तकार जो अपने खेतों पर घर बनाकर रहने में सक्षम थे, उन्होंने ही 'खेड़ी' को बसाहट में तब्दील कर दिया। अतः खेड़ी पर रहने वाले अधिकांश परिवारों की कृषि भूमि उनके घर से लगी हुई है। गाय, बैल एवं भैंस प्रमुख पालतू पशु हैं। जिन्हें कवेलु की बनी बिना

दीवार वाली छायादार जगह, जहाँ पानी की छाजन (मिट्टी की लंबी बनी पानी भरण की जगह) भी होती है, बाँधकर रखा जाता है। पशुओं की रहने की यह जगह जहाँ 'गाँव' में मुख्य घरों में ही एक भाग के तौर पर है, 'खेड़ी' में घरों से अलग कुछ दूरी पर स्थिति देखी जा सकती है।

खेड़ी से निकलकर मण्डी में आने पर आर्थिक परिवर्तनों की सुगबुगाहट होना शुरू हो जाती है। मण्डी की शुरुआत एक धर्मशाला एवं उसके ठीक सामने स्थित 'राम मंदिर' से होती है। पास ही में गाँव की पहली 'आरा मशीन' (लकड़ी को ईमारती लड़की में बदलने वाली मशीन) है। धर्मशाला के ठीक सामने आज से पाँच साल पहले तक एक विस्तृत मैदान था जिसमें 'हाट' (साप्ताहिक बाजार) के दिन सब्जी, फल और अन्य वस्तुओं का बाजार लगता है। चूँकि जमीन देशवाली समाज की थी, समाज ने निर्णय किया कि वहाँ हवनकुण्ड वाली 'यज्ञशाला' का निर्माण किया जाएगा अतः अब वहाँ 'यज्ञशाला' बन गई है। (कुछ लोगों का कहना है कि पिछले विधानसभा में देशवाली समाज के एक सदस्य को टिकट मिल सके इसके लिए उन्होंने 'यज्ञशाला' आधारशिला कार्यक्रम को बढ़ा मुद्दा बनाया गया। 'यज्ञशाला' उद्घाटन में 108 हवन कुण्डों पर लगातार 21 दिन तक कर्मकाण्ड का कार्यक्रम चला, जिसने आसपास की काफी जनता को आकर्षित किया। परन्तु यह बात कितनी सच है। यह ठीक–ठीक नहीं कहा जा सकता है। क्योंकि पिछले चुनाव में देशवाली समाज से किसी सदस्य को किसी भी पार्टी से टिकट नहीं मिला।

'यज्ञशाला' के स्थान पर लगने वाला सब्जी बाजार अब स्कूल के मैदान में लगता है क्योंकि पंचायत के पास अन्यत्र इतनी बड़ी खाली जगह नहीं थी। यज्ञशाला के पास ही कालापीपल की ओर से आने वाली बसें रुकती हैं अतः कुछेक चाय–नाश्ते की

दुकानें यहाँ अच्छा धंधा कर लेती हैं। यज्ञशाला जहाँ समाप्त होती है वहीं से मुख्य बाजार प्रारंभ हो जाता है। परन्तु ये प्रारंभिक दुकानें छोटी हैं: आकार एवं सामान की मात्र की तुलना में। जिस तरफ यज्ञशाला है उसी दिशा में 'पंचायत का भवन' कुछ छोटी दुकानों के बीच स्थित है। पहले गाँव में ही पंचायत भवन था। सन् 2003–04 में इसे मण्डी में लाया गया। यह 'मण्डी' के उस दबदबे का परिणाम है जो उसकी सबल आर्थिक एवं सामाजिक स्थिति से उत्पन्न हुआ है। पंचायत भवन के बाद से ही बड़ी–बड़ी दुकानें प्रारंभ हो जाती हैं–ये बड़ी दुकानें मुख्य रूप से 'किराने' (राशन) की हैं। बनिया वर्ग (वैश्य समाज) के लोग ही मुख्यरूप से इन बड़ी दुकानों के मालिक हैं। आसपास के 400–500 गाँव उधार एवं नगद दोनों रूपों में खरीद के लिए यहाँ आते हैं। वस्त्रें की बड़ी दुकानें भी बनियों द्वारा ही संचालित हैं। स्टेशनरी एवं साज–सज्जा की दुकानें अन्य जातियों जैसे महेश्वरी बनियों (अग्रवाल एवं माहेश्वरी बनिये इन्हें 'नीचा' मानते हैं), ब्राह्मणों, पाटीदारों, कायस्थों द्वारा भी संचालित की जाती है।

ऊपरी तौर पर किराना एवं वस्त्र के धंधों में संलग्न वैश्य समाज का मुख्य धंधा ब्याज पर रकम उठाना है तथा 'गल्ला उठाना' यानि कृषि उपज मण्डी में बोली लगाकर अनाज खरीदना है। इन सबके साथ वैश्यों के पास ही अधिकांश बड़ी जोते भी हैं। ये अपनी जोतों पर दो तरह से सौदा करते हैं 1) बँटाई 2) कुडल्ला। 1– बँटाई से तात्पर्य है कि अपनी जोत किसी पास वाली जोत के काश्तकार को खाद एवं बीज के साथ दे दी जाती है, फिर कुल 'आमद' (उगाए गए अनाज) को दो हिस्सों में बाँट लिया जाता है। 'कुडल्ले' के तहत अक्षय तृतीया के दिन जोत को सलाना कीमत तय कर फसल उगाहने के इच्छुक व्यक्ति को सौंप दिया जाता है। फसल की लागत एवं उपज से भूमि के मालिक कोई मतलब नहीं रह जाता है। इन दो

तरीकों के अलावा एक तीसरा बंदोबस्त भी 'गाँव' में प्रचलित है। वह है 'हाली' रखना। 'हाली' जोत की देखरेख, फसल संबंधी संपूर्ण जानकारी एवं सामान जुटाने वाला वह व्यक्ति होता है जिसे पुनः अक्षय तृतीया (आखातीज) के दिन सलाना आय पर रख लिया जाता है। पशुओं की पूरी देखभाल सिंचाई की उपयुक्त व्यवस्था करना भी हाली की जिम्मेदारी होती है। हाली रखने वाले काश्तकार को समय–समय पर खेत का मुआयना करते रहना पड़ता है। सामान्यतः भूमिहीन कृषक ही हाली बनते हैं। 'कुडल्ले' से जमीन भी भूमिहीन कृषक ही लेते हैं, परन्तु ये वे कृषक होते हैं जिनके पास वैकल्पिक रोजगार उपलब्ध होता है। (वरन् फसल न होने की स्थिति में कुडल्ले की रकम अदा करना असंभव हो जाता है।)

बस स्टेण्ड तक मुख्य काला पीपल मार्ग के दोनों तरफ भिन्न–भिन्न दुकानें हैं। वस्त्रें की कुछ दुकानें 'सिंधी' समाज के लोगों द्वारा भी चलाई जाती है। 'बस टेण्ड' से कालापीपल मार्ग पर सीधे हाथ पर पहले 800 मीटर पर स्कूल का प्रांगण है फिर अगले 200मीटर पर थाना है। थाना ठीक पंचायत भवन के सामने पड़ता है। एवं स्कूल भव्य दुकानों के सामने। SBI बैंक भी स्कूल प्रांगण के पास ही है। स्कूल की बाउण्ड्री से सटकर मुख्य सड़क पर छोटी–छोटी गुमठियाँ लगी हैं, कुछ अण्डों की, कुछ चमड़े के हाथ से बने जूतों की, कुछ नाश्ते–पानी की। इन गुमठियों में कुछ गुमठियाँ 'कैरम बोर्ड' का खेल किराये पर (05 रुपये घण्टा) खिलाने का काम करती है। पिछले एक–दो सालों में 'कम्प्यूटर गेम्स' एवं 'स्क्वैश' भी किराये पर खिलाये जाते हैं। स्कूल का प्रांगण यूं तो बहुत बड़ा है पर इसकी आधी जगह में सामने की दुकानों का माल जैसे सीमेंट, सरिया आदि पड़ा रहता है। बाउण्ड्री वॉल के नाम पर स्कूल तीन तरफ से गुमठियों से घिरा पड़ा है। एक ही प्रांगण में तीन अलग–अलग शाला भवनः हायर सेकेण्डरी स्कूल

भवन, माध्यमिक शाला भवन, नवीन प्राथमिक शाला भवन हैं। नवीन प्राथमिक शाला के पीछे बास्केटबॉल ग्राउण्ड के नाम पर सीमेंट का एक लम्बा चौड़ा चबूतरा भर हैं जो भी खस्ता हालत में हैं। शौचालय की व्यवस्था सिर्फ हायर सेकेण्डरी स्कूल भवन में ही हैं।

स्कूल के पास 'बस स्टेण्ड की तरफ' गली–3 पर एक बस्ती है जिसे ''कॉलोनी'' कहा जाता है। यह PWD द्वारा बसाई गई बस्ती है, जिसमें अधिकांश रहने वाले शिक्षक–शिक्षिका ही हैं अतः इसे 'शिक्षक–कॉलोनी' भी कहा जाता है। वैसे अब यह शिक्षकों ने अपने पुराने घर किराये पर देकर बस स्टेण्ड के निकट नवीन बस्तियों में 'बड़े घर' बना लिए हैं। किराये पर रहने वालों में मुख्यतः फैक्ट्रियों में काम करने वाले मजदूर हैं। कॉलोनी समाप्त होते–होते कुछ झुग्गियां अस्तित्व में आने लगती हैं जो गली–3 पर अस्पताल तक फैली हुई हैं। इनमें खटीक (मांस बेचने वाले), पिंजारे (रजाई–तकिये भरने वाले), कुछ अन्य पिछड़ी जातियाँ जैसे बसोड़ (झाड़ू बनाने वाले), चरवाहे (जिनके पास पांच–छः बकरियाँ होती हैं) रहते हैं। कुछ पिछड़ी मुस्लिम जातियों के सदस्य जो कबाड़ एकत्र करने का कार्य करती हैं वे भी इसी बस्ती में रहती हैं। इसी बस्ती में एक मदरसा भी है जो एक 'कबाड़ खरीदने वाले चाचा' (स्थानीय लोग इसी नाम से बुलाते हैं।) द्वारा चलाया जाता है। गली–3 से गली–2 के मध्य कुछ खेत शेष है जो बिक चुके हैं एवं जिन पर अब कृषि नहीं होती। कुछ खेतों को सुव्यवस्थित कॉलोनियों में काटा गया है जिनमें शिक्षकों, पुलिसवालों, मध्यम व्यापारियों, पंचायत कर्मचारियों, बैंक कर्मियों के मकान बनने लगे हैं।

काला पीपल मार्ग के उस पार यानी 'बस स्टेण्ड' से उल्टे हाथ पर कुछ इसी प्रकार की कालोनियां अस्तित्व में आने लगी हैं। गली नं–4 जहां अस्तित्व में आती है, वहाँ एक सघन बस्ती है जिसे 'छोटी जीन' कहा जाता है। यहाँ मध्यम श्रेणी के व्यापारियों के घर, अन्य जातियों जैसे कायस्थ, पाटीदार, तेली, राजपूतों के घर हैं। इसी बस्ती में सिंधी समाज के भी कुछ घर हैं। जीन में ही कुरावर की एकमात्र मस्जिद है, जो घरों से इस तरह सटी हुई है कि अजान की मीनार न हो तो पहचान आना मुश्किल है। मस्जिद से सटे हुए मकान मुसलमानों के हैं जो गली–3 की मुस्लिम बस्ती से भिन्न है। ये आर्थिक दृष्टि से ज्यादा संपन्न हैं। इनकी गाड़ी–मोटर के गैरेज, फलों–सब्जियों की दुकानें, मांस–अण्डों की दुकानें हैं। कुछ के 'लकड़ी के पीठे' (लकड़ी के बल्लियों की दुकान) भी हैं। गली–4 पर 'गाँव की तरफ बढ़ने पर खातियों के घर, काछियों की बस्ती (सब्जी उगाने वाले / फूलमाली) आती है। वहीं पास ही में 'नाईयों की चाल' है।

काला पीपल सड़क के सीधे हाथ पर स्कूल के बाद 'संभ्रांत मुस्लिम परिवारों' (जिनमें वोहरा भी शामिल हैं) के घर आते हैं। उसके बाद 'थाने के ठीक पीछे धोबियों के घर' तथा उनसे सटे हुए हरिजन के घर हैं। ये बस्तियाँ मण्डी का ही हिस्सा है। 'गाँव' एवं 'खेड़ी' पर धोबी समाज न के बराबर है। हरिजन समाज के अधिकतर परिवार आज भी मैला ढोने का काम करते हैं, कुछ सुअर भी पालते हैं। कुछ सदस्यों ने मिलरक 'बैण्ड–बाजा' मण्डली बना ली है। यह कुरावर की एकमात्र अपने प्रकार की मण्डली है। मण्डली के सदस्यों का अपने समाज में ऊँचा ओहदा है। सदस्यों के पक्के मकान और जीवन–यापन के पर्याप्त संसाधन भी हैं।

इन स्थानीय समुदायों के अलावा फैक्ट्रियों की वजह से यू–पी– एवं बिहार से बढ़ी संख्या में मजदूर वर्ग कुरावर में आकर बस गया है। जिनकी क्रमोन्नती हो

चुकी है एवं आर्थिक हालात कुछ बेहतर हैं उन्होंने स्वयं के मकान बनाना प्रारंभ कर दिए हैं। इनमें से कुछ शादी–ब्याह के लिए कुछ समय पहले तक अपने पुश्तैनी गाँव जाया करते थे, पर पिछले कुछ वर्षों से यह चलन घट गया है। स्थानीय समुदाय में पूर्ण स्वीकृति के लिए 'जमीन' होना, आज भी बहुत महत्त्वपूर्ण है। जिनके पास अपनी स्वयं की जमीन या मकान नहीं है वे वृहतर तौर पर स्थानीय समुदायिक प्रक्रिया के अंग नहीं हैं। राजनीतिक दृष्टिकोण से देखने पर ज्ञात होता हैं कि किसी एक जाति या समुदाय या वर्चस्व तो है ही पर वास्तविक भूमिका वैश्य समाज निभाता हैं जो आर्थिक रूप से काफी सबल है।

Reflection

एक दिन की रानी
'किरण वर्मा'

माता पिता बनना ईश्वर की सबसे बड़ी नियामत है। माँ बनना एक सुकून भरी अनुभूति का परिचय देती है। माता पिता बच्चे के पहले शिक्षक होते हैं। घर और परिवार में रहकर ही बच्चा बहुत कुछ सीखता है। जो संस्कार बच्चे में आते हैं वह परिवार में रहकर निर्मित होते है। परिवार में रहकर सहयोग की भावना आती है। माँ के स्नेह और दुलार से भावनात्मक सम्बन्ध विकसित होते हैं। माँ का दिल इतना बड़ा होता है कि उसमें दुःख और खुशियाँ समां जाती हैं। जिस घर में माँ होती है उस घर को स्वर्ग कहते हैं। जब बच्चा घर में आता है तो माता पिता अपनी दुःख और परेशानिओं को भूलकर उसकी सेवा में लग जाते हैं, जिससे उनको खुशी का अनुभव होता है। माता पिता से संतान को जो कुछ भी प्राप्त होता है, वह अमूल्य है, उसकी तुलना किसी भी वस्तु से नहीं कर सकते। माँ की ममता और स्नेह तथा पिता का अनुशासन किसी भी मनुष्य के व्यक्तित्व के निर्माण में सबसे प्रमुख भूमिका निभाते हैं।

किसी भी मनुष्य को उसके जन्म से लेकर उसे पैरों पर खड़ा करने में माता पिता की मुख्य भूमिका होती है। माता–पिता को किन–किन कठिनाईयो से गुजरना पड़ता है, इसका वास्तविक अनुमान सम्भवतः स्वयं माता – पिता बनने के उपरांत ही लगाया जा सकता है। जब बच्चा इस संसार में आया है तो माता – पिता पर उसके अच्छी परवरिश की पूरी जिम्मेदारी होती है। आज संसार में बच्चे का जो भी अस्तित्व है, उसका श्रेय माता – पिता को ही जाता है। इस दृष्टि से माता – पिता सदैव पूज्यनीय होते हैं। कितने कष्टों को सहकर माता बच्चे को जन्म देती है, उसके पश्चात् अपने स्नेह रूपी अमृत से सींच कर उसे बड़ा करती है। माता – पिता के स्नेह और दुलार से बालक को मानसिक बल प्राप्त होता है।

काफी साल पहले एक परिचित महिला मेरे सम्पर्क में आयीं। वह काफी परेशान थीं। उन्होंने बताया कि बच्ची को पढ़ाई में मुश्किल आ रही है। उन्होंने बताया कि उनकी बच्ची समय से पहले हो गई थी (Premature)। बच्ची के होने से पहले उनका B.P. ज्यादा हो गया था और डाइट कम होने की वज़ह से बच्ची का वजन बहुत कम था। उन्होंने बच्ची का नाम रिया बताया। जन्म के समय उसका वजन 1 किलो ३०० ग्राम था। उसको 3 दिन तक Incubator में रखा था। इतनी कमज़ोर होने की वजह से मिमक भी नहीं ले पाती थी। रिया की नाक में पाइप लगा रखी थी, जिससे उसको feed देते थे। रिया के होने के बाद उसको डेढ़ महीने तक अस्पताल में रखा गया। जब रिया को घर लाया गया तो उसके साथ यह बड़ी मुश्किल थी कि feed लेती थी, उसके बाद उल्टी कर देती थी और फिर खाली पेट होने की वजह से रोना शुरू कर देती थी । ऐसी परिस्तिथि में इतने कमज़ोर बच्चे की परवरिश करना बहुत मुश्किल था । जब उसको घर लाए तो उससे पहले एक डॉक्टर ने 2 दिन तक कुर्सी पर बैठा कर रखा क्योकि डॉक्टर का सोचना था कि सीधे बैठने से उल्टी की समस्या बंद हो जायगी। लेकिन उसका गलत ही परिणाम निकला जिससे उसके हाथ पैर टेढ़े हो गए थे । पर ईश्वर की कृपा से रिया की नानी को मालिश करनी बहुत अच्छी आती थी । वे घर पर रोज मालिश करने आतीं थीं । यह उनके

परिश्रम का फल था कि रिया के हाथ पैर ठीक हो गए । ऐसे मुश्किल समय में रिया की मम्मी ने हिम्मत और हौसला नहीं छोड़ा । उन्होंने पूरी लगन से उसकी सेवा की और अच्छी परवरिश दी । वे रिया के होने पर खुद को मुक्कमल मानती है, अपने रब के बाद, अपनी बच्ची को मानती थी ।

जब वह मेरे पास आयीं तो उनकी बच्ची तीसरी कक्षा में पढ़ती थी । यहाँ तक रिया किसी तरह से पास होती आई लेकिन जैसे–जैसे बड़ी क्लास हुई पढ़ाई में मुश्किलें बढ़ती गईं । मेरा शिक्षा विभाग में मनोविज्ञान से सम्बन्ध होने की वजह से उन्होंने सोचा शायद मैं कुछ उनकी मदद कर सकूँ । रिया की मम्मी को समझ में नहीं आता था कि रिया के साथ इतनी मेहनत करने के बावजूद भी उसकी performance बहुत अच्छी नहीं थी ।

तब मैंने रिया की मम्मी को सलाह दी कि वह उसका I.Q. परिक्षण करा लें । इसके पश्चात् उन्होंने काफी प्रयत्न किए और डॉक्टर से सलाह लेकर I.Q. परिक्षण कराया । जिसमें पता लगा कि रिया को "Dyslexia" की समस्या है । तब मैंने बताया की यह मुश्किल पढ़ाई से सम्बन्धित होती है । रिया बहुत फुर्तीली बच्ची थी । मैंने उन्हें बताया कि इसमें बच्चे को पढ़ने, लिखने, समझने, वर्ण विन्यास, वर्तनी, अक्षर विन्यास (Spelling) और हिसाब से सम्बन्धित समस्याएं होती हैं । इस सम्बन्ध में मैंने कुछ बातें बताईं जिसका ध्यान रखना बहुत जरुरी है, जो निम्नलिखित हैं :–

- बच्चों को शब्दों और वर्णमाला की अच्छी तरह से पहचान होनी चाहिए ।
- Clay game, Magnetic Alphabet, Scrabble game, श्यामपट (Blackboard) का प्रयोग करना चाहिए और Florocent

Colour – इसका प्रयोग करने से शब्द उभर कर आते है ।

- लिखते समय पेपर सीधा रखना चाहिए द्व पेंसिल और पेन को अंगूठे, मध्यमा उंगली (Middle finger) के बीच में रखकर तर्जनी उंगली (Index finger) से जोर लगाना चाहिए।

- किसी भी विषय में उपविषय के बारे में पढ़ाते वक्त, उस विषय को बार – बार दोहराने से वह चीज़ बच्चे के दिमाग में बैठ जाती है द्व

- जिस विषय को याद कर रहे हो, उसे लिखकर याद करें ।

- ऐसे बच्चों को कभी भी पूरा पाठ्यक्रम (Syllabus) नहीं कराना चाहिये । जो परीक्षा के हिसाब से मुख्य प्रश्न लगते हैं, उन्हीं पर फोकस करना चाहिए द्व

- पिछले सालों के पेपर लेकर, जो प्रश्न बार – बार दोहराए जा रहें है, उनकी एक सूची बना लें । परीक्षा को ध्यान में रखते हुए उन्हीं प्रश्नों को कराएं । इससे 50 % पाठ्यक्रम cover हो जाता है।

- ऐसे बच्चों को सही शब्दों को लिखने में मुश्किल आती है । ऐसे शब्दों की सूची बनाना, जिन शब्दों को लिखने में गलतियां करता है और बच्चे को सही शब्द सिखाना ।

- सही वर्तनी सिखाने के लिए उसको श्यामपट या पेपर पर लिखें और बच्चे से कहें कि वह सही शब्द का उच्चारण करे और उसकी तुलना उस शब्द से करे जो उसने लिखा है । उच्चारण को दोहराने को कहें ।

- बच्चे को यदि पढ़ने में मुश्किल आती है तो अध्यापक द्वारा पढ़ी हुई या स्वयं माता–पिता उस सही reading को CD अथवा फ़ोन में

रिकॉर्ड करके बच्चे को सुनाएं और बताएं कि किस तरह से पढ़ना है ।

रिया की मम्मी ने इन कुछ बातों का अनुसरण किया और इसके साथ ही मैंने उन्हें सलाह दी कि बच्चे के सन्दर्भ में अध्यापकों से बार–बार मिलना चाहिए । इससे अध्यापकों को यह लगा की रिया की माँ रिया के लिए बहुत ज्यादा परिश्रम कर रहीं हैं । इसका प्रभाव यह हुआ कि अध्यापकों नें भी रिया के प्रति रूचि दिखाना शुरू कर दिया । इस सन्दर्भ में मैं रिया की मम्मी के साथ कई बार स्कूल भी गई । आरम्भ में अध्यापकों और प्रधानाचार्या इस बात को मानने को तैयार नहीं थे कि बच्ची को इसी स्कूल में रखा जाए । वह यही कहतीं थीं कि बच्ची पढ़ाई में कमजोर है इसलिए रिया को विशेष स्कूल (special school) में डाला जाए । लेकिन मेरे बहुत प्रयास करने के बाद, वह इस बात के लिए तैयार हो गए कि रिया को इसी स्कूल में ही रखा जाएगा ।

ऐसे बच्चों के लिए लोग उम्मीद छोड़ देते हैं और उस बच्चे के ऊपर ध्यान नहीं देतें हैं । वे समझते हैं कि बच्चा ही लापरवाह है । रिया की मम्मी नें रात–दिन एक करके उसको दसवीं तक पहुँचाया । बारहवीं की परीक्षा में रिया नें 75% प्राप्त किए और राजनैतिक विज्ञान (political science) में प्रथम स्थान लेकर 84 अंक लेकर पास हुई जिसके लिए उसको shield और प्रशस्तिपत्र (certificate)

मिला । रिया की मम्मी नें उसकी पढ़ाई के लिए बहुत परिश्रम किया । रिया की खुशियों के पीछे उसकी माँ की अनगिनत खुशियों का परित्याग निहित था । रिया की मम्मी हमेशा उसके साथ लगी रहतीं थीं । रिया को इससे प्रोत्साहन मिला और आत्मविश्वास बढ़ा । जहाँ उसकी मम्मी ने बिल्कुल उम्मीद छोड़ थी, वह उसके लिए मेरी शुक्रगुजार थीं । रिया ने आगे की पढ़ाई जारी रखी और दिल्ली विश्वविद्यालय में B.A. (Program) में प्रवेश लिया और कॉलेज में भी 56% से पास हुई । इस समय तक रिया का आत्मविश्वास काफी बढ़ चुका था। जहाँ एक समय था कि कक्षा में सबसे अलग और चुप बैठी रहती थी । इस समय उस बच्ची में मनोबल की कमी नहीं थीद्य इसके लिए रिया की मम्मी ने काफी मेहनत की जिसका फल उनके सामने आ गया । इसके साथ रिया की माँ ने कला और Computer को भी बढ़ावा दिया । रिया बहुत अच्छा Art और Craft का काम करती है और वह इस क्षेत्र में परांगत है ।

इस तरह अंत में मैं यह कह सकती हूँ कि जिन बच्चों को 'Dyslexia' की समस्या है, अगर सही वातावरण और भावनात्मक सहारा दिया जाए तो वह इस समस्या से उभर सकता है । इस सम्बन्ध में रिया की माँ की जितनी भी प्रशंसा की जाए वह कम है । इस सम्बन्ध में रिया की माँ ने सरहानीय कार्य किया द्य सच्चे मन से माँ का कर्तव्य निभाया है ।

Book Reviews

Review of 'Children as Philosophers: Learning Through Enquiry and Dialogue in the Primary Classroom'

Neeta Arora

Haynes, J. (2002). Children as Philosophers: Learning Through Enquiry and Dialogue in the Primary Classroom. London: Routledgefalmer. ISBN 0- 750-70946-4. pp. 155

The book addresses teachers and their pedagogical practices in schools that can effectively help young children to think freely, critically, and grow into reasonable adults. It suggests teaching to build upon children's natural ability to think, question, enquire, share, and to make sense of the world and their learning. In this book, teaching is considered as the process of enhancing their active intelligence, encouraging engagement, authenticity, and drive in knowing; widening the spectrum of knowing and its ways, which leads to wisdom and development of a sense of responsibility.

This approach to teaching is significant and special because we find out how authority plays a role in both traditional education systems (overtly) and in progressive education (covertly), and fails to empower students. The need for this transformative pedagogy, in a sense, calls for openly deconstructing the educational process. Even if the book is authored by an American, with instances, examples and settings from the USA; the concern is universal, not solely contextual.

For such transformation to occur various questions need to be dealt with; such as, what can be done in classrooms, how to enable teachers, what characterizes such processes, what teachers are supposed to focus on, the challenges and problems with such teaching, can these be a regular part of all curricula, can every teacher take this up, how these can lead to making students reasonable and responsible, and so on. All these issues are discussed quite realistically in this book to give teachers a better understanding.

The first part of the book opens up with a flavour of philosophical enquiry. Its meaning and significance gets exposited through the citing of children's thinking and discussions, occurring within the classroom. We find that teaching anything provides scope for lot of significant learning and in this part, the 'what', 'why' and 'how' of such enquiry begins to make sense to a new reader. There is a definite emphasis on children's participation in everything related to them, including their learning. This is understood in the context of child rights, the conception of childhood, and the issues related to the realities of children the world over. Therefore, the freedom to participate can come to children depending upon the nature of the adult-child relationship and this calls for certain qualities in a teacher.

The second part of the book is to help a teacher think about thinking (metacognize) more clearly. There is good level of discussion, with examples, that characterize philosophical enquiry, critical thinking and how the teaching of virtues/values is based on teaching thinking. A few different approaches to teaching thinking, to create a community of enquiry, are also discussed; along with how it makes society more democratic. It is apparent that philosophizing is considered to be more transformative than merely acquiring knowledge of any discipline. There are sufficient examples on the kinds of things that can be picked up to initiate such discussions; the possible paths that cognitive activity can take, and the kinds of

changes that are observed in students. Yet the reality of teachers' mind-sets, given the diverse demands made upon their role, the politicization of education, the regulatory controls over a teacher's activities, the teachers' own views and positions; all make it quite complex for a teacher to carry out such a venture.

One observation that can be highlighted is that teaching thinking or philosophical enquiry requires an oral culture, a communal dialogue where actively-thinking people openly participate. The role of teacher is thus central and critical to this kind of educational process and not replaceable by a technological access to knowledge. Perhaps we can assert that philosophizing requires the real presence of participants and dialogue. When we don't exert power as adults, with the accumulated knowledge of history and the system of education, can we succeed in empowering children?

A variety of approaches and aspects of teaching, through enquiry and dialogue, are discussed in part three. Whether if, how far, and what can promote philosophizing, and even how we can monitor progress in such abilities, is illustrated in chapters 6 and 12. The processes are not surface-level, nor is the development and progress easily assessable. Nevertheless, children's skills, metacognition, ability to deal with complexities, courage in the face of confusions and ambiguities, willingness to explore and relate to one's own experiences, keen listening to opposite views and ability to observe their own patterns and preferences; all improve.

The last part of the book further examines the situation and role of teachers in such philosophical enquiries, the ways in which such enquiry can be integrated, and whether there should be scheduled slots for these enquiries. The last chapter stands to justify and support the need to engage in such practical activity, by highlighting its benefits to all children, teachers, and society at large. Students' clarity, confidence, communication ability, active listening, accommodation of differences, courage

to engage with complexities, open-minded participation, and meta-cognition all improve. Through free, open and shared enquiries, they learn to trust and respect each other; they become more reasonable and self- regulated. These changes in students can make people, and societies, more democratic and harmonious. These are lofty and often hard to achieve aims of education, which get lost in the countless performance ratings of students, teachers and schools.

There is, however, no empirical study to support these claims. The examples and classrooms scenarios may sufficiently convince those already inclined towards such non-linear, anti-delivery mode of teaching, and looking for freedom from within the syllabus. This may not be sufficient or efficient in persuading stereotypical and successful teachers. Teachers being controlled, supervised, prescribed and evaluated on a set of criteria are unlikely to venture into such expansive and unknown domains and ways. Although the transformative effects may be valuable, the demands are also very high. One wonders whether teachers, schools, and education platforms are prepared for this. The venture is suggested for primary classrooms and two things go in its support; that as fresh entrants into schools, children are likely to take to it well, and that primary classroom processes may be comparatively less structured than higher ones and therefore more amenable to this approach.

The author has tried to plead the case for such a pedagogy on grounds of children's rights, democratic citizenship, and curricular modules like 'life skills and/or thinking skills', with fair cautions. Philosophical enquiry in all subject areas has implications for the way we run schools, the curricula within classrooms and outside and the way in which we educate our teachers, in service and before service. It also affects the way we assess students' development. The school systems are so structured and closely monitored, that only rarely can teachers dare venture into such transformative pedagogy. Therefore, the transformative pedagogy,

even if initiated individually by teachers, may not be sustainable without other transformations. Can we look forward to these other changes in view of the political and neo-liberal forces/pressures on all educational fronts?

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सर हैदर रज़ा के जीवन के साथ उनकी चित्रकारिता से परिचय करवाती यह पुस्तक एकलव्य प्रकाशन का एक अनूठा प्रयोग है । किताब की शुरुआत रज़ा के बाल जीवन के एक महत्वपूर्ण प्रसंग से होती है, जिसके चलते उनकी दिलचस्पी 'बिंदु' में पैदा हो जाती है । रज़ा इस बिंदु के गहरे निहितार्थों को अपनी कला से जरिये टटोलते चले गए और यह किताब यही बात बच्चों को रूचिकर तरीके से समझने में मदद करती है । परन्तु किताब की विशेषता मात्र इतनी नहीं है । पाठ्यक्रम की सीमाओं में जकड़ी पाठ्यपुस्तकों तथा शिक्षण पद्धतियों में कला, सृजन और सौंदर्य का स्थान विलुप्त होता जा रहा है, ऐसे में इस तरह की किताबें बालपन से ही इन मानवीय अनुभूतियों को सराहने, समझने और कर–कर आनंद प्राप्त करना सिखने में सेतु का काम करती हैं । "बिंदु" एक ऐसा ही सेतु है । रज़ा की अपनी कृतियों में जिन रंगो की प्रधानता दिखती है उन्ही रंगो का प्रयोग किताब की छपाई में किया गया है । उनकी सर्वश्रेष्ठ कृतियों के प्रतिरूपों को इस सृजनात्मकता के साथ किताब में प्रस्तुत किया गया है कि न केवल वह रज़ा के कला–दर्शन से बच्चों को अवगत करवाती है, बल्कि सम्पूर्ण कला जगत के प्रति जिज्ञासा पैदा करती है । प्रचलन से हट कर किताब के बीच बीच में सामान्य से बड़े पृष्ठों को चारों किनारों से मोड़ कर उनके बीच सुन्दर चित्र–प्रतिरूप दर्शाये गए हैं, जिन्हे खोलकर देखने को बच्चे उत्सुक रहते हैं । मेरी अपनी ४ साल की भतीजी के साथ जब यह किताब लेकर बैठी तो "बिंदु" के जुड़े उसके प्रश्नों से में अचंभित रह गयी । चूँकि किताब में "बिंदु" के परिप्रेक्ष्य में सृष्टि की कुछ ऐसी चीज़ों के नाम दिए हैं जो आकार में 'बिंदु' को चिन्हित करती हैं, जैसे चन्द्रमा, सूर्य, तारे, इत्यादि, तो मेरी भतीजी पूछती है " भुआ आँख, गेंद, बिंदी भी तो "बिंदु" ही हैं न ? उसका यह प्रश्न किताब की उस प्रभाविता को इंगित करता है जो इस तरह की किताबों में, बच्चों में सृजनात्मक विचार पैदा कर सकने की होती है । किताब का और भी रोचक पहलु है अंत में दी गयी स्टिकर आकृतियां । इन आकृतियों का वर्ण–विन्यास इस तरह से संयोजित है कि बच्चे किताब में दी गयी रज़ा की किसी भी अन्य भी अन्य कृति को, इन विभिन्न स्टीकरों को भाँती–भाँती से चिपकाकर, बना सकते हैं ।

अपनी कल्पनाशीलता और सृजनात्मकता के नए आयामों के साथ यह किताब जाने–अनजाने यह किताब मॉंटेसरी की "युद्ध के विरोध" वाली शिक्षा की साधन बन सकती है । यह बच्चों के मन–मष्तिष्क में सौंदर्यबोध, कलाबोध और कलाकार के प्रति सम्मान का भाव विकसित करने में अत्यंत प्रभावी है । पाठक के रूप में बच्चा पूरे समय एक संवाद से गुजरता है, जिसमे उसके लिए नए प्रश्न हैं और उत्तर भी उन्हीं प्रश्नों में छुपे हैं । प्रश्नों और उनके उत्तरों के माध्यम से बच्चा जीवन की सुंदरता को समझने और महसूस करने में सक्षम बनता है और उसका झुकाव सृजन की तरफ बढ़ता हैं । यथा, यह किताब "शान्ति के लिए शिक्षाऽ की भी एक अमूल्य निधि है, जिसको सभी अभिभावकों और शिक्षकों को अपने नौनिहालों के साथ पढ़ना और आत्मसात करना चाहिए ।

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Prof. Namita Ranganathan

Department of Education
33, Chhatra Marg,
University of Delhi- 110007
namita.ranganathan@gmail.com
9811438706

Dr. Vikas Baniwal

224, Pitampura Village,
New Delhi- 110034
vikas.psy@gmail.com
9718075874

Rachel Gokavi

rgokavi.16@stu.aud.ac.in

Author

Ms. Charu Sharma,
University of Delhi
Email Id: charusharma86@gmail.com
Phone no.: 9811710013

Ms. Ravneet Kaur,
Assistant Professor
Mata Sundri College for Women
University of Delhi

Dr. Meenakshi Girdhar
Assistant Professor,
G.D. Goenka University,
Gurgaon - 122103
E-mail: meenakshi.girdhar59@gmail.com

Ms. Aditi Gupta
Central Institute of Education,
University of Delhi
+91-9810500450
E-mail: eaditi5@gmail.com

Neeta Arora
Assistant Professor,
SPM College
University of Delhi
E-mail: n26arora@gmail.com

Vishakha Kumar
PhD. Scholar
Faculty of education
9873868808
E-mail: kumar.vishakha@gmail.com

Shakti Mathur
Lab Assistant
Department of Education
University of Delhi
E-mail: shaktim.17@gmail.com

Richa Sharma
Assistant Professor,
Central Institute of Education,
University of Delhi
E-mail: mmricha@gmail.com