Well-being of Pre-Primary Students in India
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ABSTRACT


Early childhood education (ECE) in India has been the focus for the last six years. The vision of ECE in India is to provide a holistic development and an active learning capacity for children below the age of six by delivering joyful and contextualized opportunities. The National Framework provided by the Ministry of Woman and Child Development (MWCD) for ECE states that the primary focus must be on the needs of the child.

The purpose of this study is to understand the well-being of students in low-income schools, both private and public systems in India. Two Anganwadis (public pre-primary centers) and four private school classrooms were observed. Interviews of seven teachers were recorded. For this study, well-being is defined using three concepts from Nussbaum's list of capabilities - Bodily health, Bodily Integrity and Play.

The main findings of this study suggest that, in Anganwadis the focus lies on Nutrition, however, other aspects of health have been ignored. The student: teacher ratio in Angawadis were lesser than the private schools, supporting bodily integrity, however, the resources were not utilized to the best. On the other hand, in private schools, health was not the responsibility of the school. Play was observed to be given least importance in Anganwadis and private schools. The capabilities approach is used as a framework for understanding the phenomena of well-being in this study. An association between wellbeing and capabilities is drawn at the end of the study.

Keywords: ECCE, wellbeing, care, capabilities approach, teachers, pre-primary school, Anganwadi.
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1 INTRODUCTION

India has 158.7 million children aged 0-6 according to the 2011 census. (Dalwai, Modak, Siddiqui, Gajria, Chatterjee, 2016). The first six years of a child’s life is referred to as early childhood. In this study, early childhood is defined between the ages, two-six. These years mark a direct impact on the child's later years of experience (Singh & Mohan, 2008). Early years are a crucial period for brain development since rapid growth occurs during this time, if invested upon, this period could show most effective developmentally (Leavitt, Tonniges & Rogers, 2003).

In India, most children enrolled in pre-primary schools are of the age of 4-5, in either private schools or government schools, depending on the economic strength of the family. With the focus on academic achievement in schools, teachers have been mainly focusing on curriculum and thus results in pressure on students to perform from the early years.

The purpose of this study is to inductively examine pre-primary education in India and focus on the well-being of children in low-income private schools and Anganwadis (Government run centers) under Nussbaum’s classification of human capabilities as the framework. Education has been a concept explored through the capabilities approach, Saito (2003) adds that the capabilities approach may have a significant relation to well-being. The current system of education in India focuses mainly on functioning, and through this approach, this study will focus on capabilities as well as on functioning and its relation to well-being. Thus for this study, interviews of teachers and observations of classrooms are the primary means of understanding well-being in the classroom setting.

Chapter 2 highlights the research of well-being among students. In this chapter, well-being is looked through the lens of three core aspects of child’s well-being - physical, social and cognitive well-being – and, its effects on the child’s overall development.
Chapter 3 introduces the reader to the framework of the capabilities approach, which works as an outline for this study. In this chapter, research reflecting the importance of capabilities and functioning and its relation to well-being of the child is discussed.

Chapter 4 defines how well-being applies in this study. For the purpose of this study, well-being is understood using Nussbaum’s list of capabilities. With the knowledge from the capabilities, approach that through recognizing the capabilities of the child and providing the opportunities and freedom, the well-being of the child can be assessed. This is done using three capabilities from Nussbaum’s list of ten capabilities.

Chapter 5 and 6 gives the reader an idea of the setting of the study and the process that was used to conduct the study. Interviews and observations were made to analyze well-being in the classrooms.

Chapter 7 gives a detailed description of the findings that were collected from the interviews and observations of five classrooms and seven teachers.

Chapter 8 summarizes the findings and discusses the study in relation to the framework of the capabilities approach and well-being in the broader perspective and concludes the study.

Chapter 9 presents the limitations to the study and further research possibilities.
2 WELL-BEING OF STUDENTS

This section highlights well-being from a broader perspective of understanding well-being in the early years. Pollard and Rosenberg (2003), define physical health and psychological development as well-being. According Foege, every child must have equal opportunities, the required support needed and the growth and experience as early as their beginning years (Foege, 2003). By ensuring this well-being, the child grows to develop lifelong abilities and to be responsible citizens in society. Moore and Keyes (2003) defines well-being as a concept, which integrates physical, cognitive and the socio-emotional aspects of a child’s growth. For children in the early years (defined between the ages 2-6), aspects, such as problem solving, emotional regulation and physical safety, constitute child health and development over the life span. Thus, the beginning years may determine their adulthood; since these initial years would lay the base for them to develop as adults (Pollard et al., 2003).

According to Pollard et al., 2003, the well-being of a child is not just the absence of a problem. Standardized indicators cannot determine well-being as a concept. (Pollard et al., 2003). Since there are no set indicators to show the presence or absence of well-being, every study determines its own indication. In this study, the indicators for well-being are mentioned further. According to Pollard et al., (2003) and Moore et al., (2003), well-being is a function of physical, socio-emotional and cognitive activities by fulfilling one’s potential. According to Zaff, Smith, Rogers, Leavitt, Halle & Bornstein. (2003), physical health is the most important aspect that determines the child’s overall well-being.

Physical well-being includes nutrition, preventive healthcare, physical activities, safety and security, substance abuse prevention and reproductive health (Zaff et al., 2003, p.24).

This age group of children, from birth to five years, experience a rapid growth physically. Adults, being the primary care-givers for children in the early years, need to ensure that children gain adequate health and provide a safe
environment. Since children at this age are immature and vulnerable to danger, their immunity to diseases could be low and infected by virus easily. Hence, adults must ensure proper care at this age (Zaff et al., 2003). Social-emotional well-being can be related to the relationship shared between the caregiver and the child. A positive relationship can determine the child’s social well-being.

Cognitive well-being, which involves the brain development of the child, also begins to grow in their early years. Mustard (2007) mentions that creating an atmosphere with an experience-based brain development sets the path for the child’s development that could also affect the child’s physical growth and behaviors in their later years (as cited in Kaul & Sankar, 2009).

Each of the indicators in this study mentioned here, such as, physical health, social-emotional well-being and cognitive well-being have a co-relation to each other’s existence (Pollard et al., 2003). By ensuring that the child’s physical health is taken care; the adult/caregiver ensures the child’s social-emotional and cognitive well-being. This will enable the child to make choices, decisions and provide the child with opportunities ahead for positive development. (Zaff et al., 2003). A healthy social-emotional well-being can also determine the child’s physical well-being and safety (Zaff et al., 2003). Likewise, the physical well-being can also affect the growth of cognitive well-being. For example, if the child is not provided with the essential nutrients, then the brain functioning of the child is affected. Zaff (2003) mentions, good nutrition is very essential, especially in the early years, since the brain development at this period is rapid and can support in the development of social-emotional and cognitive well-being (Zaff et al., 2003). As Pollard et al., (2003) stated earlier, Zaff et al., (2003) also agrees that the growth in these years could create an impact in the child’s life through adolescence and adulthood. However, well-being does not only imply that there is no harm.

“Most research equated health and well-being with the absence of physical disease or mental disorder” (Keyes & Moore, 2003, p.5).
The well-being of a child was denoted by the absence of a problem rather than the presence of a positive indicator. However, according to the report by the WHO (1983), health, being one of the major aspects of well-being is defined as a state of physical, mental and social well-being and not the absence of illness (as cited in Leavitt et al., 2003). The indicators of child well-being as suggested by many researchers have not been able to suggest positive indicators. (Moore et al., 2003).

2.1 Early Childhood Education in India

In India, ECE has been in focus for the past five to six years, either under the jurisdiction of the Department of Education and at school level, it is directly taken care by the principal. (Paul. S., S.K., & Bikhchandani. T., 2016).

“The well-being of children has been an integral part of developmental planning in India since 1951” (Manhas & Qadiri, 2010, p.443).

In order to have greater achievement in the later stages, it is essential to have a better start (Manhas et al., 2010). Having a qualified teacher, especially in pre-school is essential to keep up the quality of pre-primary education (Early, 2007). The qualification required being a pre-primary teacher or a caregiver in India is a completion of the tenth or twelfth grade. (Paul et al., 2016). Under the government, the Integrated Child Development Services (ICDS) and the Ministry of Women and Child Development (MWCD) run preprimary/early childhood education. The MWCD program in India is the most extensive childcare program in the world (Paul et al., 2016). The ICDS program has 36 million children between the ages of three to six. There are 1.34 million Anganwadis (government day care center). Officially, the necessary provisions offered under the government service based on the ICDS is supplementary nutrition, non-formal ECE, health and education, health check-up and referral services (Paul et al., 2016). The role of the Anganwadi worker (caregiver) is to ensure that services, such as providing the needed nutrition to the children, non-formal education
and health, are provided at the Anganwadi. (Paul et al., 2016). Since the adult-child ratio is high, 1:17, the caregiver finds it challenging to ensure that excellent nutrition and health are provided to each child. (Paul et al., 2016). Furthermore, the compromised quality of teachers/caregivers could be considered as a threat to pre-primary education. One of the major drawbacks according to Saini and Chikkara (1993) in Anganwadis is having low skill-based professionals (as cited in Manhas & Qadiri, 2010).

According to the Right to Education Act (RTE), students’ entry to Grade 1 should be at the age of six; however, in 23 states of the country, children are admitted into Grade 1 at the age of five. Children between the ages of 3 to 6 are excluded from the RTE act, despite being under the purview of the ICDS; the state does not take responsibility for this age group of children.

There has been a vast growth in the pre-primary education in the last two decades (Singh, et al., 2008). The growth of private system has widened the provision of the ECE system. The private pre-schooling system, unlike the Anganwadis, is unregulated, and schools may be unregistered with the government. Private pre-schooling includes play homes, nurseries, and day care (Singh, et al., 2008). Based on policy, pre-primary schools do not necessarily have to be registered with the government. Currently, the number of private schools with pre-primary schools outnumber the number of government schools with pre-primary schools in India (Paul et al., 2016).

A few of the current challenges faced in the public sector are the lack of qualified staff, as noted earlier, for this section of students and an appropriate age curriculum (Paul et al., 2016). Apart from this, research also shows the importance of physical, social and cognitive well-being of the child. This could also be a challenge faced in pre-primary schools. The wide shortage of play and other learning materials could be a constraint for the development of the child (Manhas et al., 2010). In addition, as mentioned above, the teacher-student ratio is high, which could cause threat to the positive development of the child. The major focus of schools pertains to academic achievement, ignoring the physical,
social and cognitive aspects of well-being could be considered as challenges to well-being of children in the early years.

Another major factor affecting education in most developing countries is income. India, for the longest time, has faced challenges with economy and education. “More than half a century after Independence, and despite the large-scale expansion of educational institutions, over the past 50 years, the country’s educational achievements leave much to be desired” (Kingdon, 2001, p.3052). There have been many speculations to the issue of lack of quality education. Pradhan & Subramanian (1999) stated than the education has been lacking its outcome due to low returns of economy (as cited in Kingdon, 2001). According to a study conducted by Dreze & Gazdar (1997) in the rural setting of Uttar Pradesh (a state in India), the poor functioning of the existing resources played a larger role in the lack of the outcome required as compared to the physical infrastructure (as cited in Kingdon, 2001). Thus, income does not seem to be the primary concern; therefore, focusing on the existing resources, that is human potential, such as teacher involvement, student capabilities etc., could serve ideal for improving education.

2.2 Importance of this study

As discussed in the earlier section, it is clearly noted that during the early years, well-being of the child plays a crucial role in their development. According to Dalwai et al., (2016), 65 million children out of a total 200 million children under the age of five years are not developmentally fit are in India. Well-being effects the child’s overall developments, further affecting the academic performance of students. Currently in India, the primary goal for children at pre-primary school is to attain readiness for school in arithmetic, reading and writing (NECCECF, n.d.). Statistics in India show that, 47% of children under the age of five are underweight, 46% are under height (Di Tommaso, 2007). The quality of the school is determined only by the child’s cognitive development (Kingdon,
2007). Thus, a slight shift of focus to non-academic and a more holistic development is essential in the early years.

As Bornstein and colleagues define well-being as a holistic development of physical, social and cognitive well-being and each of their interrelatedness to the other, this study focuses attention on physical well-being and its role in the current goal of academic achievement of pre-primary education in India.

Teachers are one of the most important caregivers for children in the early years. Once a child is enrolled in school, he/she spends most of his time with his teacher and peers. Teachers become the primary care-giver for the child. Furthermore, as discussed about the challenges faced in the education system in India, the usage of existing resources, space and materials.

Going by the assumption of the following challenges, this study sets out to understand well-being and its functioning based on three parameters that will be discussed in further sections.

3 THE CAPABILITIES APPROACH

The two main components of the CA are well-being and agency (see Table 1). This study focuses on well-being; hence, agency is not explored. Well-being in the CA – can be categorized into functioning and capabilities. Functioning is defined as the achievements an individual earns, what he/she can do, capabilities refer to the real opportunities and the freedom an individual gets to choose from the opportunities presented. (Schokkaert, 2007).

According to the CA, the ends of well-being, justice and development should be conceptualized in terms of people’s capabilities to function; that is, their effective opportunities to undertake the actions and activities that they want to engage on, and be whom they want to be (Robeyns, 2005)
Well-being | Agency
---|---
Achievements | Functioning | Ag. achievements

| Freedom | Capabilities | Ag. freedoms |

Table (1) Capabilities approach

Sen (2003), economists and philosophers’ theory of capabilities approach has been groundbreaking with its theory that focuses mainly on freedom, agency, and well-being. Robeyns (2001) echoes Uyan-Semerci (2007) that the CA framework reflects the availability of resources, the capacity of an individual and most importantly the freedom they own that results in Capability (Uyan-Semerci, 2007).

The Capabilities approach was not initially designed for education; however, education has been explored widely using this approach. Robeyns (2005) points that the CA does not explain well-being; however, it provides a framework to evaluate the phenomena. The two significant focuses of CA have been on emphasizing on individual freedom and agency of human beings (Sen, 1999). Sen (1999) argues that humans are entitled to freedom of wellbeing of moral importance and freedom to achieve well-being of one's capability. The CA framework denotes the freedom an individual be given to choosing what he or she is capable of doing, giving the person a choice to lead their life on their terms (Robeyns, 2016). Robeyns (2017, p.35) echoes Sen in defining the capabilities approach, that the freedom to achieve well-being depends on what people can do and the kind of life they can lead. Well-being cannot be achieved when the fundamental requirements such as food and clothing are not fulfilled. Sen's idea of wellbeing contradicts this idea, wherein well-being lies in what people are capable of doing and not on materials that people could purchase (Saito,
Saito defines functioning as an achievement, whereas capability is considered as the ability to achieve (Saito, 2003).

Thus, the capabilities approach sets out to define a person’s quality of life through their achievements and capabilities, also recognizing their freedom of choice, which helps them, enhance their capabilities. In this study, capabilities approach is viewed from the perspective of the ways in which children’s capabilities are acknowledged and the level of freedom being given to children within a classroom. In the next chapter capabilities, wellbeing and freedom is defined. The following chapters explain well-being in context to the study.

### 3.1 Capabilities

Sen (1985), defines capabilities as the ability of what people can do or be able to be – opportunities they are able to create for themselves in order to live a sanctified life. It may be that what people can do play a crucial role in determining the relation between capability and well-being. However, Nussbaum's (1993) capabilities are a set of different components wherein one aspect cannot be justified by giving substantial importance to the other. They hold equal importance and have a central significance. Nussbaum recognizes that functioning provides meaning to humans and not just capabilities.

Capabilities, as defined by Sen, is the 'ability to do' (Saito, 2003). Particularly with children, Sen argues that by giving children a choice at present, is giving him/her freedom in the future (Saito, 2003). Sen also supports the notion that children fall under the realm of the capabilities approach since a person must be given a choice to choose from rather than being happy with the alternate given (Saito, 2003). According to CA it is people’s capabilities to function that is the central focus while analyzing well-being, in other words, what people can be or do, rather than what they have regarding income or commodities.

Commodities and incomes play a role in the CA, but exclusively as a means, not as part of the ends. Capabilities should be made equal through policies addressing poverty and wellbeing, not marginal utilities as in welfare eco-
nomics, or primary goods as in Rawls’ (1971) Theory of Justice. Sen’s argument against Rawls’ view is that an equal distribution of primary goods for people with different personal circumstances, for example in the case of a blind man or a breastfeeding mother, will result in different capabilities and hence, inequalities in functioning. He sought to compensate for such differences by focusing on capabilities instead, recognizing that people in disadvantaged situations would require more or different resources to attain the same level of capabilities as people situated in circumstances that are more fortunate. Schools must be able to serve the purpose of education by providing students with the opportunity to expand their capabilities in order to function. In most cases, schools focus on functioning, and in turn, neglect the capabilities the student possess. Hence, the child’s ability to do is being neglected in order to succeed. An important as functioning is, as argues my Nussbaum, without recognizing one’s capabilities, the functioning of well-being is more forced that leveraged. Thus by focusing on the ability and providing opportunities (capabilities), the functions of wellbeing can be the outcomes that are provided by the teacher, in the case of this study. Achievements are strived for rather than ability. As pointed out by Uyan-Semerci (2007), a person’s wellbeing is derived from the opportunities they receive in order to explore their capabilities. Two individuals may have the same mean (goods, commodities), but the opportunities provided to them may enable them to explore their capabilities and define success for themselves.

As Uyan-Semerci (2007, p.203) says:

> Ultimately, the argument goes that the ways in which needs can be satisfied or a person can function depends on each person’s decision.

### 3.2 Well-being according the Capabilities Approach

Sen contends there are some significant cases in which everyone can agree about the nature of well-being whatever their more general commitments and that debate about others being a part of the society that contributes a satisfactory life. The argument Anand, Hunter & Smith (2005) make to this, is that it is
the opportunity to live a good life, rather than the accumulation of resources, that matters most for well-being, and that opportunities result from the capabilities that people have in them. Thus, capabilities pertain to what people have within rather than what commodities or materials can provide. Hence, CA points out to capabilities lying within oneself, rather than in the external availability of resources, and this can be manifested with the opportunities provided. (Anand et al., 2005).

The CA states that the well-being of a person is measured by the success of their ‘doing’ and ‘being’ (Uyan-Semerci, 2007). This implies if a student is said to have good well-being, they must be able to do as per they choice and be as per their choice, since freedom and the choice to do, relates to wellbeing. To understand well-being of students from this approach, firstly, the concept of well-being must be defined. Sen defines well-being as a person’s ability to perform valuable acts or reach useful states of being (Nussbaum & Sen, 1993).

For this research, the well-being of children is defined considering Nussbaum's ten capabilities (Nussbaum, 2011). Unlike Sen’s approach to the CA, Martha Nussbaum’s list of capabilities gives a concrete idea to how one can function to their fullest capabilities (Uyan-Semerci, 2007). The ten capabilities include

1. Life: Being able to live to the end of a human life of normal length, not dying prematurely, or before one’s life is so reduced as to be not worth living
2. Bodily Health: being able to have good health, including reproductive health, to be adequately nourished, to have adequate shelter
3. Bodily Integrity: being able to move freely from place to place; to be secure against violent assault, including sexual assault, domestic violence, having opportunities for sexual satisfaction and for choice in matters of reproduction.
4. Senses, Imagination, and thought: Being able to use the senses, to imagine, think and reason- and to do these things in a truly human way, a way informed and cultivated by an adequate education, in-
cluding, but by no means limited to, literacy and basic mathematical and scientific training. Being able to use imagination and thought in connection with experiencing and producing works and events of one’s own choice, religious, literacy, musical and so forth. Being able to use one’s mind in many protected by guarantees of freedom of expression with respect to both political and artistic speech, and freedom of religious exercise. Being able to have pleasurable experiences and to avoid non-beneficial pain.

5. Emotions: Being able to have attachments to things and people outside ourselves; to love those who love and care for us, to grieve at their absence; in general, to love, to grieve, to experience longing, gratitude, and justified anger. Not having one’s emotional development blighted by fear and anxiety.

6. Practical Reason: being able to form a conception of the good and to engage in critical reflection about the planning of one’s life.

7. Affiliation:
   • Being able to live with and towards others, to recognize and show concern for other human beings, to engage in various forms of social interaction; to be able to imagine the situation of another.
   • Having the social bases of self-respect and non-humiliation; being able to be treated as a dignifies being whose worth is equal to that of others. This entails provisions of non-discrimination based on race, sex, sexual orientation, ethnicity, caste, religion, and national origin.

8. Other Species: Being able to live with concern for and in relation to animals, plants, and the world of nature.

9. Play: Being able to laugh, to play and to enjoy recreational activities.

10. Control over one’s environment:
• Political: Being able to participate effectively in political choices that govern one’s life; having the right of political participation, protection of free speech and association.

• Material: Being able to hold property, and having property rights on an equal basis with others; having the right to seek employment on an equal basis with others; having the freedom from unwarranted search and seizure. In work, being able to work as a human being, exercising practical reason and entering into meaningful relationships of mutual recognition with other workers.

Of the ten core capabilities listed, three capabilities are considered in this study - Bodily health, Bodily Integrity and Play. Since the remaining seven capabilities listed would have required either interviewing students or other stakeholders such as parents, which are not considered a part of this research, the three capabilities have been considered suitable for this study.

1. Bodily Health: Good health, nourishment, shelter
2. Bodily integrity: The child should be able to move freely from place to place, secure against abuse and any violence
3. Play: Children should be able to laugh, play and enjoy recreational activities.

3.3 Freedom

Noddings (1992) discusses the extent to which schools, in general, stress on academic achievement and thus, blind themselves to the aspect of caregiving in schools. In addition, she strongly believes that children and teachers are forced to follow a curriculum and abide by the book, thus giving students less freedom to choose. Schools, we are told must be held accountable for the results they produce (as cited in Noddings, 2005).
According the CA, the capacity of an individual and most importantly the freedom they own that results in Capability (Uyan-Semerci, 2007). According to The CA framework denotes the freedom an individual be given to choosing what he or she is capable of doing, giving the person a choice to lead their life on their terms (Robeyns, 2016).

In the case of pre-schooling, the care required is for teachers to listen to children and understand their needs. Noddings (2005) also establishes that if the carer is caring, but the cared for denies the care, this means there is no caring relationship. Adults in many ways approach an opposing point of view of caring where they do what they think is right for the child and not from the perspective of the child, which Noddings (2005) views as caring from carers. This, according to Noddings (2003) is one of the tragedies of the traditional education system, where the child is forced to accept the thoughts of the adult as ‘right’.

Furthermore, a responsive system does not just refer to teachers being responsive to students, but also to the school being responsive to teachers (Noddings, 2005). The school must listen to the teachers’ needs and realize that teachers may also be agents of change and given a chance to operate by their own philosophy. Noddings (2005) stands by a progressive approach and believes that students ought to be given a choice of how they wish to learn, how they should be assessed and to choose what they should learn. In support of Noddings (2005), capabilities approach views education from a perspective of human freedom (Lanzi, 2007). The capabilities approach contradicts the traditional productive approach, which views the performance of schools from the lens of learning outcomes obtained by test scores. Noddings’ (2005) ideology of care refers to Sen’s terminology of ‘Productive approach to the ‘traditional’ approach which is based on test scores and academic achievement, where neither the teacher’s capabilities nor the student’s desires are taken into account. Capabilities approach views education as freedom in terms of human capabilities and functioning. The capabilities approach talks about freedom that does not exist solely with a person's capabilities, but that is interconnected with internal
capabilities that include knowledge and skills of the person to external capabilities, such as, policies, opportunities and also moral capabilities, which allow people to interact with others and internalize ethical principles. All these capabilities are interconnected and cannot exist individually. Capacity has been defined as the: “abilities, skills, understandings, attitudes, values, relationships, behaviors, motivations, resources and conditions that enable individuals as well as institutions to carry out functions and identify and achieve their development objectives over time” (UNDP, 1995a,b as cited in Lanzi, 2007). Thus, transforming a human not only from a job-oriented perspective but also from the perspective of life-skills (Lanzi, 2007).

4 WELL-BEING IN THIS STUDY

As noted earlier, well-being in this study is assessed by three parameters Bodily health, Bodily Integrity, and Play from Nussbaum's list of wellbeing (See 3.2).

4.1 Bodily Health

Nussbaum (2011) defines bodily health as access to good health, nourishment, and shelter. A report on the systematic review of physical activity points out on the beginning years of a child's life being the most crucial period for development and is the time when the child's health has an impact on his/her physical activity (Timmons et al., 2012).

“Children develop, socio-emotionally, cognitively, and physically, more rapidly during the first years than any other time of life and good nutrition is imperative to this rapid development” (Leavitt, et al., 2003, p.35).

Although the misconception that, during the early years children are innately active, could be untrue since children at this age also go through issues such as obesity.
"Overweight and obesity are becoming not uncommon among preschool children" (Timmons, 2007, p.123).

A study conducted by Timmons (2007) suggest that the health of the child is proportional to the amount of physical activity that the child has, and inactivity during the early years could imply that the child may have higher chances of health concerns. According to the National Association of Sports (2002), of the United states of America, preschoolers require 60 minutes of structured and 60 minutes of unstructured physical activity time on a daily basis (Clark et al., 2002). Studies according to Tucker (2008) emphasize that 54% of studies show that children between the ages of two to six meet the basic standards by the National Association of Sports.

Regular physical activities during childhood is not only important in maintaining a healthy body mass, but also brings a plethora of other physiological and social benefits. (Timmons et al., 2007, p.122).

Globally, there is a whopping population of 101 million children under the age of five, who are underweight and 165 million children who are stunted (Janandolana, 2015). In addition, Leavitt and her colleagues point that the habits that are developed nutritionally in the early years have a long-lasting effect on the child. She also adds that these habits may be difficult to rectify during the later stages of growth (Leavitt et al., 2003).

The Nation Nutrition Policy (1993) in India recommends intervention of nutrition in the early years. As per the objectives of early childhood care, education programs also include good nutrition routines, health habits, hygiene practices, and self-help skills (as cited in NECCECF, n.d.).

A wealth of evidence supports nutrition as crucial to well-being throughout the life span by preventing morbidity and mortality and promoting positive attributes (Leavitt et al., 2003, p.35).

To ensure the provision of quality early childhood care, the government of India recommends all the Anganwadi centers to be provided with materials required to build protein and sufficient nutrition.

Growth monitoring is another method that can be used and should be a standard element of childcare to make sure that children are receiving proper nutrition (Leavitt et al., 2003, p.42).
In fact, the WHO recognizes the need for a growth chart that could be used internationally particularly by primary health care workers (Agarwal & Agarwal, 1993). A study conducted by Janandolana (2015), in Bangalore, a city in Karnataka, India of 32 Anganwadi centers show that 17 boys and 12 girls were severely malnourished, and 105 boys and 135 girls were moderately malnourished. Although the government recommends every center to have a growth chart to track the growth of the child over the two or three years, not every center had the infrastructure facilities, such as a weighing scale, and 22 of the 32 centers had a growth chart. (Janandolana, 2015). Some of the outcomes of lack of proper nutrition during early childhood may lead to anemia, obesity. The causes of low physical capacity could also lead to a deficit in socio-emotional and cognitive well-being (Leavitt et al., 2003).

4.2 Bodily Integrity

Bodily integrity is defined as space where children can move freely from place to place and are secure against abuse and any violence (Nussbaum, 2011). As mentioned earlier, the relationship between the students and the caregiver can determine the child’s social and emotional wellbeing, which in turn is related to their cognitive development and physical wellbeing (Zaff et al., 2003). The well-being of the child also depends on the child’s integrity, focusing this study towards bodily integrity, the required space that is provided to the child, and if the child can move freely in the area. Apart from physical activities and nutrition, health is dependent on the environment around the child. The lack of space and a safe shelter could also affect the child’s health, and sickness thereby can quickly spread to other children (Janandolana, 2015). Zaff et al., 2003, express the vulnerability of children and their vulnerability to diseases.

Besides nutrition and the physical environment, exposure to violence has a direct relation to its effect on the child’s mental health (Pastor, Fisher & Friedman, 1996 as cited in McMahon, Washburn, Felix, Yakin, Childrey, 2000). This may furthermore result in the decline of the child’s bodily health. Urban
youth living in low-income communities tend to have a higher risk of aggressive behavior from the various exposures of social, community stress (McMahon et al., 2000). Violence includes teacher-student, peer violence, abuse, neglect, and violence in the community (Tomlinson, Jordans, MacMillan, Betancourt, Hunt, Mikton, 2017). The World Health Organization (WHO) describes violence as a force, power or threat against oneself or others, which may harm or cause injury to the self or the other person (Krug, Dahlberg, Mercy, Zwi & Lozano, 2002).

According to the MWCD, an Anganwadi should be a comfortable space, which has the supply of adequate water, bathroom facilities, and play space. The fundamental norms within an Anganwadi include a multipurpose room, examination room, teaching room, kitchen and a separate toilet for boys, girls and staff. In Janandolana’s (2015) study of the 32 Anganwadis, only five were safe for children. One of the most significant concerns seemed to be the lack of space; 22 Anganwadis had no separate rooms, and just a single room. Few Anganwadis reported lack of toilets and children were asked to use the bathrooms at their homes before they come to school (Kulkarni, 2013). Thirty-five children were made to sit in a 10X10 room, the kerosene stove was placed in the same place as the room the children sat, and there was a lack of space for children to play. (Kulkarni, 2013).

The child’s body is very important and must be considered a complex part in the growing years. As perceived by most of the teachers that children are destructive, research says that, in the early years the child does not have destructive sensory impressions. The child experiences and makes meaning of everything that is present physically around them. They may not be able to distinguish between different sensory impressions, such as sound or touch. This creates a mixed feeling of emotions in the child. The way the child experiences the world is through their body and before the child makes sense of words; their body has already created the experiences. According to Nucci (2001), creating a personal space around the child allows them to freely express himself/herself, helping the child to communicate regarding concerns of body or violence (as
cited in Johansson, 2005). Additionally, children constantly understand the perception people have of personal space not only for themselves, but also for others while they discover control and personal choice, experiencing the sense of boundaries and personal space in order to judge personal freedom (Nucci, 2001). For a child to develop a sense of his/her own identity, exploring multiple options and having the freedom to choose gives the child a sense of his/her own identity. Thus, giving children the space to explore the world around them is essential during their years of building their identity.

4.3 Play

Play has been marked as a natural and intrinsic process for the development of the child. Many researchers have stated the importance of play in early childhood and the significance it holds in child development. For preschoolers, physical activity could be categorized under as play (Burdette & Whitaker, 2005). The National Association for Sports and Physical activity of America recommend that preschoolers have indoor and outdoor areas that meet or exceed the safety standards for performing substantial muscular activities (Clark et al., 2002). Individuals responsible for the well-being of the student must be aware of the importance of physical activity and facilitate the child’s movement skills. However, there have been arguments made on the presence of play and re-evaluated in ECE settings (Ailwood, 2003).

In the early years, play is understood as a relation between the pedagogy of the tool and the child to support the development of the child’s learning (Fleer, 2013). Many theories have suggested that every child goes through stages of growth by progressing in play, and if the child does not, there may be something wrong with the child. As children grow, the meaning of play varies. A Vygotskian approach to play states that, through play children use their day-to-day life in an imaginary setting, create their own rules, and bring to life something new. By doing this, children are making play an activity that is close to what they understand of their own reality. Imagination and creativity are the core
elements of play that come to life. Role-play, another form of play where children create meaning of what they see around the world and try imparting them in new situations that can be imaginary, thereby, creating a new sense of life. Play creates a line between the imaginary world and the real world for children.

In the real world, children are expected to follow rules, norms of behavior and certain discipline, on the other hand, play creates a space for children to be how they wish to be. Although play has its own rules, pretend play allows children to create their own rules, thus allowing them to regulate their own sphere (Fleer, 2013). The switch between this created reality and reality enables the child to develop psychologically by gaining a sense of self-awareness.

“Through play, the child becomes more conscious of themselves performing behaviors, and during role-play the child is put in a position of having to tease out thought and behavior, which were previously merged and undifferentiated” (Fleer, 2013 p. 12).

According to Vygotsky (2005), children using their cognitive ability while they are playing and not just the action, they portray (as cited in Fleer, 2013). For example, Fleer (2013) says that when a child is physically present in an environment, the child may be lost in an imaginary world, the cupboard of the room, may be a magic door entrance where the child enters. Giving the child this space to activate the child’s imagination gives the child freedom to build his/her cognitive skills.

5 PURPOSE OF THE STUDY AND RESEARCH QUESTIONS

The purpose of this study is to understand the well-being of students from both private and public systems in India. For the purpose of this study, well-being is defined using three indicators from Nussbaum's list of capabilities – bodily health, bodily integrity and play. The research focuses on teacher's perceptions, actions in the classroom and the environment supporting well-being in the
classroom. A relation between well-being and capabilities is drawn at the end of the study. Data was collected from Anganwadis (government-run centers) and low-income private schools. Interviews of teachers and observations of classrooms were conducted.

The questions were formed considering the initial problem, which corresponds to the focus being only on academic achievement. The study aims to answer the following research questions.

1. How is bodily health seen in the classroom and perceived by the teacher?
2. How is bodily integrity seen in the classroom and perceived by the teacher?
3. How is play seen in the classroom and perceived by the teacher?

The observations and interviews mainly structure around understanding if students bodily health, integrity and play are activated in the school setting.

6 METHODOLOGY OF THE STUDY

6.1 Bangalore, Karnataka

Data for the study focuses on the low-income sector of urban Bangalore. Of a total population of 1.3 billion in India, Bangalore has a population of 10.1 million as per 2011. Of the 10.1 million people in Karnataka, 23.6%, about 14.2 million people, of the population live below poverty line. 19.6%, about 4.49 million people, of the population in Karnataka still live below the poverty line in the urban areas (which includes Bangalore).

The Urban population of Bangalore has around 2,097 Anganwadi, of which 485 operate in private buildings (Kulkarni, 2013). The other Anganwadis run in spaces that are provided by the government. Either trustees, families, run the low-income private schools. In some cases, these schools also use rented buildings.
6.2 Mantra4change

With the lack of support in improving the education system from the government, many NGOs have set out with a mission to solve the existing issues in ECE. Mantra4change is a young non-profit organization that works towards school transformation. The organization is based out of Bangalore, a city in Karnataka. They seek to address the need of ‘Lack of Diversity of Quality education’ among the low-income schools and schools that lack resources. To succeed in this, they intend to intervene at three levels; school, family and lastly, the community. They follow the School Transformation and Empowerment Project (STEP) procedure, where the team conducts a need analysis and makes an action plan. This is a 6-week process to identify the key challenges in the school. They have placed ‘Transformational Leads’ in schools to ensure that the various projects, as designed in collaboration with the school, are executed. For this study, observations and interviews from classrooms of schools, that the organization has collaborated with, are collected. This decision was made since the organization decided to intervene into pre-primary classes and required data that suited this study purpose.

6.3 Participants

Eight teachers in total were interviewed, of which two were Anganwadi workers; five were private school teachers. One Montessori teacher was also interviewed; however, this interview is used as an anecdote and not analyzed with the remaining data for the study. All the teachers were female, aging between twenty five to forty five. Few of them were novice with two years’ experience, while few were in the field of teaching for ten years. The Anganwadi workers have been working in the field for at least twenty-five years. Full-day observations over a week were made in total; six classrooms’ data were considered for this study. All the students came from low-income homes. The children were between ages two to five. One of the students had moved from an Anganwadi to a private school during the study. In total, two hundred and five students
(six classrooms) were observed, since absenteeism is a challenge, the number of students at any given day was not constant.

Data for this study was collected through semi-structured interviews and observations. The interviewees were given space to be broad and not restricted to a structure. As Cohen, Manison & Morrison (2011) suggest, having semi-structured interviews allows more complexity and dives into deeper issues; hence this method was chosen. Six classrooms were observed, each, over a period of two weeks. Each classroom was observed in the first week and the last week. The teachers followed regular lesson plans, and the classes were observed.

Interviews of seven teachers were recorded, excluding one Montessori teacher whose interview is not used for this study. The data from the Montessori class was not analyzed, since the groups did not match economically. Interviews were conducted on the last day of observation. The discussions focused on understanding the teacher’s perceptions of well-being and linked to the practices in the classroom.

Two Anganwadis and four private classrooms were observed. The purpose of the observation is to understand if the teacher’s verbalizations of well-being corresponded to the actions in the classroom. The observations also highlighted aspects of children’s wellbeing (bodily health, bodily integrity and play) which shall be discussed further in the findings.

6.4 Data collection process

Firstly, the interviews were transcribed. Although data could have been lost due to the missing non-verbal communication, points were noted down to ensure there were no loss of data. The interviews were conducted in various Indian languages, namely Hindi, Telugu, Malayalam, and English, in which the researcher was expressly fluent. However, the transcriptions were made in English, since the researcher is not familiar with the written script of all the lan-
languages. This made it easier to use excerpts from the interviews for written purpose in this study.

6.5 Research Process

Data analysis for this study was done using qualitative approach. Since well-being cannot be analyzed through standardized indicators as mentioned in chapter Well-being of students, data for this study used a thematic analysis, that are derived from Nussbaum’s list of capabilities approach. “There is no standardized metric or indicator for measurement of well-being, especially related to children. Individual studies and programs tend to derive their own measures of well-being and consequently measures and indicators of well-being tend to vary greatly” (Pollard et al., 2003, p.19). Since, every study has their own indicators and no standardized indicators are used, for this study, the three indicators are borrowed from Nussbaum’s list of capabilities to determine well-being, Bodily Health, Bodily Integrity and Play. Responses of participants were categorized under the three indicators by thematic analysis to denote the functioning of each of them in the classroom. Classroom observations were categorized according to these indicators.

Since the names are anonyms, the first characters of their names are represented for the interviews. Interviewees are represented as A, N, S, D, R, T, and C. Few of the students were given pseudonyms to bring dialogue to the findings.

6.6 Ethics and Reliability

The study focused on interviews and observations of classrooms in the low-income community in the suburban regions of urban Bangalore, Karnataka. The schools were chosen based on the schools undertaken by the organization Mantra4change. Permission was granted by the organization. Class teachers and parents were approached by the organization of the selected classrooms as re-
quired. Few of the schools did not mandate parents’ permission for observations; hence, the principal’s consent was taken. Names, wherever used in the findings are pseudonyms to keep the participants’ identities confidential. Consent from all participating teachers were obtained by the organization before the start of the study. Since students were observed and not interviewed, parents’ consent was not mandatory, and hence the principals’ consent was taken. However, since pictures were taken the teachers’ took parents’ consent. Since the consent was not in written form, the faces of all the participants were blurred. No child’s or teachers face is visible in the pictures posted.

As a part of the ethical considerations, I would like to briefly tell about my personal interest and involvement with this topic. Having studied in an education system that provided access to resources and reasonably trained teacher, the lack of its need was unnoticed until I experienced it as a teacher. The gap within the high-, middle- and low-income communities in India is vast. The effects of poverty on the education system have been discussed extensively in Section two. After working part-time at Make a Difference for 4 years, I joined Teach for India, as a teacher to thirty-two Grade three & four students in a low-income private school. A family who had no experience in the field of education ran this school. While teaching at the school, I also had the opportunity to visit and observe other classrooms, from kindergarten to the secondary school level, in the city. It was heart aching to see students in kindergarten classes crying all day. They were restricted to their classrooms entire day, since the school did not have a playground, and it was believed by their teachers to be unsafe to take them to the provincial park.

My focus as a teacher was on learning as an experience. Teach for India, allowed me to teach in classrooms, despite not having a professional teacher qualification. Over two years, I saw a tremendous growth in my students as the focus was on not only academic achievement, but also a holistic approach. I recognized that I was not the only stakeholder or influencer in the child’s education. Parents and the school were equal participants. Focusing on non-
academic aspects along with academics improved not only my students' academic achievement, but also enhanced their skills that were subjected to academics skills such as math, reading and writing. I experienced joy and a sense of satisfaction in my role as a teacher. On the other hand, in conversation with the non-teach for India staff at the school; I noticed teachers’ dissatisfaction, stress, and frustration. The role they played, as teachers, seemed to be followed strictly by how they are expected to by the school. In addition to this, a large part of their frustration had risen from monetary grounds. While teaching, it was noticed that my focus on the child’s physical development and social skills has benefitted them in their cognitive ability as well. Thus providing this holistic approach and enabling the well-being of the child drove me to understand well-being and its effects on children. Studies have shown that starting early helps the child’s development and this age shows maximum results in physical and cognitive growth. This drove my interest to understand well-being and the role it played in the early years. In addition to that, I was also curious to know how teachers perceived their roles in the classroom. My knowledge and understanding of low-income schools and my limited experience as an educator may play as a bias in this study.

7 FINDINGS

7.1 Bodily Health

Data for Bodily Health in Anganwadis and in private schools have been recorded by interviewing teachers to understand their perception of bodily health and observations of classrooms.

One of the primary focuses in Anganwadis is on Nutrition; every center is provided with required materials for a month. Not only the centers, but also families that live around the community, having children below the age of three are provided with rice, wheat, and jaggery. Teacher C says that the food for the students is cooked at the center by the Anganwadi helper. The Children are
given egg once a week, and milk is given every morning. Private schools in India, on the other hand, do not provide food, and students are expected to bring food from their homes. It has been observed that students bring either junk food (chips) or very little food. Teacher D says, the students get a 30mins lunch break, and it is challenging them to see if every child has eaten their lunch. As the only teacher in the class, it gets complicated to monitor. She also adds that the parents keep complaining that their child did not have their food and the kids are not eating.

On the other hand, Teacher N, of School X, which is a government school, but runs pre-primary privately, says:

The principal has decided to provide food for the students asking the families to pay a minimum amount. The materials are provided by the school, and an ‘aunty’ in the school cooks the food.

The children also get a glass of milk in the morning after prayer time. When asked Teacher N, what do the students eat on a daily basis; she replied;

We don’t know, every day it is different, some days kichidi (mixed rice and lentils), some days yogurt and rice, or some vegetable and rice. Every day it is different.

However, the teachers do not eat the food provided at the school. Teacher R of a private school says that it takes a lot of time to settle the kids for lunchtime, and few children get 15 minutes to eat their lunch. Teacher S says,

“We give the parents a list of items that the children can bring to school for lunch, but most of the parents do not send it since most of them are working, they send food that is fast to prepare. As teachers, we cannot force them”. Teacher R said:

We know what the child must need, for example; Dal (Lentil), rice, vegetable, or bulky breakfast items, such as, idly (steamed rice cake), Dosa (rice crepes).

It was the lunch hour at G private school when the teacher sent a student to carry an entire bucket of food. The food is not served at the same time every day. The teacher sometimes must wait for half an hour after the lunch hour. Whenever the food is ready, the class breaks for lunch hour begins. The children sat around to be served, some of them had brought little boxes from home, few of them used the plates from school (There were not sufficient plates for everyone). Few students did not have any, one student asked me for the lid of
my lunch box, which I willingly offered. Unfortunately, I just had one. The students bring chips to snack for shorter breaks. Some of them used the covers of these chips as plates (See appendix). The teacher did not object to students doing the same. Teacher N of the same school encouraged two students to share the same plate due to the shortage of dishes for the classroom. Since the food was provided by the school, it was hard to gauge the nutrition value, since the teachers did not know themselves. It did not seem like hygiene was a concern in the school. On the other hand, in Anganwadi’s, where the principal focus is nutrition, the Anganwadi helper ensures that food is provided on time. Children are given milk by 11 am, followed by lunch at 1 pm. Children do not carry food from home, hence smaller unhealthy snacks such as chips are avoided. Teacher C at the Anganwadi mentioned that, meat is avoided due to religious and culture reasons. However, an egg is given once a week to build protein

"The government gives rice, pulses, lentils, flour and the necessary spices required for a month. Funds for eggs is given, and we purchase it here since eggs need to be consumed immediately since there is no fridge here."

As observed in Montessori schools, although children bring their food from home, the schools give a recommended list of items. Teachers ensure that students are following the nutrition as prescribed. Although the National Nutrition Policy (1993) of India suggests that, there should be an intervention of nutrition in schools, private schools, although slot time for snack and lunch, do not ensure the child is given enough time or is enjoying his/her meal. No school had a mention of a Nutritionist.

In the Anganwadis, there were doctor visits once a month for all the students for a complete check-up of the child’s health. Necessary vaccinations were given to the child. If there were any requirements of a sudden need for a doctor/nurses visit, Teacher C said that they would put in a word to the officials, but the visit may be made only the next month, based on the availability of a doctor. In both of the Anganwadis, it has been observed that there were no weighing scales and growth charts as recommended by the government. When Teacher C was asked, what she thought is essential for the child's health; she quoted:
Food and they get time to sleep. Sleep is an essential component of health at the early years and affects children, physically and mentally.

Studies have demonstrated that fragmented sleep could affect children's learning and memory. Sleep has a direct impact on the neural networking system since the brain performs functions during sleep (Maquet, 2001 as cited in Sadeh, 2003). After the lunch hour, students have their naptime. They are given 30 minutes of sleep time. Teacher D mentions that Sleep is vital for a child and the child needs that nap time until they are six or seven years, only then, they will grow, and their brains will function faster. On the other hand, the same teacher mentions that

At 12.30, they are put to sleep, but have to wake up by 1.15. If they are asleep, it is difficult to wake them up, that is more problematic, and that takes more time. Therefore, if they don’t sleep, it is okay.

The belief of the teacher does not seem to match up to what they practice in the classroom. Not all the students were sleepy but were forced to sleep. One of the students, unable to sleep was talking; the senior teacher passing by walked in and punished the child for talking during the naptime. The children are given no choice and sufficient time to sleep. Not all the children could fall asleep immediately after the lunch hour, by the time they fell asleep, they were forced to wake up. Students who did not wake up were beaten on their backs and forced to wake up. The class moved into important sessions, such as math, which required children to focus and if they did not, they were made to stand or jump until they are completely awake.

Neither of the Anganwadis had a provision for a toilet. Children are asked to use the toilets in their homes since they stay close by in the neighborhood. On the other hand, private schools had a facility for toilets. When asked Teacher S, of a private school about health system at the school, the teacher said that there is no system, the health of the child is taken care by the family; the school does not provide any health service. If the child falls sick, we ask the parents to pick the child from school. Until then, the child is made to sleep in the office. Bodily health also attributes to children’s physical health and activities. When asked the teacher about physical activities, Teacher T mentioned that there was
no space for children to do events. However, events are conducted once a year and parents are invited. Children perform, and there are games organized for parents and the students. Apart from that, every semester, the center encourages parents to show the progress of the child's performance. On the other hand, Teacher C of the other Anganwadi mentioned of physical activities as movements she conducts with the kids in the morning. The Anganwadi helpers are trained during the training sessions about exercises we should do with the children. Teacher A, of a private school, starts the day by having the kids stand on the desk and move their hands and legs. She says that this energizes the kids and sets the tone for the class. Children get active after the exercise. "During the class, if I see the kids are tired, I make them do few exercises to re-energize."

Teacher S, mentioned apart from play, the afternoon is full activities; kids have playtime, TV time and other games. The activities that happen in the school are various days; such as; "vegetable day, color day, fruit day." Children are asked to dress up for the occasion, like a fancy dress.

Teacher R of the private school has her daughter enrolled in the same school and is a teacher of the same class. On the first day of the observation, a little girl sits in the last row with her head on the desk between two other kids on her left and right. She was restless and kept moving. The teacher called out to her and asked her to sit up. The child desperately looked up but had no energy in her. The teacher then came up to her, gave her a pill, and asked her to put her head down on the desk and take a nap. When asked, teacher R said:

She is my daughter; I have to take her to the doctor today. I could not leave her alone at home.

Teacher N was trying her best to get the class in order and start her lessons for the day, and she did not notice little Raghav in the last row dosing every five minutes. Every time Raghav dosed, she called out his name and the three-year-old opened his eyes for no longer than five minutes. When asked; she replied,

He is always sleeping in class, he has no attention. He was not well recently and came after many days of school.
Raghav was still burning with temperature; the teacher had not noticed until it was pointed out. She said that nothing could be done until his parents came in the evening to pick him up. He was made to sleep in the class until then, although there was no provision for the child to take a nap.

Teacher A, of the same school, although perceived play as important, but mentioned that there wasn't time to have activities and play time in the class has slotted time in the schedule to have kids move even with the space constraint. After prayer time, Teacher A sets time aside for exercises. She makes the kids move their hands and legs. Since there is less space, she makes the kids stand on the tables for these exercises. After lunch, she conducts a similar session to get the students activated for the next session. Although the exercise period lasts for 10 minutes, children are very excited.

At 10 am, in the S private school, the students break for a snack, the first movement for the day. They open their snack boxes to eat without having washed their hands. They are given about 15 minutes for snack time. Ayesha drinks water and wants to keep her bottle with her but is forced to leave it in her lunch bag. This made Ayesha cry for 10 minutes past the break. She was told, "Mam will come and shout at you." Senior teachers were used as a threat to induce fear if the students were not obeying. Some of the students insisted on washing their hands after eating to which the teacher responded, "Not required, time is up. You already wasted a lot of time eating". Some of the students could not finish their snacks, the teacher trying to get control of the classrooms yells," It enough, time is over." Most of their nails were dirty and hands unclean, yet they were made to sit in class for the next session.

The atmosphere at the schools did not seem very health-friendly. Children sat in classrooms filled with mosquitoes. There were no measures taken to keep them away. When asked Teacher N about this issue, she simply laughed and said, "Yes, there are a lot of mosquitoes in the class". Health, according to teacher, based on the findings is perceived as food and sleep. Nutrition, hygiene, sickness are factors that are ignored. Exercise and good nutrition that are age appropriate is not considered as a part of development.
7.2 Bodily Integrity

The space in Anganwadis and private schools are entirely different. The area in one of the Anganwadi was big enough to accommodate 20 students. However, the Anganwadi had not more than 12 children on an average during the entire week of the observation. Teacher C says, “Earlier we had more than 20 students, but now with private schools coming, the number has reduced”. There is a separate space for kitchen and the study room. However, there is no facility for children to move freely. The observed Anganwadi had similar demographics; however, one of them was recently renovated, the earlier space had asbestos sheets, which were replaced with concrete roofs not allowing water to seep in during the rainy times. New tiles were laid and the room had separate seating space and moving area as well. Just as the previous Anganwadi, this one had a separate space for the kitchen. However, neither of them had space for play area.

On the other hand, private schools had very big classrooms, which accommodated 40 students. Teacher A said she had 71 students in her class. The class had round tables and chairs. There was no much place for children to move, however, the teacher created space for children to have their writing time in a separate space. Children sat on the floor during the writing time. Teacher N said she had at least 60 students on a daily basis. The classroom had 20 rows of benches arranged in two columns. Teacher D said, “There should be lesser students “. The children sleep in the same place with their heads on the desk. They also have their lunch in the same space, on the floor.

Violence among peers and between the teacher and student contribute to the child’s integrity. The social-emotional well-being of the child depends on the relation between the teacher and the student. The teacher being the primary care-giver once the child begins schools helps the child develop these social-emotional skills, as mentioned in the chapter 2, Wellbeing of students. When asked the teacher about what she thought about beating a child in class, Teacher D said, “When I was in the previous school, the children understood everything
I said, I didn’t have to hit any child. Until today, I have never beaten a child. However, here, I have no choice but to do that. Children do not have any discipline. In the previous school, emotionally, I try to tell them that I will leave, because you do not want me, and you do not want to listen to me, I will leave. The children understand, their house background also may be such where the parents don’t beat them, they give them so much love, and here also we should give them the same love”. She also adds, “Children here are very strong, how much you beat them or say, they have no reaction. I try my best to do what I can, but they say, “I’ll do what I want”. There is no discipline here”. When teacher S asked about how children adjust in the initial days, to that she says; “We observe how the children are. We play with some children, or give them things. Some children need to be scared into adjusting, we shout at them”. When Teacher A was asked about how her class adjusts in the initial days; she said, “I do not do anything. I just play the phonics song and they see it. I do not do anything, whole day they keep crying, and then I tell them that their parents will come. Then they stop crying automatically”.

The children sat close to each other, five students in one row, each of their elbows touching each other. Teacher D asked the students to take out their books and asked them to note down the same as from on the board. Due to the lack of space to write on the desk, few students were recommended to sit on the floor, saying it was closer to the blackboard. The lunch hour was observed to be a time when children of the private school did not have space to move or eat. “Listen, don’t touch your bags and sit properly”, says teacher D before she starts the class. The students are expected to sit in that particular spot at least for 45 minutes continuously. The schedule set by the teachers in the private school did not involve children moving about during class time, except lunch hour, and if the child requested to use the washroom. However, teacher D made sure that the scheduled involved students moving to another room for ‘circle time’ where they sat in a circle and played word/alphabet game. All the classes had a period of play, once a week. Apart from that, the activities were quite limited not enabling continuous motion in the classroom (See appendix
for the schedule). Students were assigned a seat and made to sit in that spot everyday giving them less choice to sit with whom they want or where they wanted. However, lunch hour, although supervised by the teacher, children were allowed to sit as per their choice.

During the math class, while the teacher was teaching them ‘standing line’, the students seemed restless and stood up, unable to sit for long hours, to which the teacher instructs, “Sit down and fold your hands”. The teacher hands over the books to them to draw standing lines. The gap between the seat and the desk seemed too much, students found it difficult to reach out to write. Few of the students had finished their work and restlessly waiting for the teacher to look at their work while the teacher was attending to the rest of the class. Seeing the other students restless, the teacher shouts, “I will send you outside. Turn, sit and fold your hands”. The students listen obediently. Sandhya, three years old, was unable to focus. She wanted to move around in the class every five minutes. The teacher noticed Sandhya get up from her seat and shouted, “Should I take you to the principal’s office? Fold your hands and sit down in your place”. Sandhya was frightened and sat back at her place at once.

During the lunch hour, when children are given 30 minutes to eat, children start talking to eat other while they are seated on the floor in a circle without an inch gap between them. The teacher hits the child on her back (playfully) and says, “If you all talk, you will not get time to eat, and then your parents will come and complain. So, stop talking, and eat”. No sooner did the students start eating, the senior teacher walks in and says, “10 minutes left, I won’t give you’ll extra time to eat. So, finish eating soon”. Although there was more time to eat, the children had to eat fast.

On the other hand, Anganwadis, although having smaller space (in area) provide a more open space for children to move around. At the Anganwadis, children were not restricted to a seat or a particular activity. Although there seemed to be limited supervision from the Anganwadi helper, the children had the freedom to make their choices with no external force. There was no physical or verbal violence seen at the Anganwadi in the interactions between the An-
ganwadi teacher and the students. Playful fights between children were solved amongst them. Whereas, in the private schools, children were more violent with each other. Children sitting in the benches behind beat and pinched each other while the class was going on. Student’s restlessness resulted in destructive outputs such as pushing each other or fighting for space. However, they were shut by the teacher when the teacher instructed them to be quiet else they would be punished. As mentioned earlier, since Math and Literacy are the focus of children’s outcomes; students sit in their seats for 1.5 hours at a stretch in a particular spot, since their first break is at 10 am.

7.3 Play

This section reflects on what’s teachers say about the need and importance of play in the classroom. Teacher C, of the Anganwadi says that, “this age children should play, if they don’t play now, when will they play. When they become our age, they can’t play”. Teacher T of the other Anganwadi shared the similar thought. “At this age, children should play, they should sing, children like that more. Whatever we write, they are not interested. First, they need to play, then songs, and only when they think of writing”. On the other hand, Teacher A shared her view about play; she says,

There is no time for children to play, all the time goes for completing work. Once books are distributed, all the time will go for homework and filling the books. After 6 months, they have to write in the books as well. All the time will go in that. Playtime that happens on Saturday, once they finish their homework.

Teacher N of the same school thinks that children love to only play, if toys are given to them, they would not need anything else. Teacher D, of the private school resonates to this thought that

These are the years children should play, and hence each class gets playtime twice a week. Apart from that I do my own activities in the class like, we sit in a circle and play flash cards and other activities.

Teacher R from the same school as Teacher D said,“ There should be more time for children to play, but there is so much to do in the class that there is no time”. Play perceived by teachers in the earlier section, gave an understanding
that teachers viewed it as an important aspect of growth for children in the early years. Teacher D took the students out for playtime. The children were lined up, one behind the other. Two children were allowed to use the swings at a time (there being only two swings), while the other students waited in the line for their chance. Since the class strength was 32, it took almost 30mins for each child to get their turn, which was about the time for their play. The only playtime allotted for them was this period, once a week. When asked the teacher about it, she said,

What if children get hurt while playing? We cannot take responsibility for that “. Apart from this supervised play, there is no unsupervised play time. Teacher R adds, “We have a lot of syllabus to complete.

At Anganwadi C, the children seemed to pick activities they wished to do, toys were kept at one corner of the room, children picked and played either by themselves or with their peers. Although the toys did not seem in good condition, children were given the choice to do what they wanted. The teacher did not seem to bother the child with an applied force for activities.

8 SUMMARY OF ANALYSIS

This chapter gives an overview of the analysis regarding the research questions from the previous chapter Findings. The findings shows that Bodily health was a focus at the Anganwadis and not in the private schools. In private schools, there was a lesser focus on the child's Bodily health and Integrity. Health was a responsibility of the family and schools were in no place to take charge of them. None of the private schools that were visited had a health system. Teacher’s focus was to ensure that the students emptied the tiffin’s they carried from home to avoid complaints from the parents.

Teacher’s perception of health in the private schools was limited to students bringing their food. However, it may be debated about the outcomes of health; since there is no growth chart as demanded by the Ministry of woman and childcare development.
Due to larger classroom size, students did not have much space to interact and move around in the classroom. On the other hand, Anganwadis focused mainly on nutrition and ensuring that children are given food on time. Due to smaller classroom size in these centers, the room is not crowded providing more space for children to move around. The children are not restricted to time and space at the Anganwadi.

Student's perception of a safe environment is however not explored in this study and will be discussed in the limitations chapter. The focus at the private schools were on Math and Literacy. This seems evident since in the interviews the teachers mentioned that, the most important aspect for the child is to be able to read and write. Students are made to learn the multiplication tables at the age as young as four, Teacher R mentions; “The syllabus requires them to know tables until two, the brighter ones learn till four tables. They say it very easily”. The school did not adhere to the students beyond language, Math, and Literacy.

In private schools, children are restricted to their seats in the classroom and are expected to sit for at least two hours at a stretch, which brings it to Bodily Integrity. As mentioned in the findings, the day at the school starts at 8 am, and the first break children get are at 10 am. They are asked to sit in their assigned seats for two hours at a stretch. Some students use ‘going to the washroom’ as an excuse to get out of the classroom. In some cases, the teachers do not allow the students to go. Observations have pointed few comments where the teachers force the students to fold their hands and be seated. Students are punished if they get up from their seats when the class is going on. There have been situations that children pick up fights with their neighbors because they are restless. There is evidence that shows their restlessness. Children complete their work fast while the teacher was occupied with a set of students. The remaining students do not know what to do and pick up unnecessary fights. In some cases, these fights are uncontrollable and are handled by the teacher punishing them, which is another form of violence in itself.

Play, which is considered an integral part of children’s development, has shown private schools and Anganwadis valued less. Children were given lim-
ited hours for play during the week. At the private schools, children did not seem to be enjoying their playtime. As pointed out in chapter 7 of the Findings, children had to stand in a line to wait for their turn to use the swings. The swings were the only form of play in the school. While school S gave students playtime once a week, school G did not have provision for playtime. Play was a luxury, with teachers having a considerable syllabus to cover. Teachers perceived play as fun time for the kids and restricted. As mentioned in Findings, teachers believed that if children run around too much, they may get hurt and the parents would blame the teachers for these actions. Hence, play was restricted and supervised to provide the students a safe environment.

Students were made to sit in the class all day long. Going to the washroom was the only break from their seats. Since lunch was also served in the classrooms, possibilities for children’s movement were limited. In chapter 7 of the Results section, it is pointed out how the teacher believed in the importance of sleep. In the first section of the Results section, teachers said that children at this age must be given ample amount of sleep to increase brain functioning. It the second half of the chapter the teachers’ actions spoke. Otherwise, the children were given just 30 minutes sleep time and were forcefully woken up, sometimes were beaten on their back or shouted at to be ready for a heavy session of class. Anganwadis on the other hand, were on the other end of the spectrum, children ran home immediately after lunch. The data from the observation indicated that students attended the Anganwadi program for the meals provided. Learning was limited at the center since the major focus at the center is health and nutrition. Health may also be debated since there were no reports on the child's health and record of their daily growth and diet as per the government norms.

9 DISCUSSION

The previous chapter summarized the analysis of the data. In this chapter, the research questions will be discussed with a connection to the capabilities ap-
proach. Well-being as defined by Moore, et al., 2003 is the overall development of the physical, social and cognitive well-being of the child during the early years. This foundation plays an important role in the development of the child. Each of these aspects of growth are inter-related as mentioned in Well-being of students. However, in the private schools it was noticed that the health of the child was not the responsibility of the school or the teacher. Teacher’s perception of health is restricted to food and sleep. Nutrition, exercise and age appropriate activities for development were not seen during either the interviews or observations. On the other hand, if children fell sick, they were made to sit in the classroom or a separate space, until the parents came to take the child home. If the parents could not make it, the child sat in the class the entire day. This was also not a safe environment for the rest of the students, since children could be vulnerable to illness, and this could spread to the rest of the class (Zaff, et al., 2003). It is evident that there are opportunities for children to make choices, but the freedom is not given to them. For students to make their own decisions, it is essential that they be provided with various options. These options, as pointed out by Schokkaret, 2007, are the real opportunities that should be given to a student. Looking at the schedule that has been set for students in the private school, there seems to be no space for children to choose what activity they like to do, instead, are made to follow as per instruction. It was mentioned several times that children need to learn to read and write before they graduate to grade one. The focus on Math and Literacy has also forced teachers to create an environment in the classroom that enables the same. Uyan-Semerci (2007) claims that, in order to ensure that a person is in a state of good wellbeing, creating the right situations in order to develop one’s capabilities is essential. However, in the schools, it seemed students were given very less chances to maximize their total potential. During the day, at the private school, children are given very less opportunities to make choices or decisions. For instance, during playtime, children are not given the choice of what to play; all of them play the same game under the teacher’s supervision. Thus, opportunities provided, which can be related to capabilities in this study is not enhanced and
thus reducing freedom for the students, which in turn reduces achievement. However, opportunities for learning are provided to the students, in form of home works, regular assessment, and classwork. However, students are not given much freedom to choose what they want to do during the day’s schedule. They are restricted to the timetable structured by the teacher. Thus, although learning creates opportunities, the lack of freedom may reduce their ability to function to their full potential. By increasing, their potential is supporting the child not only cognitively, but also physically and social-emotionally. As research has already shown, each of these aspects to be interrelated, which in turn may not enhance their overall wellbeing. At the Anganwadi, children are provided opportunities to be independent during the day. For instance, children are allowed to choose what games they wish to play, unlike in the private schools. There seems to be more freedom of choice at the Anganwadi as compared to the private schools. Noddings (2001) definition of ‘care’ pertains to the concept of choice and freedom in relation to the capabilities approach. Most of the teachers, during the interviews mentioned, they want best for the students. In context to this when teachers were asked what they thought was best for their students, Teacher S mentioned:

It is important at the end of the day, the children should be able to read and write.

To this, Noddings (2001) echoes, if the cared-for, in this case, the students do not feel cared-for, even if the care giver(teacher) say they care, the care does not count. In addition to this, Noddings (2001) explains freedom of choice with an example:

Concerning Bodily health, children at the Anganwadi do not have an opportunity to choose the kind of food they like, they are made to eat the food that is served to them, having fewer options to choose from, and the child does not have the opportunity to pick him/herself. However, the Anganwadi takes care of nutrition, unlike in the private schools. Children at the private school bring food from their homes, giving them more options. One way this may be addressed is including the parents in deciding what could be the menu at the An-
ganwadi to direct to the child’s choice of food and providing a highly nutritious diet with professional consultation and provide the child with a selection of food. This will also help the child with a level of decision-making. In the aspect of health, although the Government norms state that every center at the Anganwadi bear a growth chart to track the growth of the child, none of the sample Anganwadi had a growth chart. Since there were issues of absenteeism, there was no proof to know if the absenteeism was caused by the lack of well-being at the school. Teacher N mentioned that; she has 90 students in total, but on an average 60 students attended school daily. The reason for absenteeism could also be the food or the atmosphere of the classroom.

For a child to grow holistically, as mentioned earlier, apart from nutrition, providing the right atmosphere for growth is essential. Creating these, positive experiences enable the child to have healthy relationships in the future. The relation between the student and the teacher will determine the relationships the children have among their peers. Violence and other behavioral aspects are also outcomes from classroom exposure apart from the communities. The developmental assets are positive experiences, relationships, opportunities and personal qualities that young people need to grow into healthy, caring and responsible adults (Pollard et al., 2003). According to Noddings (2003), a healthy social-emotional development depends on the caregiver relationships that are warm, consistent, and nurturing. These relationships are also essential for physical well-being and safety. In addition, providing the physical space in the classroom is important to allow the child to explore itself. Nucci, 2001 mentions that it if the child is given space in the classroom, this enables the child to express their emotions towards violence. It has been noticed in classrooms that children are beaten to gather their attention. However, research has shown that these relationships affect the child’s physical well-being. The cognitive well-being of the child may also be affected due to these gestures between the teacher and student, since physical well-being, social and cognitive wellbeing are inter-related. Each of these have their effect on the other as mentioned in Well-being of students.
Play in classrooms have marked an insignificant role in the child’s daily routine. Teachers have mentioned in their interviews that they did not have time to include play in the schedules. The curriculum and syllabus were too intense to incorporate play. As mentioned by Fleer (2013), play improved the child’s imagination, decision-making and skills that cannot be taught by the teacher exclusively. During play, children create a parallel world where their rules and imaginative skills are heightened. Play allows the children to understand themselves and the society they live in better. My reducing the presence of play in a child’s growth, teachers are restricting their cognitive ability. Thus, to ensure the child’s cognitive development, which is one of the focus presently in schools, it is essential to provide maximum support towards the child’s physical and social well-being. Other physical activities such as exercises play an important role in the growth of the child. According to Tucker & Irwin (2010), the initial years if schools create an onset for physical activities, health related behaviors, since this provides support for long-term lifestyles of the child.

The Ministry of woman and child development states that the vision of ECE in India which is to provide a holistic development and an active learning capacity for children below the age of six by delivering joyful and contextualized opportunities, which include nutrition and a safe environment for children (NEC-CECF, n.d.). In India, it is assumed that children entering primary schools would have achieved the basics of reading, writing, and arithmetic. It has been observed through this study that students are not provided with the required opportunities in terms of Bodily, health, Integrity and play to leverage their skills and be provided with a holistic development.

As mentioned in the challenges of education in India, income is one of the major constraints. In most of the developing countries, economy plays a role in defining the education the child receives. According to the CA, Laderchi (1997) suggests that the role of income plays a non-linear part and depends on many other personal, household and regional characteristics. Considering the education system India and emphasizing on the low-income community and the
quality concerning reduced staff and resources. Sen argues that a person's well-being does not depend on how rich or poor they are. (Sen, 1995 as cited in Saito, 2003). Sen (1995) defines the capabilities approach as the freedom to achieve based on one's capabilities (as cited in Saito, 2003).

In conclusion, the capabilities approach supports this study by providing a framework to understand well-being. The study draws its backbone from Nussbaum’s capabilities list. Out of the ten mentioned capabilities, three chosen capabilities; Bodily health, Bodily Integrity and Play have been used to define well-being in this study. As Nussbaum defines well-being that can be achieved by identifying the core capabilities, this study evaluates well-being based on the three parameters. The core concept of the study is to identify the teachers’ perception of the three concepts of wellbeing. The observations carried out was to understand if the teachers’ sayings matched their doings in the classrooms.

Through this study, it can be fairly concluded that, in Anganwadis, teachers’ believe that health and play are important to children and observations show that teachers’ focus on the child’s health. However, providing food alone does not mark Bodily health. The other factors as mentioned in the study are neglected. Since the student teacher ratio at the Anganwadi was less, the space for children was sufficient. However, this did not seem to be leveraged by the teacher. The time spent at the center is unaccounted for, either by the education authorities or by the parents. There has been no violence between the student and teacher. However, peer violence was observed. On the other hand, in private schools, it has been noticed that focus lied only on building the cognitive development, while physical and other aspects of holistic development were neglected. Health, nutrition, physical freedom within the classroom and freedom of choice were neglected at the private schools and Anganwadi. Thus, opportunities (capabilities) for growth in terms of health, space and play were not given to children as needed that were age appropriate. In addition, freedom of choice was very restricted. Thus according to the CA, lack of these opportunities (capabilities) results in lowered functioning of well-being.
Although it is a common factor that the lack of income is a lack of resource. This lack of resources may result in less accessibility to goods, which may in turn be a depletion in the quality of education. However, considering the CA: Although the CA was initially designed for purposes other than education, education has been widely explored using the Capabilities approach, such as the Human development index (Thompson, 2002). Clark (2005) emphasizes that the growth of income and goods are essential for human development. However, Sen (1990) contradicts this idea with an Aristotelian approach that ‘wealth is evidently not the good we are seeking, for it is merely useful and for the sake of something else’ (as cited in Clark, 2005: p. 3). For instance, a person who is differently abled might require assistance to perform a certain task, when compared to a person who is abled. Thus, the achievement depends upon the commodities rather than the person’s capability. However, Clark (2005) suggests that the well-being of the person may not be justified by the resources but by being able to function with the goods that are accessible. However, in the same example, if the ability of the differently abled person is leveraged based on the access they might have to perform the same task, without the resource and commodities, that individual may be able to perform the same task.

10 LIMITATIONS

In the final chapter of this study, the limitations and possibility for future research will be discussed.

Although Nussbaum’s list of capabilities catered to well-being as a whole, for this study, three out of the ten capabilities were selected. These three capabilities were chosen since literature on the history of ECE in India was focused on nutrition and academic excellence. Since the study was about well-being, more focus on these three aspects was taken. However, (4) Senses, Imagination and (5) Emotions, were two aspects that also could be explored, but, with children not being direct participants these two were discarded as well.
In section 7.1, the participants for this study chosen were teachers. This limitation restricted the view of other stakeholders, such as parents, principal, and the government. Since all of these stakeholders contribute equally to the students' well-being (health, integrity, and play), further research should be considered keeping in mind each of their perceptions and doings. Due to time constraint of finding the schools and unavailability of parents, and the principals’ busy schedules the present participants were chosen. In addition, during the interviews, the principal was asked for, to which Teacher S responded:

The principal is busy; she may not be available since parents keep coming to meet her. Sometimes she has meetings outside which she has to attend. Today she is gone for a meeting.”

This being one of the limitations, well-being of the student cannot be measured in totality. While understanding well-being of the students from the perspective of teachers, it is important to understand the meaning of well-being from the perspective of children themselves. Qualitative research has shown that very young children can provide important insights into their daily lives and health experiences (Irwin & Johnson, 2005). Considering, children’s views and the voices they have that could be heard unlike in the past when children were considered unreliable sources for data, would have been valuable data for this study. Thus interviewing the students, interacting with the students to know what keeps the child happy, in this study, what the child would like to eat or how the child would want to play if the child would like more hours to play; could have been explored in detail. In addition, understanding from the student, what their perception of a safe environment meant, would have helped define wellbeing appropriately. Nevertheless, in most cases, children get accustomed to the environment they are set in, giving them the possibility to believe they are in the safest setting. For reasons such as lack of expertise in interviewing students of that age group, students were participants being observed and not questioned. However, this would have been an active data point.

During the interviews, teacher’s dissatisfaction was also a factor that had occurred in several instances. Research has also stated that an unhappy teacher
may make an unhappy classroom (Mccallum & Price, 2010). However, this factor was not explored during the study. In future study, the wellbeing of the teacher could also be a factor that contributes to student wellbeing.

As discussed in Sections 9 and 10, children at the Anganwadis are given food on time and nutrition is the main program; it could be debated that this constitutes for good health. There is no growth chart to know if the nutrition provided is having a positive impact for the child. The study was not long enough to measure the child’s growth, neither did it create data points to know if the child fell ill due to the food or the cleanliness at the center, since the attendance ratio at the school was low. In addition, the study stressed upon health, space, violence and play. Factors for social and cognitive development were not considered in this study.

To extend this study, including the remaining capabilities of the Nussbaum’s list and interviewing students could give a greater scope to this study.
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Appendix 1 Interview questions

Initial questions:
General understanding, to get comfortable with the teacher.
1. Since when have you been teaching in the school?
2. What motivated you to start teaching?
3. What did you do before you started teaching?
4. Did you have to do a B.Ed. before you stated teaching here?
5. What is your role as an Anganwadi worker?

Second set of questions
Understanding the three parameters of the study:
Private school:
1. Could you please describe your daily routine?
What does the schedule look like etc...?
2. What is the structure for medical in the school?
3. Does the school provide meals? If not how is nutrition taken care of in the school
4. According to you, what is important for the child’s growth?
5. If the child does not listen in class, what do you do as a teacher?
6. When the child enters school, how long does it take the child to settle down? What do you do to help the child settle?
7. What about the physical activities in school? What kind of activities are conducted?
8. How many hours do children get to play? How important is play according to you?
9. What kind of activities involve play in school?
1. Could you describe your daily routine?
   a. What does the schedule look like?
2. What do they eat on a daily basis?
3. What is the structure for medical support at the Anganwadi?
4. According to you, what is important for the child’s growth?
5. How long does it take the children to settle once they join? How do you support the child initially?
6. What about physical activities? What are the activities conducted at the center?
7. How many hours do children get for playtime? How important is play according to you?
8. What are the activities that involve play at the center?
Appendix 2: Consent letter

Dear Principal/Teacher,

I am Chris G Kollian, currently pursuing my Masters in Education Leadership from the University of Jyvaskyla, Finland. I would like to invite you to be a part of my Master program research, which understands the well-being of students and the role of teachers of pre-primary schools in India. The purpose of this study is to examine the pre-primary education in India and focus on three main aspects of the education system, which is, curriculum, learning environment and teachers. The main idea is to understand these three aspects and study how they affect the wellbeing of children in schools. In order to learn about your experiences and understand the wellbeing of children, I would like to interview the pre-school/kindergarten teachers and observe a few of your classes. The themes of the interviews include your

- Daily schedule
- Background
- Qualification
- Curriculum

The observations would include

- Learning environment
- Student behavior

The interview conversations will not exceed 2 hours. We could decide upon a time feasible for you after school hours to spend together for this conversation. The conversations would be recorded for transcription purpose of my thesis. In addition, for capturing all the data required, informal conversations that suit the thesis shall be recorded as well. Pictures during the observation maybe taken. You may be rest assured that all the information from our conversations will be very confidential and no names will be revealed. I will do the transcription. I would be conducting my research over 3 months, June to August. There would be one interview every month. The interviews will be face to face since I
will be in the school. I do not speak the local language (Kannada) but am fluent in Hindi and Telugu. Please do share your email id’s/phone numbers with me, I am more than pleased to answer any additional information regarding the research. I will keep you informed of the study and hope to keep in touch with you.

Yours kindly,

Chris G Kollian
(Signature of the Teacher/Principal)
University of Jyvaskyla
Ph.no: +358417203970, 9959098256
Email: chglkoll@student.jyu.fi
Appendix 3:

Pictures from Observation

Image1: depicts the teacher student ratio.
Image 2: Children are made to write at a very young age. Students are made to sit on the floor with no mats.
Image 3: Children eat from paper due to the lack of plates.
### Appendix 4: Class Schedules

**Example of one classroom**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.00 am</td>
<td>Children arrive at school</td>
</tr>
<tr>
<td>9.30 am</td>
<td>School prayer</td>
</tr>
<tr>
<td>9.30-9.35 am</td>
<td>Exercise (in their places)</td>
</tr>
<tr>
<td>9.35-10.00am</td>
<td>Phonics song</td>
</tr>
<tr>
<td></td>
<td>Name of fruits</td>
</tr>
<tr>
<td></td>
<td>Name of vegetables</td>
</tr>
<tr>
<td></td>
<td>Name of animals</td>
</tr>
<tr>
<td>10.00-10.45am</td>
<td>Prayers in Arabic</td>
</tr>
<tr>
<td>10.45-11.30am</td>
<td>General Knowledge (Oral)</td>
</tr>
<tr>
<td></td>
<td>1. Who are you</td>
</tr>
<tr>
<td></td>
<td>A: We are Muslims</td>
</tr>
<tr>
<td></td>
<td>2. What is your <em>masab</em> (religion)</td>
</tr>
<tr>
<td></td>
<td>A: Islam</td>
</tr>
<tr>
<td></td>
<td>3. Who rises the sun and moon</td>
</tr>
<tr>
<td></td>
<td>A: Allah</td>
</tr>
<tr>
<td>9.45-10.30am</td>
<td>Daily blackboard routine, at least twice</td>
</tr>
<tr>
<td></td>
<td>1. Alphabet</td>
</tr>
<tr>
<td></td>
<td>2. Sounds</td>
</tr>
<tr>
<td></td>
<td>3. Small letters</td>
</tr>
<tr>
<td></td>
<td>4. Capital letters</td>
</tr>
<tr>
<td></td>
<td>5. Break</td>
</tr>
<tr>
<td>11.00-12.00</td>
<td>Writing</td>
</tr>
</tbody>
</table>
12.00-1.00pm | Lunch (Depending on when lunch is ready)
1.00-2.00pm | Rhymes

Appendix 5: Nussbaum’s list of capabilities

1. Life: Being able to live to the end of a human life of normal length, not dying prematurely, or before one’s life is so reduced as to be not worth living.

2. Bodily Health: being able to have good health, including reproductive health, to be adequately nourished, to have adequate shelter.

3. Bodily Integrity: being able to move freely from place to place; to be secure against violent assault, including sexual assault, domestic violence, having opportunities for sexual satisfaction and for choice in matters of reproduction.

4. Senses, Imagination, and thought: Being able to use the senses, to imagine, think and reason- and to do these things in a truly human way, a way informed and cultivated by an adequate education, including, but by no means limited to, literacy and basic mathematical and scientific training. Being able to use imagination and thought in connection with experiencing and producing works and events of one’s own choice, religious, literacy, musical and so forth. Being able to use one’s mind in many protected by guarantees of freedom of expression with respect to both political and artistic speech, and freedom of religious exercise. Being able to have pleasurable experiences and to avoid non-beneficial pain.

5. Emotions: Being able to have attachments to things and people outside ourselves; to love those who love and care for us, to grieve at their absence;
in general, to love, to grieve, to experience longing, gratitude, and justified anger. Not having one’s emotional development blighted by fear and anxiety.

6. Practical Reason: being able to form a conception of the good and to engage in critical reflection about the planning of one’s life.

7. Affiliation:
   • Being able to live with and towards others, to recognize and show concern for other human beings, to engage in various forms of social interaction; to be able to imagine the situation of another.
   • Having the social bases of self-respect and non-humiliation; being able to be treated as a dignifies being whose worth is equal to that of others. This entails provisions of non-discrimination based on race, sex, sexual orientation, ethnicity, caste, religion, and national origin.

8. Other Species: Being able to live with concern for and in relation to animals, plants, and the world of nature.

9. Play: Being able to laugh, to play and to enjoy recreational activities.

10. Control over one’s environment:
    • Political: Being able to participate effectively in political choices that govern one’s life; having the right of political participation, protection of free speech and association.
    • Material: Being able to hold property, and having property rights on an equal basis with others; having the right to seek employment on an equal basis with others; having the freedom from unwarranted search and seizure. In work, being able to work as a human being, exercising practical reason and entering into meaningful relationships of mutual recognition with other workers.