STATEMENT SHOWING THE PERFORMANCE REPORT IN % OF SCHOOL HEALTH PROGRAMME FROM JULY 2000 TO JANUARY 2001 & REVIEWED IN FEBRUARY 2001.

Sl. No.	Name of the District	Med. Exam. of Students	D & T	T. T.		Teacher' Training	Remarks "Marks / Grade"	
				1st dose	2nd dose		Marks	Grade
01	Bangalore(U)	95.83	91.92	95.50	100.78	11.13	84	A
02	Bangalore(R)	82.13	81.26	76.88	59.91	46.97	80	B
03	Kolar	97.74	99.02	63.75	106.26	10.72	80	B
04	Shimoga	93.60	64.83	97.56	150.50	60.07	92	A
05	Chitradurga	95.10	71.12	94.40	147.00	03.35	80	B
06	Davanagere	94.00	44.91	63.52	30.23	01.56	70	B
07	Tumkur	78.21	85.31	85.85	91.33	85.02	96	A
BANGALORE DIVISION		89.82	80.85	80.30	87.80	31.41	88	A
08	Mysore	90.05	85.72	101.18	67.00	00.93	80	B
09	Chamarajnagar	75.26	85.58	73.68	107.15	62.83	88	A
10	Mangalore(DK)	93.74	104.74	80.55	68.55	84.35	96	A
11	Udupi	86.77	64.54	80.23	69.26	43.98	84	A
12	Mandya	93.80	78.64	93.21	88.06	00.00	76	B
13	Kodagu	429.64	120.58	384.28	223.69	97.28	100	A
14	Hassan	128.40	83.33	91.30	136.47	28.40	88	A
15	Chikkamagalur	88.53	68.47	82.38	112.42	64.27	92	A
MYSORE DIVISION		110.96	84.90	101.80	91.95	38.01	88	A
16	Belgaum	98.98	73.62	81.20	102.97	15.05	80	B
17	Karawar(UK)	61.48	41.20	65.00	99.54	33.84	82	A
18	Dharwar	86.60	66.08	74.59	126.87	35.65	80	B
19	Gadag	98.60	86.43	80.13	93.14	14.42	84	A
20	Haveri	125.55	73.65	91.62	263.55	67.70	92	A
21	Bijapur	89.00	61.10	60.09	113.62	03.95	76	B
22	Bagalakote	132.46	61.45	82.71	206.66	38.00	84	A
BELGAUM DIVISION		98.94	66.25	76.42	128.80	26.52	80	B
23	Gulburga	116.82	76.20	98.22	240.98	05.71	80	B
24	Bidar	40.72	65.15	84.62	200.67	00.00	78	B
25	Bellary	78.93	77.92	93.70	134.84	216.58	92	A
26	Raichur	84.44	62.55	63.28	145.31	64.59	88	A
27	Koppal	89.55	73.80	74.70	159.78	24.27	80	B
GULBURGA DIVISION		82.13	71.95	86.32	185.10	37.34	84	A
GRAND TOTAL		95.23	74.76	84.72	112.37	32.57	84	A

- Note : 'A' - Good , 'B' - Poor , 'C' - Very poor, 'D' - Extremely poor, 'E' - Bad performance,
- Note : 'A' - Marks- 81-100 , 'B' - Marks- 61-80 , 'C' - Marks- 41-60, 'D' - Marks- 21-40, 'E' - Marks- 10-20 & less

(Dr S.B.Kurtakoti)
Addl.Director(HET)

ಅನುಬಂಧ – 1

ರಾಜ್ಯದ ಜಿಲ್ಲೆಗಳಿಗೆ ಹಂಚಿಕೆ ಮಾಡಲಾದ ಪ್ರಷ್ಠಿ ಪೆಟ್ರಿಗೆಗಳ ಸಂಖ್ಯೆ

ಕ್ರ.ಸಂ.	ಜಿಲ್ಲೆಗಳ ಹೆಸರು		ಪ್ರಷ್ಠಿ ಪೆಟ್ರಿಗೆಗಳಸಂಖ್ಯೆ
01.	ಬೆಂಗಳೂರು ನಗರ	—	
02.	ಬೆಂಗಳೂರು ಗ್ರಾಮಾಂತರ	—	790
03.	ಕೋಲಾರ	—	1040
04.	ಶಿವಮೊಗ್ಗ	—	590
05.	ಚಿತ್ರದುರ್ಗ	—	505
06.	ದಾವಣಗೆರೆ	—	480
07.	ತುಮಕೂರು	—	1025
08.	ಮೈಸೂರು	—	615
09.	ಹಾಮರಾಜನಗರ	—	335
10.	ಮಂಗಳೂರು (ದ.ಕ.)	—	525
11.	ಉಡುಪಿ	—	165
12.	ಮಂಡ್ಯ	—	590
13.	ಕೊಡಗು	—	240
14.	ಹಾಸನ	—	755.
15.	ಚಿಕ್ಕಮಗಳೂರು	—	450
16.	ಬೆಳಗಾಂ	—	735
17.	ಕಾರವಾರ (ಉ.ಕ.)	—	615
18.	ಧಾರವಾಡ	—	370
19.	ಗದಗ	—	300
20.	ಹಾವೇರಿ	—	450
21.	ಬಿಜಾಪುರ	—	450
22.	ಬಾಗಲಕೋಟೆ	—	480
23.	ಗುಲಬರ್ಗಾ	—	700
24.	ಬೀದರ	—	450
25.	ಬಳ್ಳಾರಿ	—	420
26.	ರಾಯಚೂರು	—	450
27.	ಕೊಪ್ಪಳ	—	425
		ಒಟ್ಟು :	14000

ನಿರ್ದೇಶಕರು (ಆಹಾರ),
ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ
ಸೇವೆಗಳು, ಬೆಂಗಳೂರು.

16/6/2006

GOVERNMENT OF KARNATAKA

No:HET/SHP/ 30 /2000-2001

Directorate of Health & F.W.Services,
Bangalore-9, Dated: 02-03-2001.

TO:

The District Health & F.W.Officer,
.....

District R.C.H. Officers/D.N.O. may please be instructed to contact the Deputy Director of Public Instruction of their District to collect the following information as per the format given below.

1. No.of Schools in Urban & Rural areas
2. No.of Students in Urban & Rural areas

These collected information should be sent to this Directorate by 3rd week of March 2001.

Statement showing the Schools and School Children in Urban & Rural areas of the District.....for the year 2000-2001.

Sl. No.	Name of the Taluk	No. of Schools from 1st Std. to 7th Std.			No. of School Children from 1st Std. to 7th Std.														Remarks
		Urban	Rural	Total	Urban							Rural							Total
					1	2	3	4	5	6	7	1	2	3	4	5	6	7	
	District Total:																		

Note:- 1)Urban area means District Headquarter & Taluk Headquarter
2)Rural area means other than above.
3)Students from 1st Std. to 7th Std.
4)Schools : 1st Std. to 7th Std.

Additional Director(HET)
Directorate of Health & F.W.Services,
Bangalore-9.

1. Copy with best compliment to the Deputy Director Public Instruction,
.....District.
2. Office copy.

ANNEXURE- III

Government of Karnataka

Directorate of health and F. W. Services, Bangalore-9

The monthly progress report under the School health Programme during the month of ----------

Sl.No.	Name of the District / Taluk / PHC /SC	Total of No. of primary · higher primary schools	No. of students enrolled during the period of 2000-2001				No. of students' health records opened for 1st Std. Students		Monthly target fixed for visits to school by Medical officer		Monthly target fixed for examination of students	
1	2	3	4				5		6		7	
			1st Std.	4th Std.	7th Std.	Total	During the month	Cumulative	During the month	Achieved	During the month	Achieved

No. of students medically examined					No. of students found medically defectives						No. of students treated / referred for the medical defectives						
8					9						10						
1st std.	4th Std.	7th Std.	Total	%	Dental	Eye	Ear	Skin	Nutritional deficiency	Other	Total	Dental	Eye	Ear	Skin	Nutritional deficiency	Others	Referred

No. of 1st Std. students immunized with the booster doze of D & T		No. of 7th & 10th Std. Students immunized with booster doze of TT				No. of teachers trained		No of schools supplied with medicine kits	No. of schools provided with mid-day meals	No. of schools having safe drinking water facilities
11		12				13		14	15	16
During the month	Cumulative total	7th Std. Students (1st booster doze)		10th Std. Students (2nd booster doze)		During the month	Cumulative total			
		During the month	Cumulative total	During the month	Cumulative total					

Health education activities				Environmental sanitation in the school & school Premises				
17				18				
No. of health education talks given in the school	No. of health education materials distributed to the schools	No. of PTA meetings conducted by the health personnel	No. of mini exhibition / films shows arranged in the schools	Urinals & latrines in the schools and their maintenance Please mentioned in number.			Maintenance of School premises. Please mentioned in number	
				Having	Maintained cleaned	Not maintained cleaned	Maintained cleaned	Not maintained cleaned

DIRECTORATE OF HEALTH AND F. W. SERVICES, BANGALORE-9

REVISED FORMAT

The Progress Report of the School Health Programme for the month of ----------

Note: * Medical Officers should examine, ** Health Assistant should examine, *** % to the yearly target, **** Target should be fixed depending on the budget allotted by ZP of respective Districts.

Sl.No.	Name of the District / Taluk / PHC /SC	Total of No. of primary / higher primary schools	No. of students enrolled during the period of 2000-2001 (This is the annual target to be covered for the year under report) 4			Monthly target fixed for the Medical examination of students. 5		No. of students examined medically 6		
								During the month		
1	2	3	1st., 4th. & 7th. Std. Students *	2nd, 3rd. 5th, & 6h Std. students **	Total	1st., 4th. & 7th. Std. Students *	2nd. 3rd, & 5th, & 6th Std. students **	1st., 4th. & 7th. Std. Students *	2nd. 3rd. 5th, & 6th Std. students **	Total

No. of students medically examined 6				No. of students found medically defectives/ having the medical problems 7								
Cumulative total starting from the month to the month under the report		Total	% ***	Dental Carries (a)	Worm Infestation (b)	URI	Anaemia (c)	Vitamin- A deficiency (d)	Scabies (e)	Defective Vision (f)	Otitis media (g)	Defective Hearing (h)
1st., 4th. & 7th. Std. Students *	2nd, 3rd, 5th, & 6th Std. students **											

No. of students found medically defectives/ having the medical problems 7					No of students treated for minor ailments 8	No. of students referred to Taluk or referral Hospitals 9	Training conducted for the school teachers @ rate of at least one or two teachers in each school 10		
Leprosy (i)	TB (j)	Rheumatic heart Diseases (h)	Goitre (k)	Others (l)			Annual Target ****	During month	Cumulative achievement

Health education activities 11								Environmental sanitation in the school & school Premises 12					Drinking water facilities 13
No. of health education talks given in the school		No. of health education materials distributed to the schools		No. of mini exhibition / films shows arranged in the schools		No. of PTA meetings conducted by the health personnel		Maintenance of School premises in & around the school building Mention yes or No	Urinals & latrines in the schools and their maintenance Please mention the number.				Available / Not -available / Available but not sufficient / Not suitable for drinking
									Having		Maintained cleanliness or not		
DM	CT	DM	CT	DM	CT	DM	CT		M	F	M	F	

CH 2-4

B-4.119
Info/gd/27.9.83

VITAL INFORMATION SERVICE
C-14 COMMUNITY CENTER, S D A, NEW DELHI - 110 016

NEWS PAPER CLIPPINGS

NAME OF PAPER		DATE	SUBJECT HEADINGS
Indian Express	...	18 10 83.	School Health
Times of India	...		
Economic Times	...		
Hindu	...		
The Statesman	...		
Decan Herald	...		
Patriot	...		

School health scheme in Gurgaon

BY OUR SPECIAL CORRESPONDENT

Oct. 18

GURGAON, October 17.

The recently-revitalised school health scheme of Haryana has started yielding results even in such a backward pocket as Mewat where nearly 90 per cent of the school-going children and their parents are not only undernourished but suffer from one or the other major ailment.

An enthusiastic school health officer of the Gurgaon district, Dr. (Mrs.) Pushpinder Kaur and her staff, have, however, made a break through on this vital front. Haryana's health minister Parsani Devi at whose instance the school health programme has been incorporated in the country's 20-point programme wants all the school-going children of the state to be fully medically checked and appropriate medical aid given by November 14, 1983. Dr. Kaur today claimed to have achieved nearly 80 per cent of her target and is confident to cover 100 per cent children by the targeted date.

What, however, disturbs her most is that she will not be able to cure all the sick children, by the next Children's Day because "according to her" quite a sizeable of them suffer from serious ailments and as such may not fully cured even by the school referral clinic that she has got set up in the general civil hospital, Gurgaon. Similar clinics have been set up at the Primary Health Centre (PHC) level where block medical officers have been advised to take care of the less serious cases.

She is satisfied with the training of school teachers. Dr. Kaur's target is to train, at least, one teacher in each of the district's primary, middle, high and higher secondary schools by the ensuing Children's Day. The medical kit of each school has already been updated. Simultaneously with medical check up Dr. Kaur organises immunisation and family welfare camps.

Indian express Nov 27 '81

School health service a vital goal

Express News Service

NEW DELHI, Nov 23.

A school health service system and a programme of compulsory health and nutrition insurance of mothers and children built into the rural development programmes as an integral component. Without these two things Health For All By 2000 A.D." will remain only a proclaimed goal for India. This seems to be the considered opinion of Mr C. Gopalan, one of India's top nutrition experts.

In an article in the bulletin of Nutrition Foundation of India, he says the health infrastructure envisaged in the primary health care system for Health For All By 2000, cannot do full justice at the rural level even if the full complement of the staff proposed is in position. The health care system must be buttressed by other supportive measures like these two.

He suggests:

— A school health authority which will ensure healthy environment in schools and hostels, and oversee arrangements for medical inspection and treatment of diseased children.

— Five per cent of the current budgetary allocation for primary education should be specifically earmarked for a comprehensive school health service. Similarly, five per cent of the allocation for rural employment and development hould be set apart for a programme for compulsory health and nutrition cover for mothers and children as an integral component of the rural development programmes.

The comprehensive school health service envisaged by Mr Gopalan will have these mutually reinforcing elements:

— Provision of a healthy environment in schools and environmental sanitation.

— Provision of safe water supply.

— Periodic health check-up of children, preferably in the presence of their parents.

— Appropriate follow-up action; treatment and remedial measure to correct the defects revealed by the check-up and periodic monitoring of the effects of such treatment.

— Correction of malnutrition in children through well-designed supplementary feeding of nutritions snacks.

— Health and nutrition education and appropriate training of teachers for this.

— Contact with the community — the parents and siblings of the children — so that the school can become an important medium for improving community health and for involving the community in development programmes related to health and nutrition.

Mr Gopalan says school health programmes of various kinds have been in operation in different parts of India from time to time in the last 50 years. But no comprehensive programme of this kind has ever been attempted — it was mostly routine medical check-up. As a result, the impression has grown that the results of school health programmes are not commensurate with the efforts and resources spent on them. If arrangements for follow-up and prompt treatment of defects and diseases detected in the medical check-up are not institutionalised, the whole programme becomes meaningless. And that is what has happened in India.

During the last two decades, the emphasis on school health services has somewhat receded. The recognition that the pre-school age group (0-4 years) is the most crucial and the most vulnerable from the point of nutrition and development has led to the relative neglect of children of school age. This is unfortunate and unjustified. Many school children carry the scars of malnutrition and disease of their earlier years. Many of them suffer from continuing malnutrition and disease. About 20 per cent of schoolchildren have eye defects due to vitamin A deficiency. About two per cent of schoolchildren suffer from ear infections of various kinds.

Mr Gopalan points out that the great majority of even malnourished children of the school age will live to grow into adulthood. And that they will eventually become the country's future adult citizens with poor physical stamina and varying degrees of functional incompetence.

He says a comprehensive school health programme can not only help eliminate current ill health but also reverse and remedy to some extent some of the late effects of malnutrition of earlier years. "The fact that we could not 'catch' these children while they were still very young, is no justification for writing them off altogether."

CH 2-3

MONDAY, MARCH 5, 1984.

Upgrading school health scheme

A SCHOOL HEALTH Committee was set up in 1960 under Mrs. Renuka Ray to suggest the guidelines for initiating a school health programme. There has been no follow up on its recommendations down the last two decades and more. The Prime Minister, Mrs. Gandhi, asked for a compulsory medical check of students at school and college at the inauguration of the National Heart Institute in New Delhi in August 1981. This did not also provoke the expected response. Of course, in the wake of the declaration of health for all by 2000 A.D., the Centre initiated some steps for the fulfilment of this goal. The latest result of this exercise is the new Centrally-sponsored, national school health services scheme which is to be launched early next year (1984-85). The need for such a programme is underlined by the increasing impact of malnutrition and ill health among school children. Because of the greater urgency for preventive and curative measures for tackling the health problem among pre-school children who are, healthwise, at the most vulnerable stage of development, greater attention has been paid through the various integrated child development services to correcting nutritional and physical deficiencies of the under-4 age group. The only medical units available for this purpose are the primary health centre and the sub-centres under it. With their coverage at less than optimal levels, even this basic task has not been attended to with the necessary vigour and efficiency. The nutritional and health status of the pre-school children has not improved significantly and they are still exposed to the risks of communicable diseases.

As a consequence of all this, undernourished and malnourished children spill over into the schools in large numbers from year to year. According to an expert computation, 15-20 per cent of school children show clinical ocular signs of Vitamin A deficiency and two per cent suffer from ear infections of various kinds. Since, by the time they come to school, nutritional deficiencies have done some irreparable damage, a good number of children grow into adulthood with poor stamina and functional insufficiency such as susceptibility to infections, blindness of various degrees and enfeebled intellectual powers. The problem with medical checks at school is that there is no follow up. No precise record is maintained of the defects noticed and there is no monitoring of whether the correctives, as suggested by the medical officer, have been applied. The proposed health service scheme, to be effective, should ensure that the medical check as well as the monitoring warranted by it are upgraded so that they will cease to be the spasmodic exercises (conducted in a casual manner) that they are today. Teachers and parents have an important role to play here. Teachers should be encouraged even with the help of incentives to report on the poor health of their pupils and to record how the medical advice is followed up at home. It is nobody's case that the school staff by themselves can achieve a miracle here. Results depend on the governments at all levels, their health cadres and the voluntary social welfare workers jointly mounting an integrated package of measures. A beginning in this direction can well be through assessing to what extent the free school lunch scheme can be built up as a nutritional safeguard against ill-health.

SUNDAY

The Open Classroom

by Janaki Nair

WHEN seven year old Balavendra, from a small village about 20 kms. north of Bangalore, proudly took home a painting he had done at school, his mother used it to light the fire. It was an unconscious act on the part of a parent to whom schools connoted nothing more than pages of grubby notes - even that was of dubious value in a village home.

Which is why it was no mundane event when four children from that village appeared for the seventh standard examination in March this year, and secured first classes. For eight years, they had been part of an educational experiment, the Sita School, which had battled with parental indifference and scepticism throughout its short existence. After all, what kind of school was this which encouraged children to talk in class, developed painting, drama and other artistic skills, never ever beat the children and, worst of all, never conducted any examinations? The obvious pleasure that the children had derived from attending such a school hardly made up,, in the eyes of the parents, for its other deficiencies. The examination results were crucial in establishing credibility and inspiring respect in the place of scepticism.

TO go far beyond the quarantine of formal education, while gaining the confidence of the community seems a daunting task. This is precisely what three experimental schools in Bangalore have made possible...

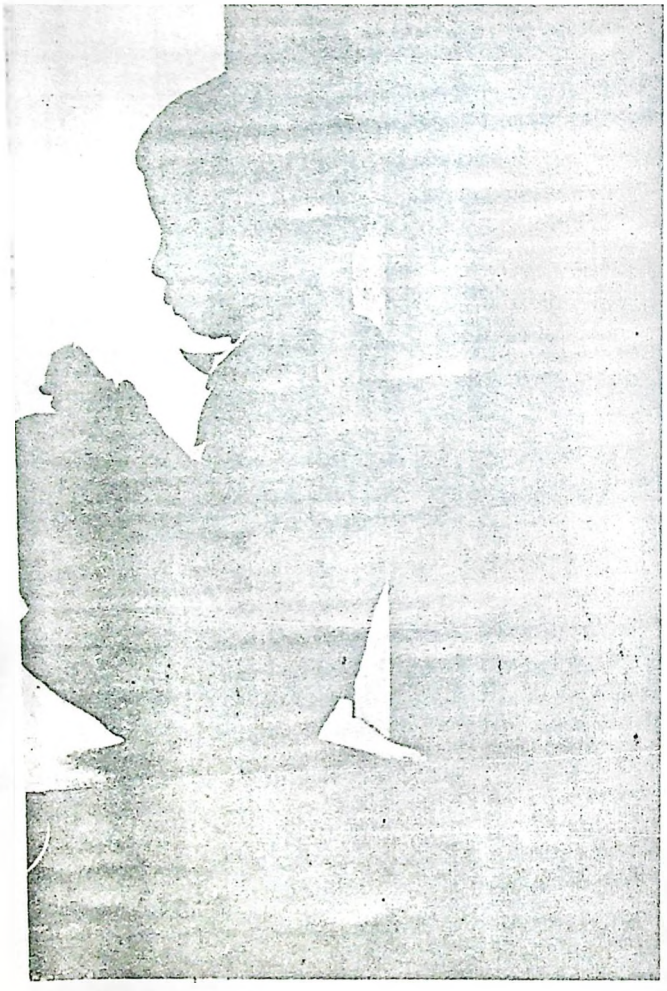
For Jane, who had started the Sita School in 1975 with "five rather anxious and subdued children", the examination success was important for another reason. It was an affirmation of the belief that the "early stress on examinations, grades and a text book mentality is not necessary". Obviously, the choice of rather unorthodox methods of teaching which emphasise creativity at all levels, does not preclude the possibility of the

ment to school. Now, 24 children from three villages attend the school, and have volunteered for

this was happening, Venkatrag-
havan held a tight leash at the

BANGALORE, November 11, 1984

HERALD



Pic by P.M. Muthusubramanian

involved in something". In the Sita School, art is not just a subject, but a process of discovery about nearly everything. A group of six children produce a map of the village, replete with detail, and remarkably accurate in terms of location - a work of art. A large embroidered curtain which covers a bookshelf was produced by a group of senior children who read the Merchant of Venice from their seventh standard textbooks — it shows an Indianised Portia between Shylock and Antonio. The school stores and uses a large number of books that the children have written and illustrated themselves - on their village, festivals, events, history, etc. At Vikasana, a large mural is a joyous and detailed memory of a trip to Mysore that the children went on.

A poetry class in progress is indicative of the non-judgemental nature of the relationship between teachers and students, and between students themselves. When Ratna reads out some limericks she has written, the other children listen with enjoyment. Ravi does not feel ashamed of reading out a poem from a book since he has written none of his own, and all the children encourage Chandri to read out her poetry which she insists is not good enough to be heard by everyone.

MORE important, perhaps, than specific skills and projects are the values that such a system engenders, obviously at variance with those of the wider community. The educational process at home is largely unconscious, though effective and rigid. Roles are ascribed within the structured hierarchical authority of homes, and although children are rarely excluded from any activity in the community, they are usually required to accept these roles uncritically. Schools such as these nurture a kind of individualism, of achievement, which permits questioning of these roles. Bhakta and Shakti refused, in early school days, to participate in cleaning and sweeping the school, since they were unused to such tasks at home. Gradually, they began to accept new responsibilities, although at first, it was clear that these new attitudes were for school alone.

> FREE activities need their own structures - space, equipment and a definite role for the adult. These structures have evolved from an apparent imformality to a new formality which incorporates freedom, not licence.

In all these schools today, many prejudices about male-female roles and abilities have been shed, yielding place to a new rationale. An atmosphere has been created within which the children have gradually felt it possible to raise and discuss issues which had always been threatening: caste and colour, poverty and hard work and injustice, violence in the family. As Margarette says; "The idea is not to make them feel helpless or overwhelmed by the size of the problem, but to acknowledge the extent to which they can change their own lives." "While filling the forms for the public examination, several of the children were perplexed by the column marked 'caste.' Do they set different papers for different castes, they asked.

"I explained that if they filled in their caste (they are all Scheduled Caste) it would be a record for possible preference either in marks or later in jobs. The children decided to fill in this column with just 'Hindu.'"

The tension between different sets of attitudes for school and for home is difficult to come to terms with. Chinnappa, for example, like many others, was ashamed of his father's drunkenness. The opportunity to alter this attitude arose quite accidentally when a story about a drunken man had to be illustrated: everyone decided Chinnappa could do it best! Much discussion followed, and, says Jane, "the trapdoor was open. They all wrote stories on violence in their own lives, openly and without shame." On one hand, a child asks "How can you expect me to be honest when my own parents tell lies?" while there is parental anguish in "My daughter talks back to me at home these days."

If the parents found the absence of beating to maintain discipline perplexing, so too did the children. But these schools have their own norms of behaviour and of punishment. Six year old Kamala always forgot to do her homework, sought refuge behind tears, and then stayed away from school, forcing her mother to take the responsibility of taking her back. This cycle was repeated till the teacher dealt firmly with the child, making her realise the importance of some kind of commitment, while giving her a token punishment.

NO matter how attractive the school, most children cannot expect to spend all their time there when their labour is more valuable, elsewhere: in the fields, looking after siblings, or earning some money. School curricula therefore have to be fairly elastic to accommodate this vital need to survive at all. Holidays are adjusted to suit the seasons in the village, children allowed to take time off for work, and in most cases, they are eager to come back and catch up on their school work.

In the slum centre, this is a

(Continued on Page 4)

children adjusting to a more formal and rigid system in the years of the exam. It was this approach, too, which stopped the children from dropping out at the alarming rate they did in the beginning. Today, the Sita School has forty children between the ages of 4 - 15, three full time teachers, and fairly regular, though not compulsory, attendance.

It is only half true that most Indian villages lack even the primary facilities for education: the other half of the truth is that objective conditions very often do not permit this luxury, and even when they do, what schools have to offer hardly motivates either parent or child. To go far beyond the quarantine of formal education, while yet gaining the confidence of the community seems a daunting task. But this is precisely what three experimental schools in Bangalore have made possible.

VIKASANA, a small school started and run by M.C. Malathi since 1977 on a farm off the Kanakapura Road, faced agonising problems initially. The children had a hard time accepting regular hours, concentration on activity, and often had work to do at home - so simply dropped out. "The parents had no academic interest", she says, "they only wanted to know if food and clothes would be given". It is an attitude they continue to hold, overcome only by the children's own commitment to the classes on Saturday as well. Four children of one family, whose parents moved to Bangalore from the village, regularly commute from the city to Vikasana, obviously preferring, despite the inconvenience, the "alternative" education this school provides.

Margarette KT, who in 1978 began a Children's Centre in a large slum in South Bangalore with 15 children, also faced high dropout rates. "The children didn't want a normal type of school, but if it was going to be different, a set-up where they could play and learn only what they wanted, and not be shut up in a classroom, they were willing to come to school". Now this has burgeoned into two centres which cater to over a hundred children of ages 4-15 drawn from six slums in the area.

In training and experience, these teachers have little in common. Margarette gave up more than fifteen years of teaching in prestigious formal schools to set up the centre. Jane had no formal training, though she is widely read on education, while Malathi trained for two rigourous years with that pioneer of alternative education in South India, David Horsburgh, at his own experimental school in Kolar district. What they do share is a basic commitment to transforming, in whatever limited way, the process of learning into a fuller, more meaningful and enjoyable experience.

Children's activities continually spill out of the airy classrooms, uncluttered by too much furniture, onto the courtyard and beneath the trees. The light and mobile desks are easily moved into small groups: here, one group works on mathematics cards and worksheets, there, another constructs a story from a vocabulary written on cigarette cards, and, under the gooseberry tree, a third group reads about life in the Stone Age. Walls covered with bamboo matting prominently display the creative work of students.

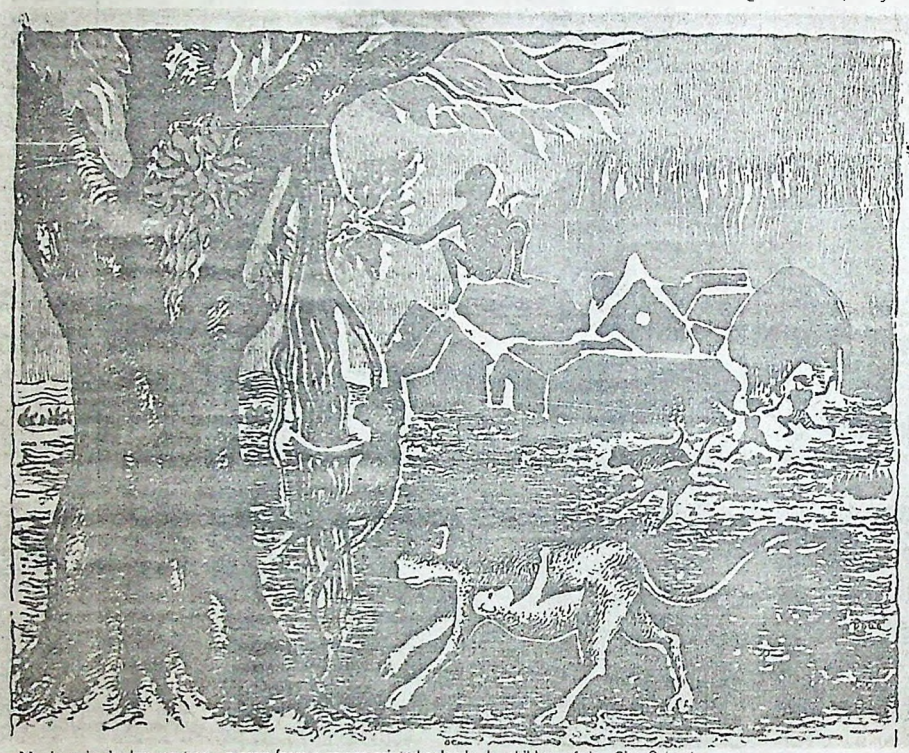
Play was the starting point for each of these schools: in the first six months of their existence, no formal teaching was done, only games, with beads and jigsaws, blocks and domino cards, leaves and stones. At first, the freedom was incomprehensible for some: Jane records that, contrary to expectation, one six year — old "seemed paralysed by the strangeness of it all, and for more than a week participated only as a sullen silent observer." If sheer passivity was the response to this new freedom in the Sita School, play provided a totally new focus for violence amongst the children of the slum. "For four to five months, the children took out their violence on the toys they had been given." Though it was therapeutic for children upto a point, this unstructured play had to be given direction, and so discussion began: Why are we so poor despite our parents working so hard? Can we do something different with education? Most of these students have either never been to school or have dropped out of structured educational institutions.

IN the rejection of the meaningless formality of structured schooling, these schools have not fallen prey to anarchic spontaneity. Free activities need their own structures - space, equipment, and a definite role for the adult. These structures have proceeded from an apparent informality to a new formality which incorporates responsibility in freedom, not licence.

An average day in any of these schools begins with a period of quiet reflection, followed by joint singing, moving on to more and more unstructured activities as the day goes on, with craft and art occupying a large part of the afternoons. Since the children are divided into groups according to abilities rather than age, there is scope for greater homogeneity. Though there is no unnatural periodisation of the day, work rhythms are established and adhered to. The emphasis is on self study and on helping each other, rather than competition. But, as Malathi says, (and the others agree) "the children as well as parents want examinations. There were a lot of dropouts as a result of not having them!" In the slum Children's Centre, the students have realised that some kind of testing of their understanding is necessary to realise their abilities. There is, consequently, none of the usual tension and nervousness when "examinations" are held.

Textbooks are used, thought they are not accorded a primacy, and are deepened and broadened through other books and related activities. "In this kind of learning, children can be made to know that there can be more than one answer to a question, unlike textbooks which expect a particular kind of answer". The environment of the school is used resource, especially in the early stages, but there are obvious limitations: the sense of wonder about other times and places cannot be directly experienced for children who may never have seen snow, the sea, a city, or a train, never known tribal, peasant or city life.

Along with the hard core of academic skills (literacy, numeracy, conceptualisation,) art and craft activity occupy a centrality of attention and time. Carpentry, needlecraft and pottery, as well as purely creative art, drama, and claywork form part of this more balanced 'diet'. "Children only learn when the whole body responds", says Jane, "not just when they are involved intellectually, but when they are totally



Monkeys in the banyan tree - a page from a screen printed calendar by children of the Sita School.

The Open Classroom

Continued from Page 1

more difficult problem to get around, and a certain drop-out rate is inevitable. But working with the children in their most impressionable years does provide them with a set of values which is appreciated wherever they go.

None of these teachers, however, claim to be the New Alchemists of Education, whose formulae can be replicated with ease elsewhere. They are not taking on reform of "The System" in any radical sense. In fact, these are, in many ways, expensive answers to bewildering questions. Isolated creativity can in itself become a definite privilege. A teacher-pupil ratio of 1:15 at the very maximum is something of a luxury, and the freedom to develop a syllabus on one's own, choosing appropriate methods etc, necessarily demands the abs-

The emphasis is on self study

ence of strangulating government control. It has only been the use of non-governmental funds which has made these schools possible. This immediately limits the feasibility of extending such work.

Even where such investment is possible, the method relies heavily on personal skills of a very high order. As such, the experiments cannot but be peripheral to the mainstream educational structure. The Sita School, for instance, has decided that taking students upto the SSLC level may be beyond its resources (in terms of facilities such as libraries and laboratories), without compromising on standards of quality. The newer schools, meanwhile, have not yet explored options of growth. But, by and large, and perhaps a little dange-

ducing interaction to the minimum level of seeking legitimisation of their "education" through the accepted grades offered in State examinations.

Such alternatives in education which lie entirely outside the State system exclude another crucial level of intervention — in reforming syllabi, textbooks, and examinations and most important teachers in Government schools.

THIS is not as radical or impossible as it sounds. In 1972, 16 middle schools in Hoshangabad district in Madhya Pradesh came within the ambit of an experimental science teaching programme — two voluntary agencies in the area, Friends Rural Centre and Kishore Bharati made use of the surprisingly free hand that the State Government gave them in evolving, over a period of four years, a science "package." It included a simple environment-based kit for discovering basic principles of new textbooks which provoked observation and experiment and, most important, a teacher training programme. (Of course, there was some resistance from teachers, for whom the discovery method meant more work and a total re-orientation of their approach to teaching).

A network of resource people were involved ranging from local social teachers to professors and science graduates from major cities. New chapters were written on cards, tested, modified, dropped, added to, before they finally assumed the shape of a text book.

A major bottleneck was the public board examination after middle school. How would

cope with the M.P. level exam? It was a significant acknowledgement of Kishore Bharati's work that the programme personnel were allowed to set the papers and evaluate and grade the students covered by their programme. They used the opportunity to introduce a new and fairly radical element — the open book examination.

In 1978 the State Government took over the Hoshangabad Science Teaching Programme and extended it to all middle schools in the districts to cover 40,000 students, in over 250 schools. Since 1982, the job of overseeing the programme has been undertaken by Eklavya, a quasi-Governmental institution set up for the purpose. This will prevent the programme from being "co-opted" into becoming another sterile government programme. Meanwhile, Eklavya's work has begun to burgeon, moving into a proposed reform of middle school social science syllabi text books, and teaching and language teaching.

In its work on social science, Eklavya may be treading more dangerous ground, and raising the more political question of what perspective to adopt. But the social sciences as they are now taught are antiseptic, disconnected narratives, emphasising detail without developing a sense of history or concepts which bear relation to child lives.

Although the combination of circumstances which have made such significant changes possible may be difficult to find in other states, the HSTP opens up broader and more par-reaching for change within the state system.

It will be a long time before the Illichian prophecy of doom for schools becomes true in India, and deschooled societies appear within the realm of the possible. Meanwhile, the emergence of such alternatives, and the obvious tolerance of them by state systems are important indicators that options on the passage to change are not altogether