TAMIL NADU TEACHERS EDUCATION UNIVERSITY

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Course 1: Childhood and Growing Up

Prepared By

Unit VI **:** Marginalized children: issues and concerns

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UNIT VI: MARGINALIZED CHILDREN: ISSUES AND CONCERNS

Objectives:

After completion of the unit, the learner will be able to:

    1.learn the meaning of marginalized children
    2.understand the issues of slum children, street children, abused child
    3.analyse the measures to promote the status of marginalized children

Introduction

Marginality is an experience that affects millions of people throughout the world. People who are marginalized have relatively little control over their lives, and the resources available to them. This results in making them handicapped in delving contribution to society. A vicious circle is set up whereby their lack of positive and supportive relationships means that they are prevented from participating in local life, which in turn leads to further isolation. This has a tremendous impact on development of human beings, as well as on society at large. As the objective of development is to create an enabling environment for people to enjoy a productive, healthy, and creative life, it is important to address the issue of marginalization. Development is always broadly conceived in terms of mass participation. Marginalization deprives a large majority of people across the globe from participating in the development. It is a complex problem, and there are many factors that cause marginalization. This complex and serious problem need to be addressed at the policy level. This project deals with the problems associated with the groups suffering from marginalization and the ways to reduce them.

Meaning

Amarginalized children is a group of children that's confined to the lower or peripheral edge of the society. Such a group is denied involvement in mainstream economic, political, cultural and social activities.

Concept

The process whereby something or someone is pushed to the edge of a group and accorded lesser importance. This is predominantly a social phenomenon by which a minority or sub-group is excluded, and their needs or desires ignored.

In general, the term 'marginalization' describes the overt actions or tendencies of human societies, where people who they perceive to undesirable or without useful function, are excluded, i.e., marginalized. These people, who are marginalized, from a group or community for their protection and integration and are known as 'marginalized groups'. This limits their opportunities and means for survival. Peter Leonard defines marginality as, being outside the mainstream of productive activity and/or social reproductive activity".

Characteristics of marginalized groups:

Usually a minority group has the following characteristics

1) It suffers from discrimination and subordination.

2) They have physical and/or cultural traits that set them apart, and which are disapproved of, by a dominant group.

3) They share a sense of collective identity and common burdens.

4) They have shared social rules about who belongs, and who does not.

5) They have a tendency to marry within the group.

CHILDREN LIVING IN URBAN SLUM:

Issues of children living in urban slum:

1. Children were defined more by their behavior than by their age

2. Aside from poverty or health problems, the top rated harms to children were:
• being out of school
• sexual exploitation and abuse
• drug and alcohol abuse
• early pregnancy.

Drug and alcohol abuse were rated as a much more serious forms of harm to children in one slum than in the other. Also, socio-economic status influenced the relative rankings.

3. Primary causes of children being out of school were:
• inability to pay school fees
• family demands that children work
• parental neglect
• pregnancy
• discrimination against non-biological children within the household
• negative peer influences
• beatings by teachers.

4. Sexual abuse and exploitation of children was reportedly rampant in both slums, and the perpetrators frequently included people in positions of power and authority, such as teachers and elders. Teenage girls were more likely than any other sub-group to rate this as the top harm to children. Women frequently used their daughters to attract male customers, who became drunk and abused the girls. Sexual abuse also occurred frequently at funerals, disco dances, and video halls. Men frequently gave fried potatoes to girls as young as six years of age as a means of enticing them to have sex. Pre-teenage and teenage girls were sexually active; many traded sex for desired objects or benefits.

5. Early pregnancy was widespread; significant numbers of girls reportedly became pregnant in their early teens. Contributing factors were children regularly watching their parents have sex and then imitating them, parental neglect, and alcohol and drug use. Whatever the causes, early pregnancy served as a gateway to sexual exploitation.

6. Alcohol and drug use were pervasive. Adults attributed the use of alcohol and drugs to children's disobedience, bad behavior, and bad peer group influences, while teenagers attributed the problems mostly to the stresses of living in the slums.

7. Children aged 5–12 years frequently had different views from teenagers and adults of the main kinds of harm they face. Younger children did not like getting hit, seeing parents fight, or seeing people who had been burned, stabbed, or killed.

8. For the most part, the pathways of response to these and other problems were through the extended family and community groups, such as religious groups, women's groups, and youth groups.

9. Chiefs, elders, police and others were connectors who linked communities with the formal system. The formal child protection system was used in situations such as the rape of a child by someone from outside the child's family. Such an offence was sometimes reported to the police, who arrested the perpetrator, took the child for medical treatment, and conducted an investigation. Nearly two-thirds of the participants said people were unwilling to report such offences to the authorities.

10. Aside from the family, religion emerged as one of the most important preventive factors. For both Christians and Muslims, religion was seen as fundamental in moral education and teaching children good values. Also, Muslim and Christian organizations helped to keep children in school by raising funds to pay school fees. Youth groups were particularly important preventive factors in regard to the use of drugs.

Concerns for Children Living in Urban Slum

1 The 74th Constitutional Amendment of 1992, which proposes that urban local bodies (ULBs) should have a direct stake in urban poverty alleviation and slum improvement and upgrading, with participation of citizens

2 The Jawaharlal Nehru National Urban Renewal Mission (JNNURM), launched in December 2005, which embodies the principles of the 74th Constitutional Amendment. Jnnurm outlines a vision for improving quality of life in cities and promoting inclusive growth, through substantial central financial

assistance to cities for infrastructure and capacity development for improved governance and slum development through Basic Services to the Urban Poor. These include security of tenure at affordable prices, improved housing, water supply, sanitation, education, health and social security.

DEPRIVED CHILDREN

Deprivation is the reduction or prevention of culturally normal interaction between an individual and the rest of society. This social deprivation is included in a broad network of correlated factors that contribute to social exclusion; these factors include mental illness, poverty, poor education, and low socioeconomic status.

Social deprivation may be correlated with or contribute to social exclusion, which is when a member in a particular society is ostracized by other members of the society. The excluded member is denied access to the resources that allow for healthy social, economic, and political interaction. Pierson has identified five key factors that set social exclusion in motion – poverty, lack of access to jobs, denial of social supports or peer networks, exclusion from services; and negative attitude of the local neighbourhood. It is also associated with abusive caretaking, developmental delay, mental illness and subsequent suicide.

DALIT

The word "dalit" is derived from the Sanskrit (dalita), and means divided, split, broken, scattered, derived from the meaning of the verbal root - to divide.The caste system is a strict hierarchical social system based on underlying notions of purity and pollution. Brahmins are on the top of the hierarchy and Shudras or Dalits constitute the bottom of the hierarchy. The marginalization of Dalits influences all spheres of their life, violating basic human rights such as civil, political, social, economic and cultural rights. A major proportion of the lower castes and Dalits are still dependent on others for their livelihood. They have meager purchasing power and have poor housing conditions as well as have low access to resources and entitlements. Structural discrimination against these groups takes place in the form of physical, psychological, emotional and cultural abuse which receives legitimacy from the social structure and the social system. Physical segregation of their settlements is common in the villages forcing them to live in the most unhygienic and inhabitable conditions. All these factors affect their health status, access to healthcare and quality of life. There are high rates of malnutrition reported among the marginalized groups resulting in mortality, morbidity and anemia. Access to and utilization

of healthcare among the marginalized groups is influenced by their socio-economic status within the society.

Concerns for Dalit Improvement

Steps are taken

1. To adopt special measures in favor of descent based groups and communities in order to ensure their enjoyment of human rights and fundamental freedoms, in particular concerning access to public functions, employment and education.

2. To take effective measures to reduce dropout rates and increase enrolment rates among children of affected communities at all levels of public and private schooling.

3. To eradicate the existing prevalence of caste-based discrimination in schools, including stereotypical and demeaning references in e.g. school books; ensure inclusion of children of affected communities in schools; and disseminate general information about the importance of non-discrimination and respect for affected communities in the entire education system.

4. To remove obstacles, including child labor, which keep children from regular full time education. Governments should also pay particular attention to the need of providing adequate education to illiterate children and adults who have not had any formal education.

5. To improve educational and professional training for Dalit girls and boys so they can move to other professions of their own choice.

6. To raise awareness both among the public and among government officials, teachers, and media practitioners on discrimination based on work and descent. Areas of attention should not only include the print and broadcasting media but also alternative avenues of information dissemination, such as local oral information through theatre, songs, etc. as well as information via the internet.

TRIBE

A tribe is viewed, developmentally or historically, as a social group existing before the development of, or outside, states. A tribe is a group of distinct people, dependent on their land for their livelihood, who are largely self-sufficient, and not integrated into the national society. It is perhaps the term most

readily understood and used by the general public. The world's only organisation dedicated to indigenous rights, has defined tribal people as "those which have followed ways of life for many generations that are largely self-sufficient, and are clearly different from the mainstream and dominant society".

Tribals are still devoid of modern facilities like education, electricity, proper drinking water health care, ample transportation, etc. problems associated with education of tribal women needs immediate attention and early resolution. Tribal women need to face lots of challenges in the society. Skills training, increased growth, productivity and innovation, in particular for the informal sector are linked with poverty re-education. The first and foremost challenge to the tribal is that they are still not much exposed to the outside world and are confined to their community only.

Most of the primitive tribes still live in hills, dense forest with difficult terrain and many a times, it is difficult to reach them because of lack of road and transport facilities. It is a challenge to provide education to tribals and setting up school and institutions in small, scattered and remote tribal habitations. High school drop-out rate among tribals is another reason for their lagging behind in education. The external constraints are related to issues at levels of policy, planning, and implementation while internal constraints are with respect to education system, content, curriculum, pedagogy, and medium of instruction, etc. The third set of problems relates to social, economic, and cultural background of tribals and psychological aspects of first generation learners.

Improvement for tribal children

Measures are to be taken to provide educational facilities on vocational and technical training. According to these measures, concessions, stipends, scholarships, books, stationery and other equipments are provided.

Children Mortality and morbidity among children are caused and compounded by poverty, their sex and caste position in society.

All these have consequences on their nutrition intake, access to healthcare, environment and education. Poverty has a direct impact on the mortality and morbidity among children. In India, a girl child faces discrimination and differential access to nutritious food and gender based violence is evident from the falling sex ratio and the use of technologies to eliminate the girl child.

ABUSED CHILD:

Child abuse or child maltreatment is physical, sexual, or psychological mistreatment or neglect of a child or children, especially by a parent or other caregiver. It may include any act or failure to act by a parent or other caregiver that results in actual or potential harm to a child, and can occur in a child's home, or in the organizations, schools or communities the child interacts with.

Types

The World Health Organization distinguishes four types of child maltreatment:

- physical abuse
- sexual abuse
- emotional abuse
- psychological abuse

Physical abuse

Among professionals and the general public, people often do not agree on what behaviors constitute physical abuse of a child. Physical abuse often does not occur in isolation, but as part of a constellation of behaviors including authoritarian control, anxiety-provoking behavior, and a lack of parental warmth.

This includes hitting, beating, kicking, shaking, biting, strangling, scalding, burning, poisoning and suffocating.

Sexual abuse

Child Sexual Abuse (CSA) is a form of child abuse in which an adult or older adolescent abuses a child for sexual stimulation. Forms of CSA include asking or pressuring a child to engage in sexual activities (regardless of the outcome), indecent exposure of the genitals to a child, displaying pornography to a child, actual sexual contact with a child, physical contact with the child's genitals, viewing of the child's genitalia without physical contact, or using a child to produce child pornography.

Effects of child sexual abuse on the victim(s) include guilt and self-blame, flashbacks, nightmares, insomnia, fear of things associated with the abuse (including objects, smells, places, doctor's visits, etc.), self-esteem difficulties, sexual dysfunction, chronic pain, addiction, self-injury, suicidal ideation, somatic complaints, depression, post-traumatic stress disorder, anxiety, other mental illnesses including borderline personality disorderand dissociative

identity disorder, propensity to re-victimization in adulthood, bulimia nervosa and physical injury to the child, among other problems.

Psychological abuse

Psychological abuse is defined as: spurning, terrorizing, isolating, exploiting, corrupting, denying emotional responsiveness, or neglect" or "A repeated pattern of caregiver behavior or extreme incident(s) that convey to children that they are worthless, flawed, unloved, unwanted, endangered, or only of value in meeting another's needs"

- Some have defined it as the production of psychological and social defects in the growth of a child as a result of behavior such as loud yelling, coarse and rude attitude, inattention, harsh criticism, and denigration of the child's personality.

CHILDREN GROWING UP IN POVERTY

Poverty refers to a situation when people's basic needs are not fulfilled. When people doesn't have the necessary food to eat or clothes to wear or shelter to stay then it is called poverty. Life becomes very difficult for people with income are below the poverty line (BPL).

The causes, effects and solutions for poverty in India are discussed below:

Causes: The major reasons or causes of poverty are:

- People don't get proper education which leads to poverty. People are poor because they are illiterate, because they cannot afford education. Illiteracy and poverty stays side-by-side. They both are the cause and effect of each other.
- In case where the resources and opportunities are limited and the population is high, there arises a situation of joblessness which ultimately leads to poverty.
- When a large number of people live in poverty, there is limited scope for the development of country's economy.
- Some natural and environmental problems such as lack of rainfall, drought, etc. often lead to poverty. There are many other reasons also like caste system, unemployment, etc.

Effects: The negative effects of poverty are mentioned below:

- Poor people will always have to depend on others to survive.

- Low quality foods may leads to bad nutrition.
- Poor people have less liberty for the choice of profession.
- Poverty may affect the moral and self-esteem of people living in extreme hardship.
- Poverty also results in building stress which ultimately affects the relationship of people.
- The low standard of living prevails among poor people.

Solutions: The solutions for poverty are discussed below:

- Poverty can be checked by increasing job opportunities. It will decrease the rate of unemployment which ultimately results in decrease of poverty in economy.
- Government should take more steps towards charity, trusts and also have some transparency while spending money in those social institutions.
- There is a need for initiatives of paid leave to the workers.
- The education system should be reformed and initiatives should be taken to bring more children to schools.

STREET CHILDREN

Street children are a term for children experiencing <u>homelessness</u> who are living on the streets of a city, town, or village. Homeless youth are often called street kids and street youth;

The causes of street children are:
- Poverty
- Religion
- Poor family planning
- Child trafficking
- Wars
- Illiteracy

The solutions to children street children are:
- Implementation of Child's Right Act;
- Construction of Orphanage Homes;
- Reaching out to the Poor; and
- Amendment of Some Religious Practices

HIV AFFECTED CHILDREN

Human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS) is a spectrum of conditions caused by infection with the human immunodeficiency (HIV). it interferes more with the immune system, increasing the risk of common infections like tuberculosis, as well as other opportunistic infections, and tumors that rarely affect people who have working immune systems. These late symptoms of infection are referred to as AIDS. This stage is often also associated with weightless.

HIV and AIDS profoundly affect children at many levels. A child's family and community can be hard struck by the effects of AIDS as parents get sick, are not able to work or are not there to protect their children. The results of this can disrupt children's lives and put their health and security at risk.

Solution

Economic support and social care are both important for reducing the impacts of HIV on children and families, new infections in adolescent girls, as well as for supporting the uptake of and retention in services. Social protection, care and support works at all levels – from local and community to national - to improve health, maintain continuity in education, prevent marginalization through stigma and discrimination, and reinforce and support families in the face of poverty and illness. Social protection has the potential to play a key role in reducing an individual's chance of becoming infected with HIV, improving treatment access and adherence, and reducing the likelihood that HIV will have a damaging effect on individuals, households and communities.

CHILDREN WORKING IN UNORGANIZED SECTOR

The unorganized labour is overwhelming in terms of its number range and therefore they are omnipresent throughout India.

As the unorganized sector suffers from cycles of excessive seasonality of employment, majorityof the unorganized workers does not have stable durable avenues of employment. Even those who appear to be visibly employed are not gainfully and substantially employed, indicating the existence of disguised unemployment.

The workplace is scattered and fragmented.

There is no formal employer – employee relationship

In rural areas, the unorganized labour force is highly stratified on caste and community considerations. In urban areas while such considerations are much less, it cannot be said that it is altogether absent as the bulk of the unorganized workers in urban areas are basically migrant workers from rural areas.

Workers in the unorganized sector are usually subject to indebtedness and bondage as their meager income cannot meet with their livelihood needs.

The unorganized workers are subject to exploitation significantly by the rest of the society. They receive poor working conditions especially wages much below that in the formal sector, even for closely comparable jobs, i.e., where labour productivity are no different. The work status is of inferior quality of work and inferior terms of employment, both remuneration and employment.

Primitive production technologies and feudal production relations are rampant in the unorganized sector, and they do not permit or encourage the workmen to imbibe and assimilate higher technologies and better production relations. Large scale ignorance and illiteracy and limited exposure to the outside world are also responsible for such poor absorption.

The unorganized workers do not receive sufficient attention from the trade unions.

Inadequate and ineffective labour laws and standards relating to the unorganized sector.

CHILD LABOUR

Child labour is a system of involving children in any economic activity. Children at the age of playing engage themselves into economic activity for their family. Child labour can be seen throughout the country in a wide way.

The causes, effects and solution of Child labour are briefly mentioned below:

Causes: The major causes of child labour in India are:

- Unemployment,
- Poverty,
- Illiteracy, and
- Low standard of living.

If the above problems can be resolved from the Indian society, then the country will have less social issues.

Due to unemployment of the parents, children do not get proper education and are forced to get involved in child labour. Educated people are less likely to engage their child as child labours. In general, educated people want to maintain a certain level of standard and live a respectable life. On the contrary, poor and illiterate people are not even aware of the evil effects of child labour.

Effects: The negative effects or major disadvantages of child labour include:

- Child labour is an inhuman practice. The mental growth of the children engaged in child labour is checked.
- Children get less time and opportunity to go to school. They are deprived from education which makes them illiterate.
- Child labour obstructs individual growth. The standard of living of people remains low.
- Child labour destroys their childhood.
- Children are the future pillars of the economy and involving them into child labour will only make those pillars weak. Ultimately, child labour affects the country's growth.

Solution: The main solution to child labour is:

- Imparting education and knowledge to children.
- If incomes of the parents can be increased then it is possible for the children's to get education.
- Government will have to take more steps towards proper enforcement of labour laws.
- People who are employed and are above the poverty line should take steps towards replacing child workers with adult workers. It will benefit not only the society, but the country at large.

MEASURES TO PROMOTE MARGINALIZED CHILDREN
- ➢Elimination of school fees that reflect obstacles for the poorest children
- ➢Implementation of an enriched and adaptable curriculum
- ➢Developing strategies to support lower-performing students
- ➢Enhancing community dialogue and participation in planning and programdesign, including data collection efforts
- ➢Providing adequate and healthy school infrastructure and guaranteeing child rights and protection

➤Improving teacher quality and teacher motivation

➤Establishing community schools

➤Providing bilingual education

Conclusion

The pertinent question therefore is where do the marginalized groups stand today? Though there has been some improvement in certain spheres and despite some positive changes, the standard of living for the marginalized communities has not improved. Therefore, what Minimum needs are like access to Agricultural Land , providing adequate capital, information, technology and access to markets , Improved Employment in Public and Private Sectors arranged for them.

Questions for Discussion and Reflection

1. Who are marginalized children? Discuss briefly the remedial measures to promote the status of marginalized children in India.
2. Explain the issue related to children in urban and slum areas
3. Exam the measures taken by the Govt. of India for abolishing the child labour.

UNIT VII: UNDERSTANDING ADOLESCENCE

Introduction

Adolescence is a most important period of human life. It is an age of transition from childhood to adulthood. As a result, lot of physical changes takes place in the human body during this period. Physical changes are accompanied by changes in behavior and attitudes. Educators and psychologists have pointed out different ways of describing the stages of development in the life span of an individual, how an individual reacts to events, the mannerism, talents, interests, intelligence, aptitude and other aspects of personality.

Meaning of adolescence

Etymological the term adolescence comes from the Latin word Adolescere' which means to grow or to grow to maturity. It emerges from the later childhood stage and merges into adulthood during which the child develops into a man or woman. Adolescence is the period of transition from childhood to adulthood. It is the most crucial and significant period of an individual's life. It is a period of rapid evolutionary changes in the individual's physical, mental, moral, spiritual, sexual and social outlook.

Definition

Adolescence has been defined and explained differently by educators and psychologists.

1. According to Jean Piaget, adolescence as "the age of great ideas and the beginning of theories as well as the time of simple adaptation of life".
2. According to Stanley Hall, the period of adolescence as "a period of great stress and strain, storm and strife.
3. According to Dorathy Rogers, Adolescence is a "process, rather than a period, a process of achieving the attitudes and beliefs needed for effective participation in the society".

Study of adolescent behavior in their natural settings

Behaviour was defined by Watson as an action, which can be seen and observed in an objective way. This means behaviour is the way in which an individual carries out his activities. Behaviour of an individual is influenced by the internal body environment as well as external environment around him. Adolescent behaviour has been studied from very early times. Plato characterized the adolescents to be

argumentative and easily excitable while Aristotle described them as impulsive, prone to excess and exaggeration and lacking self-restraint.

Adolescents are characterized by

1. **Anxiety**: It is an uneasy mental state concerning impending or anticipated ill. According to Hurlock, anxiety is marked by apprehension, uneasiness and foreboding from which the individual cannot escape; it is accompanied by a feeling of helplessness because the anxious person feels blocked unable to find a solution to problems.

2. **Mood swings**: The adolescents are characterized as moody. Sometimes they feel pleasant and on the other times they are depressed. This is due to their disturbed physiological condition because of effect of hormones.

3. **Confusion/Indecision**: Erickson characterizes the adolescents with identity vs confusion crisis. The physical and intellectual changes during adolescence disrupt their sense of continuity and personal wholeness. They pay great attention on how other people view them. Their choices are usually supported by the reactions of parents and other people. They are not able to make decisions and keep on changing their roles. So they are said to be in a state of confusion/ indecision.

4. **Lethargy:** Adolescents tend not to eat properly and rapid pace of their growth makes them undernourished. As a result they become weak and lethargic. Adolescents are greatly influenced by peers and they enjoy doing things with their group. Since they are growing up they want to take decisions themselves and want to do things their way, while adults (parents and teachers) want them to behave like mature individuals. This leads to arguments between them.

5. **Anger/irritability**: In adolescents, thwarting of desires, interruption of activities in progress, constant fault finding, teasing, lecturing, or making unfavorable comparisons with other children lead to anger. Older children when fail to realize their goals, they become angry at themselves or at the people they believe have stood in their way.

6. **Experimentation:** Adolescents show risk taking behaviour. They want to try doing different things. They are greatly influenced by their peer group. They want to be viewed as adults and tend to indulge in alcoholism and even drug abuse. They may even want to indulge in sexual activity, which make them prone to STD and AIDS.

Understanding the anxiety in society as parent and citizen

No matter how old people are, they are still like emotional children, as long as they continue to run only to their parents for assistance and understanding. The true adult loves his parents, respects their desires, yet makes his own decisions and lives his own life. For an adolescent to become free of his childhood attachments to parental authority, parents must learn to give up the control. Attempts to resist will produce either childish or rebellious adults. There are few main areas in which parents can help their adolescent children to progress towards mature independence.

❖ Build a close relationship by conversing with the adolescent and try to understand his/her point of view.

❖ Try to make him/her aware of the implications of peer pressure and how to deal with the same tactfully.

❖ Help the adolescent appreciate socio-cultural values and keep him away from social evils.

❖ With no alcohol and drug taking habits, parents can become role model for them.

Understanding the anxiety in schools as a teacher and facilitator

Whenever the teacher get appropriate time, while teaching or through informal contacts discuss with students the problems they are facing. Keep a close watch on the students' activities and their interests. It will be helpful in understanding their behaviour. Encourage discussion among them on the socio-cultural value-based issues. Juvenile delinquency, drug abuse and sex related problems could be discussed with a positive attitude. But be careful in advising them and give them space for their own value judgment. Help them examine their career options and encourage them to set goals and achieve those goals.

An approach to interviewing adolescents

Adolescents obtain their health information from a number of sources. Health care providers are high on the list of the most valued of these sources. Therefore, clinicians need to continue to develop their approach and communication skills with their adolescent patients. One of the challenges of adolescent medicine is helping the patients in finding a path to a healthy lifestyle they are comfortable with. It is essential to get the information to need to assess and diagnose health issues, and for the patient to get the information he needs to deal effectively with health issues.

The Home, Education Employment, Activities, Drugs, Sexuality, Safety, and Suicide mnemonic (HEADSSS) are very useful to remind us of important information we need to obtain from adolescent patients. This approach starts with nonthreatening, open-ended, nonjudgmental questions and progresses to more sensitive areas such as sexuality, feelings of depression and thoughts of suicide.

The discussion of the presenting complaint or reason for the visit should be addressed at some time during the visit even if other important issues are brought forward.

This HEADSSS approach has been found to help uncover areas of concern or distress and allows us to identify protective factors and support systems that may be used to foster resiliency and health-promoting practices for youth. It also allows for the clinician to provide accurate and important information to the adolescent even if certain risk behaviours are denied. Helping the adolescent give up risky behaviours or choose healthy ones is a very important role for the clinician. Building decision-making skills is the cornerstone of this task. The PASTE mnemonic is useful in teaching these skills and may be demonstrated with a number of problems that the adolescent may be facing.

P problem – define the problem, **A** alternatives – list possible alternative solutions and list their pros and cons, **S** select an alternative, **T** try it, **E** evaluate your choice and modify it as needed, or even reselect.

Many adolescents make the transition to adulthood without a lot of stress or turmoil. However, it is important for the health care professional to identify problems and develop an approach to treatment for those patients who need help during this time. It is important not to pass up problems as issues that the youth 'will grow out of it'. It is important to identify the adolescent's strengths and support system. Learning and using a few special techniques to communicate with youth make this medical intervention easier and often more successful.

Important Problems of Adolescents in Educational Institutions:

I.**Delinquency in Adolescence**:

Delinquency in adolescence is not the predominant phase of adolescence. It is improper to assert that juvenile delinquency is at its peak in adolescence. To say that there is a spurt in this period of manifestation delinquency before he engages himself in stealing or other violent crimes, before he enters up on destruction of property, and before he becomes surely at home and in school. He disobeys rules and regulations. He gives danger signals. He becomes maladjusted. Pre delinquent behavior is shown in defying instructions from the parents, teachers and school authorities.

a) Day- dreaming:

All normal adolescents indulge in day-dreams and those who do not are generally below average in intelligence, their day-dreams are submerged. He gets in to different kinds of day-dreams which are related to the taste. The adolescents make castles in air regarding their future in these day-dreams. This

holds well with both boys and girls. The day-dreams are both happy and unhappy according to their ideas. Day-dreams consume much of adolescent's time. He is so engrossed in day-dreams that he forgets many things. However, it will not be correct to consider day-dreams as harmful. They are a source of inspiration to adolescents.

II.**Scholastic backwardness of Adolescence**:

Education is considered as the key to a successful life. We hear parents complaining that their wards are not studying properly and that they are not using their full potential to come up in life. Many a time, problems arise due to the over expectation of the parents and the inability of the child to come up to their expectations. The majority of these children are penalized for no fault of their own as their real talents lie hidden and never get used. Scholastic backwardness is diagnosed when an adolescent:

1) is not able to perform tasks according to his/her ability
2) finds it difficult to follow a particular type of syllabus.
3) loses interest in studies due to other pre-occupations. Scholastic backwardness or poor academic performance in students may be due to poor study habits, low intelligence, impaired vision/hearing, physical disability/chronic illness, psychological/emotional problems, specific learning disabilities

III.**Ragging:**

The word 'Ragging' means, the act of teasing, taunting, playing practical jokes or prank up on someone or holding of comic parades and other activities during a certain period of college term. A healthy interaction of fresh students with their seniors is necessary and should be promoted for the good of the students themselves and for the good of the institution. Ragging has both positive and negative manifestation. Ragging could be considered positive, when it is done with in decent limits and if it aims at raising funds for charity. The fun quotient in earlier forms of ragging has got replaced by sadism. In such cases the ragging has degenerated into plain harassment both physical and mental even an excuse for sexual misbehavior and violence. Cases were often reported of students being tortured, forced to run away from hostels and in a few extreme cases even to commit suicide.

IV.**Examination fear**:

Fear about examination is universal and natural. Fear makes the students to become serious, avoid all other activities and start studying. That is why teachers and parents try to induce some fear in the students when examination is in the corner. But excess fear is counterproductive. It decreases the

efficiency of the student. He or she cannot study, learn, recall and perform well. In severe cases, the student can develop and suffer from fever, vomiting and diarrhea, breathing difficulties, severe restlessness, shivering, and increased frequency of maturation, mind becomes confused and blank resulting in unable to think and write.

V.**Self pride**- **Inferiority complex**:

Self-pride gives self-confidence and helps to compete with other, face problems and take assignments. However, large number of people lack self pride and suffer from inferiority feelings. They become anxious to meet people who are better placed. They are afraid to interact with seniors, superiors and any authority figure. Thus feelings of inferiority become a hurdle in the path of progress and achievement.

VI. **Teenage identity crisis**:

Adolescence is a phase of multiple identity crises. They always try to impress others and make others acknowledge that they also are grown ups and more like adults. Hence they try to move out from the control of the parents to become more independent and get involved with their peers. Adolescents often complain that they are misunderstood, unduly restricted and unfairly treated by their parents. Parents or elders usually fail to understand the emotional changes taking place in the adolescent and complain that the adolescents either fail to communicate or communicate their feelings in a hostile manner.

VII.**Adolescent suicide**:

Suicide is the first leading cause of adolescent death in many countries. Stress of study and examination is a major cause for suicide, parental loss, parental divorce or separation, family disharmony, love failure, an alcoholic father, alcohol and drug abuse, and low self esteem, break down of joint family, consumerism, lack of support, loss of a loved one, substance abuse, child abuse, problems in the school psychiatric illness etc, are some of the common causes of suicide. Educational stress is an important factor in adolescent life. The expectations of parents are usually too high in comparison to actual academic performance and sometimes beyond the child's ability.

VIII.**Adolescent depression**:

Depression is equally common among young adults, adolescents, children and even infants, though the symptom picture differs from age group to age group. In depressed infants, the most striking 30 and alarming sign is failure to eat. In older children, depression may manifest itself primarily as apathy and inactivity. In adolescents, the most prominent symptoms may be negativism, withdrawal, complaints of not being understood or appreciated, and perhaps antisocial behavior and drug abuse.

IX.**Substance related problems**:

Substance related disorders involve psychoactive substances that affect thought, emotions and behavior. Among the drug addicts, behavior patterns vary depending on the type, amount and duration of drug use; the physiological and psychological makeup of the individual and in some instance the social setting in which the drug experience occurs. The major problems, very common among adolescents, are drug addiction, alcohol and cigarette smoking.

a) **Drug addiction**: The wide spread use of drugs in our society today is readily apparent in our vast consumption of alcohol, cigarettes, coffee, medically prescribed tranquilizers and such illegal drugs as cocaine, marijuana and heroin. The substance use disorders are differentiated from each other depending on the actual substance used and patterns of use i.e. substance abuse and substance dependence.

b) **Alcohol:** Alcoholism causes impairment of the individual's physical, mental and social health. It not only damages the individual but also his family and society. Alcohol plays an important part in group culture of children and adolescents. Alcohol is a depressant that affects the higher brain centers thereby lowering one's self control. The drinker experiences a sense of warmth and well-being. In such a mood unpleasant realities enter a generally pleasant world of unreality in which worries are temporarily left behind. Many adolescents seem to believe that it is fashionable to consume alcohol. This is because they tend to blindly follow the lifestyle of some adults they admire.

c) **Cigarette Smoking**: Smoking is the fastest way to feel the drug's effect. When the smoke is inhaled, it is spread across the surface of the lungs, quickly absorbed into the blood stream and carried into the brain in a few seconds. Smoking usually begins during adolescence. To an adolescent smoking is a symbol of maturity. Smoking is a difficult habit to give up, may be due to the unpleasant nature of the withdrawal experience.

Guidance needed for Adolescents:

Guidance involves personal help given by someone, it is designed to assist a person in deciding where he can best accomplish his purpose, and it assists him in solving problems that arise in his life. It does not solve problems for the individual but helps him to solve them.

The focus of guidance is the individual, not the problem; its purpose is to promote the growth of the individual in self direction. Guidance is the systematic professional process of helping the individual through education and interpretative procedures to gain a better understanding of his/her own characteristics and potentialities and to relate himself more satisfactory to social requirements and opportunities, in accordance with social and moral values

As the life is getting complex day by day, the problems for which expert help is needed are rapidly increasing. The scope of guidance is extending horizontally too much of the social context, to matters of prestige in occupations, to the broad field of social trends and economic development. Educational, vocational, social, personal, moral, physical and even material problems of individuals are the concerns of guidance. Its scope is indeed vast

Objectives of Guidance:

- ❖ To help in the total development of the student.
- ❖ To enable students to make proper choices at various stages of their educational career.
- ❖ To help students choose, prepare for, enter upon and progress in a career. To help the students in vocational development.
- ❖ To help students make the best possible adjustments to the situations in the school as well as in the home.
- ❖ To supplement the efforts of home.
- ❖ To minimize the mismatching between education and employment and help in the deficient use of man-power.
- ❖ To identify and motivate the students from weaker sections of society.
- ❖ To help in checking wastage and stagnation.
- ❖ To identify and help students in need of special help. To ensure the proper utilization of time in non-class rooms
- ❖ To increase the holding power of schools.
- ❖ To make secondary and higher secondary education successful.
- ❖ To minimize the incidence of indiscipline.

Guidance services to the Adolescents: To achieve these objectives an effective guidance programme extending the following specific services can be organized in schools and colleges.

1. **The Pre-admission Service**: The pre admission service helps the students to get admission in the right course after completing high school education; students aspiring for higher education join colleges or universities. This service may be arranged in collaboration with the employment exchanges, university employment information and guidance bureau, student advisory bureau, and local resource persons,

2. **The Admission Service**: The admission service is one of the important links in the chain of guidance services. This service is given to admit the right persons for the right course for the maximum advantage both to the individual and the society. This service was given to select those 34 candidates most likely to succeed to keep wastage figure and dropout rate at the minimum level. Admission service, to be effective, will comprise a carefully framed criterion of admission to all colleges and universities

3. **The Orientation Service**: The orientation service has to be a continuous service in an institution. It provides adequate information to new entrants about physical facilities offered by the institution, its rules and regulations, expectations and standards. Later, the emphasis may shift to study habits, library orientation, and information regarding new policies and circulars

4. **The Student information Service**: The student information service is intended to assist the student to obtain a realistic picture of his abilities, interests, personality characteristics, achievement in different subjects and activities, level of aspiration and state of health. It enables the student to know himself on a socio – comparative basis, to provide a record of the student's progress, and help the guidance workers and others to understand him-more adequately

5. **The Information Service**: The information service assists the students in making better choices or helping them in better adjustment or optimum development. Information provided by this service through group guidance activities such as educational and career conferences, work experience seminars, discussion groups and individual interviews constitute the main media for implementing the information service.

6. **The Counseling Service**: This service is intended to establish a relationship between the guidance worker and the student in which the former attempts to assist the latter in achieving optimum educational, vocational, personal-social development and adjustment. The service may be performed by the counsellor, teacher or the administrator, provided they are adequately trained. This service involves helping the student to

a)Understand what he can do and what he should do,

b) Understand the choices he faces, the opportunities open to him and the qualifications he possesses for the goal he has chosen.

c) Handle his difficulties in a rational way and strengthen his attributes.

d)Makes his own decisions and plans on the basis of self-understanding, accept responsibility for his decisions and take action on the plans developed

X. **The Placement Service**: This is an important service in the guidance programme and is intended to help the student in situating himself in the right scholastic track, suitable place in the post-school environment, selection of suitable co-curricular activities and job oriented courses. This service help and guide the student in getting part-time jobs during working session and whole time jobs during vacation and after getting education and training.

XI. **The Referral Service**: A teacher or even a counsellor recommends and indicates to the student a more specialized person or agency which can give him better help when they need in special circumstance. The teacher/counselor follows up a student whom he has referred for more specialized treatment and also maintains a close working relationship with referral persons and referral agencies so that he can utilize them optimally.

XII. **The Remedial Service**: The defects in speech, hearing, reading and study habits can seriously impede the functioning of many able students and restrict the contributions. The remedial services in schools and colleges help the students in these defects and similar other areas when they are needed. Almost all students could profit by these services through some training in study skills and special education.

XIII. **The Follow-up Service**: Follow-up is the review or systematic evaluation carried out to ascertain whether guidance in general satisfies the needs of the students. The typical follow-up method employs the techniques of interview, post card survey or questionnaire. Information obtained through follow-up techniques can be used for improving the curriculum, stimulating better teaching, increasing the value of the guidance service and establishing better school-community relationships.

XIV. **The Research Service**: Research is one of the most important guidance services. It is needed for a better understanding of students and school resources and for evaluation of achievement in relation to goals. Research can give the guidance staff greater psychological security because of knowledge of effectiveness of its efforts. It can also provide a basis for guidance development programme.

XV.**The Evaluation Service**: The evaluation service completes the entire process of guidance. It is essential to evaluate the use and application of information to establish activities in order to determine their efficiency that is how time, money and personnel are utilized.

Developments in Adolescence:

Adolescence in human life is the stage when rapid changes take place. The individual's physical, mental, social, moral and spiritual out looks undergo revolutionary changes. Such changes during adolescence are more rapid than during infancy and childhood. Due to these various changes his personality develops new dimensions.

Physical development:

In adolescence certain in born maturational processes lead to various physical changes; growth is accelerated; bodily shape changes; primary and secondary sexual characteristics become marked; and hormonal level alters. Each of these physical changes produces psychological effects. The beginning of adolescence is signaled by a sudden increase in the rate of physical growth. While this growth spurt occurs for both sexes, it starts earlier for girls (at about age ten or eleven) than for boys (about age twelve or thirteen). Before this spurt, boys and girls are similar in height; in its early phases, girls are often taller than boys; after it is over, males become several inches taller, on average than females. This growth spurt is just one aspect of puberty, the change during which individuals of both genders reach sexual maturity.

Cognitive development:

The cognitive development takes place mainly in areas of perception, memory, generalization and categorization of concepts, handling of logical problem & reasoning, meta cognition and social cognition. Intellectual powers like logical thinking, abstract reasoning and concentration are almost developed. Hero worship is the most prominent in this period. The memory in adolescence develops tremendously with the growth in vocabulary.

The adolescents can imagine about a situation which is not physically present before them and their long-term memory increases. They can retain facts for a longer period, anticipate future needs and plan for it. The idea of historical past can be grasped by adolescents and the idea of time concepts becomes clear to them. The ability to solve problems increases in adolescence with the help of symbols. He is now able to deal with ideas that do not represent something in which a person is definitely involved. The adolescents solve and talk about national and international problems. They are able mentally to

deal with events in a world that extend far beyond their own immediate sphere of activity. The adolescents on roads, in coffee houses, and tea stalls can be seen arguing for hours on topics of their interest.

One noticeable characteristic of mental operations in adolescence is increased ability to generalize the facts. Children usually generalize in relation to concrete objects. The intellectual development in childhood operates on perceptual level but in adolescence the ability to generalize on conceptual level develops. The adolescent can generalize in an abstract way. There is an increase in the ability to see relationships and solve problems of increasing complexity and difficulty. His depth of understanding develops.

The adolescent can think the solution of more difficult problems. Adolescents become capable of logical thinking. However, this does not mean that they necessarily demonstrate such thinking. In fact, only about 40 percent of adolescents can solve the kind of problems used by Piaget to test for formal operational thinking (e.g., Stanovich, 1993). Moreover, if they do show such logical thinking, it may be restricted to topics or types of problems with which they have had direct experience (Rogoff & Chavajay, 1995). In addition, adolescents' theory of mind – their understanding of how they and others think – continues to change and develop. Younger children take what has been described as a realist approach to knowledge.

Moral development:

The formation of strong sentiments during this period intensifies the moral development. The impact of religion and religious practices is also felt for the first time at this stage. According to Kohlberg, the third level of moral development, post conventional morality, should be reached during adolescence.

This is the level of self accepted principles and it consists of two stages. In the first stage the individual believes that there should be a flexibility in moral beliefs to make it possible to modify and change moral standards, if this will be advantageous to group members as a whole In the second stage individuals conform to both social standards and to internalized ideals to avoid self condemnation rather than to avoid social censure.

In this stage, morality is based on respect for others rather than on personal desires. Even with the best foundations, the three major tasks in achieving adult morality-replacing specific concepts with general moral concepts, formulating these newly developed concepts into a moral code as a guideline 11 for behavior and assuming control over one's own behavior are difficult for many adolescents. Some fail to make the shift to adult morality during adolescence and must finish this task in early adulthood.

Others not only fail to make the shift but they build a moral code on socially unacceptable moral concepts.

Social development:

Erik Erikson in his theory of 'psychosocial development' places adolescent in the fifth stage, which is a transitional stage from childhood to adulthood. Like any other stage of psychosocial development, psychological development of individual (their personalities and view of themselves) proceeds hand in hand with the social relations they establish as they go through life. During adolescence individuals face a crisis of identity & role confusion. They pay great attention on how other people view them. They experiment with roles. They attempt to find out what kind of person they are and they adapt the characteristics of other people to see if their characteristics fit them. Adolescent behaviour is characterized by egocentrism and autonomy. The physical changes coupled with the new thinking abilities, make them over conscious and they tend to become self-centered. As the adolescents begin to socialize, they desire autonomy that should be emotional, behavioural and of values.

According to Erikson if an individual is able to come out of crisis successfully he sees himself as an unique and integrated person i.e. he visualizes himself in high self-esteem and is better adjusted to his environment. If he fails to come over the crisis he is in a state of confusion over whom and what he really is. He may develop what is called maladjusted personality.

 The most important and in many respects the most difficult of which are those to the increased influence of the peer group, changes in social behavior, new social groupings, new values in friendship selection, new values in social acceptance and rejection and new values in the selection of leaders. Of all the changes that take place in social attitude and behaviour, the most pronounced is in the area of hetero sexual relationships. Whether prejudice and discrimination will increase or decrease during adolescence will be greatly influenced by the environment in which adolescents find themselves and by the attitudes and behavior of their friends and associates. Because adolescents, as a group tend to be choosier in the selection of associates and friends than they were as children, they find adolescents of different racial, religious or socioeconomic backgrounds less congenial than those with similar backgrounds.

However, they are more likely to ignore those they find uncongenial than to treat them in a way that expresses their feelings of superiority as older children do. 13 The adolescent had a much firmer and more mature grasp of society's rules and regulations. Hall observed, with the dawn of adolescence at the age of twelve or shortly after comes the recognition of a larger life, a life to be lived in common

with others, and with this recognition the desire to sustain the social code made for the common welfare.

Emotional development:

During adolescence the individual wants to take independent decisions in different situations of his experiences. However, the adolescent starts to control his desires according to standards set by the society and also begins to realize his social responsibilities. If he fails in this attempt, he develops many defects in his personality. From the very start of adolescence sexual curiosities appear in boys and girls. During adolescence there is a kind of mental tension or conflict going on in the individual.

Their emotions fluctuate very frequently and quickly. It is widely believed that adolescents are highly emotional—that they experience huge swings in mood and turbulent outbursts of emotion. In several studies on this issue, large numbers of teenager were weepers and were signaled at random times thoughts and feelings in a diary. Results indicated that they did show more frequent and larger swings in mood than those shown by older persons.

Questions for Discussion and Reflection:

1.Characterize the Adolescents.
2.What are the important problems of Adolescents in Educational Institutions?
3.What are the Developments in Adolescence?
4.What are the Guidance services to the Adolescents?

UNIT VIII: PLAY AND CHILD DEVELOPMENT

Objectives:

After completion of the unit, the learner will be able to:

1. explain play and characteristics of play.

2. understand the types of social participation

3. describe the functions of play

4. understand the functions of play

Introduction

In few area of development has more radical change in attitude towards its importance to children's personal and social adjustments than in play. Since the turn of the present centenary, there has been a radical shift in attitudes toward play as the result of scientific studies of what play can do for the child's development. Instead of regarding play as a waste of time, scientists been having pointed out that it is a valuable learning experience.

Play is the most natural of childhood activities and one of the most frequently observed. Three criteria that may help to define play: freedom of choice, personal enjoyment, and focus is on the activity itself rather than its outcomes. Just as the adult works, so does the child play; it is the business of the child. Through the play, the child grows, develops, learns, and ultimately matures.

PLAY

Play is needed for healthy development for your child. Research shows that 75 percent of brain development occurs after birth. Play helps with that development by stimulating the brain through the formation of connections between nerve cells. This process helps with the development of fine and gross motor skills. Fine motor skills are actions such as being able to hold a crayon or pencil. Gross motor skills are actions such as jumping or running. Play helps the child to develop language and socialization skills. Play allows children to learn to communicate emotions, to think, be creative and solve problems.

CONCEPT OF PLAY

❖ Play is critical to the healthy growth and development of children

❖ One of the ways children learn about themselves, the people around them, their environment, and their community.

❖ By playing, a child will then learn how to process and make sense of what sensations he/she receives whether it's by sight, sound, taste, smell, or touch.

❖ Play relieves stress and boredom, connects people in a positive way, stimulates, creative thinking and exploration, regulates emotions, and boosts confidence.

Meaning of Play

"Play" is a term to loosely use that its real significance is apt to be lost. In its strictest sense it means any activity engaged in for the enjoyment it gives, without consideration of the end result.

Definition of Play

According to Bettelheim, play activities are those "having no rules other than those the player himself imposes and no indented end result is external reality".

CHARACTERISTICS OF PLAY:

Self-directed - self-selected

Open-ended - voluntary

Enjoyable - flexible

Motivating individual or group

FUNCTIONS OF PLAY

❖ make sense of their world,

❖ expand social and cultural understandings

❖ express personal thoughts and feelings

❖ Practice flexible and divergent thinking encounter

❖ solve real problems

❖ learn to consider other people's perspectives

❖ plans and develop self control

❖ extend language and literacy skills and

❖ enhance brain and motor development.

Types of Play

The child grows and develops, his or her play evolves. Certain types of play are associated with, but not restricted to, specific age groups.

1) **Unoccupied play**: In the early months of infancy, from birth to about three months, the child is busy in unoccupied play. Children seem to be making random movements with no clear purpose, but this is the initial form of playing.

2) **Solitary play**: From 3 to 18 months, babies will spend much of their time playing on their own. During solitary play, children are very busy with play and they may not seem to notice other children sitting or playing nearby. They are exploring their world by watching, grabbing and rattling objects.

3) **Onlooker play**. Onlooker play happens most often during the toddler years. This is where the child watches other children play. Children are learning how to relate to others and learning language. Although children may ask questions of other children, there is no effort to join the play. This type of play usually starts during toddler years but can take place at any age.

4) **Parallel play**: From the age of 18 months to two years, children begin to play alongside other children without any interaction. This is called parallel play. Parallel play provides your toddler with opportunities for role-playing such as dressing up and pretending. It also helps children gain the understanding of the idea of property right such as "mine." They begin to show their need of being with other children their own age. Parallel play is usually found with toddlers, although it happens in any age group.

5) **Associative play**: Associative play helps the preschooler learn the do's and don'ts of getting along with others. Associative play teaches the art of sharing, encourages language development, problem-solving skills and cooperation. In associative play, groups of children have similar goals. They do not set rules, although they all want to be playing with the same types of toys and may even trade toys. There is no formal organization.

6) **Social play**: Children around the age of three are beginning to socialize with other children. By interacting with other children in play settings, child learns social rules such as give and take and cooperation. Children are able to share toys and ideas. They are beginning to learn to use moral reasoning to develop a sense of values. To be prepared to function in the adult world, children need to experience a variety of social situations.

7) **Motor - Physical Play**: When children run, jump, and play games such as hide and seek and tag they engage in physical play. Physical play offers a chance for children to exercise and develop

muscle strength. Physically playing with child teaches social skills while enjoying good exercise. The child will learn to take turns and accept winning or losing.

8)**Constructive Play**: In this type of play, children create things. Constructive play starts in infancy and becomes more complex as the child grows. This type of play starts with your baby putting things in his/her mouth to see how they feel and taste. As a toddler, children begin building with blocks, playing in sand, and drawing. Constructive play allows children to explore objects and discover patterns to find what works and what does not work. Children gain pride when accomplishing a task during constructive play.

9)**Expressive Play**. Some types of play help children learn to express feelings. The parents can use many different materials. Materials may include paints, crayons, colored pencils and markers for drawing pictures or writing. It can also include such items as clay, water, and sponges to experience different textures. Beanbags, pounding benches, and rhythm instruments are other sources of toys for expressive play.

10) **Fantasy Play**: Children learn to try new roles and situations, experiment with languages and emotions with fantasy play. Children learn to think and create beyond their world. They assume adult roles and learn to think in abstract methods. Children stretch their imaginations and use new words and numbers to express concepts, dreams and history.

11**Cooperative play**: Cooperative play begins in the late preschool period. The play is organized by group goals. There is at least one leader, and children are definitely in or out of the group. When children move from a self-centered world to an understanding of the importance of social contracts and rules, they begin to play games with rules. Part of this development occurs when they learn games such as follow the leader, Siman Says Games with rules teach children the concept that life has rules that everyone must follow

COGNITIVE THEORY OF PLAY

Every act of intelligence is characterized by equilibrium between two polar tendencies. i.e assimilation and accommodation (Piaget). In Assimilation, the subjects incorporates events, objects, situation into existing ways of thinking (Organized mental structures). In accommodation, incorporation of new aspects of external environment Intelligence: Subjects adapts to the requirements external environment reality, while at the same time, maintaining mental structures intact.

PAIGET'S THOUGHTS ON PLAY

Paiget's three stages of practice characterized by the primacy of assimilation over accommodation the subject incorporates events and objects into existing mental structures.

CONSTRUCTIVE PLAY: Use of blocks or materials to make something dramatic/pretend play: use of imagination and role play games with rules: accepts predetermined rules, to play games such as Cricket/ football. Knowledge helps educators provide appropriate environments that support children's development. It enables them to enjoy, encourage, and appreciate age-appropriate play behaviour.

SYMBOLIC PLAY: Through pretence, make or believe, identification of one object with another .A banana is telephone Uses' words for objects It lasts 02 to 03 years, Body parts as other things (after 03 Y), Not for practical or instrumental purpose, but for pleasure derived from motor skills mastery symbolic play relates to their verbal abilities. Children with visual impairments demonstrate similar level of sophistication Low in quantity

PURPOSIVE PLAY: when practice play becomes less numerous and diminish child passes from mere reputation to fortuitous and then purposes combination of actions and manipulations, set goals and transfer to constructions, elaborate sequences of scio- dramatic play, rules spontaneously created rigidity, language development engage them in verbal games. Play with rules and activities become collective standardized activities under the age of 10, children believe that rules are created by an authority, unchangeable. After the age of 10, children understand that rules are created to make the game playable by all, and that they could be changed by mutual agreement. Play is inextricably linked to children's cognitive abilities

SOCIO-DRAMATIC PLAY: Relates strongly to children's cognitive and social abilities. It offers rich opportunities for children to: develop abstract thinking (Piaget, 1962) refine their understandings about the world solve problems in a safe context.

SOCIAL ASPECT OF PLAY: Play results from interaction with other peoples helps to develop their cognitive abilities. In infancy babies tend to be played to by adult's passive role After 12 months, able to imitate actions more active role

PRETEND PLAY: A sophisticated activity. Integrate different representations of objects and events. Seeing its mother pretending that a banana is telephone. True identity of banana is different from pretend identity as telephone

SOCIAL PLAY: It is characterized by playful interactions with parents (up to age 2) and/or other children (from two years onwards) parallel Play. In spite of being around other children of their age, children between 2 to 3 years old commonly play next to each other without much interaction socio-dramatic play: As their cognitive skills develop, including their ability to imagine, imitate and understand other's beliefs and intents, children start to get fully involved in it.

PHYSICAL LOCO MOTOR PLAY: While interacting with same age peers, children develops narrative thinking, problem solving skills (e.g., when negotiating roles), and a general understanding of the building blocks of story. Around the same time, physical/locomotors play also increases in frequency. Running and climbing, play fighting (three to six)

GENDER DIFFERENCES : Boys & Girls Play differently socio-cultural theorists suggest play useful way of practicing in a non-threatening environment. Students have opportunity to learn relationships, roles, and conventional pattern of behavior. Strengthen the distinction between appearance (pretend) and reality Provide social interaction, basis for cognitive

FREUD'S VIEW ON PLAY: Play is a means by which children could compensate for the anxieties and frustrations that they experiences in everyday life. Desire to mastery, to emulate their parents by staying up late, safe, stress free environment. Anxiety to go to the doctor. Play is an outlet for creativity. Function is equally important. Imaginary companions

THE BOUNDARY BETWEEN PLAY AND AGGRESSION

Children disturb others if they themselves or poor players. Popular player are those with positive and happy disposition, show high level of cooperative play, little aggression unpopular children

a) **rejected:** disruptive, argumentative, extremely active, talkative, unwillingness to share and solitary behavior as consequence

b) **Neglected:** shy, rarely aggressive, antisocial, avoid interaction, bullying: laughter and smiling, restraint, it is different from fighting, rough, tumble play.

c) **Object play** refers to playful use of objects such as building blocks, cars, dolls, etc allows children to try out new combinations of actions, free of external constraint, and may help develop problem solving skills.

d) **Pretend play:** involves pretending an object or an action is something else than it really is. A banana is a telephone, 15 months of age with simple actions, such as pretending to sleep or putting dolly to bed,

Contribution of play to child development

There are many benefits of play. Children gain knowledge through their play. They learn to think, remember, and solve problems. Play gives children the opportunity to test their beliefs about the world. Children increase their problem-solving abilities through games and puzzles. Children involved in make-believe play can stimulate several types of learning.

Children can strengthen their language skills by modeling other children and adults. Playing house helps children create stories about their roles, such as "I am the Mom." They also imitate their own family experiences. This helps children learn about the different roles of family members. Children gain an understanding of size, shape, and texture through play. It helps them learn relationships as they try to put a square object in a round opening or a large object in a small space. Books, games, and toys that show pictures and matching words add to a child's vocabulary.

It also helps a child's understanding of the world. Play allows children to be creative while developing their own imaginations. It is important to healthy brain development. Play is the first opportunity for the child to discover the world in which he lives. Play offers a child the ability to master skills that will help develop self-confidence and the ability to recover quickly from setbacks.

Play is important when the child enters school. Play can assist children in adjusting to a school setting. It enhances children's learning readiness and their cognitive development by allowing them to move from subject and area without of the fear of failure. Playtime in school such as recess time, allows learning and practicing of basic social skills. Children develop a sense of self, learn to interact with other children, how to make friends, and the importance of role-playing. Exploratory play in school allows children time to discover and manipulate their surroundings.

VALUES OF PLAY

1. **PHYSICAL VALUE:** Muscular & sensory abilities are developed. Infants & young children develop their sensory abilities through the tactile, visual and auditory sensations derived from playing with rattles balls & other toys. Toddlers & preschool children enjoy large muscle activity such as running, climbing & exploring the environment. School age children organize their movements into more complex forms like bicycle riding, racing.

2. **INTELLECTUAL VALUE:** Children learn the differences in sizes, shape, colors, textures, numbers, & names of the objects. They learn to understand special relationships, to do abstract thinking, & to engage in problem solving activities. Distinguished what is real & what is unreal/ fantasy.

3.**MORAL VALUE**: Cultural values like honesty, integrity, sportsmanship, & compassion are learned. They assumes responsibility for their own actions and should adhere to the group values & can be expelled if they don't.

4.**CREATIVE VALUE :** Playing with materials like clay, paper & finger prints. Children are most creative when they are playing alone. They carry their new discoveries to the outside world of play

5.**THERAPEUTIC VALUE**: Play provides the release of stress and tension. Children express their emotions and test out frightening situations in a way that peers and adults can accept. They reveal themselves through play. Nurses can carefully observe the play of children & determine needs, concerns & feelings that cannot be put in to words. Children should be protected if they become aggressive & should be guided into less aggressive type of play.

6.**SOCIALIZATION:** Social & emotional development is enhanced through play. When they play with adults, parents and peers they develop social relationship.

Conclusion

Play is an essential and critical part of all children's development. Play starts in the child's infancy and ideally, continues throughout his or her life. Play is how children learn to socialize, to think, to solve problems, to mature and most importantly, to have fun. Play connects children with their imagination, their environment, their parents and family and the world. Parental involvement in a child's world of play is not only beneficial for the child but is extremely beneficial to the parent. Playing with children establishes and strengthens bonds that will last forever. Parent-child play opens doors for the sharing of values, increases communication, allows for teachable moments and assists in problem solving. Playtime provides opportunities for the parent and child to confront and resolve individual differences, as well as family related concerns and issues. Finally, it allows the parent to view the world through the eyes of a child once again.

Questions for Discussion and Reflection:

1.Concept, meaning and definition of play.

2.Describe the types of functions of play.

3.Explain the theories of play.

4.Discuss the contributions of play to child development.

5.What are the values of play?

UNIT IX: MEDIA AND CHILD DEVELOPMENT

Objectives:

After completion of the unit, the learner will be able to:

1. gain knowledge about the role of media in the development of children and adolescents
2. analyse the factors for the harmful effects of media on children and adolescents
3. realize the impact of media violence on children and adolescents
4. study the role and contribution of media on racial and gender stereotyping and
5. explore various ways and means for healthy media usage.

I - MEDIA AND CHILD DEVELOPMENT

Introduction

As 21st Century is being noted as the boon in the development of science and technology, the impact of media goes in line with the top priority in the techno-revolution. As a result of this rapid development, most of developing countries, in particular, India have been emerged as an inevitable socio-economic power not only in Asia, but also compatible in the world arena. For the sub-continent, the human resource becomes the big boon as 25% below 18 age group and more than 65% of its population between the age group of 18 - 35. Nowadays the electronic gadgets like mobile phones, tablets, iPads, laptops and etc. becomes the part and parcel of the youngsters' life, and so the impact of media on younger generation is abundant. This, chapter, henceforth, deals with how the media influence on youngster in different perspectives, in terms of their childhood experiences and adolescence development.

Definition and Meaning

Media:

1.Communication channels through which news, entertainment, education, data, or promotional messages are disseminated. Media includes every broadcasting and narrowcasting medium such

as newspapers, magazines, TV, radio, billboards, direct mail, telephone, fax, and internet. Media is the plural of medium and can take a plural or singular verb, depending on the sense intended.

2. Data storage material divided into three broad categories according to the recording method:

(i) Magnetic, such as diskettes, disks and tapes

(ii) Optical, such as microfiche and

(iii) Magneto-Optical, such as CDs and DVDs.

Mass Media: Mass media is communication - whether written, broadcast, or spoken - that reaches a large audience. This also includes television, radio, advertising, movies, the Internet, newspapers, magazines, and so forth.

Social Media: It refers to the means of interactions among people in which they create, share and exchange information and ideas in virtual communities and networks. The Office of Digital Communications manages the main Facebook, Twitter, Instagram, WhatsApp, YouTube and Video accounts.

Influence of Children Media

According to the American Academy of Pediatrics (AAP), "Children are influenced by media -they learn by observing, imitating, and making behaviors their own". The influence of media on children has been the subject of increased attention among parents, educators, and health care professionals. The significance of this issue becomes major concern in the diverse Indian culture. Media influence on children has steadily increased as new one and more sophisticated types of media have been developed and made available to the Indian public. Though the availability and the greater affordability of media for Indian families, has provided easier access to media for children, whereas the beneficial effects of media are plentiful such as, early readiness for learning, educational enrichment, opportunities to participate in discussions of social issues, exposure to the arts through music and performance and entertainment. Harmful effects may result from sensationalization of violent behavior, exposure to subtle or explicit sexual content, promotion of unrealistic body images, presentation of poor health habits as desirable practices, and exposure to persuasive advertising target children.

History of Media for Children

The 20th century was a time of phenomenal growth and development of new kinds of media. In the early twentieth century, film, radio and newspapers were the media forms to which children had access, though limited. Beginning in the early 1940s, children's media experiences expanded into

television, recorded music, videotapes, electronic games, interactive computer software, and the Internet. Print media, such as comic books and children's magazines, also expanded during this period, though not at the same accelerated rate as the visual electronic media.

Factors for General Media Considerations

There are two important factors that must be included in the discussion of media influence on children. The first factor, called *media literacy,* was addressed by Renee Hobbs. Hobbs contended that: Just because the students can use media and technology doesn't mean they are effective at critically analyzing and evaluating the messages they receive. Students need a set of skills to ask important questions about what they watch, see, listen to and read. Later it was called as media literacy, these skills include the ability to critically analyze media messages and the ability to use different kinds of communication technologies for self-expression and communication. A child, provided who is media illiterate, it is more vulnerable to being influenced by messages in all kinds of media. The second factor that can affect how children are influenced by media is the amount of parental involvement in supervising media exposure of children. Parental monitoring is a key factor, since the research studies show that increasing guidance from parents is at least, as important as simply reducing media violence. Children may learn negative behavior patterns and values from many other experiences by TV programmes, so parental guidance is needed to help children to sort out these influences and develop the ability to make sound decisions on their own.

An important media literacy skill, which can be developed through parental guidance, as it is a child's ability to distinguish between reality and fantasy in media messages. Children would not be capable of making this distinction without an adult's help, resulting in a child's confused perception of fantasy as reality. But with proper adult guidance, they can learn to critique what they view and become more discriminating consumers of media.

Studies of Media Influence

Violence in interactive media forms (Internet, computer and video games) as opposed to passive media forms (television, movies, videos) may have even stronger effects on children and, as a result, has become a focus of new research. According to the Office of the Surgeon General, "children are theoretically more susceptible to behavioural influences when they are active participants than when they are observers." To further legitimize these concerns, the AAP reported that initial studies of interactive media show that the element of child-initiated virtual violence may result in even more significant effects than those of passive media. Because research has already shown that passive media

violence has significant influence on children, the implications of increased effects from interactive media are troublesome. Despite the research reports, there was debate between television broadcasters and scientists regarding the harmful effects of television violence on children. Broadcasters asserted that there was not enough evidence to link viewing television violence to children's aggressive behavior.

II - HARMFUL EFFECTS OF MEDIA ON CHILDREN AND ADOLESCENTS

Children and adolescents are spent a considerable portion of their time watching television, movies, playing videogames and on the internet. Media has proved to be a very useful tool in the fields of education, arts, science, sports, and culture. Over the past few decades, there has been a surge in the use of media by the younger generations and concern has been raised about the impact of media on children because of research reports of long term harmful effects. Media use is a double edged sword with both merits and demerits and it is therefore imperative for parents to understand the effect of media exposure on children in order to understand and handle problems resulting from this exposure better.

Extent of Media use by Children and Adolescents

Today's children had been growing up in a world saturated with media use. A national survey in the US found that children aged 8 to 18 years had an average media usage time of 7 hours and 38 minutes every day. The average of youngsters spend one-third of each day with some form of electronic media. There are not many studies on media exposure in Indian children and adolescents, but the scenario in India shows a similar trend with Indian children spending more than two hours of their time on the television daily. This increased exposure to the media has profound effects on the development and functioning of children and adolescents today. Media has been found to have a negative impact on the physical, psychological and social development of children. In particular, the effect of media in the areas of violence and aggression, obesity, nutrition and eating disorders, substance use and early sexual initiation, which have to be taken into special consideration.

Media and Violence

The national television violence study, carried out to understand the content of American television, showed that there was an alarming amount of violence present in the programs watched by children and adolescents. Young people view an average of 10,000 acts of violence per year with 61% of the

shows containing violence of some kind. In general, violence on television and in movies often conveys a model of conflict resolution. It is efficient, frequent and inconsequential. Among violent programs only 15% carried any sort of advisory/content code. The study concluded that television violence contributes to antisocial effects on viewers. The prime effects of the study had seen as follow,

1. Learning aggressive behaviour and attitudes
2. Desensitization to violence and
3. Fear of being victimized by violence.

Children cannot discriminate between reality and fantasy. They lack adult reasoning abilities and may perceive TV shows as being realistic and shape their behaviours accordingly. Media violence cannot be considered a lone cause of violence in the youths of today. But the use of violence to achieve goals and to settle conflicts is learned behaviour. Adolescents who are exposed to violence or are victims of violence in their homes or communities are more likely to use violence themselves. This goes to show that witnessing of violence is an important factor of violent behaviour and media violence represents the witnessing of violence in a very explicit and graphic fashion.

Media and Substance abuse

Studies have examined the relationship between TV advertising of alcohol and drinking knowledge, beliefs and intention to later drinking in children. The results showed that children with more exposure to advertisements of alcohol held more favourable beliefs about drinking and more frequently intended to drink as adults. The positive effects attributed to drinking included romance, sociability and relaxation. Recent studies have also shown that exposure to alcohol advertising and TV programming is associated with positive beliefs about alcohol consumption. A content analysis of music videos showed that one fourth of music videos commonly broadcast on television contain alcohol or tobacco use. Research has revealed an association between exposure to certain mass media messages and smoking in adolescents. For instance, more than half of adolescent smoking initiation has been linked to watching smoking in movies.

Media and Risk of early Sexual initiation and Sexual promiscuity

A very important factor contributing to early sexual initiation in adolescents is exposure to sexually explicit content in the media. Over the past few decades, there is an increased and more explicit portrayal of sexual material in the media. There is however very little information about the risks

associated with early sexual initiation and indiscriminate sexual behaviour like unwanted pregnancies and the risk of contracting sexually transmitted diseases. Content analysis of sexually explicit material on television showed that more than 50% of shows and 66% of prime time shows contain sexual content, only 9% contain any reference to possible risk or responsibilities of sexual activity or any reference to contraception or safer sex. A study examining the relationships between amount of television viewing and parental regulation of content on sexual initiation observed that watching two or more hours of television per day and lack of parental regulation of television programming were each associated with increased risk of initiating sexual intercourse within a year. The Internet offers easy and private access to very sexually explicit content with just a few keystrokes. The internet also poses other sexual risks to adolescents like risks from stalkers, lack of privacy, sharing too much information, or posting inappropriate photos of themselves on the net especially on social networking sites. Swift, widespread distribution of such photos via cell phones and computers may result in dire, unforeseen consequences.

Media and Obesity

Children today tend to spend their leisure time on the television, computer or video games rather than playing or indulging in other physical activities. Studies have reported a strong causal link between television viewing and the risk of developing obesity. There is a significant association between playing electronic video games and obesity with a twofold increased risk of obesity for every hour spent playing electronic games daily. Studies have also shown an inverse relationship between the hours spent using video games and daily physical activity. The mechanism of effect of media exposure on obesity may also operate through the extensive advertising messages for unhealthy foods targeting children.

Media and Other behavioural problems

The time spent on the television and other forms of entertainment media significantly reduce a child's time for activities necessary for the physical and mental development like playing, reading, storytelling and spending time with peers and family. Studies have revealed a harmful effect of watching more than one to two hours of television per day on academic performance. Excess television viewing causes poor peer relationships and thereby increases the risk of social isolation, anxiety disorder and agoraphobia. Studies have also shown that TV viewing may play an intensifying, if not causal, role in the development of attention-deficit/hyperactivity disorder and that excessive TV viewing in adolescence is a risk factor for development of depression in young adulthood.

Domains of Influence

Research studies have identified the following domains of influence in which media content has been shown to have negative effects on children like as, violence and aggressive behavior, sexual content, body image and self-esteem, and physical health and school performance.

1. **Violence and aggressive behavior:** The question of violence in the media and its influence on children is probably the most widely researched domain of media influence. Studies over a span of three decades, beginning in the early 1970s, have shown that significant exposure to media violence increases the risk of aggressive behavior in certain children and adolescents. Other effects on children include desensitization to others' pain and suffering and the tendency to be fearful of the world around them, viewing it as a dangerous place. Research has also shown that news reports of violent crimes can traumatize young children.

2. **Sexual content:** Increased attention has been given to the second domain, sexual content in the media. According to studies commissioned by the Kaiser Family Foundation collectively labeled "Sex, Kids, and the Family Hour," there was a 400 percent increase from 1976 to 1996 in sexual references during the evening television viewing time period commonly referred to as "family hour." It was determined that by 1996 children were exposed to about eight sexual references per hour during this time slot. In *Media, Children, and the Family,* Jennings Bryant and Steven Rockwell reported the results of their studies that investigated the effects of exposure to sexual content on television. They found that such exposure affected adolescents' moral judgment. They qualified the results, however, by saying that parental discussion and clear expression of personal values mitigated the effects on adolescents.

3. **Body image and self-esteem:** The third domain, body image and self-esteem, is widely affected by advertising in the media. Researchers have suggested that media may influence the development of self-esteem in adolescents through messages about body image. Television, movies, magazines, and advertisements present images that promote unrealistic expectations of beauty, body weight, and acceptable physical appearance. Efforts to sell an image that adheres to certain standards of body weight and size may be a catalyst for eating disorders suffered by some adolescents. And, when adolescents fall short of their own expectations based on media images, self-esteem can suffer. Media theorists and researchers have determined that the effects of this trend are being seen in both boys and girls, with negative psychological effects.

Advertisement of appealing, but often financially unaffordable, clothing and promotion of negative gender stereotypes are other areas of concern.

4.Physical health and School performance: The fourth domain involves the amount of time that children spend to get engaged with media activities. The average of a child or adolescent spends more than twenty hours per week viewing television. Additional time is often spent watching movies, listening to music, watching music videos, playing video or computer games, or spending computer time on the Internet. This increase in time, spent by children using media for recreation has been shown to be a significant factor in childhood obesity due to associated physical inactivity. School achievement may also be affected as a result of decreased time spent on homework or school assignments. And parents often unintentionally contribute to this negative influence by using the television as a way to occupy their children's attention - as a babysitter of sorts. Educators have expressed concerns that the passive nature of media exposure undermines the ability of students to be active learners. On the contrary, there have been concerns that overstimulation due to excessive media use might be related to attention deficit disorder or hyperactivity. There has been no research to date that indicates a clear relationship. Increasingly, tobacco, alcohol, and illicit drugs have been glamorized in the media. Tobacco manufacturers spend 6 billion dollars per year and alcohol manufacturers spend 2 billion dollars per year in advertising that appeals to children. Movies and television programs often show the lead character or likeable characters using and enjoying tobacco and alcohol products. On the other hand, media also provide factual information and venues for discussion, typically through public service announcements or through public programming, informing children and warning them of the dangers of addictions to these substances. These educational messages, however, are on a much smaller scale and are much less appealing in their presentation.

Educational Implications and Recommendations

The AAP, the Office of the Surgeon General, and the APA have offered recommendations to address the issues of media influence on children. Included in these recommendations are suggestions for parents, educators, and health care professionals to advocate for a safer media environment for children through media literacy. They urge media producers to be more responsible in their portrayal of violence. They advocate for more useful and effective media ratings. A consistent recommendation in studies, however, is proactive parental involvement in children's media experiences. By monitoring what children hear and see, discussing issues that emerge, and sharing media time with their children,

parents can moderate the negative influences as well as increase the positive effects of media in the lives of their children.

Conclusion

Considering the profound role of the media on various facets of a child's development, the need of the hour is to find ways to promote the healthy use of the media in the community. This requires the solidarity efforts of physicians, educators, parents and policy makers. Physicians, in their role as health promoters, should become more active in sensitizing the media to its impact on youth. Programming decisions should be made with potential consequences to the viewing audience kept in mind. Physicians should make parents and schools "media literate," meaning they should understand the risks of exposure to violence and other inappropriate sexual content. The parents should also monitor what sort of programmes their children are viewing and should also limit the time spent watching the same. Children should be taught how to interpret what they see on television and in the movies, including the intent and content of commercials without blindly copying or imitating the same. In doing so, children may be increasingly able to discern which media messages are suitable. Research in ways to maximize the positive use of the media and minimize its harmful effects will help in its optimal use.

III - INFLUENCE OF MEDIA VIOLENCE ON CHILDREN'S AND ADOLESCENT'S BEHAVIOUR

Introduction

Radio, television (TV), movies, video games, cell phones, and computer networks have assumed central roles in our children's daily lives. The media has demonstrated potentially profound effects, both positive and negative, on children's cognitive, social, and behavioral development. Considering the increasing exposure of children to newer forms of media, we could review the current literature on the effects of media on child health in contrast with both in the Western countries and India. It is widely accepted that media has profound influence on child health, including violence, obesity, tobacco and alcohol use, and risky sexual behaviors. Simultaneously, media may have some positive effects on child health. We are now in much need of finding ways and means to optimize the role of media in our society, taking advantage of their positive attributes and minimizing their negative ones. In other words, it becomes the need of hour to sensitize in better ways how to reverse the negative impact of media and make it more positive.

Effect of Electronic Media on Children

One of the notable changes in our social environment in the 21st century has been the saturation of our culture and daily lives by the mass media. Unfortunately, the consequences of one particular common element of the electronic mass media have a particularly detrimental effect on children's well-being. It is now not just kids in bad neighborhoods or with "bad" friends who are likely to be exposed to bad things when they go out on the street. A "virtual" bad street is easily available to most youth now in their very homes.

Effect of Media on Children and Adolescents

Effects of the mass media have been found to be far-reaching and potentially harmful in influencing the health-related behaviors of children and adolescents, many of whom are not yet mature enough to distinguish fantasy from reality, particularly when it is presented as "real life." This is particularly important for very young children who develop mentally to think concretely and are unable to distinguish fantasy from reality. Furthermore, time spent with media decreases the amount of time available for pursuing other more healthy activities such as sports, physical activity, community service, cultural pursuits, and family time etc.

Media and Behavioral Problems

Children, who observe (in the media or in the environment around them) others exhibiting a specific aggressive behavior, e.g. hitting, are more likely to perform the same aggressive behavior immediately. Exposure to media violence has been positively related to subsequent aggressive behavior, ideas, arousal, and anger. Additionally, there is a significant negative effect of exposure to violence on subsequent helping behavior. Infrequent exposure is not likely to produce lasting consequences, but parents, particularly need to be urged to protect their children against the kinds of repeated exposures that excessive play with violent video games or immersion in violent TV programs is likely to produce. The studies from India (Ray, et al.) reported that children having exposure to violence through media had poorer school performance and its impact on their psychosocial adjustments was detrimental. Another study from India showed that vivid display of violence through media (9/11 terrorist attack) caused stress in adolescents. The study (Yama, et al.) has also described that some of the fears, tensions, bad dreams and tendencies towards delinquencies of children are a result of frequent and a regular exposure to murder-mystery movies, and stories filled with violence and torture that children view on TV and movies. Association between TV viewing and suicidal

behavior has also been reported from India. Both content exposure and screen time of media had independent detrimental associations with school performance in children and adolescents. The findings of a study (Hopf, et al.) showed that the more frequently children view horror and violent films during childhood, and the more frequently they play violent electronic games at the beginning of adolescence, the higher will these students' violence and delinquency be at the age of 14. Furthermore, the study (Primack, et al.) reveled that excessive TV viewing in adolescence is a risk factor for development of depression in young adulthood. TV viewing may play an exacerbating, if not causal, role in the development of attention-deficit/hyperactivity disorder (ADHD). Thus, a more careful examination of the relation between television viewing and children's cognitive abilities are needed.

Television Viewing and Social Isolation

As children spend more total time watching TV, they spend a significantly shorter amount of time with friends as compared to those who don't. Thus, viewing television causes poor peer relationships and thereby increases the risk for social isolation, anxiety disorder, agoraphobia, and antisocial behavior, including aggression and gang involvement. Some authors found that the more time children spent watching TV, the less time they spent with their families. While TV may isolate children, the reverse causal direction is also plausible – lonely children may turn to TV for entertainment and companionship. Children who are marginalized by their peers use TV to escape the stresses of their lives and meet their social needs. Conversely, children who are socially integrated spend less time watching TV. Thus, it can be argued that it is social isolation that motivates excessive media use. Overall, it is most likely that both effects occur - children who watch more TV become more socially isolated, which leads them to spend more time watching TV. While TV viewing is often perceived as an isolating activity, it frequently occurs in the company of friends. Because socializing builds interpersonal skills, TV viewing with friends may provide a venue for these skills to develop. It is important to consider content whenever investigating the relationships between media use and behaviors. Violent television viewing may influence younger children to be more anti-social; resulting in their becoming socially isolated which, in turn, attracts them to more violent media. To optimize children's social development and long term mental health, parents, teachers, and pediatricians should discourage the viewing of violent television programs.

Media and Childhood Obesity

The mechanism of effect of TV exposure on overweight risk is undoubtedly multifactorial. It appears to operate independently from reduced physical activity. Excessive TV exposure may instead operate

through the extensive advertising messages for unhealthy foods targeted at very young children or from a tendency of children to snack while watching TV. A randomized controlled trial found that increasing screen time resulted in reduced energy expenditure and increased energy intake. There is association between exposure to advertisements and children's requests for specific foods, food purchasing, and food consumption. Indeed, studies show that TV viewing is inversely associated with intake of fruits and vegetables, which receive little air time despite their potential to promote health in various ways and protect against weight gain. Reducing television viewing and computer use may have an important role in preventing obesity and in lowering BMI in young children, and these changes may be related more to changes in energy intake than to changes in physical activity. In the absence of regulations restricting food advertising aimed at children, reduction in television viewing is a promising approach to reducing excess energy intake.

Media and Eating Disorders

The print media promotes an unrealistically thin body ideal that, in turn, is at least partially responsible for promoting eating disorders. One prospective study of thin ideal-promoting media use in young adolescent girls found that decreases in magazine reading over 16 months was associated with decrease in eating disordered symptoms. Van den Berg, et al. found that frequent reading of magazine articles about dieting/weight loss strongly predicted unhealthy weight control behaviors in adolescent girls, but not boys, 5 years later. (Field, et al.) observed that the majority of the preadolescent and adolescent girls in their school- based study were unhappy with their body weight and shape. This discontentment was strongly related to the frequency of reading fashion magazines. The frequency of reading fashion magazines was positively associated with the prevalence of having dieted and exercised to lose weight and to improve body shape. The results suggest that the print media aimed at young girls could serve a public health role by refraining from relying on models that are severely underweight and printing more articles on the benefits of physical activity.

Media and Smoking

Research has demonstrated a strong association between exposure to certain mass media messages and smoking in adolescents. For instance, more than half of adolescent smoking initiation has been linked to watching smoking in movies. Acknowledging the effects of mass media on attitudes and behavior, media literacy may teach youth to understand, analyze, and evaluate advertising and other mass media messages, enabling them to actively process media messages rather than passively remaining targets of mass media. India faced a lot of controversy with the ban on on-screen smoking in films and television

programs. Initially, ban was imposed from January 1, 2006 and then on January 23, 2009, Delhi High Court lifted the smoking ban in films and TV. There is a need for evidence based guidelines for such issues.

Media and Alcohol Drinking

It has been shown that exposure to alcohol advertising and TV programming is associated with positive beliefs about alcohol consumption. Although such cross-sectional studies do not prove causation (only association), it is of interest that in a 1990 study, 56% of students in grades 5 to 12 said that alcohol advertising encourages them to drink. Findings showed that girls who had watched more hours of TV at ages 13 and 15 drank more wine and spirits at age 18 than those who had watched fewer hours of TV. One study suggested independent associations between marijuana and alcohol use, and media exposure. In particular, music exposure is associated with marijuana use while movie exposure is related to alcohol use.

Media and Risk of Sexual Initiation

Initiation of sexual intercourse by younger adolescents is associated with risky sexual behaviors and increased risk of multiple partners, unwanted pregnancy, sexually transmitted infections, and pelvic inflammatory disease. In the US, approximately 47% of high school students have had sexual intercourse. One potential but largely unexplored factor that may contribute to sexual activity among adolescents is exposure to sexual content in the mass media. In India, there are reports of messaging of sexual contents through mobiles among school- going adolescents. The TV programs watched by adolescents contains high levels of sexual content, include little information about sexual risks, and are an important source of information about sex. Almost 75% of 15 to 17 year olds believe that sexual content on TV influences the behavior of their peers 'somewhat' or 'a lot'. (Collins, et al.) reported that the amount of sexual content viewed, but not hours of television watched, was a significant one year risk factor for sexual initiation. (Ashby, et al.) examined the relationships between amount of television viewing and parental regulation of content on sexual initiation and observed that watching television 2 or more hours per day and lack of parental regulation of television programming were each associated with increased risk of initiating sexual intercourse within a year. (Peterson, et al.) found that co-viewing television and discussing television with parents were related to decrease sexual initiation in certain adolescents.

What can be done to pacify Impact of Media on Children and Adolescents?

Given the enormous influence that media in all forms exerts on the lives of children, it is astonishing how little parents, researchers, and policymakers have been prompted to action. First, the media needs to be recognized as a major public health issue rather than as a series of commercial endeavors in need of regulation, as they are among the most profound influences on children. This intersects with many other issues that are critically important to child health, including violence, obesity, tobacco and alcohol use, and risky sexual behaviors. Television and other media must be viewed as more than sources of evil or mere idle pleasures; their potential to enrich the lives of our children are, in fact, enormous, and that potential needs to be explored and actualized. Recently, (Moreno, et al.) reported that a brief e-mail intervention using social networking sites shows promise in reducing sexual references in the online profiles of at-risk adolescents. There is a need to decide, how to cover a tragedy in a way that will communicate the necessary information and minimize the detrimental effects on the developing brains. Thus, we need to find ways to optimize the role of media in our society, taking advantage of their positive attributes and minimizing their negative ones. Media should deliver positive messages e.g. program to address childhood obesity, to encourage parents to talk to their pre-adolescent and adolescent children "early and often" about delaying the onset of sexual activity, anti - tobacco message etc. Indian literature also states that with media's cooperation, it is possible to take important health messages to the community and to screen out images that legitimize practices harmful to child health. Finally, a better evidence base is needed. In India, there are limited studies on effect of media, especially newer media items, on child health and about interventions to improve role of media in child health. The American Academy of Pediatrics (AAP) has recommended guidelines, which has been revised recently, for use of media in children:

1. Not allowing the bedroom to be a media center with TV, video games, and Internet access

2. Limiting media time to 1 to 2 hours of quality programming

3. Discouraging TV viewing for children younger than 2 years

4. Viewing and discussing content together

5. Turning off the TV when no one is watching and during meals, and

6. Being a good media role model.

Pediatricians must become cognizant of the pervasive influence that the wide and expanding variety of entertainment media has on the physical and mental health of children and adolescents. The AAP also makes recommendations to the entertainment industry to avoid violent content. Pediatricians should advocate for a simplified, universal, content-based media-rating system to help parents guide their

children to make healthy media choices. Just as it is important that parents know the ingredients in food they may feed to their children, they should be fully informed about the content of the media their children may use. No such guidelines exist in India. The Indian Academy of Pediatrics should take the lead in formulating and implementing the guidelines to help parents and children to develop healthy media using habits.

Conclusion

The media has a disturbing potential to negatively affect many aspects of children's healthy development, including weight status, sexual initiation, aggressive feelings and beliefs, consumerism and social isolation. Media also has potential for positive effects on child health. We need to find ways to optimize the role of media in our society, taking advantage of their positive attributes and minimizing their negative ones. The ultimate goal is to reach youth with positive messaging. Embracing media rather than trying to counteract it promises to be an effective tool in shaping the behavior of children and adolescents.

IV - MEDIA ON RACIAL AND GENDER STEREOTYPING

Introduction

Media's role in a democracy is to bring mass awareness on political, social and economic issues. However, media channels tend to give preference to political and economic news items over social issues, especially the issue of women. This has led to the issues on women take a backseat Media can play a significant role in sensitizing the society about gender issues. But, before that, the media itself needs to be sensitized in covering women issues. The distribution of power between the two sexes – both physical and economic- is unequal, leading to discrimination against women. Media exerts immense influential power on the masses; this cannot be undermined. Portrayal of women as equal has not been given the priority it deserves by the media. Women issues should be dealt in a sensitive, responsible way by the media. Declining sex ratio, rape, workplace sexual harassment, dowry-related crimes domestic violence molestation, eve-teasing and honour killings are some of the issues that the media needs to sensitize the society about. Total women empowerment can come about only if it includes political, social, cultural and other dimensions of human life. This happens only if development includes women participation and control over resources of power. The electronic media and particularly TV has become the most influential medium of mass communication. It is a disturbing trend when media negatively portrays women as "the weaker sex" who should remain subservient. Most disturbing, however, is the disproportionate coverage of sensationalized violence. Sexual brutalization of women has remained a highly marketable commodity. "Commodification" of women

as "sexual objects" in advertisements should be stopped. Media can either be an accomplice to gender based discrimination or it can challenge the gender bias by providing balanced coverage.

Media in India

Media is the fourth pillar of democracy as immense power to act as the watchdog of the society. It is the mirror of society and reflects of happenings in the society. It can influence the masses and the convergence of the media has further enhanced its potential as a tool of creating public opinions and values. Television which has become the most important medium of mass communication in India pays an important role in creating public opinion. Mass awareness by using the media on issues of political, social and economic importance holds the foundation of any democracy. In fact, communication has developed as a discipline wherein media play its role in the development of the nation. It is mostly observed that news on political and economic issues dominate over social issues. Social issues are not given the kind of importance or platform of communication that it deserves. Issues of violence against women and other discrimination against women which basically stems from inequality - both in terms physical and economic power -between men and women is rarely given the importance it deserves.

The Gender Stereotype

By 'Gender' it can mean the roles and responsibilities that have been constructed by the society, in a given culture or location. These roles have political, cultural environmental, economic, social, and religious factors influencing them. Custom, law, class, ethnicity, and individual or institutional bias also influence 'gender stereotype'. Within the above framework, Gender attitudes and behaviours can be learned and can also be changed.

According to Gender stereotypical perceptions, women are supposed to be dependent, weak, incompetent, emotional, fearful, flexible, passive, modest, soft-spoken, gentle, care takers while men are powerful, competent, important, logical, decision-makers, aggressive, focused, strong and assertive particularly in the context of India.

In India where a patriarchal society flourishes, 'son preference' is an age-old gender bias, in which the male of the family bears the responsibility of 'carrying forward' the family's name. He is supposed to support his parents in old age and also perform their last rites when they die. The fact that daughters are generally regarded as 'somebody else's wealth' and the giving away as dowry to the groom ensure that daughters are often seen as an 'economic liability'.

A United Nations statistics shows Gender inequality very blatantly: Women perform two-third of the world's work but earn only one-tenth of the world's income. They comprise two-third of the world's illiterates and own less than one-hundredth of the world's property. A gross discrimination stands out.

Gender Differences seen in Some Situations

1. **Social situations:** The social roles demand that the head of the family is always a male. He is also the main bread-winner while the woman is usually seen as a house-maker, a nurturer and care-giver.

2. **Political situations:** Power sharing between men and women is biased. Men are seen mostly at higher level of political field - the national, while women are expected to be at the local level.

3. **Educational situations:** There is a definite gender bias in educational opportunities and expectations. It is the boy in the family who gets the resources for higher education. Girls are usually expected to go to less-challenging academic fields.

4. **Economic situations:** There is a wide gap between access to lucrative careers and finance between men and women. Credit and loans; land ownership policies etc. are more biased towards men.

Women and Media

1. **Representation in the Media:** It has long been recognized by Feminists all over the world that there is a significant and long lasting influence of the media in either challenging or perpetrating existing constructions of gender. In a broad-ranging analysis, Feminist Media Studies, Liesbet van Zoonen explores the ways, in which feminist theory for the fuller understanding of the multiple roles of the media in gender construction in contemporary societies. The book analyses media representations through content analysis and semiotics. Media as a tool for gender sensitization can only be utilized when the full influence of media on gender construction is understood.

2. **The Fourth Global Media Monitoring Project (GMMP 2009 - 2010):** Which is the most extensive research on gender bias and subsequent initiatives in the news media, shows women representation in the media. The GMMP, after gathering insights and information through media monitoring aims to promote a balanced gender representation in and through the news media. It involves voluntary participation of women from grassroots communities to university students and researchers to media practitioners. It was astonishing, as the report shows that less

than one fourth (24 percent) of the people made visible or heard or read about on Television and print news worldwide is female. Women were represented only in four percent of 'politics and government' stories and just one percent in 'economy' stories.

3.**Women professionals in the Media:** The GMMP report shows women's participation and contribution as in the media profession. Although in the print media the percentage of stories by female reporters has increased since 2005 (to 35 percent) and news television (to 44 percent), it has decreased in radio newscasts (27 percent). Men reporters however continue to surpass female reporters while reporting in all media forms. Men overwhelmingly continue to report 'hard news', like politics and economics while women are restricted mostly to the 'soft' areas of arts, entertainment and lifestyle coverage. Women reporters tend to cover more female-oriented news subjects (26%) while male reporters have only 19% female oriented stories. Female reporters challenge gender stereotypes twice more than male reporters (eleven per cent by the former compared to six per cent by the latter). Only twelve per cent of news stories were found to highlight issues of gender equality or inequality.

4.**Media Content and Gender Identity:** Deodrin Correa. (2011) in 'The Construction of gender identity in India through television advertisements: A semiotic analysis', investigates how television advertisements in India construct gender identity. Advertisements that appeared during popular Indian television serials were obtained from a local video rental outlet and recorded on a weekly basis for a period of six months. A representative sample was then screened and used for analysis. This study employed semiotics as a method for analysing the ideological messages of Indian television advertisements. Interestingly, Correa found out that all the advertisements involving domesticity emphasised the traditional role of women - as a wife and mother. Through the ideologically constructed messages of the advertisements, the domestic roles of women were made to appear normal while highlighting their traditional bearings. This study is one of the first major studies of the nexus between the media, and the construction of gender-identity in India today. Therefore, this study will be repeatedly referred by the policy makers as well as educators for developing and implementing a media literacy programs which aim at developing students' critical thinking and their capacity to evaluate the role and power of the media in lives.

5. **Disproportionate Media Coverage of Women Issues:** Media's agenda setting role ensures that we get to see, read or hear what the media deems important. Very often, lack of

appropriate media coverage or under-coverage implies that the issue is unimportant. If a story is not reported or not significantly reported, public awareness is significantly lessened. The consequence of media ignorance and bias against women is a global pandemic and is horrific. Disproportionate coverage of sensationalized violence is perhaps the most disturbing. Rape stories, perhaps it focuses on one individual, gets far more coverage than domestic violence stories. Also, a women becomes 'a marketable victim item' if she happens to be attractive. Sexual brutalization of women is a highly marketable business and a profitable story for the news media. For voyeuristic reasons that soar up the TRPs, the Indian media, be it press or the broadcasters, usually chooses to highlight the rape and murder rather than to report about the success of women in the local elections. The actual problems plaguing the real India, its culture, traditions, faiths and facets of 'development communication' usually take a back seat. When compared to men, the overall media coverage of women is much less. Men have more opportunities to present their opinions and are shown in a wide spectrum of professions. Women, however, are either under-represented or totally excluded. Interviews of women are limited to certain accepted professions such as educationists or doctors. Women who have achieved success in a 'male domain' go to great pains to point out her 'feminism'.

6. **Media coverage of women and the Concept of 'Symbolic Annihilation':** The concept of 'symbolic annihilation' was introduced by George Gerbner (1972). He first briefly referenced the concept without elaboration as: "representation in the fictional world signifies social existence; absence means symbolic annihilation." Gerbner used this concept to reveal how representations (including omissions), in the media cultivate dominant assumptions about how the world works and, as a result, where power resides.

Indian media gives low priority to the subject of portraying women as equals in the society. The message and content of television programmes and commercial films is loud and clear as one flips through the pages of popular magazines and newspapers - The Indian media likes nothing better than to see their womenfolk as home-makers and a compulsive buyer who buys the latest dress, shoes, accessories, cosmetics, mostly at the expense of her husband's money. Although it purports to show them as independent characters, the media actually portrays them as consumers rather than as modern, liberated women. Television, which is a pervasive and powerful medium of communication in India, the portrayal of Indian women is superficial and is rarely linked with their real concerns. Women have to consistently make adjustments at home, carry the entire burden of household chore and provide constant care as wives and mothers.

How women bias is formed

1. **The Cultivation Theory:** Cultivation theory was an approach developed by Professor George Gerbner. He began a research project in the mid-1960s called the 'Cultural Indicators' in which he studied and how watching television influences viewers' ideas and their perception of how the world is or ought to be. Cultivation theorists argue that television has long-term effects which are small, gradual, indirect but cumulative and significant. According to Gerbner, mass media cultivate attitudes and values which are already present in a culture. These values are propagated by the media, binding members of a culture. Television primarily maintains, stabilizes and reinforces attitudes, conventional beliefs and behaviours already present in a society, rather than later, threaten or weaken. A 'resonance' or a 'double dose' effect boosts cultivation of values and attitudes. If the viewer's everyday life experiences are in congruence with those depicted in television, he experiences a resonance effect which further strengthens his beliefs and attitude.

2. **Distorted portrayals and their impact:** Distorted images of women by the media have a negative effect on the society and its development: The perpetuation of inequalities at home: According to studies and statistics, women and girls are more likely to be undernourished and uncared for than men and boys.

3. **Creating a distorted self-image:** Media influences the social image and the self-image of women. Media affects the choices they make, what they eat and what they wear. It influences their behavioral attitude, their learning process, and ultimately what they become. Media has clearly discouraged the emergence of a new confident, assertive woman. Such differential media treatment increases their isolation, disempowers them and weakens them. They remain unheard, unrepresented and 'incommunicable.'

4. **Reinforcing biases in development plans:** In its conservative way, Media ignores economic participation and contribution made by women, especially rural women. Instead of challenging the obscure view that women are inferior, subservient, unimportant, media has reinforced it. The man is always the opinionated, active doer. Women's needs and concerns are either not articulated publicly or just plain neglected. Public thinking, discourse or debates on the real concerns of women are not encouraged. Development plans take a back seat mainly because the needs and concerns about women issues remain unheard and unarticulated.

5.The importance of media literacy: The greatest fear in today's world of information explosion is that we are imbibing all the gender biases subconsciously and reinforcing existing inequality without even being aware of it. The way and the lengths to which we interact with the media no doubt that it affects us in knowing and unknowing ways. This affect is dangerous because very often the many media images and messages play on our subconscious mind. That amounts to passive retention and processing of information.

6.Media as a tool: Some examples of media's role as 'perpetrator' and 'challenger' of gender bias.

The following examples will highlight the two sides of the same coin:

1. Newsletters in UP that began as development efforts to help women communicate among themselves have evolved as a forum for addressing problems that are relevant to whole communities instead. Newsletter Khabar Lehariya has even won the prestigious Chameli Devi Jain award.

2. In 1981, Ashwini Sarin, who was then with the Indian Express newspaper broke the law to expose how poor women were being trafficked by actually going ahead and "purchasing" a woman named Kamala. It was later made into a feature film which received national and international awards.

3. In 2007, a Delhi school teacher (Uma Khurana) was duped by a television journalist Prakash Singh who conducted a sting operation on her using a hidden camera and claimed that she was luring her students into commercial sex work (Hindustan Times, 31 August 2007; Daily News and Analysis, 9 September, 2007). She had to spend time behind bars and lost her job. It was later found that the case was false and that the journalist had sought to malign her reputation.

4. The way in which the press covered the still unresolved ArushiTalwar murder case of 2008 has been criticized from several quarters. Not only did it show gender insensitivity, but also put her parents through a 'trial by media.

5. The media has played a positive role in the criminal cases related to Jessica Lall and PriyadarshiniMattoo.

6. In July 2007, The Information and Broadcast Ministry banned advertisement of two underwear brands on the ground that these were 'indecent, vulgar, suggestive and demeaned women.' The Amul macho advertisement showed a newly-wed woman suggestively washing her husband's underwear.

7. More recently in the Nirbhaya gang rape case, some news channel went overboard by calling her a Jinda Lash (living corpse) even before she had died. It was a case of gender insensitivity. Even if she had survived, would she have been able to live through the stigma?

8. Tucked away in Pastapur in Medak district of Andhra Pradesh is Sangham Radio, a unique community radio experiment run by two Dalit women since 2008. These days, when the villagers tune

in to this radio station, they hear their voices, concerns, songs, and solutions to everyday problems. This new-found thrill of liberation, however, is rooted in nothing less than a decade of passion, pursuit, and perseverance.

Educational Implications

It is necessary that public should be motivated and sensitized to the issue of criminalization, politicization, and commercialization of women vis-à-vis their projection in the media in a healthy manner. Print and broadcast media reinforce the stereotype and traditional roles of women in society. Women need to be portrayed in 'empowered' roles in their career, leadership so that the status and position of women in society is truly represents Indian culture and ethos.

'Sexual objectification' and constant glorifying of stereotypical roles of motherhood and wifehood shackle women to the fetters of these prescribed roles. They just cannot break free. The sex equality and equal participation that our Constitution guarantees remain questionable because of such conservative depictions. A sweeping change in the social outlook is required. The cumulative and unconscious impact of media messages encourages gender discrimination. The mass media possesses the power to influence and can help in removing such prejudice.

Conclusion

For India is well known for its "Unity in Diversity" consisting different kinds of culture, language, religion and creed, majority of women are still subjected to discrimination and harassments in all spheres, though there is an exposure of media that women are experiencing freedom. In spite, they proved themselves as having potential to carry out any tasks and ready to discharge the duties assigned to them even at risky, they have been shackled by various taboos in terms of race, gender, religion, culture and creed etc. In this way, this chapter deals with the media (including mass media and social media) in gender bias in brief.

V - REGULATING HEALTHY MEDIA USE

Children and Healthy Media Use - Guidelines for Parents

The following health and safety tips are from the American Academy of Pediatrics (AAP). Feel free to excerpt these tips or use them in their entirety in any print or broadcast story, with acknowledgment of source. In a world, where children are "growing up digital," it's important to help them learn healthy concepts of digital use and citizenship. Parents play an important role in teaching these skills. Here are

a few tips from the AAP to help parents manage the digital landscape they're exploring with their children.

Treat media as you would any other environment in your child's life: The same parenting guidelines apply in both real and virtual environments. Set limits, kids need and expect them. Know your children's friends, both online and off. Know what platforms, software, and apps your children are using, where they are going on the web, and what they are doing online.

Set limits and encourage playtime: Tech use, like all other activities, should have reasonable limits. Unstructured and offline play stimulates creativity. Make unplugged playtime a daily priority, especially for very young children. And don't forget to join your children in unplugged play whenever you're able.

Families who play together, learn together: Family participation is also great for media activities - it encourages social interactions, bonding, and learning. Play a video game with your kids. It's a good way to demonstrate good sportsmanship and gaming etiquette. And, you can introduce and share your own life experiences and perspectives - and guidance - as you play the game.

Be a good role model: Teach and model kindness and good manners online. And, because children are great mimics, limit your own media use. In fact, you'll be more available for and connected with your children if you're interacting, hugging and playing with them rather than simply staring at a screen.

Know the value of face-to-face communication: Very young children learn best through two-way communication. Engaging in back-and-forth "talk time" is critical for language development. Conversations can be face-to-face or, if necessary, by video chat, with a traveling parent or faraway grandparent. Research has shown that it's that "back-and-forth conversation" that improves language skills - much more so than "passive" listening or one-way interaction with a screen.

Create tech free zones: Keep family mealtimes and other family and social gatherings tech free. Recharge devices overnight - outside your child's bedroom to help children avoid the temptation to use them when they should be sleeping. These changes encourage more family time, healthier eating habits, and better sleep, all critical for children's wellness.

Don't use technology as an emotional pacifier: Media can be very effective in keeping kids calm and quiet, but it should not be the only way they learn to calm down. Children need to be taught how to identify and handle strong emotions, come up with activities to manage boredom, or calm down through breathing, talking about ways to solve the problem, and finding other strategies for channeling emotions.

Apps for kids and do your homework: More than 80,000 apps are labeled as educational, but little research has demonstrated their actual quality. Products pitched as "interactive" should require more than "pushing and swiping."

It's OK for your teen to be online: Online relationships are part of typical adolescent development. Social media can support teens as they explore and discover more about themselves and their place in the grownup world. Just be sure your teen is behaving appropriately in both the real and online worlds. Many teens need to be reminded that a platform's privacy settings do not make things actually "private" and that images, thoughts, and behaviors teens share online will instantly become a part of their digital footprint indefinitely. Keep lines of communication open and let them know you're there if they have questions or concerns.

Remember that Kids will be kids: Kids will make mistakes using media. Try to handle errors with empathy and turn a mistake into a teachable moment. But some indiscretions, such as sexting, bullying, or posting self-harm images, may be a red flag that hints at trouble ahead. Parents should take a closer look at your child's behaviors and, if needed, enlist supportive professional help, including from your pediatrician.

Media and digital devices are an integral part of our world today. The benefits of these devices, if used moderately and appropriately, can be great. But, research has shown that face-to-face time with family, friends, and teachers, plays a pivotal and even more important role in promoting children's learning and healthy development. Keep the face-to-face up front, and don't let it get lost behind a stream of media and tech.

Conclusion:

In this way, this chapter deals with the media and child development, impact of media on children's and adolescent's experience, behavoiur and development, media on racial and gender stereotyping and regulating healthy media use in detail.

Questions for Discussion and Reflection:

1. Discuss the development of media in Pre and Post-Independent India.
2. Examine the impact of media in violence on children and adolescents in India.
3. Examine the role of media on racial and gender stereotyping.
4. Write a report on the regulatory steps and measurements to be taken by Govt. on healthy media use.

UNIT X: URBANISATION AND ECONOMIC CHANGE ON CHILD DEVELOPMENT

Objectives:

After completion of the unit, the learner will be able to:

1. grasp the meanings, definitions and concepts of urbanization, economic change and child development

2. realize the impact of migration of family on child development

3. analyse the factors of environmental pollution and its effects on child development

4. get knowledge about the consequences of libralisation, privatization and globalization

I - URBANISATION ON CHILD DEVELOPMENT

Introduction

Any consideration of the impact of urbanism must take into account many variables. The behaviour and values of persons who may be affected by urban influence the geographical location of the persons, whether residing in cities or the hinterlands: the effects on the political, economic and occupational organization of the cities or the hinterlands, the health, education and general welfare of individuals involved. It must also be kept in mind that the social and cultural systems of societies differ and that these differences invariably have a bearing on the interaction between a city and its hinterland.

Determinants of Urbanization

The impact of urbanization can be seen as societies become increasingly urbanized, social emphasis is placed on achievement rather than on ascription. Urbanization has brought about many changes in various spheres of urban life, namely physical, social, psychological and cultural aspects. These aspects are elaborated as follow,

I - Physical

a. Growth of cities

b. Homelessness

c. Suburbanization

II - Social

a. Family

b. Crimes

c. Unemployment

d. Poverty

e. Prostitution

f. Gambling

g. Beggary

h. Conflicts

III - Psychological

a. Alcoholism

b. Stresses

IV - Cultural

a. Impersonality of relations

b. Mechanical way of life

c. Urban outlook

V - Economical

a. Industrialization

b. Migration

VI - Political

VII - Environmental.

II - MIGRATION OF FAMILY

Introduction

Geographical mobility or migration of people within a country is a demographic response to disparities in the regional levels of socioeconomic development. Regions of higher economic development with higher incomes and wages tend to attract people and particularly economically active population from regions with relatively lower levels of development and consequently lower rates of wages and incomes. Migration constitutes the very foundation of the process of urbanization and is recognized as the chief mechanism by which urban areas continue to grow.

Meaning and Definition of Migration

Significance of Migration

Migration has led to a massive movement of people from areas of low economic opportunities, concentrated in rural areas and in smaller sized urban settlements to the centres of high economic opportunities, which are hyper-concentrated in the metropolitan cities with population exceeding 1 million. Sometimes, this uncontrolled influx of migrants into the metropolitan cities is fraught with disastrous consequences. It has resulted in a number of jobless or underemployed people, which is one reason why a number of people are living in slums or as squatter settlements or on pavements as houseless population and decline in providing the basic amenities like water supply, sanitation and health.

Consequences of Migration

The consequences of migration can be seen in the rural areas also. The impact is more if one male or female member of the family has migrated. These working males or females send money to their families living in rural areas and also visit them often. This results not only in the flow of wealth from urban centres to rural areas, but also the flow of urban culture to rural areas and vice versa. If a person has migrated with his/her nuclear family to the city, but the remaining members of his/her family are still residing in rural areas, then the migrated family may not visit their rural relatives so often, but the impact of urbanization is felt on such facilities also. In such cases, usually money is sent to the rural relatives once in a month or when it is needed. Along with money, the urban way of living is also transferred to the rural relatives whenever the family visits the rural centres. Therefore, migration will not only bring about changes in urban centres, but will also bring about changes in rural areas.

Factors of Migration

1. Political:

In urban areas, one can find many new immigrants. These new comers do not have the same social connections as the original inhabitants, so they increasingly resort to developing informal social networks for their survival. In the process, some rural traditional forms of organizations are formed. Various forces try to exploit these organizations for personal or political gain. Once the members of the organizations start understanding their importance, they start exercising authority collectively. In course of time, these organizations may take the form of political parties. Sometimes, the urban people may only influence the existing political party's future in a democratic country.

2. Environment

Today's urban environment is not a natural environment. It is an artificial environment created by man. The high density of population and rapid industrialization have polluted the urban environment to a great extent. The problem of environmental pollution has become a serious threat to the urban environment. The unhygienic conditions in which majority of the urban people are living because of the high cost of installing pollution control devices are expected to bring the paradoxical trap of poverty and pollution in the long run.

III - ENVIRONMENTAL EFFECTS ON CHILD DEVELOPMENT

Introduction

Overall child mortality declined significantly in the 1990s, but environmental hazards still kill at least 3 million children under age 5 every year. Such young children make up roughly 10 percent of the world's population, but comprise more than 40 percent of the population suffering from health problems related to the environment. Children worldwide require special protection from longstanding risks such as smoke from traditional fuels and from emerging risks such as exposure to an increasing number of hazardous chemicals. Although new regulatory standards and greater awareness of children's vulnerability to such hazards have improved children's situation in a number of more developed countries, many children, especially in less developed countries, continue to be exposed to toxins. Their vulnerability is exacerbated by the lack of protective policies, medical and public health interventions. Short-term curative responses can save some lives, but addressing underlying risk factors is key for long-term change. Efforts to measure children's environmental health risks, develop policies and programs to mitigate such exposures worldwide, and strengthen efforts to address the problem at all levels are needed. This policy brief, part of PRB's **Emerging Policy Issues in Population, Health and Environment** series,

explores children's special vulnerability, outlines the risks and the conditions that increase such risks, and highlights what is being done to address the problem.

Children's Vulnerability

Due to their size, physiology and behavior, children are more vulnerable than adults to environmental hazards. Children are more heavily exposed to toxins in proportion to their body weight, and have more years of life ahead of them in which they may suffer long-term effects from early exposure. Perinatal conditions, which can be influenced by environmental conditions, cause 20 percent of deaths worldwide in children under age 5. Furthermore, fetal exposure to chemicals such as lead increases a child's chances of having brain damage or developmental problems. Children at all ages, not just the very young, are at greater risk than adults. Children under age of 5 breathe more air, drink more water and eat more food per unit of body weight than adults do, so they may experience higher rates of exposure to pathogens and pollutants. Typical childhood behaviours, such as crawling and putting objects in the mouth, can also lead to increased risks. Children between ages 5 and 18 may face higher risks of injuries, including exposure to hazardous chemicals, due to their growing participation in household chores and work outside of the home. Many school-age children attend schools without sanitation facilities, making them more likely to contract various diseases and less likely to go to school. According to UNICEF, about 10 percent of school-age African girls either do not attend school during menstruation or drop out at puberty because of the lack of sanitary facilities.

Environmental Risks to Children's Health

Indoor Air Pollution

Half of the world's households use biomass fuels, including wood, animal dung, or crop residues, that produce particularly, carbon monoxide, and other indoor pollutants. The World Health Organization (WHO) has determined that as many as 1 billion people, mostly women and children, are regularly exposed to levels of indoor air pollution that are up to 100 times those considered acceptable. Young children, who spend more time indoors, are more exposed to the noxious byproducts of cooking and heating. In India, where 80 percent of households use biomass fuel, estimates show that nearly 500,000 women and children under age 5 die every year from indoor pollution, largely from acute respiratory infections (ARIs). The figure for other less developed countries is similar.

Exposure to indoor pollutants can cause or aggravate ARIs, including upper respiratory infections such as colds and sore throats, and lower respiratory infections such as pneumonia. Acute lower respiratory infections are one of the primary causes of child mortality in developing countries, and lead to 2.2 million deaths in children under age 5 in 2001. ARIs can also increase mortality from measles, malaria, and other diseases. Other factors that can worsen ARIs include low birth weight, poor nutrition, inadequate housing and poor hygiene conditions, overcrowding, and reduced access to health care.

The strongest risk factors for development of asthma appear to be exposure to indoor allergens and a family history of asthma or allergies. Exposure to environmental tobacco smoke (ETS, or secondhand smoke), chemical irritants, air pollutants, and cold weather are also risk factors for the disease, as are low birth weight, respiratory infections, and physical exercise. Children whose mothers smoke, have 70 percent more respiratory problems and middle-ear infections than children of nonsmokers. Studies show that asthmatic children's condition is significantly likely to be worsened by ETS.

Outdoor Air Pollution

Data suggest that over 60 percent of the diseases associated with respiratory infections are linked to exposure to air pollution. Outdoor pollutants such as sulfur dioxide, ozone, nitrogen oxide, carbon monoxide, and volatile organic compounds come mainly from motor vehicle exhaust, power plant emissions, open burning of solid waste, and construction and related activities. According to one report, children in cities with populations greater than 10 million are exposed to levels of air pollution two times to eight times higher than the level WHO considers acceptable.

Unsafe Drinking Water and Poor Sanitation

Contaminated water and inadequate sanitation cause a range of diseases, many of which are life-threatening. The most deadly are diarrheal diseases, 80 percent to 90 percent of which result from environmental factors. In 2001, diarrheal infections caused nearly 2 million deaths in children under age 5, primarily due to dehydration; many more children suffer from nonfatal diarrhea that leaves them underweight, physically stunted, vulnerable to disease, and drained of energy. Poor sanitation conditions and inadequate personal, household, and community hygiene are responsible for most diarrheal infections.

Despite significant investments in improving water supplies and sanitation over the last 20 years, about 18 percent of the world's population still lacks access to safe drinking water, and nearly 40 percent have no access to sanitation. At present, people in rural areas are the most affected,

although continual urbanization means that increasing numbers of people live in densely populated cities, where they face shortages of potable water supplies and sanitation systems, as well as growing pollution. More than 1 billion people, mostly in Africa, Asia, and Latin America, currently live in slums or as squatters.

Infectious Disease Vectors

Vector-borne diseases, such as malaria, represent an international public health problem, particularly in tropical areas of Africa, Asia, and Latin America. Approximately 1 million children under age 5 in sub-Saharan Africa die of malaria each year; malaria causes about 25 percent of all deaths among children in the region, especially among children living in remote rural areas with poor access to health services. Malaria also contributes to low birth weight, one of the leading risk factors for infant mortality, because pregnant women are more susceptible to both malaria and anemia. The prevalence of malaria is strongly related to environmental factors such as irrigation and other agricultural practices, land clearing, and changing demographic patterns. Higher temperatures, heavier rainfall, and other changes in climate, as well as deforestation, increase the risk of malaria and related epidemics.

Exposure to Hazardous Chemicals

As countries pursue economic development, the increased risk of exposure to chemical hazards may worsen other risks to children's health, such as unsafe water and poor hygiene. Industrialization and modernized agriculture have many benefits, but they have often been accompanied by problems, such as exposure to pesticides, that disproportionately affect children. Other potential toxins include lead discharged from battery-recycling operations; mercury in fish; and nitrates, arsenic, and fluoride in drinking water.

In many countries, children are exposed to toxic chemicals in the workplace. According to the International Labour Organization (ILO), more than 352 million children ages 5 to 17 engage in "economic activity," an internationally accepted standard that includes unpaid and illegal work and work in the informal sector. Of those children, about 50 percent work in hazardous occupations or situations, defined as those "likely to have adverse effects on the health, safety, or moral development of children." The ILO has classified mining, construction, manufacturing, retail, personal service, transportation, and agriculture, as well as any work where a child works more than 43 hours per week, as being hazardous. Hazardous labour is often informal. Some

children scavenge rubbish dumps, where they may be exposed to discarded batteries, medical waste, and pesticides.

1.**Lead:** Exposure to lead remains the main environmental problem for young children in developing countries, according to Environmental Defense and the Alliance to End Childhood Lead Poisoning. Even small amounts of lead can be dangerous, especially for the development of the brain. Studies have shown that IQ falls by up to six points for every 10 micrograms of lead per deciliter of blood (μg/dl). Lead exposure can also cause anemia, kidney disease, hearing damage, and impaired fertility; at high levels, it can result in coma or death. Leaded gasoline accounts for 80 percent to 90 percent of airborne lead pollution in some large cities, elevating the blood lead levels of people living in the area. Lead can contaminate soil, air, drinking water, and food, thereby posing a significant threat to young children, whose digestive systems absorb lead at significantly higher rates than do those of adults.

2.**Pesticides:** Pesticides, including some that have been banned in more developed countries, are widely used in less developed countries. People who come into contact with pesticides that are being applied to crops or who consume food that is carrying pesticide residues can become ill. Pesticides can also seep into the ground and contaminate drinking water. Symptoms of pesticide poisoning in children resemble those in adults, and include eye, skin, and respiratory irritations and higher rates of long-term health problems such as cancer. But children are much more susceptible to these hazards, since they eat and drink more per unit of body weight, making them likely to absorb higher amounts of pesticides from food and water.

Taking Action against Risks

Environmental health risks to children are increasingly being recognized as an international problem. Although progress has been made in reducing mortality from environmentally mediated diseases, such as ARIs and diarrheal disease, more needs to be done to prevent these illnesses and to focus on new threats from increased industrialization, urbanization, and agricultural commercialization. Global environmental threats such as climate change may compound many of these issues, and efforts to mitigate certain hazards may create other problems. For instance, efforts to provide more drinking water in Bangladesh resulted in widespread poisoning, since the country's well water was heavily contaminated with arsenic. Experience and research suggest that

there are a number of actions that policymakers and planners can take to address environmental health threats to children.

Encourage the development and support of community-level initiatives to reduce environmental health threats to children

In many less developed countries, municipal governments are increasingly managing local resources, especially drinking water and firewood. Community and household-level interventions could also be adopted to reduce exposure to and transmission of ARIs, diarrheal disease, and malaria. For instance, numerous field studies have indicated that good personal and household hygiene practices can help reduce the occurrence of diarrheal disease, even when there is no access to safe water or modern sanitation.

Continue to raise awareness and provide education about children's environmental health issues

Since 1997, when the G-8 countries first declared their responsibility for children's environmental health, many international, regional, and national conferences have been held, and international organizations have developed special units to address environmental health concerns affecting children. In addition, several non-governmental organizations (NGOs), including the Children's Environmental Health Network and the International Research and Information Network on Children's Health, Environment and Safety (INCHES), have been created specifically to protect children from environmental hazards and to promote a healthy environment. At the local level, efforts need to be made to teach children, families, and communities to identify environmental threats to children, to adopt practices that reduce risks of exposure, and to work with local authorities and the private sector to develop prevention and intervention programs.

Promote the recognition, assessment, and study of environmental factors that affect children's health and development

Efforts to encourage research about environmental hazards might involve establishing research centers or multidisciplinary studies; incorporating material on children's environmental health into training for health care providers and other professionals; and promoting the collection and dissemination of harmonized data. Current multilateral efforts to advance international indicators for children's environmental health include collaboration between Physicians for Social Responsibility, INCHES, and the U.S. Environmental Protection Agency, based on previous work by WHO and other organizations.

Reduce children's exposure to pollutants through education, regulation, use of cleaner fuels, and reduction of environmental tobacco smoke

Strategies for reducing deaths from pneumonia and other respiratory conditions include cutting children's exposure to smoke from air pollution, cooking stoves, and cigarettes. Some national governments have reduced indoor pollution by promoting safer, more efficient, more durable cook stoves. International health experts recommend a combination of educational programs and legislative interventions to halt tobacco use in settings frequented by children. Regulations on air pollution need to be enforced in cities, and include phasing out leaded gasoline, reducing emissions from coal-fired plants, and replacing fossil fuels with cleaner energy sources.

Invest in programs to increase access to clean water and sanitation facilities and to promote better hygiene practices

While diarrhea-related deaths between 1990 and 2000 declined by 50 percent due to oral rehydration therapy, there is little evidence that the incidence of diarrheal disease has decreased. Efforts to combat diarrhea include combining appropriate drug therapy with optimal breastfeeding practices, improving nutrition, increasing access to clean water and sanitation facilities, and improving personal and domestic hygiene. Several studies have shown that improving water and sanitation can reduce the number of diarrheal episodes by between 20 percent and 26 percent. Furthermore, better hygiene practices, such as washing hands regularly, can reduce the number of diarrhea cases by up to 35 percent.

Strengthen interventions to prevent and treat malaria

While progress has been made in reducing ARIs and diarrheal disease, deaths from malaria have increased in the past 10 years, due in part to global climate change and in part to the emergence of antibiotic-resistant strains of the disease. Environmental improvements such as proper irrigation and drainage techniques, combined with the use of insecticide-treated bed nets and adequate medical treatment, could greatly reduce malaria's spread. Several international initiatives, such as the Roll Back Malaria (RBM) partnership, have also been instrumental in addressing the problem. RBM seeks to halve the global incidence of malaria by 2010, and focuses on early diagnosis and prompt treatment; vector control and use of insecticide-treated bed nets; malaria treatment for pregnant women; and prevention of and response to epidemics.

Reduce children's exposure to lead, and screen for lead poisoning

About 50 countries worldwide, including more than 20 less developed countries, have phased out leaded gasoline. Efforts to phase out leaded gasoline and to reduce or eliminate other sources of lead exposure include the Global Lead Initiative, sponsored by the Alliance to End Childhood Lead Poisoning, to develop national action plans, fund technical assistance projects, and encourage civic participation in exchanging best practices and coordinating efforts within regions.

Reduce exposure to harmful pesticides by banning the use of the most toxic chemicals, educating users, and encouraging the use of integrated pest management to minimize the use of pesticides

In order to reduce the threat from pesticide exposure, international organizations, national governments, and industry have stepped up efforts to limit the exportation of dangerous chemicals, help affected countries develop national action plans for handling and disposing of pesticides, and encourage the use of environmentally friendly alternatives. As of June 2002, more than 150 countries had signed (and 11 had ratified) the Stockholm Treaty on Persistent Organic Pollutants, which phases out or restricts the use of 12 chemicals, including nine pesticides that persist in the environment and accumulate in the food chain. The treaty will become legally binding once 50 countries have ratified it. National efforts are also being developed. Costa Rica, for example, is fostering pesticide-free, organic farming by devoting more than 9,000 hectares to organic cultivation of 30 crops.

Evaluate and address the plight of children employed at hazardous workplaces

Children are increasingly likely to be exposed to chemicals in the places where they live, play, and work. Much attention has been paid recently to mitigating environmental and other threats to children in all of these spheres, particularly at hazardous workplaces. As of May 2002, more than 120 countries had ratified the Convention on the Worst Forms of Child Labor, which calls for withdrawing children age 16 and younger from intolerable and hazardous work situations, by identifying hazards and developing effective monitoring systems.

Conclusion

While overall child mortality declined by 10 percent in the 1990s, much remains to be done to protect children from the myriad environmental threats to their health. Reducing long-term

threats requires that underlying risk factors be addressed. Over the past 15 years, international, regional, and national attention has focused on environmental hazards' effect on children's health. Efforts now need to be made to measure these risks; build and strengthen community, national, regional, and international coalitions to address the problem; and develop policies and programs to prevent and mitigate environmental hazards for children worldwide.

IV - LIBRALISATION, GLOBALISATION AND PRIVATISATION

Introduction

The term Globalization was first coined in 1980s. But even before this there were interactions among nations. But in the modern days Globalization has touched all spheres of life such as economy, education. Technology, cultural phenomenon, social aspects etc. The term "global village" is also frequently used to highlight the significance of globalization. This term signifies that revolution in electronic communication would unite the world. Undoubtedly, it can be accepted that globalization is not only the present trend but also future world order.

Effect of Globalization on India

Globalization has its impact on India which is a developing country. The impact of globalization can be analysed as follows:

1. Access to Technology:

Globalization has drastically, improved the access to technology. Internet facility has enabled India to gain access to knowledge and services from around the world. Use of Mobile telephone has revolution used communication with other countries.

2. Growth of international trade:

Tariff barriers have been removed which has resulted in the growth of trade among nations. Global trade has been facilitated by GATT, WTO etc.

3. Increase in production:

Globalization has resulted in increase in the production of a variety of goods. MNCs have established manufacturing plants all over the world.

4. Employment opportunities:

Establishment of MNCs have resulted in the increase of employment opportunities.

5. Free flow of foreign capital:

Globalization has encouraged free flow of capital which has improved the economy of developing countries to some extent. It has increased the capital formation.

Negative effect of globalization:

Globalization is not free from negative effects. They can be summed up as follows:

1. Inequalities within countries:

Globalisation has increased inequalities among the countries. Some of the policies of Globalization (Liberalization, WTO policies etc.) are more beneficial to developed countries. The countries which have adopted the free trade agenda have become highly successful, (e.g.) China is a classic example of success of globalization. But a country like India is not able to overcome the problem.

2. Financial Instability:

As a consequence of globalization there is free flow of foreign capital poured into developing countries. But the economy is subject to constant fluctuations. On account of variations in the flow of foreign capital.

3. Impact on workers:

Globalization has opened up employment opportunities. But there is no job security for employees. The nature of work has created new pressures on workers. Workers are not permitted to organise trade unions.

4. Impact on farmers:

Indian farmers are facing a lot of threat from global markets. They are facing a serious competition from powerful agricultural industries quite often cheaply produced agro products in developed countries are being dumped into India.

5. Impact on Environment:

Globalization has led to 50% rise in the volume of world trade. Mass movement of goods across the world has resulted in gas emission. Some of the projects financed by World Bank are potentially devastating to ecological balance. E.g.: Extensive import or export of meat.

6. Domination by MNCs:

MNCs are the driving force behind globalization. They are in a position to dictate powers. Multinational companies are emerging as growing corporate power. They are exploiting the cheap labour and natural resources of the host countries.

7. Threat to national sovereignty:

Globalizations results in shift of economic power from independent countries to international organisations like WTO United Nations etc. The sovereignty of the elected governments are naturally undermined, as the policies are formulated in favour of globalization. Thus globalization has its own positive and negative consequences. According to Peter F Drucker Globalization for better or worse has changed the way the world does business. It is unstoppable. Thus Globalization is inevitable, but India should acquire global competitiveness in all fields.

Liberalisation:

It is an immediate effect of globalization. Liberalisation is commonly known as free trade. It implies removal of restrictions and barriers to free trade. India has taken many efforts for liberalisation which are as follows:

New economic policy 1991.

Objectives of the new economic policy.

i. To achieve higher economic growth rate.

ii. To reduce inflation

iii. To rebuild foreign exchange reserves.

FEMA:

Foreign exchange Regulation Act 1973 was repealed and Foreign exchange Management Act was passed. The enactment has incorporated clauses which have facilitated easy entry of MNCs.

i. Joint ventures with foreign companies, (e.g.) TVS, Suzuki.

ii. Reduction of import tariffs.

iii. Removal of export subsidies.

iv. Full convertibility of Rupee on current account.

v. Encouraging foreign direct investments.

The effect of liberalisation is that the companies of developing countries are facing a tough competition from powerful corporations of developed countries.

The local communities are exploited by multinational companies on account of removal of regulations governing the activities of MNCs.

Privatisation:

In the event of globalization, privatisation has become an order of the day. Privatisation can be defined as the transfer of ownership and control of public sector units to private individuals or companies. It has become inevitable as a result of structural adjustment programmes imposed by IMF.

Objectives of Privatisation:

To strengthen the private sectors.

Government to concentrate on areas like education and infrastructure.

In the event of globalization the government felt that increasing inefficiency on the part of public sectors would not help in achieving global standards. Hence a decision was taken to privatise the Public Sectors.

Causes of Inefficiency of Public Sectors:

i. Bureaucratic administration

ii. Out dated Technology

iii. Corruption

iv. Lack of accountability.

v. Domination of trade unions

vi. Political interference.

vii. Lack of proper marketing activities.

Privatisation has its own advantages and disadvantages as follow,

Advantages:

i. Efficiency

ii. Absence of political interference

iii. Quality service.

iv. Systematic marketing

v. Use of modern Technology

vi. Accountability

vii. Creation of competitive environment.

viii. Innovations

ix. Research and development

x. Optimum utilisation of resources

xi. Infrastructure.

However, privatisation suffers from the following **defects**,

i. Exploitation of labour.

ii. Abuse of powers by executives.

iii. Unequal distribution of wealth and income.

iv. Lack of job security for employees.

Privatisation has become inevitable in the present scenario. But some control should be exercised by the government over private sectors.

Changes across Europe, Third World, USA and Their Impact on India: Changes across Europe and USA:

Significant changes have taken place across Euro and USA on account of globalization, particularly in the field of international business politics etc. Such changes have given rise to change in cultural and social aspects as well.

The economy of European countries and US are getting integrated with the global economy. Different arrangements have been made in this regard which are as follows:

1. Free Trade Area:

It is an agreement among a group of countries to abolish all trade restrictions and barriers, in carrying out international trade.

2. Customs Union:

The member countries abolish all the restrictions and barriers and adopt a uniform commercial policy.

3. European Economic Community:

It was initially formed by six countries such as, France, Federal Republic of Germany, Italy, Belgium, Netherlands and Luxembourg. It came into existence on 1.1.1958. The EEC has 15 members. In order to, become a member of EEC, a country must be European country and it must be democratic.

Activities of EEC:

i. Elimination of custom duties and quantity restrictions on export and import of goods.

ii. Devising a common agricultural policy.

iii. Devising a common transport policy.

iv. To control disequilibrium in balance of payments.

v. Development of a common commercial policy.

4. North American Free Trade Agreement:

NAFTA

i. It came into being in 1994 Developed countries like US, Canada and a developing country Mexico became the members.

Objectives and Activities of NAFTA:

i. Removing barriers among the member countries to facilitate free trade.

ii. To enhance Industrial development.

iii. To enhance competition.

iv. To improve Political relationship among member countries.

v. To develop industries in Mexico the international market.

European Free Trade Association:

It was formed in 1959. The member countries are: Austria, Norway, Denmark, Sweden and Switzerland and Great Britain.

Objectives of EFTA

i. To eliminate trade barriers.

ii. To remove tariffs.

iii. To encourage free trade.

iv. To enhance economic development of member countries.

Changes in the Third World:

The concept of Third World does not have much significance in the present scenario. This term was popular prior to the disintegration of Soviet Union. USA and USSR were considered as super powers and the countries in the world were divided in supporting them. The countries which did not have an alliance with both the countries were considered as Third World countries. But with the disintegration of USSR the concept of Third World has almost disappeared. However changes in Asian countries and

other countries (other than Europe and USA) have affected India. Such changes can be discussed as follows:

Trade blocks in Asia:

South Asian Association for Regional Cooperation (SAARC)

It came into being in 1983 countries like India, Bangladesh, Bhutan, Pakistan, Maldives and Sri Lanka adopted a declaration on SAARC.

Objectives of SAARC:

i. To promote economic social and cultural development among member countries.

ii. To improve the life of people among member countries.

iii. To enhance cooperation with other developing economies.

iv. To liberalise trade among member countries.

v. To promote economic cooperation among member countries.

Changes in Asian Countries

Chinese Market:

China has introduced many economic reforms. It started privatisation in 1984. China has formed special economic Zones. It has attracted heavy foreign investments. It has also formed economic and Technical Development Zones in towns and cities. These zones are free zones which allow quick business operations.

Impact on India:

Changes across Europe, USA and Third World has its own impact on India which can be summarised as follows:

i. India's economic dependence on other countries has significantly increased.

ii. Extensive opportunities in the field of information technology.

iii. Extensive opportunities for India's Telecom sector.

iv. Strategic alliances. Joint ventures, mergers have become the order of the day.

v. Extensive research and development.

vi. Bilateral treaties to promote free trade.

vii. Membership of WTO.

viii. Amending the domestic laws to suit the liberalised economy. (e.g.) FEMA. Amendment of Patent Act

ix. Active participation in global politics.

x. Improvement in Productivity.

On the whole it can be concluded that changes across Euro, USA and other countries have significantly changed the Indian economy. India has realised that its business can't survive without focusing on changes in other countries. Indian economy has become a major economy of the world and a significant trading partner. In the new era, India is looking at the potentials of the new products.

Management Perspective:

Globalization has led to the practice of management across culture. Modern business organisations have adopted Global management practices. Efforts are being made by India to understand Japanese, Chinese style of management. Issues in Motivation, communication across culture has gained significance. Every functional area of management is being studied with a global perspective. E.g.: International HRM, International Financial management, International marketing etc.

Conclusion

Hence, this chapater deals with how the urbanization and economic change impact on child development in detail.

Questions for Discussion and Reflection:

1. Discuss the role of urbanization on child development.

2. Examine the pros and cons of the migration of family.

3. Explain the various factors for environmental degradation and its impact on child development.

4. Analyse the impact of liberalization, privatization and globalization on child development.

References:

1. Anita, Woolfolk. (2015). *Educational psychology*. Noida (India): Dorling Kindersley.

2. Berk. L.E. (2014). *Child development*. New Delhi: PHI Learning.

3. Elizabeth B. Hurlock. (2015), *Child development*, New Delhi: Mc Graw Hill.

4. Gecas, Viktor. (1979). "*The influence of social class on socialization*." Pp. 365-404 in*Contemporary theories about the family*, edited by Wesley R. Burr, Reuben Hill. F. Ivan Nye, and Ira L. Reiss. New York: Free Press.

5. Grunbaum JA, Kann L, Kinchen S, et al. (2003). *Youth risk behavior surveillance*. United States: MMWR SurveillSumm.

6. Hernandez, D. (2004), *Demographic change and the life circumstances of immigrant families, the future of children*. Strasbourg: Council of Europe.

7. Piaget, J. (1972). *The psychology of the child*. New York: Basic Books.

8. http://www.globalnetwork.princeton.edu/publications/interest/34.pdf.

9. http://www.kff.org/entmedia/loader.cfm?url

10. https://www.en.wikipedia.org/wiki/childhood.

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