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**An investigation into the intricacies of the instructional model for
early childhood education in rural Thai Child Development Centres**

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Abstract

Thailand's education system faces a problem with distinct disparities between levels of regional education management. Consequently, urban areas seem to have obvious perceivable advantages over rural area settings. In response to this problem, the central government has authorized the local government to supervise and support local education settings including early years education and child caregivers who have the responsibility to provide education and care for early years learners in the form of Child Development Centres. The purpose of this current research is to investigate the knowledge, understanding and practices, including the factors and challenges which impact upon child caregivers' day-to-day performances regarding education and care provision for disadvantaged young learners from hill tribe communities who attend the rural Child Development Centres in Thailand.

A qualitative approach was employed to collect data from twenty-three child caregivers and seven educational officers. Two investigative methods were used in this research: interviews and direct observations. The interviews were conducted with all the participants including child caregivers and education officers, followed by observations of four child caregivers.

The results provided indicate that the child caregivers perceived themselves as performing several roles alongside their main responsibilities as education providers, while being simultaneously challenged by issues including regional deprivation, underfunding for learning resources, and insufficient support from local authorities. Child caregivers revealed obtained by a range of means external support from local communities and parents to meet their resource requirements. In addition, to a full

discussion of the findings from the empirical work several suggestions have been made to the central government and local authorities in order to improve the quality of early years education management delivered within rural CDCs.

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List of abbreviations

ARNEC	Asia-Pacific Regional Network for Early Childhood
CDC	Child Development Centre
DLA	The Department of Local Administration
DOH	The Department of Health
EQ	Emotional Quotient
IQ	Intelligence Quotient
LAO	Local Administrative Organization
MOE	The Ministry of Education
MOI	The Ministry of Interior
MOPH	The Ministry of Public Health
NICHD	The National Institution of Child Health and Human Development
NSOT	The National Statistics Office of Thailand
OBEC	The Office of Basic Education Commission
OEC	The Office of Education Council
OECD	The Organization for Economic Cooperation and Development
ONEC	The Office of National Education Commission

ONESDB	The Office of the National Economic and Social Development Board
UNESCO	The United Nations Education, Scientific and Cultural Organization
UNHCR	The United Nations High Commissioner for Refugees
SAO	The Sub-District Administrative Organization

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Chapter One: Introduction

1.1 Introduction

This thesis will examine the issues associated with child caregivers'¹ self-perceptions regarding their understanding of, and practices around, child's development and learning. It will focus upon Child Development Centres in Thailand with particular reference to child caregivers who work with disadvantaged young learners from those hill tribe's resident within the remote and mountainous regions of Mae Hong Son Province, Thailand. The study therefore not only examines perceptions of child caregivers in relation to their practices, but also the importance of child caregivers' knowledge and understanding. It situates its analysis of these educational and care practices within the Department of Local Administration's policy and standards which established operative guidance for child caregivers within Child Development Centres.

1.2 An overview of Thailand

The Kingdom of Thailand is located within the heart of Southeast Asia, covering a total area of 514,000 sq. km and composed of 77 provinces. It shares borders with Western and Northern Burma, Northern and Northeastern Laos, Eastern Cambodia, and Southern Malaysia. Previously, Thailand was called Siam. Thais are very proud of their nation, which is the only country in Southeast Asia that has never felt colonial occupation throughout its long history. The climate is warm and humid with seasonal monsoons.

¹ People who are directly responsible for taking care of children in the Child Development Centres are called caregivers, whilst those working within kindergarten education are called teachers.

Thai language is the official national language, although English is extensively spoken in big cities such as Bangkok (Ministry of Foreign Affairs of Thailand, 2006). The capital, Bangkok, is the country's centre of political, commercial, industrial, and cultural activities. Thailand is substantially an agricultural country with a few rapidly growing alternative industries (Office of the National Education Commission (ONEC), 2002).

Figure 1.1 Map of Thailand



Source: United Nation (2009) cited in OECD/UNESCO (2016)

Thailand is a constitutional monarchy with Maha Vajiralongkorn Bodindradebayavarangkun, or King Rama X, the tenth monarch of the Chakri Dynasty as the present king and head of the nation. The population has increased rapidly and now consists of 68.86 million people (World Population review, 2017), 70% of whom live in rural areas (National Statistics Office of Thailand (NSOT), 2008). The majority (95%) of people in Thailand are Buddhists and 5% are other religions (Tourism Thailand Organization, 2006); most of the people in Thailand are ethnically Thai with significant minority groups including Chinese and Muslims in the south. Thailand's economy has increased with an average raise of 8-9% in GDP per year since 1995 (Organization for Economic Cooperation and Development (OECD), United Nations Education, Scientific and Cultural Organization (UNESCO), OECD/UNESCO, 2016: 41-43). Despite this, economic progress has not been of equal benefit to all Thais. Poverty has become increasingly concentrated in the *rural areas* where about 80% of the country's 7.3 million poor live (World Bank, 2014 cited in OECD/UNESCO, 2016: 41-43). This applies particularly to the rural northeast, and in the remote areas in the far north and south.

There are educational institutions in rural areas, which are responsible for providing education services to learners from the poorest families. Nevertheless, education in remote areas in Thailand faces significant challenges: these include a systemic lack of effective administration, instruction, and financial support (Buaraphan, 2013). The area explored in this study, Mae Hong Son Province, located in the Northern region of Thailand, is populated by diverse hill tribes who inhabit mainly mountainous areas. These tribes have multiple distinct languages and cultures (OECD/UNESCO, 2016: 39) and the provision of education for their young children constitutes the focus of this study, as will be discussed in greater detail later in this chapter.

1.3 The rationale for the study

The origins of this research lie in the background of the researcher: I gained a bachelor's and a master's degree in Early Childhood Education and I was a preschool teacher in Thailand for several years before starting my PhD in the year 2015. My Masters research focused upon issues surrounding leader performance within child-caregiver networks², specifically the Child Development Centres under the Department of Local Administration (DLA). She conducted research involving the 75 Centre leaders and, in the process, visited 21, largely rural-based, CDCs (Chongcharoen, 2009).

Drawing on this earlier work, this study argues that problems existing within CDCs significantly impact children's development and learning, an issue with which the DLA should be concerned. In the course of fieldwork, I observed 21 child caregivers' performances and within their respective (21) CDC learning environments. Subsequently, I identified that not only did categorically disadvantaged children grow up in conditions of poverty but that children consequently possessed fewer opportunities for engagement with diverse learning opportunities and resources. Additionally, it became clear that parents were greatly dependent upon child caregivers for their children's care and development. Therefore, child caregivers require appropriate knowledge and understanding of suitable teaching methods in order to support the progress of disadvantaged children's progression and increase their potential.

Predicated and building upon these initial conclusions, this research seeks to examine the main elements determining child caregivers' practices in order to address the needs and

² Leaders of caregiver network have been chosen from all caregivers in one province to be the leaders of them. Thailand had 75 leaders of caregiver from 75 provinces.

challenges of child caregivers, particularly within rural CDCs in Thailand. Given the substantial proportion of the day young learners spend with practitioners and the measurable, variable social impacts relating to child development and learning associated with differing qualitative levels of education provided to disadvantaged communities within Thailand, it is unsurprising that there is a concurrent, continuing focus upon these areas in the country, particularly with regards to instructor and attendant roles. Additionally, the research elucidates the current situation and the reasons for serious concerns on the part of the government. It particularly notes that, ‘Teaching-learning activities are organized without understanding the basic concept of child learning [...] Furthermore, there is a lack of systematic monitoring and control of the quality and standards of early childhood care and development centres’ (Office of the Education Council (OEC), 2007: 12-13).

From the information above, it can be understood that child caregivers are trusted and expected by parents and communities to look after and educate their children. Therefore, CDCs must provide preschoolers with knowledge, understanding skills and appropriate behavioral practices; these prepare students for entry into states of properly socialized adulthood as defined within Thai society. This research’s chief concern then centres around child caregivers’ performances, especially in rural CDCs where child education appears by empirical measures to be comparatively disadvantaged. Thus, the study seeks to investigate professional self-perception and actual performance of child caregivers based upon their demonstrable knowledge and understanding, their general roles, and their discernible aptitude for develop children in the appropriate way in those rural CDCs. Finally, I believe that this research facilitates a more thorough understanding of child caregivers’ performances with regards to the leading factors and challenges impacting upon their current practices. Likewise, this research will provide actionable information

to the DLA which enables both a greater understanding of and more effective response to the situation within rural CDCs.

1.4 Sociology of childhood parenting and care in Thailand

In Thailand, Thai children were traditionally looked after during the day by their primary care-giver mothers at home while fathers worked externally to earn income for the family. This was particularly the case in rural areas where children grew up surrounded by nature and natural resources (Jiumpanyatach, 2011). Children thus had a variety of chances to explore surrounding places.

On occasion, they accompanied their parents to work as agriculturists or stayed at home with their extended families (grandparents, siblings, etc.), particularly in rural areas lacking suitable childcare centres in the event of both parents working (Amornvivat, 1990; Chotsuwan, 2007; Mo-suwan et al., 2014). The family - the basic unit of society - is a group of individuals, generally connected by association or marriage, which aims to provide its members with mutual social, emotional and economic security (Wright and Leahey, 2000; Clark, 2011). Contemporary family structures in Thailand have shifted from extended families to a nuclear family model. According to the National Statistics Office of Thailand (2005), 55% of the Thai population now live in a nuclear family, principally consisting of a father and mother with their children, and that most parents tend to work, regardless of the age of their children (NSOT, 2005).

Unsurprisingly, the lifestyle of many Thai children has changed, especially in terms of being looked after and raised. Parents need to send their children to early years educational institutions instead of having them in the primary care of the family; children are more likely to spend more time in CDCs with childcare providers than they do with

their own family members. Therefore, early years educational institutions such as the school system or CDCs have become substantially more significant in terms of looking after children (Sudjainark, 2013).

The table below shows the number of learners in early years education under the supervision of the Local Administrative Organizations (LAOs) in Academic Years 2011-2015 (Ministry of Education (MOE), 2017: 29).

Table 1.1 Number of early years’ attendances in early years institutions under the LAOs, academic years 2011-2015

Levels of Education	Academic Years				
	2011	2012	2013	2014	2015
Early Years	1,159,816	1,162,098	1,162,113	1,158,981	1,162,259

Source: Thailand Education Statistics Reports (2011-2015), OEC, MOE (2017: 29)

The LAO in the form of CDCs has a significant duty to provide education and care of young children while parents might be employed; this is particularly pronounced within rural areas where the young learners do not have many choices to attend the early years institutions.

1.5 The early childhood education system in Thailand

The current education system in Thailand emerged from the revised Thai constitution promulgated in October 1997; the constitution obligated the state to enact new national

education legislation (Office of National Education Committee (ONEC), 2002). Hence, the National Education Act of B.E. 2542 (1999: 4), Chapter 1 indicates that:

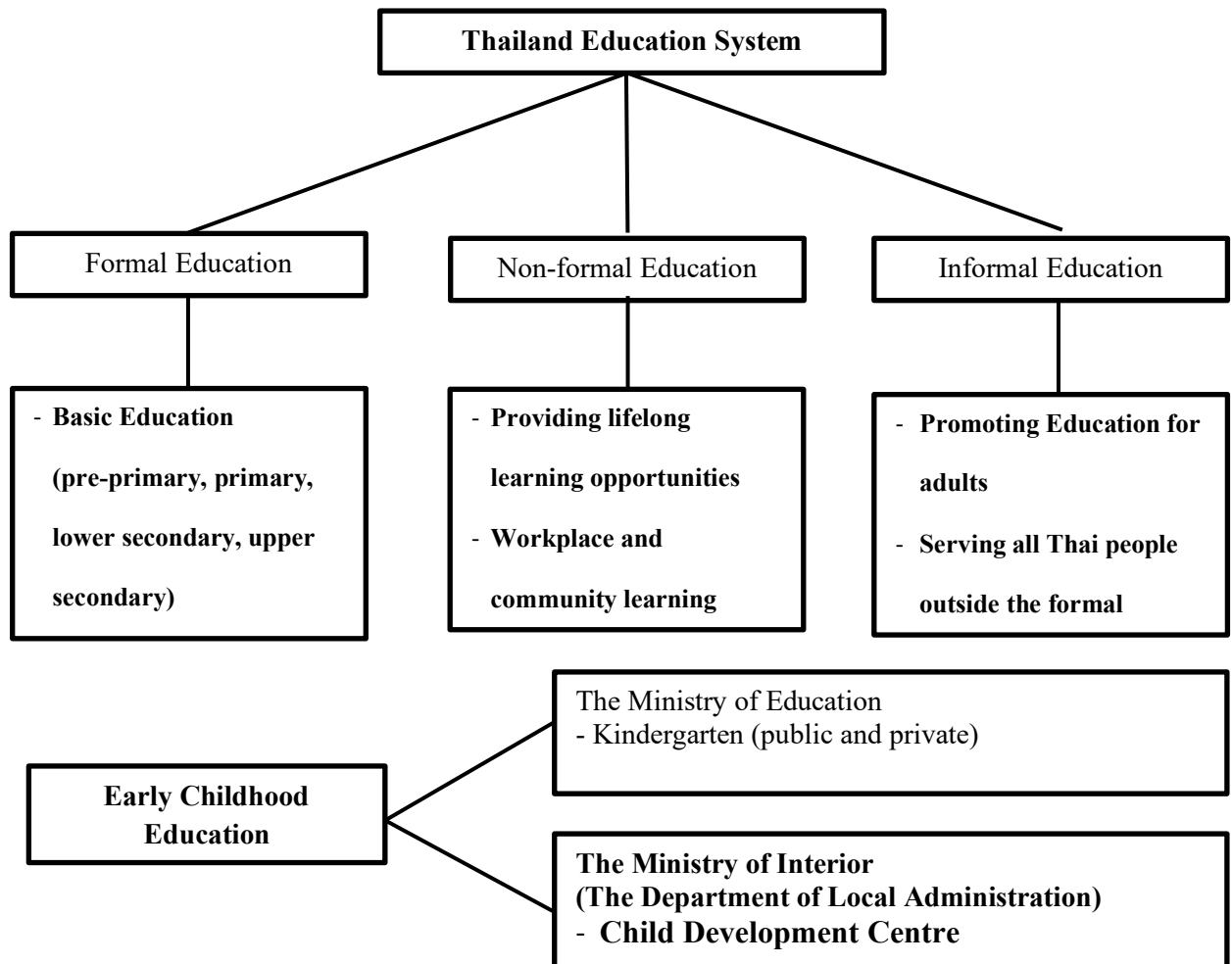
‘Section 6 Education shall aim at the full development of the Thai people in all aspects: physical and mental health; intellect; knowledge; morality; integrity; and desirable way of life so as to be able to live in harmony with other people’.

The National Education Act of B.E. 2542 (1999) established a new administrative structure for Thai education. In Section 8 of the National Education Act, the provision of education was conceived along the following principles: (1) Lifelong education for all; (2) All segments of society participating in the provision of education; and (3) Continuous development of the bodies of knowledge and learning processes. Additionally, Section 15 states that there are three types of education, consisting of formal education, non-formal education and informal education spanning from birth until death (Office of National Education Committee (ONEC), 2002: 7-8).

The purposes of this system were to develop the human personality, intellectual abilities and other specific skills, whilst also enhancing living experiences, and fulfilling the professional and social ambitions, of people irrespective of age or social category (ONEC, 2000). The Ministry of Education (MOE) (2017: 4) also stipulated that ‘Education is a foundation to the production of human resources and the nation’s future and creates a robust society, with quality and morality [...] It is believed that education is able to build a stronger society full of virtue and ethics’.

In Thailand, early childhood education incorporates formal, informal and non-formal education systems (UNESCO, 2013: 41) alike. In addition, through the National Education Act B.E. 2542 (1999), the LAOs under the supervision of DLA, Ministry of Interior (MOI) (United Nations Educational, Scientific and Cultural Organization (UNESCO), 2006) was were given right of governance over CDCs. Figure 1.2 below illustrates the Thailand education system diagrammatically.

Figure 1.2 The education system in Thailand



The Thai government's policy on pre-school education has been to develop clear pathways with a view to expanding and improving the provision of pre-school education

within rural areas. According to the National Education Act of B.E. 2542 (1999), the principal objectives of the Act were to provide an education for all Thais in order to potentially develop multiple aspects of the self, including those relating to physical and mental health, intellect, knowledge, morality, integrity, and pursuit of a desirable lifestyles regarding harmonious social living (Israsena, 2007).

The policy additionally mobilizes all political parties around participating in promotion of high-quality early childhood care and development (Office of the National Education Commission of Thailand (ONEC), 2004). Although Fujioka (2002) states that there has been increasing recognition of the function of education for children around the world including in Thailand, the country has seen increasing numbers of children resident in those remote areas where education and learning opportunities are still limited. Furthermore, budgets allocated from central government have decreased while costs have been increasingly transferred to community members. Such phenomena therefore corroborate the argument of Raudenbush, Kidchanapanish and Kang (1999: 256)'s that "disadvantaged children are substantially less likely than advantaged children to have access to pre-primary education. Studies conducted in [...] Thailand have found that preprimary programs are found most often in urban areas to serve children of relatively high socioeconomic status".

Such concerns led the Thai Ministry of Education (2012) to mention in the National Strategic Plan for Early Childhood Development (Newborn to Pre-First Graders) developed in accordance with the Government Policy 2012-2016, that early childhood rearing discernibly suffers from a 'lack of data for effective planning and management of early childhood development, especially a lack of categorized data reflecting the situation of disadvantaged groups; consequently, it has been difficult to plan specific projects in

support of these groups' (MOE, 2012: 46). As a preliminary response, the government therefore considered providing better and more extensive educational opportunities for young children through establishing CDCs under the DLA and MOI since 1999 (MOE, 2015; MOI, 2016).

There are now CDCs found in every sub-district with the possibility that one sub-district may have two or three CDCs. Despite these advances, inequality in educational investment among Thai families has persisted (DLA, 2015). The National Statistical Officer (1999) cited in Pattaravanich, et al. (2005: 563) argues that 'children in urban areas continue to be advantaged over their rural counterparts in terms of educational attainment, and rural families continue to report economic constraints as among the most serious barriers to school continuation for their children'.

Limited access to education is still a significant issue in Thailand, particularly with children who live in remote rural regions. Parents often struggle to meet many of the additional costs associated with schooling, such as transport and uniform (Lakin and Gasprini, 2003; MOE, 2015). In rural educational institutions there are often only limited learning materials available, whilst such a lack of learning resources is compounded by a lack of qualified instructors. In addition, the authorities struggle to provide adequate funding for these institutions.

1.6 The early childhood education setting under the Department of Local Administration

Based upon the National Education Act B.A.2542 (1999), the Thai Ministry of Education has reformed its policy on pre-school education so as to improve schools in rural areas thereby providing better educational opportunities for young children within CDCs. In

2015, the MOE produced a report, subsequently presented by the Thai national authorities at the World Education Forum in Korea. This stated that: “Education development has been consistent with the Constitution, the national policies, and the national economic and social development plans of every government, with a focus on the development of quality, on access to and expansion of opportunities for education, and on equity and fairness for all groups within the society...” (MOE, 2015: 4). These economically disadvantaged children in rural areas constitute a part of that aforementioned group who are to be afforded better educational opportunities around access to early year educational institutes (DLA, 2015).

This revised early childhood learning opportunity provision, then, potentially provides greater benefits for the most disadvantaged young learners. According to the Ministry of Education (2007: 20) addresses in the Long-Term Policy and Strategy for Early Childhood Care and Development (0-5 Age Group) 2007-2016, “Disadvantaged groups and those with particular needs are entitled to receive special care and assistance. They need to have secure life for their survival and protection. They also need full development to their highest potentiality, so as to be able to lead a happy and creative life in society”.

Since 1999, under the situation outlined above and Thailand’s wider educational reforms, responsibility for pre-primary education has therefore been transferred from the Department of Social Development and Welfare, Ministry of Social Development and Human Security to the DLA and MOI (UNESCO, 2006; DLA, 2015). In 2011, the MOI was assigned supervision of 20,997 CDCs in order to prepare a budget for child caregivers' salaries, teaching materials, lunches, milk and other core resources. (OEC, 2012). In 2015, there were 1,162,259 children attending the pre-primary service delivered

through CDCs (MOE, 2017: 29). The National Education Act of B.E. 2542 (1999: 15-16), states that:

‘Section 41 Local administration shall have the right to provide education at any or all levels of education in accordance with readiness, suitability, and requirements of the local areas.

Section 42 The Ministry shall prescribe the criteria and procedures for assessing the readiness of the local administration organizations to provide education. The Ministry shall be responsible for the coordination and promotion of the local administration organizations' capability to provide education in line with the policies and standards required. It shall also advise on the budgetary allocations for education provided by local administration organizations.’

The Ministry provides support to the Local Administrative Organizations (LAOs) in extending educational opportunities to all young children between three to five years of age. In addition, the CDCs are obliged to provide a ‘quality’ early childhood education service to all children in the local areas; this entails delivery of developmental activities in order that students have the opportunity to reach their highest potential (UNESCO, 2006; MOE, 2007). The LAOs are the organizations closest to the local communities, in turn actively improving quality of life for people in the rural areas (Hrigchan et al, 2008 cited in Taecharungroj, 2014: 71).

Child Development Centres are supported with academic guidelines, a budget and training, and their purpose is to prepare children under five years old for high-level school. There are three types of activities undertaken by CDCs: (a) centre management and administration; (b) teaching and learning processes to strengthen child development; and (c) learning quality assurance. The CDCs exist predominantly in rural areas but also in some urban areas within Thailand's 76 provinces (excluding Bangkok) (MOE, 2012: 16).

In addition, the local government is responsible for supervising the CDCs, including establishing administrative structures, authority lines, and budget allocation (DLA, 2011; Department of Health (DOH), 2009). The Ministry of Education (2017: 30) states that:

‘Local administration organization play a greater role in the provisions of education. ... Many local administration organizations are able to provide education effectively and contribute to the improvement in the ways of life in local communities because of sufficient education resources and an appropriate number of schools in each area under their supervision. Additionally, they can arrange learning and a teaching curriculum which is flexible and conforms to various needs and ways of life in each local community’.

The DLA (2012), which supervises CDCs, is mandated to provide and support educational institutions under its jurisdiction. This provision of early childhood education, in part through the managing of CDCs, is predicated upon developing four features in children: physical health; emotional wellbeing; intelligence; and social skills.

1.7 Education for disadvantaged young children

Advantaged young children have many opportunities to access and engage with educational resources relating to their development and learning, consequently, they demonstrate greater outcomes of improvement. In contrast, children living in remote rural areas disproportionately encounter comparative economic and resource poverty, which leads to a lack of various learning opportunities (Kantabutra and Tang, 2006; Prasartpornsirichoke and Takahashi, 2013) and reduced outcomes. Early years learner attendance of CDCs has increased rapidly due to rising number of mothers seeking employment (Ministry of Public Health (MOPH), 2011). Conversely, UNICEF (2006: 7) states that, “the quality of Thailand’s education that is provided to all children equally is a major concern due to discrepancies in the provision of education quality between urban and rural areas”.

The OECD/UNESCO (2016: 16), *Review of National Policies of Education in Thailand* asserts that “Thailand needs to do much more to attract, retain and support educators in disadvantaged rural schools”. In respect of the remote areas, disadvantaged young children indubitably underachieve educationally; determining factors include their greater exposure to risk, involuntary failures around parental support driven by lack of financial resources, relatedly, of time. Individual and regionally-centred unequal distribution of learning resources sees rural children subsequently engage with limited set of learning materials, leading in turn to relatively obstructed to children’s essential development and learning.

This study’s interests and concerns focus on child caregivers’ performances in relation to the effectiveness of their knowledge, understanding, general role and aptitude in developing underprivileged young children’s development and learning. Crucially, these

young children attended those rural CDCs where authorities paid less attention to supporting their learning activities; in consequence, this study also examined factors and challenges which child caregivers faced.

The main area of focus for this study is the Mae Hong Son province, a region dominated by mountainous ranges and forests (Office of the National Economic and Social Development Board, 2018). Crucially, as the report by the United Nations High Commissioner for Refugees states: (UNHCR, 2007: 14), “Mae Hong Son, which is about 924 km from Bangkok by road, is one of Thailand’s poorest provinces, lagging behind the rest of the country in many areas of development”.

This area is primarily populated by minority ethnic groups referred to as hill tribes; in the highland areas where they live, tribe members face limited access to basic services including education and health. Living in isolated areas, some of them lack a sense of national identity (Fujioka, 2002: 3), exacerbated by lack of access to government services. For the purposes of this study, these disadvantaged children, lack access to proper care and education for two discernible reasons. Firstly, as Fujioka (2002) and UNESCO (2016) state, early years children receive initial care through senior family members. Many working-age people of tribal heritage move to the city to seek a basic income through labouring or otherwise undertaking menial roles, to avoid poverty life in rural hill areas and very low-wage work available. Empirical research has shown that people who are responsible for young children do not speak standard Thai to an acceptable level and do not have a suitable knowledge and understanding to nurture the children.

Secondly, the remoteness of the hill communities and poor roads make it difficult to provide standard education services in these communities and to find adequately

qualified educators to teach the rural children (Fujioka, 2002; UNESCO, 2016). The CDC is the only educational institution in these rural areas which delivers education and creates skills development activities for young children aged three to five. Education within the CDCs is maintained through relations of dependence towards local authorities as administered under the supervision of the DLA and MOI (Gongphet, 2018). Despite this, the local government administrators are not interested in matters concerning determination and developmental control of services (Fujioka, 2002; Pattaravanich et al., 2005; Taecharungroj, 2014; Pesses, 2018)

At present, the CDC of the local government serves as an early year educational institution for children between three to five years of age. It has the same status as other educational institutions (MOI, 2008). The Local Administration Organization (LAO) oversees promotion and of all dimensions relating to children's development within Thailand. This is considered a significant mission which all involved units must be aware of and pay close attention to, thus ensuring that the quality of the children's education is improved, and standards are met (Local Education Management and Coordination Division, 2002).

Duly contextualized, this study seeks to shed light upon rural CDCs' operations with regard to practitioners' day-to-day practices around development and provision of opportunities for disadvantaged young children based within local communities. In doing so, it seeks to better understand the childcare providers' perceptions according to the main issues and challenges that they face when undertaking their tasks and thus provide an opportunity for development of policy insights.

1.8 The importance of child caregivers

Child caregivers' roles in CDCs are the same as the roles of teachers in state schools, namely, to develop young children's learning experiences and skills, as well as supervising and caring for children who attend their respective educational establishments. As the MOI (2016: 16) states, "the main responsibility of a child caregiver is to perform in set up learning experience, develop learning skills for young learners and perform to improve academic education".

In caring and educating young children, practitioners are required to understand the young children's objectives, so they can devise age-appropriate and engaging development and learning activities. Additionally, the National Education Act of B.E. 2542 (1999: 11), states in section 24 that:

“Section 24 In organizing the learning process, educational institutions and agencies concerned shall:

(1) Provide substance and arrange activities in line with the learners' interests and aptitudes, bearing in mind individual differences; ...

(3) Organize activities for learners to draw from authentic experience; drill in practical work for complete mastery; enable learners to think critically and acquire the reading habit and continuous thirst for knowledge”.

This means the child caregivers who work as providers of learning experiences for young children need to understand approaches to educational management of children and be able to synthesize all their curriculum-derived knowledge so as to develop learning principles, learning experiences, and activities orientated around enhancing child development, whilst also evaluating children's development and learning. In terms of working with disadvantaged young children, using local materials and resources ought to offer them opportunities to engage fully and achieve their potential. It is important that child caregivers be sufficiently qualified to operate effectively within their roles and to avoid having a harmful impact on young children (Bruce, 2011).

1.9 Research context

The field research carried out as part of this study involved interviewing and observing child caregivers directly responsible for taking care of children aged three to five years old within rural CDCs located in the Mae Hong Son province, Thailand. Mae Hong Son is 924 kilometers from Thailand's capital city, Bangkok. The total population is approximately 248,178 people. Mae Hong Son has the lowest average monthly income per household in Thailand, which is 8,821 Baht per month (approximately £176 per month) (NSOT, 2014). Mae Hong Son province largely consists of complex Thai highland mountain ranges, which are still covered with rainforest. The province is subdivided into 7 districts. There are approximately 163 CDCs from 45 sub-districts and 415 villages, with 255 child caregivers, and 4,407 young children attending aged between three and five, within Mae Hong Son province (DLA, 2014). This geographical context will be further discussed within Chapter Four: *Introduction and context of the fieldwork area, Mae Hong Son Province*. This is essential so as to situate the study within its physical and human-geographical context, that of a particular region of Thailand

specifically selected as a case study for this research. Relevant aspects of these environments will be also integrated within the data analysis sections.

In terms of participation, the child caregivers were invited to participate in this research play significant roles throughout their careers with those disadvantaged children. They are seen to be representative of the childcare practitioners who work in the rural CDCs. Moreover, the educational officers³ were also invited to participate in the research.

As part of this study, participants had opportunity to reflect upon their working experiences in relation to their knowledge and understanding, their day-to-day performances, and their aptitude for developing children within the rural CDCs. The research findings, as showcased and analyzed within the remainder of this study, will also provide evidence outcomes which permit increased departmental focus upon those rural CDCs providing a core educational service to young learners in remote areas.

1.10 Summary

Thai children have progressively begun to spend more time with child caregivers than with family members; this trend is particularly pronounced within poor remote areas where parents tend to seek paid work from economic necessity in contradistinction to closely raising their children. There is evidence that child caregivers have a quantifiable impact upon young learner social and cognitive development; it is reasonable to conclude that they require proper knowledge and understanding regarding early years' development and learning in order to provide the 'quality services' which the Thai

³ The educational officer is in charge of supervising the child caregiver's performance around provision of education responsibilities and care duties towards young learners attending the CDCs in relation to the DLA's policy and standards.

constitution mandates. CDCs are early years educational institutions located consistently throughout every sub-district in Thailand, particularly in remote areas.

However, the findings of previous studies (e.g. Fujioka, 2002; Isaranurug et al., 2007; Maleeles, 2008; Chongcharoen, 2009; Sudjainark, 2013; Bhulpat, 2014; Taecharungroj, 2014; Thianthad, 2018) have revealed high levels of inadequate educational provision based upon the observed quality of teaching, knowledge demonstrated by practitioners and learning outputs. Indeed, practitioners seemed to lack basic understanding of children knowledge-acquisition processes. Despite this, the findings of this project will highlight the main factors and challenges which child caregivers face throughout their work, serving as an academic study and a basis for policy recommendations in respect of the DLA. The goal in this final regard is to help the DLA understand better the difficulties faced by childcare practitioners according to their rural conditions and thus improve oversight and learning delivery outcomes.

Chapter two: Literature Review

2.1 Introduction

This chapter reviews the existing literature and research around child caregivers' performance in relation to early years' development and learning within Thai rural Child Development Centres. The purpose of this chapter is to develop an analytical framework which will underpin the design of data collection and analysis in order to answer the research questions. To that end, this chapter is divided into four sections. The first section presents discussions of international jurisdictions in early years education and early childhood education policy within Thailand in reference to the Child Development Centres under the Ministry of Interior which constitute the main substantive focus of this study. The second section provides a review of: (a) child caregivers' qualifications, training and standards; along with (b) child caregivers' roles in accordance with early years' development and learning theory. The third section summarizes the key issues with regards to child caregivers' day-to-day practices in Thailand, including the everyday problems relating to the child caregiver themselves, the policy-commitments and practical support associated with local governments, and the challenges of theories within child caregivers' practices. The final section is comprised of a conceptual framework and summarizes the chapter.

2.2 International jurisdiction in early years education

Early Years education and care is widely acknowledged as foundational in terms of young children's future learning, since it nurtures and develops those fundamental skills key to their prospective attainment. At the same time, it is a significant field and has

consequently generated much critical discussion. In Europe, there are two approaches interconnected approaches around promoting access to Early Years educational institutions, the legal right to access and a legal – mandated compulsory obligation attendance as stated by the European Commission (2019). The European Commission also reveals that public authorities need to be involved in each approach so as to fulfill the obligations around Early Years education provision. It states that “top-level authorities in all European countries issue official guidelines to ensure that settings have an intentional educational component” (European Commission, 2019; 16).

In the United Kingdom, early childhood education and care comprises a wide range of provision which involves creating and running diverse nursery institutions, such as day nurseries, nursery schools, and nursery classes (Wall, Litjens and Tagume, 2015; 32). Early Years education policy highlights the importance of good quality in early schooling and underlines early years’ development and learning essentials. According to Mathers et al. (2016: 23) state that “the 2004 Children Act states an explicit duty on local authorities to promote the educational attainment of all children in their care. In carrying out this duty, local authorities are expected to give particular attention to the educational implications of any decisions regarding the welfare of looked after children”.

The local authorities are required to provide adequate support to Early Years educational institutions whilst educators are required to have “a Personal Education Plan (PEP) as a part of their care plan” (Mathers et al., 2016; 24), which in turn establishes termly reviews by an education officer (DCSF, 2009 cited in Mathers et al., 2016). In term of early years educators, the local authorities are required to ensure that the educators who provide education and care for young students have achieved either a good or outstanding grade in their most recent Ofsted evaluation (Department of Education (DfE), 2014). Ofsted

(2016 cited in Mathers et al., 2016; 26) reveals that “the national regulatory body (Ofsted) is responsible for monitoring and assuring the quality of early years education settings in England”. Ofsted’s responsibility is based around devising and ensuring adherence to frameworks around both Early Years education settings and local government Early Years’ education delivery, Ofsted processes in turn are obliged to offer sufficient support Early Years educational attainment whilst local authorities must guarantee the quality of education provision (Ofsted, 2016).

The Department for Education provides ‘free places for two to four years old children which offer 570 hours a year over no fewer than 38 weeks of the year and up to 52 weeks of the year for every eligible child’ (DfE, 2018; 7- 8). In addition, the Early Years Foundation Stage (EYFS) produces the curriculum which underpins early years education programmes in England which covers young children’s development and learning from birth to the age of five in six aspects of learning (Wall, Litjens and Taguma, 2015; 40):

- Personal, social and emotional development
- Communication, language and literacy
- Problem solving, reasoning and numeracy
- Knowledge and understanding of the world
- Physical development
- Creative development.

Additionally, EYFS outline the standards by which all early years educators need to ensure their young students develop; such interventions include improvements to their development and learning as well as keeping attendees healthy and safe (DfE, 2018; 17). Lipscomb and Pears (2011) and Wall, Litjens and Taguma (2015) further describe how

early years educators are required to address these areas of learning within their personal education plans and apply these plans and principles within their activity settings. Attendance of early childhood education centres is aimed at delivering valuable early interventions around young students' development and learning in the form of opportunities. Local authorities would be anticipated to deliver services through early years educational institutions, taking much stronger responsibility for how well attendees perform through regulating their performance and provision.

2.3 Early childhood education policy in Thailand

In Thailand, early childhood education has recently become more significant than ever before. The official policy line of the Ministry of Education (MOE) is that high quality training and development of learners should begin at an 'early stage of life' (MOE, 2017: 88). In 2008, the Ministry explicitly stated that it aimed to support the development of quality early childhood programmes and the government thus appointed a National Committee on Early Childhood Development. The committee, which was chaired by the Prime Minister, announced a comprehensive national policy for early childhood development. This was geared towards implementing urgent measures supporting the overall development of young children from birth through to entry into first grade formal educational studies (MOE, 2015).

The importance of early childhood education has therefore become increasingly central to the Thai government. The MOE (2015: 10) states that: "Because of the problems and challenges involving the implementation of early childhood care and education, both in the overall development of young children in all aspects and in the integration of effective holistic growth, it is essential that there be improvement in the approaches to education

and care of young children so as to produce sound, moral, and ethical individuals who are able to adapt effectively in society”. There has been a rapid expansion of early childhood educational provision due to increased understanding from parents of how these early years constitute an integral stage of speedy physical and mental growth. Therefore, young learners need access to high-quality early years programmes and services in order to achieve positive outcomes and thus become ready for integration into society through scholastic development as well as inculcation with core social values.

As discussed, early childhood is the foundation for all subsequent developments and the sustainable development of human qualities (Sangnapaboworn and Changdacha, 2007). In Thailand, there is the National Strategic Plan for Early Childhood Development 2012-2016 which asserted that all Thai children have equal rights to being provided with education and training from an early age (MOE, 2002; MOE, 2015). In terms of early years institutions’ structure, the Ministry of Education is responsible for the regulation of general Thai education. Early childhood education has over time been developed and enacted in conjunction with several Ministries and organizations. These include: Ministry of Education; Ministry of Public Health; Ministry of Social Development and Human Security; Ministry of Interior; Ministry of Labor; Ministry of Industry; Royal Thai Policy; Border Patrol Police Bureau; Bangkok Metropolitan Administration; Ministry of Culture; and Private Sector Organizations (MOE, 2015; UNESCO, 2016).

In addition, the Thai government has clearly committed itself to providing improved early year care and education for Thai citizens. This is seen in the delivery of appropriate content knowledge which seeks to develop young children and prepare them for basic education. These services are designed to provide opportunities for an enlightened population to emerge and as well for the growth of economic prosperity within the

country (MOE, 2015). In addition, the Thai government promulgated the National Education Act B.A. 2542 (1999) (Office of the National Education Commission (ONEC), 1999: 10), which states within section 18 that ‘early childhood development institutions, namely: childcare centres, child development centres, pre-school child development centres of religious institutions; initial care centres for disabled children or those with special needs, or early childhood development centres under other names’, are all mandated to provide education for all children. Emerging out of this new-found focus, this current study therefore focuses upon Child Development Centres (CDCs) under the administration of the Department of Local Administration (DLA) part of the Ministry of Interior (MOI), with particular reference to those situated within local areas. Early year students in these areas have limited access to early years’ institutions, and they tend to attend the CDCs in order to receive proper care and develop essential skills, thereby making their educational institutions particularly germane objects of study.

In 2018, the government launched the pre-elementary curriculum, B.A.2561 (MOE, 2018), which provided guidelines for educating young children from birth to three years old and from three to five years old respectively. The Office of the Education Council (OEC) explains that: “Organized for the 3-5 age group, the 2003 Early Childhood Curriculum focuses on preparing children in terms of their physical, intellectual, emotional/mental and social readiness. The curriculum provides guidelines to parents, caregivers and teachers in caring for and educating children” (MOE, 2017: 48). As a result of this legislation, all early childhood educational institutions have to now develop their own early childhood curricula in accordance with the concept and principles of this Early Childhood Curriculum 2003 (B.E. 2546) (UNESCO, 2004: 22 cited in Lungka, 2014: 31). This curriculum stipulates child rearing and learning experiences, guidelines

for educators, as well as teaching and learning experiences for the children to develop appropriately (MOE, 2003; Tongthaworn, 2003; and MOE, 2008b).

Essentially, early childhood education is considered to be an initial step towards basic education for every young child. The Thai government's policy on pre-school education has developed a clear pathway for expanding and improving the provision of pre-school education in rural areas on a general scale in order to provide better educational opportunities for economically disadvantaged young children within these areas (UNESCO, 2011). This policy demonstrates the Thai government's commitment to equity and social justice for all children.

Within those local communities (municipalities and sub-districts) whose child population is primarily made up of those classified as 'socially disadvantaged', education and care have been essentially organized through the Ministry of Interior (MOI) in the form of CDCs. The ministry supervises CDCs throughout the Department of Local Administration (DLA) in order to provide equal educational opportunities to those local young children, with the key measure being access to early years' institutions (DLA, 2015). This study's literature review will now focus more specifically upon these CDCs administered under the MOI and examine these in greater detail; it does so in the context of these organizations' relevance relating to the levels and types of provision which constitute the focus of this study.

2.4 Child Development Centres under the Department of Local Administration, Ministry of Interior

The provision of early years education is a crucial part of children's development and learning quality and the worth of learning and education can impact upon their

development significantly when they are growing. Young children are active learners and they learn through the everyday activities they engage with. Early year learners enthusiastically drive their own learning and development by exploring in a stimulating environment, which is provided through activities established and carried out within early year institution settings (Resnick and Snow, 2009; Janta, Belle and Stewart, 2016; Lindon and Brodie, 2016; Palaiologou, 2016; Macblain, 2018; Powell and Smith, 2018; Reardon, Wilson and Reed, 2018).

The study from UNESCO (2012) and the Office of the Education Council (OEC) (2013) confirm that 94 percent of children in Thailand aged two to five years attending early years educational programmes are at an ‘appropriate’ standard developmentally. They are also on average healthier, more enthusiastic around learning, and behave better than the children who are without preschool education. High-quality early year education constructively impacts preschoolers’ linguistic and overall cognitive development. Donoghue (2017: 2) states, “Research of high-quality, intensive ECE programmes for low-income children confirm lasting positive and social abilities”. This has been confirmed in studies (Kiernan et al., 2008; Woodhead, 2009; Gambaro, Stewart and Waldfogel, 2015; Bakken, Brown and Downing, 2017, Donoghue, 2017) where the quality of early year education helps to counteract the negative effects of poverty for disadvantaged children. Crucially, it can be noted that the young learners engaging with educational institutions achieve appreciably positive learning expansion outcomes (Buain, 2017).

This study focuses on CDCs, particularly those based within rural remote regions in Thailand where education and care are provided to disadvantaged young children organized by the MOI. Therefore, the Centres are responsible for delivering proper

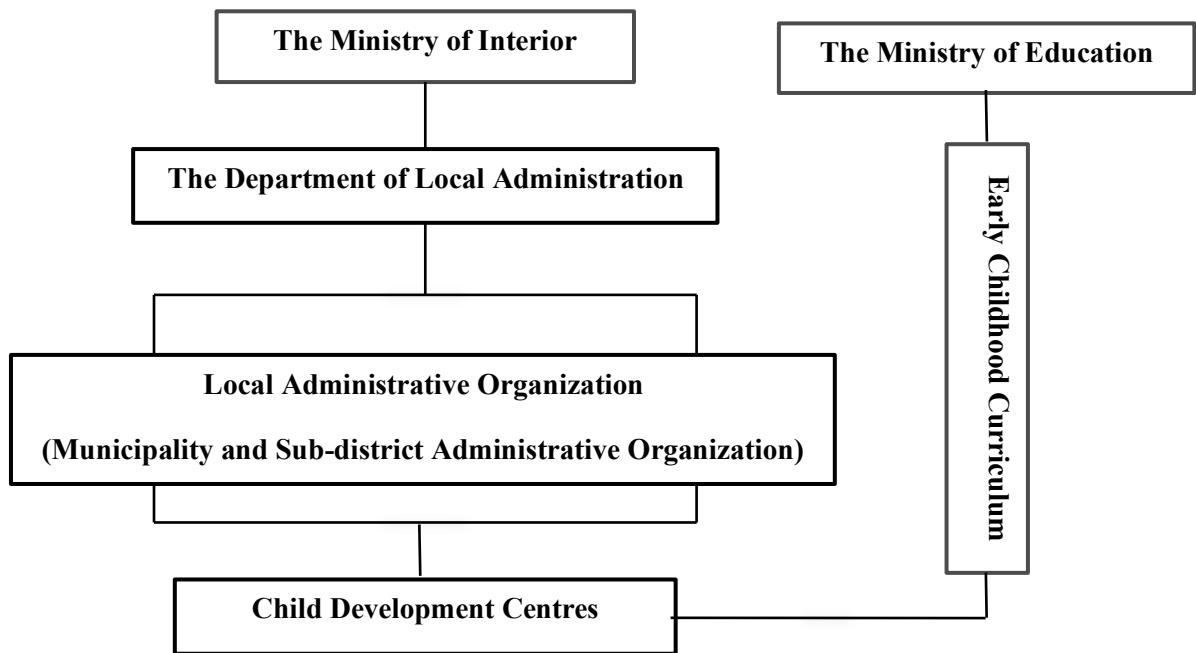
education services and care procedures; within this model, educators help preschoolers acquire knowledge and thereby encourage their healthy growth, understanding of society, and readiness to live peacefully within the world (Pinyoanuntapong, 2013). CDC services thus primarily provide education and care for young learners in local units where there is limited access to educational attainment.

The National Education Act B.E. 2542 (1999: 15), section 41 states that Thailand's MOI has "the right to provide education at any or all levels of education in accordance with readiness, suitability, and requirements of the local areas". In principle, then, the MOE becomes responsible for setting the framework underpinning the Thai education management system as well as its guidelines. In practice, however, it is dependent upon each Ministry to establish the policies and specific practices for each target group. In terms of local divisions, the MOI becomes responsible for education management which establishes the goals and practices for providing education and care for young children, especially in rural areas which house a disproportionate percentage of underprivileged children. Unfortunately, there are educational issues in underprivileged areas, which include inequality in education and these issues certainly impact on the children who live within these areas. Thailand has increasingly concentrated on developing early years' education provision, particularly focusing on childcare providers' performances as these influence children's development and learning (Wiboonuppatum, 2002; MOE, 2015).

Therefore, the MOI has deputed responsibility to the DLA around administration of education and provided authorization to Local Administrative Organizations (LAOs) around providing education and care for young children aged three to five in the form of Child Development Centres (CDCs) (Hrigchan et al, 2008 cited in Taecharungroj, 2014; MOI, 2016). In 2001, the Office of the National Primary Education, along with the MOE

and other agencies, transferred responsibility for education of children within pre-schools to the DLA; this education was to be carried out through the CDCs. Such transfer of responsibility for educating and taking care of children aged 3 years has been adjudged by some commentators to be a significant development within provision of organized educational services (Maboon, 2011 cited in Taecharungroj 2014). Figure 2.1 displays the current CDC administrative structure in Thailand.

Figure 2.1 Administrative structures of CDCs



The CDCs are expected to provide young learners with the following services - food and nutrition, physical care, and support for holistic child development. Holistic child development comprises love and care; space for physical movement; various resources and learning experiences with which the young learners can engage; opportunities to investigate and solve problems; and interaction with peers. With regard to early years

education management, there is the Early Childhood Curriculum, B.A.2561 (MOE, 2018), launched by the MOE, which provided guidelines for all early years' educators engaging with young learners' development and learning to understand and provide appropriate activities settings for them.

In 2011, there were 20,997 CDCs for which the DLA is responsible; duties include the provision of payment to child caregivers, of materials and of supplementary food (lunch and milk). Within these CDCs, the total number of children who attended was 1,141,184 (OEC, 2012; MOE, 2013). UNESCO (2006) and Wilkinson (2009) concurred that the local authorities have a significant role in the childcare institutions in terms of providing an adequate education service in terms of quality and through supporting educators. The local government administration has been assigned management of local education according to the needs within that locality. Consequently, the Municipalities and Sub-district Administrative Organizations (SAOs) are responsible for providing the early childhood care and education services for children in the communities because these are the organizations most closely associated with the people in local areas (Hrigchan, Pichayakul and Kosalanantakul, 2008).

The National Education Act, B.A. 2542 (1999) and Amendment 2nd edition, B.A.2545 (2002), section 10, states that equality within education must be guaranteed through equal provision of educational opportunities to all people for at least twelve years. In effect, the state must provide its citizens with free education. Unfortunately, despite the state's policies involving free education for the poor and the underprivileged, inequality in education persists as a major issue (Achavanantkul, 2011 cite in Thumthong, 2014). There is a quantifiably large gap in the quality of early childhood education delivered to children in isolated areas compared to city areas. Educational inequality is consequently

a policy issue which has been under substantial discussion over the past decade (Chiengkool, 2009; OECD/UNESCO, 2016).

The DLA on behalf of the MOI is responsible for providing quality education to the local children in the form of CDCs. Sricharatchanya (2016) elaborates the point that the quality of the centres depends on the context, skills and knowledge of early childhood educators providing these services to young children. The parents rely on sending their children to attend CDCs and trust child caregivers to nurture their children while they spend their time working. Working with young children is stimulating and diverse and this job requires accurate knowledge and understanding based upon professional values, skills and capabilities along with a sense of personal responsibility in order to ensure that practitioners provide appropriate opportunities for the young learners to reach their potential (Scott et al., 2008; Bruce, 2015; Neaum, 2019). Suwannasuan et al.'s (2015: 182-183) study revealed that educational management problems with underprivileged children who lived in the highlands of Thailand stem from “first, in terms of students [...] they live in poverty and they do not support their children to further their education. The students also lived far away from schools. Furthermore, in terms of schools, the curriculum was not suitable for school located far away from the students. The teachers lacked understanding regarding their students”.

In essence, there are still three main factors contributing to the disparity between urban and rural areas: the government problematic policy itself; the quality of educators; and the economic background of the parents (Chiengkool, 2009; Oviedo, 2009; Schmidt, 2011), each of which will be discussed in more detail later. According to this study, the child caregivers working in the rural CDCs frame everyday self-perceptions of their practices and self-evaluations around their performance within the context of cultural,

economic and environmental challenges; such challenges experientially and qualitatively impact upon their day-to-day practices.

2.5 The Child Caregivers' Qualifications, Training and Standards

It is critical to understand that the role of the child caregiver is to assist parents by taking care of young children during the day whilst at the same time educating the young children by developing their essential skills in order to prepare them for further education. Therefore, caregivers ought to have proper knowledge so as to enhance children through activities in order to meet the early year learners' development needs, interests and needs (Bosch and Jacobs, 1998 cited in Sudijainar, 2013; Vickerius and Sandberg, 2006).

According to the Long-Term Policy and Strategy for Early Childhood Care and Development (0-5 Age Group) 2007-2016, the Office of the Education Council, Ministry of Education (MOE, 2007: 9) states that in childcare centres for children aged 2-5, "Parents, guardians, teacher and childcare providers are required to have knowledge and understanding, as well as the capacity to appreciate the importance of development of those in the 0-5 age group, in order to properly nurture the children, with care and experiences, thus enabling them to learn and develop themselves to the best of their ability". It is clear that young children need a high-quality early years educational provision; this can be assured in part through an effective qualifications structure attainment through which helps confirm that the practitioners will perform with the knowledge and skills in order to work with young children.

2.5.1 Qualification and Training

The child caregiver is defined by Curtis and O'Hagan (2003) and Wood (2013) as a worker who identifies and meets young children's care, support and learning development needs and, finally, supervises learning activities in order to provide the best experiences for young children. Indeed, the child caregiver should ensure that all children in their care feel included, secure, valued, and happy to spend their learning time in CDCs. Child caregivers need to provide essential learning and development opportunities through setting realistic activities and challenging expectations, thereby in summary, meeting the various needs varied children. Similar to the Long-Term Policy and Strategy for Early Childhood Care and Development (0-5 Age Group) 2007-2016, the Office of the Education Council, MOE (2007: 21), therefore states that the main strategy for developing children in the early years group lies within ensuring that: "Childcare provider, teachers etc. are true professionals, endowed with knowledge, desirable attitudes and values as well as the most appropriate and best skills for the protection and all-round development".

In relation to the question of Thai educators' levels of qualifications, as previously discussed there is an increasing awareness of the significance of early years education, which requires qualified educators to be performing well and enhancing young children's development and learning (Holman, 1995 cited in Rodd, 1997). The DLA specifies that in relation to child caregivers' qualifications: "the minimum requirement is that they are over 18 years old and have completed nine years of compulsory education (secondary school). Furthermore, national standards for childcare centres now require all child caregivers to undergo a six-week training course, based around a standard core

curriculum, either before they are hired or within three months of their employment, provided by any institution approved by the MOE.” (UNESCO, 2011: 18).

In addition, practitioners who complete a bachelor’s degree in early childhood education and hold a teaching license have the opportunity to become civil servants whilst others (who are unqualified) will be assigned the status of local government employees; however, this depends on the jurisdiction of the chief of local authority (MOE, 2016: 15-18). There is also as discussed by Bhulpat (2012), a view that childcare providers should continue to learn and attend training programmes in order to update their knowledge. Training session programmes consist of minimum 20 hours per year around working skills, and are intended to be tailored, individually catering to child caregivers’ needs by providing various kinds of immersive, reflective and observational learning experiences. These include classroom observation, teaching technique and individual counseling. Qualified child caregivers can thus help young learners achieve early learning goals on condition that they maintain and augment the quality of their teaching through attending basic training sessions.

Beyond this, the practitioners are mandated to provide appropriate care and support children around developing their curiosity and knowledge. The MOE (2007: 26) produced guidelines around offering quality early childhood education through its Long-Term Policy and Strategy for Early Childhood Care and Development (0-5 Age group), 2007-2016. These guidelines stipulate that each educator should “Provide services for strengthening knowledge, understanding and skill-training for parents, family members, childcare providers, teachers regarding early childhood psychology and appropriate and suitable methods of rearing all young children in different situations in accord with their age”. Unfortunately, in Thailand, there are no administrative structures responsible for

early years educator training; therefore “most training programmes are dependent on the perceived needs and budget in each school or school department or more particularly on the resources of individuals” (Lungka, 2015: 7).

It is crucial for educators to be trained, which as UNESCO (2011) and Sudijainark (2013) indicate, means that the onus is on educators to develop their roles efficiently and update their knowledge and understanding in relation to providing proper learning activities which are beneficial to young children. In terms of the child caregivers’ development, it is stipulated by the DLA that child caregivers should undertake further education programmes to increase their knowledge skills and experiences, which help to improve the quality of childcare provision. Consequently, the child caregivers should be involved in in-service training sessions, as organized by the DLA (consisting of 5 days/35 hours) and other agencies with regards to educational providers and early years carers (UNESCO, 2006: 8).

The DLA (2012) has one significant mission; providing and supporting education for local children within its jurisdiction through ‘establishing child development centres for small children aged 3 to 5 years’ (MOE, 2015: 12). As childcare providers, they are expected to have enough knowledge and be well prepared enough to work effectively and efficiently; as a consequence, and as mentioned above, the DLA has promoted essential workshop-training programmes for them. The DLA has established training topics (Bhulpat, 2012: 7), consisting of 11 categories for practitioners who work under the jurisdiction of the DLA, which relate to childcare practices and early childhood education. These practices can be found detailed within the table 2.1 below.

Table 2.1 The topics of child caregiver’s basic training by the DLA (Bhulpat, 2012: 7)

Topics of the training
1) Children with special needs
2) How the environment and learning build the brain
3) Classroom management for young children
4) Young children’s development
5) Learning experiences for young children
6) Observation, record, assessment and reporting young children development
7) Creating materials for young children
8) Nutrition for young children
9) Promoting integrity and ethics for young children
10) Health and safety for young children, and
11) The importance of song, poem and circle activities for young children

The provision of early childhood education and CDCs’ operations seek to educate young children with an emphasis on the overall development of their physical, social, emotional, verbal, cognitive, and intellectual skills. Crucially, child caregivers whose work involves offering care to develop children may find that workshop-training programmes are very useful. These can provide child caregivers with both theoretical insights and details of appropriate practices regarding young learners’ development and learning.

In addition, the DLA requires practitioners to attend 20 hours per year of additional training sessions aimed at improving their working skills around children; the content must be devised according to individual needs of child caregivers with the aim of affording them various kinds of experiences such as classroom observation and individual counseling. Along with these professional qualifications, it is expected that they will enjoy working with others, are well prepared for classroom life and will choose appropriate methods for teaching (Bhulpat, 2011). All teaching training should be appropriate and related to the practitioners' practices, relevant to children's ages and stages of development, attuned to learners as unique individuals, and responsive to those social and cultural contexts within which both practitioners and young students live.

Essentially, the quality of provision within early years institutions depends on all practitioners having suitable qualifications and training proficiencies commensurate with their roles and duties. Jaturapat (2004) indicates that training can increase practitioners' knowledge, understanding and teaching skills in order to work professionally. Despite this, Lungka (2015: 8) argues that: "in Thailand, most of the content used in the training that does exist focuses on the development of cognitive skills more than social skills, for instance developing scientific and mathematical skills, and there are no other agencies providing training for teachers in developing children's social skills, despite their key importance".

2.5.2 Standards of child caregivers

The DLA has the responsibility of inspiring and supporting the provision of good-quality and standardized education in Early Childhood Development (ECD) programmes along with CDCs. The Centres are obliged to provide proper development of children's skills,

which are deemed to be physical, emotional, social and intellectual skills. Besides, the Centres retain the Standards Operational Guidance for Child Development Centre, B.A.2559 (2016), established by the DLA to determine functional standards in order to be able to deliver the quality and appropriate education and care to young children (MOI, 2016).

Within this research study, attention has been paid to the performance of child caregivers in CDCs, particularly with attention to those based within rural high mountain areas remote from various facilities. The aim, as discussed, of setting up CDCs is to implement the government's education management policy around provision of equal education in all regions within Thailand (MOI, 2016; MOE, 2017). The operating standards of the DLA attempt to ensure consistent delivery of sufficiently well-developed policy that allows young learners to learn and develop appropriately. It was on these grounds that the DLA launched the Standards Operational Guidance for Child Development Centre under the Department of Local Administration, Ministry of Interior, B.A. 2559 (2016) providing guidance and mandatory standards in respect of child caregivers' operations within CDCs.

The purpose of the standards is to help local authorities and childcare providers understand in greater detail the DLA's expectations around how to provide proper and equalized education and care for young learners aged two to five years throughout the CDCs. These criteria can be divided into 6 areas (MOI, 2016: II), with each defined as follows:

(1) Standards for management of CDCs

The CDCs of the local administration organization are considered to be an educational institution under Section 4 of the National Educational Act, B.E. 2542 (1999). Local

authorities are therefore responsible for the CDCs' operation in terms of academic principles, laws, regulations and other relevant orders with cooperation from local communities. The management can be divided into 2 areas, which are educational management and budgetary management (MOI, 2016: 1).

➤ *Educational Management*

The CDC is a place where parenting and experiences are provided for young children in order that they can develop their skills according to their age and potential. Consequently, the duration of learning management and its guidelines are crucial and need to be “implemented continuously and appropriately so that the children can receive education and development appropriate to their age” (MOI, 2016: 2). This also has highlighted the need to be consistent with the social and cultural contexts as well as use local wisdom and the curriculum for early years education (MOI, 2016). In this regard, the local authorities have to provide education based upon an understanding of local backgrounds in order that young learners may achieve this objective. Education has always played a significant role in the culture of Thailand particularly in disadvantaged areas (MOI, 2013).

➤ *Budgetary Management*

The budget used for the management of the CDC is obtained through the DLA and the income of the Centre itself. Local governments also need to provide a budget for Centres in accordance with principles of encouraging educational development (MOI, 2016). Nitain and Ketsiri (2014: 133) suggest in their study regarding financial administration that “abiding by laws and regulations and transparency should be practiced”. Kanmok (2010) and Wanrawae and Utairat (2017) argue that there should be sufficient budget

within the CDCs, as a percentage of revised overall funding reasonably awarded to them, for the organizing of education activities applicable to young learners.

(2) Personnel Standards

In order for the CDCs to be able to operate to high standards, efficient and systematic personnel management is required. The MOI (2016: 16) thus states that: “child caregivers must hold a bachelor’s degree in education in early childhood or hold a bachelor’s degree in other fields but with at least 3-year experience or training related to early years’ development”. Additionally, they must possess a certificate of teaching or be able to demonstrate that they are capable of performing early years’ teaching tasks. Likewise, the MOE (2007: 18) describes their mandate as being: “to provide all children in the 0-5 age group with an opportunity for quality development to their highest potentiality [...] with the children providers and all segments of society participating in providing desirable and suitable services and environment in keeping with the local context and the children’s development in accord with their age”.

CDC administrators are comprised of local government organization executives, government administrators responsible for the Centre, and personnel in the field along with other staff such as food caterers, janitors, and mentors. Collectively, they ensure that successful educational provision is provided according to early years principles. The main responsibility for management of CDC lies with child caregivers (MOI, 2016). Despite this, Taecharungroj’s study (2014: 78) argued that: “more children and less caretakers lead to higher caretaker problems”. Similarly, Maboon (2011) revealed that child caregivers faced challenges stemming from lack of financial and human-resource assistance and which were exacerbated by having to perform additional works alongside

teaching and taking care of young learners. The cumulative effect of these responsibilities without adequate provision was that their performances were detrimentally impacted.

(3) Standards for Buildings, Environment and Safety of CDCs

In terms of the construction or renovation of buildings and management of the surrounding landscape, durability, sturdiness, sanitation and security for children must be taken into consideration. The Centre should be appropriately sized, should not be in a dangerous area and the doors and windows should be in good condition. In addition, the area has to be clean and safe, since the sanitation will directly affect the children's health (MOI, 2016).

In terms of buildings, environment and safety administration, "maintenance of buildings and environments to keep the Centres safe and habitable should be promoted" (Nitain and Ketsiri, 2014: 133). It is essential to guarantee that both child development and children's health are promoted, and the parents can rely on the fact that their child will be safe while being in the CDCs.

(4) Academic Standards and Activities according to the Curriculum

Caregiving, organizing learning experiences and promoting the development of young children are all important missions within the education management of CDCs, as supported by local administrative organizations. Educational providers have a responsibility for activity planning, materials usage and evaluation of children's learning. The availability and strategies underpinning the selection of learning materials are both key aspects relating to educational provision within local areas; this importance relates to practical provision, the applicability and efficacy of national guidelines, and critical evaluations of caregiver performance by local administrators and research studies

including this current study alike. Specifically, as determined within the guidelines, provision of materials has to ensure that these are diverse in order that young children gain the opportunity to learn different skills.

In turn these skills underpin learner development around cognitive, social and emotional skills and knowledge, and must be cultivated within appropriate settings; the form and subject content of exercises and environments are both ultimately based upon early years curriculum guidelines (MOI, 2016). In order that young children receive appropriate education and development around their physical, emotional, social, and intellectual needs, the teaching and learning will consist of an integrated approach based upon the aforementioned engagement with activities planned by practitioners (Buain, 2017).

Hay (2015) further supports the contention that effective education for young learners involves both development of an applicable curriculum and the use of qualified practitioners with proper knowledge and understanding in areas of young children's development and learning. Therefore, the practitioner has responsibility to design activities, providing activities, using teaching materials and evaluating learning outcomes. However, Tepvorachai and Cheunarrom's (2018) study identified significant causal links between the child caregivers' background knowledge and their subsequent service provision within the CDCs. They found that the child caregivers invariably identified their overriding responsibilities as being provision of good education and care of young learners in order to prepare them for further education, regardless of other caregiver background factors.

(5) Standards for Participation and Support

The teaching and learning activities of the CDC of the local government must be based on the participation and support from all sectors in society. This is important, as it is the

cooperation in terms of the resources as well as social investments that has to be used to its potential to develop the children and prepare them for higher education. This is also important for strengthening relationships within families and local communities in order to meet the needs of society (MOI, 2016).

With regards to the educators within remote CDCs, the OECD/UNESCO (2016: 28) claims within the Reviews of National Policies of Education in Thailand that: “Educators in disadvantaged areas need more support to improve the outcomes of students who are at the greatest risk of falling behind”. Thus, if educational management of local government is accepted and supported by the local authority, community and the society, budgets can be efficiently allocated, and other essential support provided which ultimately helps ensure positive outcomes around delivery of education and care of young children alike. Furthermore, Tepvorachai and Cheunarrom’s (2018) study reiterated that when CDCs operate effectively, the child caregiver provides opportunities for parents to become involved in activities settings for young children. Furthermore, the parents provided fully encouragement in response to child caregivers’ requests for support.

(6) Standards for Promoting the Network of Early Childhood Development

The operation behind creating a network for CDCs is predicated upon collaborative learning exchanges between CDCs in order to promote early childhood education and disseminate their best practices around teaching and provision of early years activities. This is also an opportunity for practitioners to participate in early childhood development organization in the form of CDCs. The Network Operations Committee may be established or appointed to strengthen the performance of early childhood development within respective local government organizations’ CDCs (MOI, 2016).

Child caregivers need to recognize, integrate and analyse approaches to maintaining education management standards relating to caring for young children. Essentially, their practices should be appropriate to children's age and developmental status, attuned to them as unique individuals, and responsive to the social and cultural contexts in which they live (MOE, 2013a). Furthermore, Scott et al. (2008) claim that child caregivers must have the ability to practice principles relating to good instruction and respond appropriately to young children. Despite this, Kaewsawa's (2017) study revealed that the overall problems identified relating to the child caregivers' performances stem from local authority administrative practices and degrees of support around personal development; issues at these levels are correlated with qualitative underperformance on the part of practitioners.

This current study focuses upon the child caregivers, who are trained to meet specific DLA's standards within teaching settings when providing education and care to underprivileged young children. The study investigates the main factors and challenges determining child caregivers' day-to-day practices as well as impacting upon the assessment of professionalism in the proficiency of child caregiver throughout their performances within CDCs under the Standards Operational Guidance for Child Development Centre, B.A.2559 (2016) (MOI, 2016).

2.6 Child Caregivers' Roles

The National Education Act of B.E. 2542 (1999), section 22 states that "Education shall be based on the principle that all learners are capable of learning and self-development and are regarded as being in the moment. The teaching-learning process shall aim to enable the learners to develop themselves at their own pace and to the best of their

potentiality” (ONEC, 1999: 12). Attached to this, Bredekamp (2010) states that a significant goal in teaching young children is identifying a way for them to receive proper development and learning, thus encouraging them to overcome their challenges and complete their goals for uninterrupted learning.

The Standards Operational Guidance for Child Development Centre under the DLA, MOI, B.A. 2559 (MOI, 2016), relates to the Early Childhood Curriculum, MOE, B.A. 2560 (MOE, 2017); both affirm the division of daily activities between those serving children aged two years and those enabling children of three to five years. In addition, the early years practitioners are obliged to understand these capacities of organization and delivery of appropriate educational activities and care with regards to young learners towards the ends of development and learning.

➤ *Scope of Daily Activities for Children Aged 2 Years*

Activities for children aged two years are crucial for physical emotional, mental, social, and intellectual foundations. Activities should be consistent with the needs, interests and abilities of children according to their age. Such consistency can be achieved by integrating learning activities through parenting according to their daily lifestyle and age. Movement and balance, for instance, encompass heterogeneous activities promoting use of arms and legs muscles, hands, fingers and other parts of the body, thereby emotional development and a healthy mind through providing an environment that encourages children to feel warm, happy and able to express their inquisitive qualities. In terms of promoting social skills, the practitioner should therefore create activities that encourage children to interact with other people and the environment around them.

Children need to be taught how to play in groups with others and how to share and wait. Therefore, promoting language skills is an activity that practitioners need to employ, whilst children need to speak and say a variety of words along with also learning to express their feelings gesturally (MOI, 2003; MOI, 2016). All early years institutions aim to offer young children a daytime environment which is safe with healthy mealtimes along with an array of learning opportunities (MOE, 2003).

➤ *Scope of daily activities for children aged 3-5 years*

Activities for children aged three to five years foreground the development of large and small muscles in order to help the children successfully use their body within their present routines and future activities. There is an emphasis upon emotional development and inculcating morality and ethics within children which is related to good attitudes towards the self and others; children are thus encouraged to become confident, assertive, self-disciplined, responsible, honest, and sharing. These attributes are inspired through activities that allow children to make their own decisions whilst within their structures teach morals at the same time in order that children acquire good manners and follow ideals associated with public and private conduct within Thai culture.

Through engaging with sessions children should be able to become independent in carrying out daily routine tasks and be aware of their own safety. Therefore, it is important that practitioners provide opportunities for young learners to train by performing daily tasks regularly. In addition, within properly run CDCs, young children are able to become involved in discussion periods concerning various topics and have worthwhile discussions with experienced guest speakers, clearly advantageous to their

development, as well as the opportunity to use language to communicate with other (MOE, 2003; MOI, 2016).

In terms of this study, underprivileged young children grow up within poor environments and lacking various learning opportunities according to their life conditions. There are considerable empirical and correlative indications of links between social privilege or deprivations and the quality of educational provision available to students (Fujioka, 2002). The practitioners' role is significant in providing relevant learning activities in order to fulfill their responsibilities around providing essential skills provision to these young children. Drawing on the Standards Operational Guidance for Child Development Centre (MOI, 2016), childcare providers need to appreciate these principles when engaging in early years education management in order to provide appropriate learning activities for children according to their ages and abilities. Prasartpornsitichoke and Takahashi (2013) argue that practitioners should focus on young children by taking into account the context of the children's lifestyle, community, traditions and culture.

The professional standards of early years educators who work in the CDCs under the DLA, MOI are addressed by the same regulations governing preschool teachers who work in schools under the MOE. According to the Long-Term Policy and Strategy for Early Childhood Care and Development (0-5 Age Group), 2007-2016, MOE (2007: 21), referring to the early years educators' professionalism in relation to development of children in the 0-5 age group, "childcare providers and teachers are true professionals, endowed with knowledge, desirable attitudes and values as well as most appropriate and best skills for the protection and all-round development. The environment should also be conducive to their development, with continuous participation and cooperation of parents, guardians and family members". As discussed, all teaching practices should be

appropriate to children's ages and developmental status, attuned to them as unique individuals, and responsive to the social and cultural contexts in which they live.

Yangbuddha's (2010) study points out that in order for child caregivers' performances to be professional, they need to be trained around understanding young children's development and learning levels so as to deliver quality and creativity learning activities for them. Yangbuddha also highlights various learning experiences which utilize local resources and integrate these within activities based around both inside and outside classroom settings.

The National Standard for Early Childhood Care, Development and Education Thailand B.A. 2562 (2019) recently established the appropriate ratio of childcare providers to children within materials assigned to all early years institutions. This standard consists of one childcare provider per 10 - 20 children within the two to three age group and one childcare provider per 15 - 30 children within the three to five age group (Committee of National Early Childhood Care and Development, 2019). This ratio seems to best facilitate positive interactions between childcare providers and children, and it may affect the quality of CDCs, which impact on children developing and learning.

2.6.1 Child Caregiver - Children Interactions

The interaction between practitioners and children is an important element in developing the secure emotional base essential to children's learning and thus ensuring the quality of early childhood education. Standards from the Developmentally Appropriate Practices (DAP) launched by the National Association for the Education of Young Children (NAEYC) highlights the significance of appropriate interactions such as sensitive and responsive contact which enhance young children's social-emotional development

(Copple and Bredekamp, 2009). In particular Bredekamp (1987) cited in de Kruif et al. (2000), describes how the interactions between early years educators and young learners are perceived to be developmentally appropriate when the educators: (a) immediately, quickly, straightforwardly, and lovingly respond to children; (b) thoroughly deliver a diversity of opportunities to contribute in verbal interactions; and (c) cautiously specify and clarify on the children's development and organize proper activities.

According to Love et al. (1996: 6) it is possible to define the quality of childcare providers' roles in terms of interactions where: "caregivers encourage children to be actively engaged in a variety of activities; have frequent, positive interactions with children that include smiling, touching, holding, and speaking at children's eye level; promptly respond to children's questions or requests; and encourage children to talk about their experience, feelings, and ideas". Elicker and Fortner-Wood (1995) and Whitebread (2003) also highlight various interactions with childcare providers, of a sensitive and reactive nature, which are valuable to children's learning development. The quality of collaboration between educators and children has a direct influence on the children's development and learning consequences (Mashburn and Pianta, 2010).

With regards to CDCs in Thailand, Bhulpat's (2016) study notes the importance of connections established within CDCs between child caregivers and young children, highlighting that the child caregiver assumes a leadership role in guiding the development of trust and clear communication-based relationships within one-to-one and whole-class interactions. Commencing CDC day sessions with greeting, smiling, hugging, and using gentle tactile reassurance towards young children in the morning helps generate an encouraging atmosphere for and amongst young children; this atmosphere in turn creates associations between the care environment and feelings confidence, protection and

stability in children's minds. This current research study focuses upon CDC work carried out within rural regions located in high mountainous areas populated by hill tribes.

As Chapter One discussed, the young children have their own cultural values, beliefs and diverse dialects unique to each region along with their families (Fujika, 2002; Kaewnuch, 2010), which provides specific challenges and thereby demands definite skills relating to knowledge and adaptability on the part of child caregivers. As set out earlier, this thesis study examines potential shortfalls, as addressed in previous studies, within the nurturing of children in relation to the CDC's environment in terms with of guidelines around educational standards. It reassesses the degree to which these are present as well as identifying strategies in current critical literature and suggested by practitioners themselves for addressing these needs. Therefore, this current study is clearly essential to consider the context in which young learners grow up and the importance for child caregiver practice of developing good relationships with learners which lead to a better understanding of the learners' behaviours as well as addressing knowledge gaps and promoting self-reflection upon practice by the part practitioners.

➤ *Verbal collaboration*

It is worth highlighting the significance of good initial interactions as these underpin verbal collaborations offering children the opportunity to reflect, associate, and deploy a wide range of expression when interacting with practitioners (Hughes and Westgate, 1997), an issue this study will go on to explore. When using language to describe things to young children, the practitioner's input may clearly involve adjectives or idioms explaining the children's actions and providing triggers for them via the posing of questions pertaining to 'why', 'what', and 'how' when the occasion permits (Allen and Hart, 1984 cited in MacHaughton and Williams, 2009), thereby teaching as well as

drawing upon pre-established conventions familiar to the children. Through questioning, the practitioner seeks information from the learner; in this fashion the practitioner and the learner can exchange responses, with each response eliciting the next question from the practitioner in order to drive the discussion in accordance with the objective of the session (Carlsen, 1991 cited in Lucy, 2012).

Since questioning constitutes such a substantial element in educator-child verbal collaboration, Kyriacou (2014: 61) explicates the distinctions between ‘open and closed questions’, where ‘open questions can have a number of right answers, whereas closed questions will only have one right answer’. Open questions offer children the chance to demonstrate their experiences, thinking, understanding or feeling about what has been asked, and the answers can be one of many probabilities. Conversely, closed questions normally elicit a short response requiring minimal thought processes or cognitive processing before responding and limited communication (Wells, 2009).

Additionally, McNaughton and Williams (2009) emphasize one teaching technique, which involves using verbal techniques to encourage understanding in children of the complex dissimilarities as well as parallels between occasions, people, and things. They also suggest that the educator use descriptive language as clearly and accurately as possible. Descriptions can increase children’s vocabulary; the child caregiver in this instance must use appropriate words in order to establish a basis for understanding. The child caregiver should facilitate children’s interaction and encourage children to share their knowledge and understanding with others using their own descriptive language.

It is key to establish that young learners involved in the classrooms during the observation sessions were hill tribe young members who not only spoke their own mother tongue as a first language but also needed to learn standard Thai language in order to pursue

subsequent core education opportunities. Hovens (2002), cited in UNESCO (2016: 133) states that “Children who are given opportunities to obtain early literacy skills in their own, home language have been found to be better adjusted when they start primary school and more able to transition efficiently to learning in a second language”. UNESCO’s (2016) study found that minority-culture youngsters become more confident around learning freely when able to use their language in the course of studying. It is well established that early years students naturally absorb information, are known to benefit from actively learning and learn particularly well through a variety of activities.

Furthermore, when these children have a secure relationship with their childcare providers, they are more likely to be receptive to exploring tactile objects, sensory phenomena (like sounds), naming and concepts of language, and concepts of community and belonging within these learning environments. Security in this case starts with a baseline of common verbal communication as well as extralinguistic techniques and common cultural familiarity. When engaging hill tribe young children, the practitioners understand that they need to strategically communicate with the learners within their own dialect whilst inserting Thai language phrases into the teaching sessions. The nature of this practice-descriptions of its form and evaluations of its efficacy-needs to be framed within a detailing of those circumstances in which the practitioners provide education and care for the learners within both languages.

2.6.2 Teaching techniques

As a means of providing information to young children, the childcare provider may choose from a range of appropriate methods: these include questioning; proposing cues; adding more of a challenge to tasks; and offering opportunities and encouraging children to work together with peers in terms of ideas and solutions. The educator is completely

responsible for deciding to use the teaching methods in order to stimulate young learners' learning abilities as well as preparing them. In supporting the children's achievement in activities, the child caregiver provides opportunities for encouraging children's thinking and learning without any interruption (Hyson, Tomlinson and Morris, 2009).

Child caregivers can engage children in a range of activities which promote awareness of interpersonal relationships pertaining to children and other children, children and caregivers, children and family units and children in relation to society. They are trustworthy to help make children's learning easier. Tomlinson and Hyson (2009: 150) advocate that childcare providers should be characteristically 'warm, caring, and responsive' and every child under their responsibility should be deemed a priority in order that healthy relationships be constructed and maintained with each of their charges. Physically helping can form part of these interactions, for instance aiding a child with a task with which they are struggling or encouraging them to achieve a solution by using materials (McNaughton and Williams, 2009).

As a practitioner, choosing the appropriate methods can be deliberately or unconsciously utilized to develop the young learners; this development is an integral part of every exercise. The techniques discussed below constitute a sampling of good practice in accordance with the practitioners' obligations around providing effective services for young learners and in turn such sampling can assist the researcher in developing a framework for observations.

➤ *Guidance*

Children practice and learn to develop their skills through two methods; namely, listening to instructions and observing consistent behaviour from the educator as in the form of

learning guidance (Tu and Hsiao, 2008). Subsequently, they imitate each step physically. With regards to realizing goals around children's learning development, educators provide opportunities for children to associate with peers, undertake hands-on activities and explore within their environment, thus practicing their basic life skills (Copple and Bredekamp, 2009; Parker and Neuharth-Pritchett, 2006).

In terms of instruction, the educator needs to plan procedures and activities before starting a lesson. Then, the educator needs to instruct children how to approach a task in detail (Whitebread, 2003). This can be done through engaging the children in discussion about real experiences whilst providing direct instruction to them at the same time. However, Gillies (2006) argues that the approach of giving direction on a task can reduce creativity, since children are given only one direction as how to approach a task and may therefore have their development compromised. One suggestion should be provided at a time, whereby young learners take the requisite time to work throughout the information intellectually before moving on to try out the other concepts presented by the practitioner.

➤ *Praise*

Additionally, praise is another part of the teaching approach in the form of reward and support given to children aside from coaching them on how to complete a task. McNaughton and Williams (2009: 68) define the term as: 'to praise someone means to show that you approve of what they have done and that their act deserves acclaim'. In terms of teaching activity, praise is a teaching strategy which supports and assures children that what they have achieved is correct as well as expressing gratitude for their efforts (Copple and Bredekamp, 2009). Verbal feedback in the form of praise, can be a positive influence for children's learning; it encourages children to continue with their

current method whereby they can develop their aptitude for completing tasks and accomplishing goals (Bronson, 2007 and Lucy, 2012).

Once the childcare provider engages young learners with good interaction, they are able to practice their essential skills by using their curiosity to discover and explore various environments and activities. In addition, the techniques such as describing, questioning, guidance and praise have to be merged into the discussion sessions between practitioner and young learners in a natural manner in order that they will be productive.

2.7 Key Issues with regard to the child caregiver's performances

The above sections of this chapter draw on the significance of education within young children's development and learning in terms of child caregivers' practices in order to provide appropriate education and care toward disadvantaged young children. Unfortunately, Thailand has struggled with inequality around education. Conversely, Prasertpornsirichoke and Takahashi (2013: 1) argue, in clarifying the issue of equality, that "Equality in education, an issue in many countries including Thailand, does not mean that all citizens must have the same level of education attainment, but rather that all citizens should be treated the rights, opportunities, and accessibility with regards to certain basic education." This study looks at work by caregivers within Child Development Centres under the administration by the DLA, MOI which have focused operationally around underprivileged young learners' development and learning.

The child caregivers are responsible for children's care and development, so they need to have sufficient knowledge and understanding, and possess the appropriate skills to develop children in terms of fulfilling their learning potential. Despite this,

Sricharatchanya (2016) contends that even children who attend early childhood programmes do not always receive the proper educational services they require. External issues and structural factors relating to educational service delivery potentially impact significantly on children's development and learning, particularly those learners originating from disadvantaged backgrounds. In addition, low quality provision in the CDC-based early years education was often evident within those areas where the majority of parents were living below the Thai poverty line. It is therefore clear that the quality of CDCs still needs to be improved, particularly, this study contends, in relation to developing and supporting those early years practitioners directly responsible for providing education and care to young learners (Prasertpornsirichoke and Takahashi, 2013).

There are several studies on practitioners' performances, which all differ in perspective and context. With regard to the previous studies, the practitioners were examined and had concerns around their knowledge, understanding and qualifications which were seen to impact on their performance.

➤ *Issues from staff themselves (Qualifications, knowledge, and training)*

Several studies have shown similarities with regard to the issue of the practitioners' performances. Chengkoon (2001) and Songsaree (2001), which highlighted lack of knowledge relating to child psychology on the part of childcare providers as well as, consequently, how to teach young children appropriately in accordance with their ages and interests. Likewise, Aekphong's (2008) study, which interviewed 80 child caregivers in 54 childcare centres in Thailand, found that child caregivers had low standards of knowledge when understanding child intelligence quotient (IQ) and emotional quotient

(EQ) development. Yangbuddha and Prasertcharoensook (2011) further reported that the child caregivers lacked sufficient knowledge for the purposes of educating and caring for children. They regularly did not have any knowledge and experience within early years education and did not likewise know how to arrange appropriate activities for the young learners.

This means that the childcare providers had no appropriate qualifications and experience in either child development or learning (Kuptusthein et al., 2001; Keenmok, 2010). Similarly, Jerajaturapornkul (2017) argued that the practitioners have little understanding of curriculum preparation due to inadequate knowledge and training. Knowledge and experience were both crucial within not only effective provision of education but also in engaging in holistic, caring work with young learners. Yangbuddha and Prasertcharoensook (2011: 164) further suggest the necessity for developing guidelines around childcare providers development which is “to provide training and field trip studies regarding how to care for children in early childhood. The caretakers need to be trained in quality care taking and there is a pressing need to establish the early childhood curriculum, written by experts and those with experience in educational management for the early childhood”.

Isaranurug et al. (2007) examined 20 CDCs and found that there was a lack of trained and qualified staff members in the Centres. Similarly, Lungka (2014) examined the teachers’ training programme and, upon evaluation, found it to be unsuitable and not sufficiently up-to-date for their current needs. Lungka thus recommended that training services develop high quality, relevant and up-to-date training appropriate for young children’s educators. In addition, the role of child caregivers in CDCs is complex, as identified by a myriad of studies which includes that of Suelierrm et al. (2008), which

found that child caregivers have additional jobs apart from their teaching, including paperwork, cooking, cleaning, and looking after the CDC environment and these can be obstacles that adversely impact upon their main roles. They suggest that the local authority should consider resolving these issues, since child caregivers are unable to work successfully without minimization of these obstacles and these can only be fully tackled at a more structural level through their local governments.

Despite this, Thianthad (2018: 1078) suggested that: “one practitioner alone could not provide an efficient performance; therefore, the local government should employ a local resident in the position of a monthly employee in order to assist the practitioner’s performance”. Likewise, Roa and Sun (2010) suggest another solution to resolve this issue which would be to provide more than one staff member per group of children. In other words, the problem can be at least in part resolved by providing an assistant to support the main childcare provider. Surprisingly, in 2010, the DLA surveyed the country and found that close to 20,000 Thai child caregivers had not attended official training sessions provided by the department. Through surveying 885 caregivers from 74 provinces of Thailand, the majority of whom have attended training organized by the DLA, Bhulpat (2014) determined that the knowledge of appropriate teaching techniques and approaches regarding children’s development and learning was low, with only 10.76% of caregivers meeting the requisite standard in this regard, and concluded that caregivers had not effectively improved their teaching skills in line with in the DLA regulations and through the training programme. Likewise, the MOE (2007: 12) argued that: “Teaching-learning activities are organized without understanding the basic concept of child learning”.

Young learners aged three to five years receive education services in the form of CDCs, which, as discussed above, have structural inadequacies which affect the way the children develop and learn. These issues should be considered due to the fact that child caregivers play an essential role in providing education and care for children during their development period. These aforementioned studies above examine issues relating to child caregivers' qualifications, knowledge and training, and conversely better provision, measurably impact upon young learners' development in the broadest sense of this latter term. This current research study explicitly examines child caregivers' performances with regards to disadvantaged young learners. The research parameters include accounts by practitioners and educational officers, as well as analyses from studies of previous researchers and this study's author determining how practices approach and adapt to culture-specific needs. Moreover, these needs created by family conditions relating to poverty and linguistic competency (in this case, in Thai) and the symbolic status of CDCs and child caregivers, are magnified by an objective lack of appropriate various learning resources.

Practitioners who chiefly form the basis of this study clearly have a significant role in providing enriching activities and instruction in order to develop the underprivileged children and to ameliorate the effects of resource shortfalls through their ingenuity and adaptability, in particular, to local holistic needs as well as more universal tenets around children's intellectual, affective and social development. In order to better frame these discussions and highlight the most salient issues with regards to the CDCs' teaching and care operations in the context of LAO support. The next section will discuss those studies which illustrate the issues addressed by, and stemming from, national policy and local government which impact on the practitioners' day-to-day performances.

➤ *Issues from policy and local government*

In operational terms management of the CDCs by local government currently involves adhering to guidelines of the DLA, which aims to properly develop the children in terms of their education. However, there are still a number of problems that cannot be effectively dealt with. Keenmok (2010: 145-149) cited in Nammanee, Ketsiri and Pakotang (2014: 117) reported that the main problem for CDCs' administration was the lack of adequate budgets around personnel development due to "the local authorities allocating most of the budget to local facilities". Likewise, Buranakanon (2010) cited in Tumthong (2014: 134-135) revealed that: "the budget allocation for educational management for underprivileged children is a complicated system. It involves complicated steps as well as delayed payments, and the budget allocation has not met the requirement of the target group".

Selaruk and Asawaphum (2015) contend, based upon their research, that local government organizations did not always allow their staff to attend training sessions due to limited budgetary support. Consequently, the staff remain underqualified which impact on the quality of early years educational programmes. Besides, Sawangkhot, Kumsri and Rittidej (2010) state that the child caregivers desired their local authorities' administrators support around attending basic training sessions relating to the early year learners' development as well as onto increasing caregiver work productivity in order to meet the standard requirements of the DLA. This is consistent with the research of Boonmee (2011), which claimed that problems and obstacles of the CDC and the local government primarily stem from lack of understanding on the part of caregivers, curriculum inadequacies, flaws in activity management, flawed evaluations of child development, as well as absence of funding for teaching aids and playgrounds. These

problems arguably stem from the fact that the local administrators do not value the management of CDCs as a priority (Kantabutra and Tang, 2006).

In fact, the evidence points to local administrators paying more attention to facilitation services rather than educational management within CDCs. Due to rural Thai society lacking the awareness of the importance of education for young children the measures to take care of and support these groups of children are insufficient, both at the level of policymaking and on the ground, and also with resource-driven authority to perform tasks (Buranakanon, 2010 cited in Tumthong et al., 2014: 134-135). Buranakanon also argues that the lack of understanding within early years education sustains these structural impediments through a combination of practical actions combined with the lack of continuous follow-ups from the authorities. Consequently, researchers have identified inconsistencies with regards to the fulfilment of educational institutions' responsibilities and regional inequalities regarding the provision of useful activities and projects.

There have been several studies, as discussed in this literature review, relating to practitioners' performance and the challenges encountered which impact the CDCs' operation and the practitioners' practices. Despite this, from a policy and scholarly perspective, there is a discernible lack of studies focusing on rural CDC practitioners' perceptions of their roles in principle and practice, including empirical observations of day-to-day practices, specifically at the CDCs which are located in high mountainous regions and provide education and care for early years students from hill tribe communities. Such studies would potentially allow the researcher to learn more about the main factors and challenges in rural areas and provide a foundation for practical policy as well as educational research. Therefore, this study seeks to address this disciplinary gap by highlighting child caregivers' performances relating to provision of education and

care for underprivileged young children and support from local government. In doing so, it will examine the practitioners' levels of knowledge and understanding about how to develop young children effectively as well as providing the basis for further empirical research, guidelines and institutional analysis of educational provision at a national, regional and CDC centre-based level.

Additionally, the practitioners experience receipt of internal support from their local authorities or external support from communities, and how these support systems actually, and symbolically, affect participant performances and mindsets. Critical reflections from their views and the data from the direct observation will in turn allow the development of actionable information for the DLA, providing in turn a more comprehensive picture of the condition in rural CDCs. The rural CDCs operate less professionally than urban ones and there the policies around improving educational attainment must therefore be a priority in order to reduce the inequality of early years educational provision

2.8 The challenge of theory in child caregivers' practices

Child caregivers are responsible for ensuring that their performance appropriately encourages children's development with particular reference to their knowledge and understanding of principles and practices associated with early years' development and learning, and stimulation of young learners' curiosity (Davidson, 2005). The task for childcare providers is to establish proper expectations and deliver according to standards and practices laid down by the government through provision of various activities for preschoolers. The early years activities need to be supportive, sensitive, and provided within a stimulating environment which encourage development and learning through a

nurturing adult-child learning relationship (Burchinal et al., 2008 cited in Tomlinson and Hyson, 2009). Tomlinson and Hyson (2009: 113) further argue that:

“Preschoolers revel in their increasing coordination, using their bodies exuberantly. They thrive in an environment with new materials, roles, and ideas through various projects and especially through play; they have great interest in feelings and are better able to express and label their emotions and identify others emotions; they make some important gains in cognition, allowing them the pleasure of representing their world in pretend play, symbols, objects, drawings, and words; and given a rich language environment, they show astonishing gains in language skills”.

McClelland, Acock and Morrison (2006) argue that early childhood educational institutions contribute to enhancing children’s learning skills. Thus, early year educators need to have an understanding of children’s learning and development, teaching methods, and management of classrooms with children from different backgrounds. Moreover, a study from Kugelmass and Ross-Bernstein (2000) cited in Lucy (2012) identifies specific influences upon adult and child interactions. These include education, training, theory around children development; teaching experience; preceding work experiences; and general knowledge in the context of with childhood development and learning. With regard to early years education development in Thailand, the MOE (2017: 88) states that, “Early childhood education is deemed important to Thailand since it is the development of learners’ quality at an early stage of life. Policies and disciplines on early childhood development have been under continuous development’. This principle applies to all

educational institutions and must be observed by all agencies overseeing them as well as child caregivers and teachers managing their day-to-day practice.

In terms of managing local education, the DLA throughout the local authorities aims to develop local young learners' readiness to the basic education level. The mission behind education management amongst many local governments is the same; that is to provide education and care for the local young children particularly in rural areas where education was previously difficult to access. The CDCs as institutions provide the education and the local governments monitor the CDCs' duties: the latter's functions include assessing childcare providers' performance in order to verify operational consistency and delivery of appropriate support for young children's development and learning.

Conversely, the local government administrators do not understand the roles and responsibilities around educational management which constitute their own duties around early years education in terms of providing appropriate support to the practitioners (MOI, 2002).

The Local Education Management and Coordination Division, of the DLA, MOI (2002), states that the LOAs identify the aim of organizing education for local residents following the DLA's educational policy. Conversely, the local government administrators do not understand their responsibilities for educational management, which constitute their own duties around early years education in terms of providing appropriate support to the practitioners (MOI, 2002). Moreover, executives have the power to approve all local developments to meet residents' requirements, meaning that predominantly more attention is given to the provision of infrastructure rather than the CDCs' operational support (Selaluk and Asawaphum, 2015). This has led Yangbuddha and Prasertcharoensoon (2010: 165) to state that "guidelines in developing the administration,

finance, and supply include carrying out resource allocation and investment from various sources for education by setting up scholarships clearly as well as allocating more budget for education in order to be sufficient and covering educational the implementation”.

In addition, childcare providers form part of the local resident community and consequently apply for posts based on various reasons which include proximity to their homes, serving the communities where they were born, and developing young local children who may be their relatives or children of their friends/acquaintances (Sueluern et al., 2008). Furthermore, they may apply for these roles on the basis of needing a stable income or pride in working within local services/ the civil service. Nevertheless, the study conducted by Sueluern et al. (2008: 40) discuss how the childcare providers have many issues including, “Lacking knowledge about child development, lacking educational equipment, inadequate budgets and inadequate facilities”. As discussed, in addition to their responsibilities as early years practitioners, they also have further tasks such as cleaning, cooking, whilst sometimes they are assigned extra work from their local authorities. All of these additional responsibilities can be obstacles for their capability performance (National Institution for Early Childhood Education, 2002 and Sueluern et al., 2008).

Furthermore, the findings of several studies described above (detailed in section 2.6) found these challenges explicitly influence the child caregivers’ performances and indicate that caregivers are nevertheless unaware of how significantly their education and their understanding impact on the young children’s development and learning. In a significant number of cases, based upon the available evidence, practitioners create early years’ activities without proper knowledge and understanding about early years learning needs. Also, their local authorities are unwilling to deliver appropriate support to the

CDCs' operations and the childcare providers' personnel development due to the limited budgetary provision (Nammanee, Ketsiri and Pakotang, 2014; Pongdech, 2015).

These concepts are brought into this discussion since they have been established as having a significant impact upon how childcare providers perform with children, based on children's subsequent development and learning. This study examines the practitioners' perceptions and their performances in respect of disadvantaged young children's development and learning. Disadvantaged children often lack appropriate care and various learning opportunities. Therefore, child caregivers' qualifications, training and teaching techniques are critically important in creating developmental early years daily activities. Consequently, their performance should meet the standards established by the DLA.

2.9 Conceptual framework

Based on the following research questions detailed below, the conceptual framework is structured so as to provide a clear and focused direction for the researcher (Hatch, 2002). By so doing it can provide actionable information as well as making a contribution to academic research in the field of early childhood education. Through the designated research questions, the study will look to ascertain:

- i. What role do current child caregivers think they are playing in the education system?
- ii. Do child caregivers' levels of professionalism match the demands of the Department of Local Administration's policy and standards?
- iii. To what extent do child caregivers think that the Department of Local Administration's policy and standards on early childhood meet the Department's aims and objectives?

The above questions will lead the study to investigate possible answers in the context of rural education, using this as a case study which is positioned within larger Thai-based educational policy and practices but yet which seeks to make a practical-theoretical driven contribution to provision of education for disadvantaged, predominantly minority groups within the region in question. The conceptual frameworks are essential in order to create practical and analytical research outputs. There is substantial literature, suggesting that child caregivers' perceptions underpin their practices (Coopple and Bredekamp, 2009; Tomlinson and Hyson, 2009; Bhulpat, 2011; Lucy, 2012, Sudijainark, 2013; Gambaro, Stewart and Waldfogel, 2015). In this area, determinant factors involved may include the attitudes and teaching styles of child caregivers. A study of the literature also points to the fact that child caregivers' qualifications, knowledge, training and support from the local authorities directly affected their effective performance (Wilkinson, 2009 and Taecharungroj, 2014).

The child caregivers' performances and the collaboration between child caregivers and children have a significant impact in terms of children's development and learning. It is found that the overall quality of the programme and other external factors relating to child caregivers, as well as those implicit within child caregivers' perceptions of themselves and their characteristics, also discernibly affect the quality of the early education programmes. Critical reflections by child caregivers undertaken as part of this study and recorded as part of its research outputs will help to overcome challenges by allowing theory to be developed as well as better applied through practice: by implication, it is the child caregivers who can make a difference.

As discussed above, the main focus in this study lies within rural areas where the child caregivers work with disadvantaged young children throughout the CDCs. It is

recognized that disadvantaged young children start their early years programmes with some concerns regarding inappropriate education and care based upon their social and especially familial background, which influence their physical, emotional, social, and intellectual skills developing. The onus is upon CDCs to help make up this shortfall and thus prepare them higher education. Consequently, the child caregivers' perceptions regarding their knowledge, their understanding with regard to early years' education and care, their general role and their aptitude for fulfilling their obligations around educating these disadvantaged young children have a cumulatively significant impact care provided. Crucially, the local context in the broadest sense needs to be more closely examined in order to provide equality of quality education in the context of tailored provision.

2.10 Summary

The supporting literature alluded to and explicitly presented within in this chapter reflects upon the effectiveness of child caregivers' performances within rural Child Development Centres; it does so through framing discussion within the context of Thailand's educational organization. This chapter outlined the Thai policy relating to children's education, the quality of CDCs, child caregivers' performances, and interactions between caregivers and children. The facts relating to child caregivers' qualifications, training, and standards have been broadly illustrated in this chapter in order to demonstrate the importance of these factors. In addition, the chapter also presented the changing structure of the Thai family and early childhood education policies, both of which are essential and significant with regard to the development of young children. Studies undertaken by several researchers have also been taken up in order to provide some salient discussion points regarding issues and challenges related to this particular study (Jindadath, 2003;

Chongcharoen, 2009; Bhulpat, 2011; Sudijainark, 2013; Taecharungroi, 2014). The next chapter will highlight and discuss the methodology and research design, the procedures for data gathering and finally the mechanisms used to undertake analysis of evidence gathered.

Chapter Three: Methodology and Research Design

3.1 Introduction

This chapter will examine research methodology and applied research methods. The chapter will include an explanation of the underpinning philosophical approach, case study's research design as well as an explication of its data collection methods which included interviews and observations. In addition, it will discuss the sampling techniques and the context within which the study was conducted. The chapter will also provide an explanation of data collection procedures and ethical considerations. The data analysis process will then be discussed in detail, together with the processes around transcription, translation and resolving issues of validity. In addition, it will illustrate the researcher's involvement in all aspects of the research design. Finally, as a point of reference, participating child caregivers and educational officers were and are referred to interchangeably as child caregivers or as participants.

3.2 The underpinning philosophical approach

Grix (2004; 59) defines ontology as those "claims and assumptions that are made about the nature of social reality, claims about what exists, what it looks like, what units make it up and how these units interact with each other". In other words, the ontology constitutes the philosophical consideration of reality's very nature and there may therefore be different understandings of fact on the basis of not *how* but *what* we come to know (Jackson, 2013). Bergene (2007) and Pratt (2009) argue that the ontological approach to accountability thus involves the approach towards and evaluation of the

reality underpinning both data collection methods and objectives. In addition, it implies that participants' perspectives expressed within language signify their reality.

By contrast epistemology focuses on what comprises acceptable knowledge and how we are able to acquire such knowledge (Sharp, 2009 and Oliver, 2010), with this epistemological perspective being utilized within the current study. The epistemological perspective is definable as “research itself which is concerned with seeking new knowledge. The way in which knowledge is developed is dependent upon the methodology, and the rigour of the methodology therefore has a direct link to the strength of the claim to new knowledge” (Jackson, 2013; 53). Likewise, Toohey (2007) indicates that the epistemological relates to participants' knowledge and how such knowledge is attained. It indicates that the epistemology is concerned with nature and procedures of knowledge which constitute what is defined as acceptable within research and therefore what evidence meets the criteria for satisfactory presentation of objects of enquiry, analysis and research findings.

Additionally, this study is framed within an interpretivist approach – known as constructivism (Gray, 2004) which is frequently applied and used in qualitative research so as to reflexively understand the implications, from the perspective of participants of being subjects of enquiry when fieldwork is being undertaken within the community as well as when engaged in the practices which forms the main field of study (Creswell, 2014). Creswell (2009; 8) cited in Scotland (2012; 12) further explains that “the interpretive methodology is directed at understanding phenomenon from an individual's perspective, investigating interaction among individuals as well as the historical and cultural context”. With regard to this current study, the researcher adopted the ontological perspective in conjunction with epistemological perspective where the ontological

viewpoint facilitated the researcher's enquiries around the reality of the situation being study and the epistemological viewpoint concerning about the knowledge being obtained from studying the situation (Jack, 2013).

3.3 Case study design

A case study research design is employed within this study in order to investigate real-life phenomena (Yin, 2014). Here, the case study design is used to examine the particular phenomenon of child caregivers who worked in rural Child Development Centres (CDCs) within Thailand. More specifically it seeks to explore pertinent issues relating to child caregivers' knowledge and understanding of their day-to-day performances. Yin (2014) defines a case study as the method which allows a researcher to investigate and pay attention to an interesting case whilst retaining a holistic and realistic worldview. Furthermore, the case study method can be used in various circumstances in order to extrapolate broader conclusions from, and develop actionable findings relating to, each individual case as part of a larger thesis whilst also recording its particularity. Robertson and Darling (2004: 165) likewise indicate that case studies permit researchers the opportunity to appreciate what they are exploring from 'the perspective of what is being studied'.

Essentially, the case study model encompasses a variable, combined and selected, range of data gathering methods such as interviews, observations, questionnaires, documents and text analysis which permit both qualitative and quantitative approaches to be used (Yin, 1994: 14). Creswell (2012: 98) indicates that the case study constitutes a good qualitative method for presenting an in-depth understanding of the case through a potentially rich description of data. Within educational field research, case studies are

methods of ‘collecting and disseminating research’ which not only impact upon practice but also refine theoretical frameworks and conceptualizations (Freebody, 2004: 81).

In this study, twelve rural CDCs in Mae Hong Son province were selected as case study subjects for this research, from which were obtained thirty human participants: twenty-three child caregivers and seven education officers. The process of devising selection criteria and applying subject selection methods will be further discussed below in section 3.4. In the process of carrying out field work with participants, the researcher employed two methods, interviews and observations, as tools to collect appropriate data sets in order to appropriately address the larger research questions.

3.4 Research methodology

The researcher chose to utilize a qualitative approach for this study. Such qualitative research constitutes “a broad approach to study of social phenomena [...] social interactions as expressed in daily life along with the meanings participants themselves attribute to these interactions” (Marshall and Rossman, 1999: 2). The aim of this study was thus to empirically describe and account for childcare providers’ perceptions and performances, rather than to test pre-established hypotheses. Qualitative research methods offer ‘the best source of illumination’ (Richards, 2003: 8) and may be deemed especially useful in investigating the meaning and the way participants behave and think within particular research objectives (Bogdan and Biklen, 2003; Denscombe, 2003).

Qualitative methods can, for instance, explore ‘people's life histories or everyday behaviour’ (Silverman, 2013: 11). In addition, the reasoning behind deployment of qualitative methods within this study was in part predicated upon Creswell’s rationale (2013: 45) which indicates that:

“Qualitative researchers often collect data in the field at the site where participants experience the issue or problem under study. They do not bring individuals into a lab (a contrived situation), nor do they typically send out instruments for individuals to complete, such as in survey research. Instead, qualitative researchers gather up-close information by actually talking directly to people and seeing them behaves and acts within their context. In the natural setting, the researchers have face-to-face interaction over time.”

In this study, the researcher collected data from interviews and observations, rather than testing hypotheses, since this method was perceived as the most productive way for the researcher to reach and understand participants in terms of their concrete thoughts and performances (Silverman, 2013). The researcher directly gathered the data from child caregivers and educational officers, regarding their perceptions in relation to child caregivers’ knowledge and understanding of early years’ development and learning; their general role working in rural CDCs; their understanding of policy and standards; and the challenges which occur and self-descriptively impact upon their performances.

The study sought to utilize these qualitative approaches for the purposes of obtaining and extracting data from interviews and observations. Each participant explained his/her specific situation in detail via the form of in-depth interviews. Observations were then used as a secondary method in order to verify the findings derived from interviews by framing them within the child caregivers’ day-to-day practices. Details of justifications and methods pertaining to the interviews can be found below.

(1) Interviews

The interview is a frequently used method for collecting qualitative data in education research (Atkins and Wallace, 2012: 86). The interview allows the researcher to investigate the interviewee in order to explore an idea or perception in more detail regarding the research questions (Britten, 1999). When the researcher used semi-structured interviews in a qualitative approach, the researcher talked to participants who had direct knowledge of/or experience around the issue of interest (Rubin and Rubin, 2012: 3).

In-depth interviews are considered a beneficial technique for gathering data, since they provide an insight into the opinion of participants. The interview method for this study therefore constitutes an effective technique for assessing the participants' knowledge, perceptual understanding and views, which are relevant to the broader research questions. Patton (2002: 341) defines the purpose of the interview as a method allowing the researcher access into 'the participants' perspectives and to study what is in someone else's mind in order to gather their stories'. In addition, the researcher chose the interview format in order to investigate the participants, since the interview structure afforded them significant opportunity to ask and clarify questions when information was not clear (Henning, 2004). The interview guide, in turn, demonstrates how the structure of the interview was formulated in accordance with the research questions.

The interview guide is the list of questions or issues, which help the researcher to gather data and is developed upon the basis that questions will be approached in a specific order and in an appropriately open-ended fashion according to the individual research objectives and research questions (Patton, 2002; Bernard, 2011). Additionally, the advantage of having an interview guide for the researcher is that it enhances confidence

and competence, ensuring that the researcher can control the direction and structure of the interview whilst under time limitations during the interview process (Patton, 2002).

In this research study, the interview participants were divided into two groups: educational officers and child caregivers, from whom the researcher collected both factual and attitudinal information (McNeill and Chapman, 2005). Given the group distinctions, the researcher created the interview guide which was divided into two forms (Table 3.1). The first interview group was educational officers, chosen on the grounds of their responsibility for supervising child caregivers' practices and ensuring that they met the aims and objectives of the Department of Local Administration (DLA). The purpose of these educational officer interviews was to gather their perceptions and broader attitudes with regards to the effectiveness of child caregivers' general performances.

The second interview group was the child caregivers, who were ultimately to be the main subject group of this study. The purpose of these interviews was to obtain child caregivers' perceptions of the teaching environment and their own practical competencies; these included self-descriptions of their knowledge and understanding of educating and caring for young children, along with effective and reflective identifications of those factors and challenges which impacted on their actual practices within working in rural CDCs.

The two interview guides contained six questions for the educational officers, which corresponded with their role in supervising the practitioners, and three main questions with applicable sub-questions for the child caregivers; in each instance these were formulated based upon the study's research questions (see Appendix Two, p.342-344). Participants were interviewed according to the list of topics and their taxonomies detailed within Table 3.1 below:

Table 3.1 The main topic of interview guides

Interview Officers	Interview Child Caregivers
1. Current practices 2. Current role as supervising child caregivers 3. Policy standard within their institutions 4. Relationship with child caregivers 5. Perception about child caregivers' performances 6. Perceptions about good education	1. Roles as caregivers within the education system <ul style="list-style-type: none"> - Daily routine - Role within education system - The importance of policy and curriculum
	2. Perceptions of caregivers' jobs <ul style="list-style-type: none"> - Understanding of good education in early childhood education setting - Training programme - Opinion about child's development and learning - Motivation to do this job
	3. Level of professionalism <ul style="list-style-type: none"> - Effective in developing children - Method of teaching - Challenging work - Perception of their knowledge and skill

All interview questions were developed between September and November 2016. Interview sessions were divided into two sets, relating to the respective target groups and associated questions. As noted earlier, these sessions were used to interview the educational officers and child caregivers respectively. Interview guides relating to each interview group were sent to the supervisory team for comment before being taken to the project's subjects. The researcher then revised the interview questions following these comments.

In addition, the Keele University Research Ethics Committee approved the interview guides before the data was gathered. The interview visits were subsequently conducted in the period between March and May 2017. The interview sessions were the first part of this two-part approach. Observational visits were then used to obtain more detail around child caregivers' practices in order to support data gathered through the interviews.

(2) Observation

Observation is the second method utilized within this study. It is an essentially qualitative technique, used in this research to help the researcher observe the childcare providers' actual performances inside and outside the classrooms. This conceptualization of observation is further supported by Creswell (2013) and Yin (2014), who indicate how observation can be utilized to provide answers for questions raised by the researcher's investigation. In addition, observation is 'the systematic description of events or behaviours in the social setting chosen for study' (Marshall and Rossman, 2006: 79).

The role of the researcher was to take field notes without any participation, recording objectively through descriptive writing what occurred during the observation period (Creswell, 2013; Phillippi and Lauderdale, 2018). Estacion et al. (2004: 9) state that 'Direct observation is the best methodology available for studying how teachers teach'. The purpose of the observation in the study was therefore to obtain more details about child caregivers' performance in order to support data garnered through interviews. The researcher informed the child caregivers in advance about the aims and procedures of the study along with the potential benefits for more effective educational practice arising from their co-operation.

Field notes included observations relating to behavior and activities performing, following Marshall and Rossman (1999). An unstructured, continual observation method was employed within the note-taking in order to avoid missing important child caregivers' practices within the sessions and to record as much detail as possible through the period of the observations. The notes rendered a stream of action and events as these naturally unfolded, following Marshall and Rossman, (1999) and Punch (2014). Geertz (1973) as cited in Ponterotto (2005), indicates that this type of observation provides key information including the context, details, emotions, and interactions. It describes the significance of events or behaviours, which include voices, feelings, actions and meanings.

In this research, the observation method was developed so as to be relevant to the topic of how childcare providers perform. The researcher therefore structured the framework of the observation into three categories:

- (1) Daily routine,
- (2) Classroom management and the techniques being used, and
- (3) Child caregivers and children interaction.

An observation guide was developed in parallel with the interview guide over the period September to November 2016. The researcher decided to observe each child caregivers' performance for ten days, amounting to forty days in total across four child caregivers in four CDCs. The draft of the observation guide was sent to the supervisory team along with the associated interview guides. The observation guide was checked and commented on by the supervisory team as part of the development process, and was, as with the interview questions, revised by the researcher. The Keele University Research Ethics Committee approved the observation guide before the data was gathered. Following the

initial research methodology, observation fieldwork was carried out once interviews had been concluded and occurred between May and August 2017.

Qualitative research methods employed in this study therefore included interviews and observations. The interview questions and structure of the observations were developed as to be relevant to the research questions relating to the examination of those factors and challenges which impact on the child caregivers' day-to-day practices, particularly in rural CDCs. The following section discusses this correspondence of research forms to objectives further, positioning it in terms of the methodological trustworthiness and validity of this study.

3.5 Trustworthiness and Validity

Trustworthiness is significant when assuring the quality of any qualitative approach. Guba (1981) cited in Shenton (2004: 64) divided such trustworthiness into 4 criteria: these include; credibility (internal validity); transferability (external validity); dependability (reliability); and confirmability (objectivity). In order to meet these requirements, the researcher employed the two research methods: interviews and observations respectively, to investigate phenomena in depth with the aim of acquiring rich data and developing a better understanding of childcare providers' performances in relation to work in rural CDCs.

In this context, the triangulation of data collection methods aided the researcher to accurately assess the phenomenon under investigation (Cohen, Manion and Morrison, 2007; Silverman, 2010). Silverman (2010: 277) defines triangulation as the "attempt to get a true fix on a situation by combining different ways of looking at it or different findings". Jakob (2001), as cited in Yeasmin and Rahman (2012: 154), argues that 'the

purpose of triangulation in specific contexts is to obtain confirmation of findings through a convergence of different perspectives', which refers to the combination of multiple investigative methods in one study.

In this study, the researcher interviewed two groups of participants, which were child caregivers and educational officers, and observed the performances of the former. There were three steps to gathering the data. Firstly, the researcher gathered data from the child caregivers to obtain their self-perceptions relating to knowledge around, understanding of, and actual practice in educating and caring for the disadvantaged young learners who attended the CDCs. Secondly, the educational officers were interviewed in order to ascertain their perceptions of the child caregivers' performances based on officers' roles as supervisors to the child caregivers. Finally, the child caregivers' performances were observed over 10 days whilst engaged in their day-to-day professional practice in order to support the data from the interviews.

These three steps helped the researcher to gather a range of evidence types suitable for methodological triangulation, as described above, which in turn enhanced the credibility of the research findings (Hesse-Biber, 2010). The use of the three steps enabled the methods of observation and interviews to be combined and set in conjunction with one another, a technique which Dewalt and Dewalt (2002) argue strengthens the validity of data through its permitting observation to accurately clarify data obtained by other research methods.

Cohen, Manion and Morrison (2011: 179) reiterate that, "validity is an important key to effective research. If a piece of research is invalid, then it is worthless". The use of a combined method across a three step research process enabled the researcher to critically examine all aspects of the research questions through a comparison of the data provided

by participants interview responses and the researcher's own observation of practices; in turn, this comparison allowed them to develop a more accurate assessment of relative concordance between child caregivers' perceptions and the practices (Silverman, 2010).

The researcher was conscious that the data needed to be represented honestly and correctly. In this study, the sample was chosen purposively for accurate representation, whilst in the case of the interviews, the researcher created the questions from the research objectives and interviewed both childcare providers and educational officers. Content validity was further assured through the researcher's consulting with academic experts, who were specialists in early years education within Thai CDCs, to assess the questions' content and observation's framework. Following this, the supervisory team from Keele University provided further comments on both aspects of the research framework. Finally, the researcher completed revisions in order to ensure that these tools could represent the content of the study (DeVaus, 2002).

The researcher designed the length of observations, comprising ten days in each Centre, in order to obtain in-depth data and to make the child caregivers, who were observed, perform naturally and with ease. The researcher obtained rich information through combining different ways of interrogating sources, providing more rigorous, substantiated and ultimately trustworthy data, contributing to the efficacy of the overall study. The researcher also employed direct quotes from interviews and observations in supporting these findings in order to corroborate assertions around the trustworthiness and validity of the phenomena being studied for the reader.

3.6 Sample and Contexts of the Main Study

‘Broadly speaking, sampling is a process of selecting subjects to take part in a research investigation on the grounds that they provide information considered relevant to the research problem’ (Oppong, 2013: 203). According to Bernard (2002) and Oppong (2013), purposive sampling techniques, especially in the context of qualitative research, involve the selection of participants, ‘who can and are willing to provide the information by virtue of knowledge or experience’ (Etikan, Musa and Alikassim, 2016: 2). As a result, purposive sampling was adopted in this study in order to gather qualitatively rich data which could explore the selected child caregiver research subjects’ performances in order to answer the broader research questions.

The researcher wanted to investigate child caregivers’ perceptions and their day-to-day performance as a means of determining the effectiveness of child caregiver’s practice around facilitating disadvantaged children’s development and learning within Thailand’s rural CDCs (discussed in Chapter One). The selection was done in three steps:

(1) The researcher used purposive sampling to select 12 CDCs out of 163 CDCs in the above area. The main objective in using the purposive sampling was to select a sample representative of the case study which would enable the researcher to answer the research questions (Ritchie et al., 2013). Selection was approached through using records from the Office of National Education Standards and Quality Assessment (ONESQA)⁴. This office offered access to the department’s database in order to select the centres for this research.

⁴ The Office of National Education Standards and Quality Assessment (ONESQA) is the recognized and standard external quality assessment agency which assesses and certifies educational quality, as well as providing recommendations leading to the development of quality national education.

(2) In terms of the interviews, the 12 selected CDCs were divided into 2 groups; these were based upon the ONESQA performance assessments, and comprised of the 6 highest scoring and 6 lowest scoring Centres. As such, 12 Centres were chosen for the case study in order to establish an average and a representative sample of the entire population. The intention of such selection procedures was also to ensure that the study's findings were not biased towards either good or poorly performing Centres, in contradistinction to the outcome of only focusing on one grouping. All child caregivers who worked in the selected Centres (12 Centres) took part in this current study.

(3) For the observation process, the 4 selected Centres were the 2 highest scoring and 2 lowest scoring, thereby following the same criteria as the interviews in order to similarly obtain a representative sample of 4 child caregivers (Table 3.3)

➤ *Participant selection for interviews*

For the interviews, two procedures were used to select participants from each of the groups, i.e. child caregivers and educational officers. Firstly, the researcher selected the twelve CDCs, following the rationale described above, in order to establish a sample of twenty-three child caregivers, this uneven number can be accounted for on the grounds that individual Centres frequently employed more than one child caregiver. Secondly, the seven educational officers invited to participate were drawn from nine of the selected Centres, since the other three Centres chosen for study had no educational officers. Consequently, the study involved thirty participants in total. The breakdown of interview participants relating to each individual centre can be found illustrated in detail below within Table 3.2:

Table 3.2 The number of participants in the interviews (N=30)

Child Development Centres' name	Number of child caregivers (N=23)	Number of educational officers (N=7)
CDC (1)	2	1
CDC (2)	2	1
CDC (3)	2	-
CDC (4)	3	1
CDC (5)	2	1
CDC (6)	4	1
CDC (7)	1	1
CDC (8)	1	
CDC (9)	2	1
CDC (10)	1	
CDC (11)	2	-
CDC (12)	1	-

All the participants were Thai, consisting of twenty-three female child caregivers along with a mixed-sex group of seven educational officers, the latter encompassing four females and three males. As noted above, not every CDC in this study had educational officers in place to supervise the child caregivers. The reason for this was that certain Centres were under the same Local Administrative Organization (LAOs). Hence, three CDCs did not have the educational officers because they had been moved to other LAOs, and in those centres the chief of the LAO office performed the duties of the educational

officers. The LAO chiefs were not willing to participate in the study as they only took on the duties of educational officers temporarily.

➤ *Participant selection for observations*

Observations were done after the interviews. The researcher explicitly requested the educational officers' permission once again in order to collect data from the child caregivers who were being observed. The four Centres were selected from the ONESQA's assessed database; once again this selection was made upon the basis of their corresponding to the two highest and two lowest ONESQA scores respectively. The researcher obtained four child caregivers from these four Centres. The number of observation participants is illustrated in detail below within Table 3.3:

Table 3.3 The number of participants in the observations (N=4)

Child Development Centres' name	Number of child caregivers (N=4)
CDC (1)	1
CDC (2)	1
CDC (7)	1
CDC (8)	1

Additionally, the children attending the twelve CDCs of the twenty-three child caregivers were automatically involved in the study due to proximity; consequently, details of the study were given to parents in the form of an information sheet and they were asked to

consent on behalf of their children before any data gathering commenced. In practice, participants willingly allowed the researcher to conduct the study and welcomed the opportunity to participate. They accepted the researcher with hospitality even though they spoke their own regional dialect as a first language and could not speak Thai confidently whilst the researcher could not speak their dialect; standard Thai was however sufficiently widely understood to ensure that there was no issue in relation to communication.

The participants were hospitable and courteous in allowing the researcher to carry out the study, including calling to ensure that the researcher knew how to locate their CDCs and arranging lunch for the researcher during the observations. The researcher and the participants arranged appropriate contact and observation time according to the procedures for conducting the study.

3.7 Data conducting procedures

The study was conducted between March and August 2017, with the data collection process being divided into two sets of sessions. The first set involved gathering data from interviews with child caregivers and educational officers during the period between March and early May 2017. The second involved observation of child caregivers' performances and occurred between the mid-May and August 2017. This process can be found illustrated within Table 3.4 below:

Table 3.4 The methods in this study

	Participants	Purpose	Method
Session One	Officers (7)	To investigate a general view of child caregivers' knowledge, understanding and performances to develop children and their training according to the policy and standards.	Interview
	Caregivers (23)	<ul style="list-style-type: none"> • To investigate child caregivers' perceptions focusing on the knowledge and understanding of caregivers' activities, their general role, and their aptitude to educate and care for young children. • To investigate the main factors and challenges according to child caregiver's performances 	Interview
Session Two	Caregivers (4)	To explore what actually happens in a daily routine between child caregivers and young learners.	Observation

Session one

To organize interviews, the researcher took the initial step of contacting the educational officers responsible for supervising the caregivers in order to explain the aim of the research through telephone calls and emails. Requests were made to the educational officers, inviting them to take part in the study along with extending this invitation to the respective child caregivers themselves. Subsequent to this, the researcher hand-delivered the consent letters to the LAOs' Chief Executives and the invitation letter, information sheets and consent forms to the educational officers and child caregivers. Once approval was secured, the researcher asked each participant to select an interview time convenient for them.

The interviews took approximately 45 - 60 minutes and were conducted face-to-face, whilst the researcher used the approved interview schedule as a basis for directing the discussion appropriately and effectively. The participants were given the opportunity to choose a place and time for the interview to be conducted. Dates for the interviews were determined based on mutual consent, with most interviews taking place after lunchtime for both educational officers and child caregivers; these took place at their office for the officers and in the Centres for the caregivers. Seven educational officers and twenty-three child caregivers were interviewed to investigate their general views of child caregivers' knowledge, understanding and their day-to-day performances according to early years education and care. In conjunction with this, the researcher explored the participants' perceptions with regards to the main issues impacting upon the efficiency of the child caregivers' work.

Session two

In addition, four of twenty-three child caregivers were chosen to have their performance observed, with the observations conducted after the interviews. Informed permission was obtained prior to data collection from all the participants, educational officers and program directors. After the approval process, the four childcare providers who worked in the four CDCs were informed in advance via telephone calls and hand delivered invitation letters, information sheets and consent forms. The researcher and child caregivers arranged suitable dates for the observational visit together.

Regarding observation of the child caregivers, the researcher informed the parents of children who were in the classroom (even though the children were not the subjects under observation) in advance about the aims of this study by hand delivering letters and information sheets to them. Afterwards, the researcher returned to the Centres, met with parents and confirmed that those unable to read and write could understand the message contained within the letters and information sheets. This also afforded the researcher the opportunity to provide parents with any necessary clarification before parents were asked to sign the consent forms. The observation participants were informed in advance about the field-notes written during the observations.

During the observations, the researcher arrived at the classrooms 10-15 minutes before the start of the observation to ensure that children and child caregivers were happy for the researcher to be there. Subsequently, the researcher observed the class's usual routine without interrupting, which included observation of activities occurring both inside and outside the classrooms; observation points also included facial expressions and multiple interactions between the child caregivers and young learners between 8.30am to 11am. This time frame was selected due to its being the chief period when child caregivers and

young learners would participate in a variety of collective activities. The observation allowed the researcher the chance to directly watch caregivers' interactions with children and the children's activities within the usual educational environment.

3.8 Ethical considerations

The main research data for this study was collected from CDCs, which given their educational status and their involving minors, meant that several ethical issues needed to be addressed. Research ethics consider several categories of risk when planning, conducting, communicating and following up research (Punch, 2014). These risks relate to: harm; compromised autonomy and informed vs uninformed consent; privacy; confidentiality; and anonymity. Ethics consequently influence research procedures as well as determining whether the researcher is able to complete a successful project. Through analysis of potential ethical risks and associated obligations, three main ethical issues emerged, as illustrated within the following discussion.

(1) Gaining access

The research tools for this study were submitted to the Keele University Research Ethics Committee and approval was granted approval by the Ethics Review Panel on 24th February 2017 (Ref: ERP2316) (see Appendix One, p.341). After permission from the university had been granted, the researcher contacted the Department of Local Administration's (DLA) staff with responsibility for supervising all CDCs in Thailand to inform them about this study. The process of gaining access to the university and the initial contact to the DLA was successful. The researcher then contacted the ONESQA asking for the CDCs' performance evaluation records in order to obtain a list of the

highest and lowest scoring centres. Prior to moving into the centres to begin the data gathering process, it was necessary to obtain the approval of the LAO chief executives. Therefore, further permission was needed before doing fieldwork. The letters of permission were requested through emails and followed up via telephone calls.

(2) Informed consent

In addition, the researcher sought permission from the child caregiver and educational officer participants. An invitation letter (see Appendix Three, p.345; Appendix Six, p.352; Appendix Nine, p.359), an information sheet (see Appendix Four, p.346; Appendix Seven, p.353; Appendix Ten, p.360), and a consent form (see Appendix Five, p.350-351; Appendix Eight, p.357-358; Appendix Eleven, p.364) were sent directly to the officers and passed to the caregivers individually through emails before being followed up on by telephone calls after a few days. The follow up was to gauge interest and ask for agreement to participate in the interview process. The participants were then asked to sign a consent form in order to confirm their willingness to participate in the study prior to starting interviews.

Once the selection of Centres where observations were to be conducted had taken place, the researcher contacted the childcare providers again to inform them and arrange a time to attend the Centre. Since the observations focused on child caregivers' performance the involvement of the young children could not be avoided. Given that children were directly part of the observations, the researcher arrived at the Centres before the appointment to ensure that parents understood about the aims and objectives of this study. In the course of these meetings they clarified to parents that there were no harmful

consequences pertaining to the children. The parents were provided with an information sheet.

In addition, the researcher hung up a poster (see Appendix Fifteen, p.370) at the entrance of the Centre. The poster introduced the researcher and what the researcher was doing for this study as well as its more general aims. The parents were asked to sign the consent form (see Appendix Fourteen, p.369) on behalf of the children due to the extremely young age (aged 2-4) which precluded them from directly giving or withdrawing their research participation consent. The parents had to sign a consent form in order to affirm their willingness for their child to be involved in the study. In addition, the researcher took 10-15 minutes before the start of observations in order to ensure that the children were happy for her to be with them.

All participants understood and confirmed their consent to be a part of this study. The participants were informed of their right to withdraw their participation through the information sheets and consent forms (Mackey and Gass, 2005). Those taking part in individual interviews and observations could withdraw up to one month after the interviews and observational visits. If they chose to withdraw, their data would not be used in the study; no participants requested withdrawal.

(3) Confidentiality and Anonymity

The participants were informed through the information sheets at the beginning of the interviews and observations that they were assured of confidentiality and anonymity since the researcher would change or remove any information (Babbie, 2004 and Punch, 2014), which could personally identify them. In terms of the reporting and publication of results, participants were anonymized as far as possible through the deletion of names

and other potentially identifying information. In addition, consent forms containing participants' names were stored separately from the data and locked in the researcher's office at Keele University. Only the researcher and her supervisors could access these forms along with the other data collection documents.

3.9 Data analyse

The data was gathered between March and August 2017. All interview data from the audio recording was transcribed verbatim, following which thematic analyses were conducted by the researcher. Transcription in this text means 'transposing the spoken work (from audio recorded) into a text (transcription)' (Marshall and Rossman, 2006: 110). The interview transcripts were typed into Word format and divided into 2 folders, namely, caregiver and officer. There were 23 files within the caregiver's folder and 7 files within the officer's folder. The researcher transcribed the audio-recorded interviews verbatim in order to familiarize herself with the data.

Using an inductive approach to data analysis, which allows themes to emerge from the data (Cohen et al., 2011), transcribed interviews were read and reread by the researcher several times. As Marshall and Rossman (2006: 158) suggest, 'reading, rereading and rereading through the data once more forces the researcher to become intimately familiar with the data'. The researcher read and reread the transcripts and field-notes in order to become familiar with the entire rich data set before going further in organizing their coding.

The data from the interviews was analyzed through focusing on meaning, which involved coding and interpretation of meaning (Kvale, 2007: 104). Coding here refers to the analytical practice of arranging raw data and producing categories to organize relevant

data (Neuman, 2013). The data was coded and interpreted in terms of themes inferred directly from the interview questionnaire text whose form is itself derived from the core research questions. Having the research questions in mind helped the researcher to read the transcriptions which were coded line by line.

When the researcher finished the line by line coding, all similar codes were grouped into categories and were moved around to identify the form most conducive to analysis. Each category was named and then related to themes which were based on the research questions. The coding of the interview data was done manually, and the words found in the transcribed data were used as codes.

In terms of the observation, the data from field-notes was analysed in order to support the data obtained from the interviews. Meanwhile, the observation data was presented impartially by the researcher in line with Ki's (2013: 197) suggestion that research observations must be presented in a manner which allows them to 'speak for themselves'. The researcher then used the thematic analysis approach in the process of analyzing the raw data from both interviews and observations.

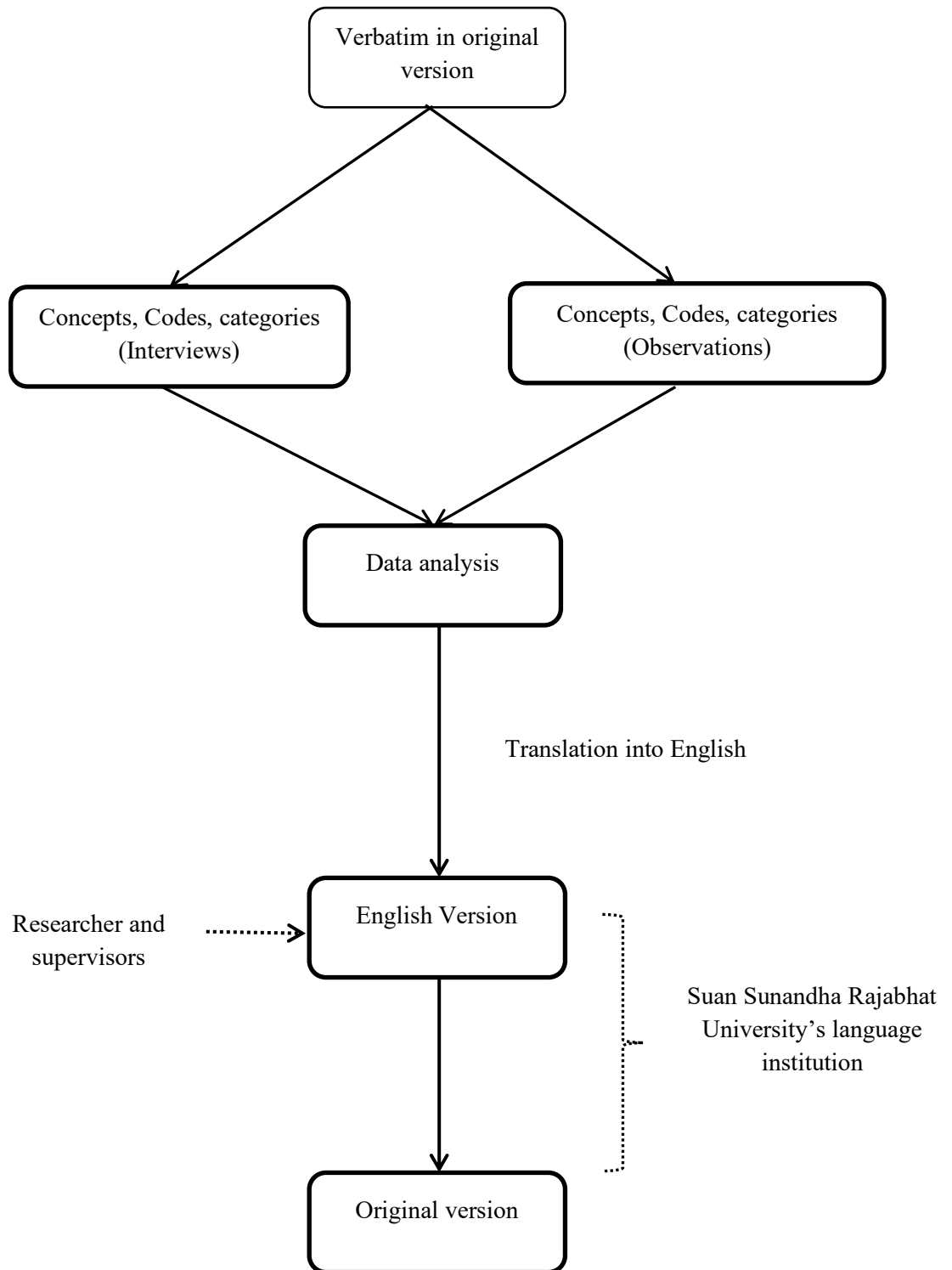
According to thematic analysis, Maguire and Delehunt (2017: 3352) clarify that, "Thematic analysis is the process of identifying patterns of themes within qualitative data". Thematic analysis was thus employed in the process of identifying, analysing, and reporting themes within this qualitative study through reading those multiple combined themes emergent from the interviews and observational data in relation to the research questions (Braun and Clarke, 2006).

Semi-structured interviews and observations were conducted in Thailand using the Thai language. The data was transcribed and analyzed in Thai and then translated into English by the researcher (Rossman and Rallis, 2003; Chen, 2010; Naruemon, 2013). All

recorded data was transcribed word-by-word in the Thai language in order to ensure that all the data was accurate. The researcher read through the scripts several times to look for significant, pertinent information regarding research question concerns, and to formulate an interpretation of the child caregivers' attitudinal stances and conduct framed within the supporting literature.

Data was analyzed according to the objectives of this study and the research questions. A matrix of themes was developed based on the research questions. Examples of these categories include: the child caregivers' perception of their role; support from local government executives; and the standards of child caregivers' performances. Both the English and Thai versions were audited by Suan Sunandha Rajabhat University's language institution in Thailand in order to test the accuracy of the original translation. Although the researcher works at Suan Sunandha Rajabhat University, there is no relationship between the researcher and the language institution. This process is further described in Figure 3.1.

Figure 3.1 Translation Procedures



All transcriptions were anonymised in order to protect the identity of the participants. The transcriptions in turn were provided to all respondents in order to ensure that they were comfortable with the data and to ensure the validity of what had been recorded.

3.10 Summary

This chapter has presented the research methodology utilized within this study. It elucidated the researcher's use of a predominantly qualitative methodology, using interviews and observations to investigate the caregivers' perceptions in relation to the effectiveness of their practices around developing children's physical, emotional, social, and intellectual skills within rural CDCs in Thailand. The case study approach was presented, subsequently adopted in this study.

The researcher's methodology was described in detail, specifically two methods comprising of interviews and observations. A sample and context of the main study was illustrated. Ethical considerations were explained, followed by a description of the principles and practice around data collecting procedures and data analysis. Trustworthiness and validity were also discussed in detail within the context of research ethics. The next chapter presents the findings which emerged from this study.

Chapter Four: Introduction and Context of the fieldwork Area, Mae Hong Son Province

4.1 Introduction

This chapter outlines the social geography of the rural region chosen as the focus area for this study and illustrates the background of the young children who live in this area. Crucially, these youngsters receive education and care from the child caregivers who are constitutive of this study's main research subjects. In addition, the chapter aims to establish these children's social context and situate this both in relation to their everyday life and their educational and pastoral needs following the concerns of this research project. The majority of young children in this region are likely to attend Child Development Centres (CDCs) under the supervision of the Department of Local Administration (DLA) part of the Ministry of Interior (MOI), since they do not have access to multiple alternative early years educational institutions, in contradistinction to children from urban areas, owing to regional poverty and individual difficulties around travel. Therefore, children in rural areas will generally have to attend CDCs located nearest to them.

Mae Hong Son province is the rural area represented in this study. The province is geographically isolated due to being comprised of high mountain ranges. The local population living in this mountainous area maintains a traditional and peaceful rural lifestyle, one deeply interconnected with nature and the natural world. Conversely, this area experiences significant problems illustrative of broader structural issues pertaining to rural Thai early years education.

4.2 General background of Mae Hong Son Province

Mae Hong Son is a western border province, bordering Myanmar and Laos in the northern part of Thailand see Figure 4.1. The province is covered with fog throughout the year. It has long been isolated from the outside world, comprising 13,814 square kilometres. It is the third largest province in the North and the eighth largest in the whole country. The population density is the lowest in Thailand, numbering 279,088 people, and is extremely rural.

Figure 4.1 Location of Mae Hong Son Province



The province is divided into 7 districts, namely, Mueng Mae Hong Son, Khun Yuam, Pai, Mae Sariang, Mae La Noi, Sop Moei, and Pang Mapha see Figure 4.2. These are further subdivided into 45 sub-districts and 402 villages (Office of the National Economic and Social Development Board (ONESDB), 2018).

Figure 4.2 Mae Hong Son Province's districts



The area is dominated by a high mountain range and dense forests, which cover approximately 88% of the province. The roads in Mae Hong Son are asphalt surfaced roads see Photo 4.1, which are often extremely steep, winding, and therefore potentially challenging for motorists (ONESDB, 2018).

Photo 4.1 The complex mountains and road (Fieldwork, 2017)



There are secondary roads, which link the main roads to the rural areas; nevertheless, these largely consist of dirt roads across tricky terrain which become difficult to use in the May to October rainy season. Travel can therefore be practically restricted for five months of year.

➤ **Mae Hong Son's population**

Mae Hong Son's population is divided into 2 major groups, the Tai Yai descendants and the ethnic groups (referred to as hill tribes). The Tai Yai people migrated from Myanmar and practice the Buddhist religious faith. Ethnic groups, by contrast, are labelled as hill tribes and comprise 63% of the province's population. They belong to 7 groups, namely the Karen, Hmong, Yao, Lahu, Lisu, Akha, and Shan (Office of the National Economic and Social Development Board (ONESDB), 2018). Due to these diverse groups, Mae

Hong Son is characterized as the most nationally diverse Thai province. The hill tribes themselves are undoubtedly amongst the most disadvantaged and vulnerable groups in Thailand society. The majority live in extremely remote regions, primarily working in agriculture although, in some cases, primary income is derived from off-farm occupations which include selling products or handicrafts at local markets. It is also not unusual for people in employment to have additional secondary sources of income (Fujioka, 2002: vii), combining the agricultural and non-agricultural.

Due to the diversity of its people, Mae Hong Son has a variety of languages which originated amongst different ethnic groups. The Karen is the most populous of the tribe of hill tribe people, comprising 78% of the population in the province's highlands. They have settled across all districts and have lived in the territory of Mae Hong Son province for a long time. They also have their own traditions, deliberately associated with a peaceful way of life and consciously grounded within nature an important feature. This association with nature is materially reflected within the predominance of agriculture as a tribal occupation and source of income (Sutamongkol, 2006).

Following the place-based and observation-orientated methodology underpinning this study, the researcher travelled to each CDC in order to gather data by herself and spent some time communicating with local people. I found that most of the hill tribe people live in relative cultural isolation within small villages and communities along foothills, valleys, and high mountains. Each village seems to exist independently from their local authorities due to inaccessibility, which causes difficulties for interaction with other villages or the wider area as well as precluding the potential construction of a more modern, higher-quality infrastructure. The hill tribe peoples tend to retain a lower status and experience poorer living conditions compared to those groups classifiable as

indigenous Thai natives. In this instance, such patterns and conditions of habitation have led to diversification of belief, with each village having developed their own distinct ancient traditions in accordance with their beliefs and way of life. In hill tribe villages, shared experiences of poverty, combined with the remoteness and isolation of each village, often leads to very close and trusting relationships with other members of the village community. Consequently, it is common practice to regard other members of the village as relations, even if there is no familial relationship (Kaewnuch, 2010: 43).

Photo 4.2 The small village of a hill tribe (Fieldwork, 2017)



➤ **Mae Hong Son Economic Geography**

Agriculture practice occupies 11.7% of Mae Hong Son's total land area. Such practice largely consists of rice, garlic, maize, chili, and cabbage production as well as cattle and pig rearing. These farmers grow produce chiefly for consumption within the province

although excess production is sold in other provinces to supplement income. In terms of the Thai hill tribe settlement, 87% of these people choose to both reside and work outside of the municipality (ONESDB, 2018).

Photo 4.3 The agriculture of the hill tribes (Fieldwork, 2017)



Mae Hong Son is Thailand's smallest provincial economy, with the population's income primarily dependent on agriculture and tourism. Due to the rural nature of Mae Hong Son and the lack of industry, this province has the highest level of poverty in comparison with other provinces, with the average income per head 56,862 baht per year or (approximately) 1,354 pounds per year (42 BAHT = 1 GBP) (National Statistical Office of Mae Hong Son, 2015) representing a lower average income and lower material quality of life than the remainder of Thailand.

In Mae Hong Son, people of working-age have a statistically lower standard of education with 33.5% classed as uneducated and 33.6 % having completed primary or lower education compared with only 9.9% having graduated from higher educational institutions (National Statistical Office of Mae Hong Son, 2015).

➤ **Infrastructure problems in Mae Hong Son**

As alluded to earlier, Mae Hong Son's landscape creates difficulties for transportation due to its remoteness and difficult, rough terrain along the province's key transport routes. As a result, the government is constrained in terms of developing basic transport infrastructure and improving services (ONESDB, 2018: 2). Structural constraints include:

- **Persistent Poverty:** Mae Hong Son has the highest level of poverty in the country and this problem has been getting worse since 2006. The majority of people in this province rely on agricultural labour as their main source of income. This income is usually quite small and there is little job security. Also, difficulties in transportation mean commuting any distance is not possible, with a general lack of opportunities to undertake alternative labour. All of this has combined to create systemic poverty in this province. Fujioka (2002: vii) thus stresses that, "in addition to long-standing problems such as citizenship and land settlement, a wide range of issues related to hill tribe people are being addressed. Particular emphasis is on the promotion of quality of life and welfare through human resource development. Accordingly, the role of education in improving socio-economic condition is further recognized".
- **Limitations on infrastructure development:** Most of the landscape is mountainous terrain, which can be dangerous and roads particularly steep and difficult to traverse.

This terrain often obstructs the development of infrastructure, especially with regard to transportation and public utilities. In addition, the area is mostly a conservation area and a national forest, which legally limits agricultural, industrial and residential development.

- Limitations on basic services: Health care, education and other basic services provided by the government are not consistent throughout the province. This is primarily due to the impossibly high mountainous terrain and distance between communities. Therefore, it is difficult to navigate and manage service provision, as well as maintain access to public services.
- Limited tourism period: Tourism has recently become a major source of income for the province. Despite this, the tourism season only lasts throughout the winter period from November to February, constituting a short-term tourist season.
- Restricted land: There is a continuous risk that the forest area may encroach onto the agricultural areas and more land will be lost to forestation as opposed to being used for agriculture. This risk is continuing and threatens the economic viability of the area on a permanent basis.

In spite of this, the ONESDB (2018) states that the people in the Mae Hong Son do not feel as though they have problems on that grounds that they generally enjoy a contented and happy life. However, the high poverty situation and chronic conditions, placing restrictions on infrastructural development, combined with the physical geography of the province, present a cumulative challenge for the government. Therefore, the state's first priority when facilitating Mae Hong Son's development is in addressing the fundamental poverty issue for the residents on the grounds that this province represents Thailand's poorest province and poverty has various deleterious secondary effects upon wellbeing.

Nevertheless, another (related) concern is the lack of educational development, particularly for hill tribes' children (ONESDB, 2018).

Within this current study, the researcher has determined to focus on the child caregivers' roles with regards to educating and caring for those underprivileged young children who have mostly been ignored by the government. Clearly, from an ethical and statutory perspective alike, these children possess the right to receive an education comparable to that received by children in urban areas and currently adjudged to be qualitatively superior in terms of learning and holistic outcomes. As mentioned in the report of the World Education Forum (2015: 6), "Thailand's policy is to create and expand education opportunities, taking into consideration the need for equity and fairness for every group within the society, including the poor, the disadvantaged, and those with physical and learning disabilities, as well as minority groups, to respond to the second goal in the provision of education for all".

4.3 Education for underprivileged children in rural areas

In Thailand, comprehensive education plans for the development of children were initially formulated in 1992; these stated that, "a policy for the development of children was formulated based on improving the situation regarding basic needs and services for children [...] All children aged 3-5 must be developed in all aspects before receiving compulsory education." (MOE, 2007: 4-5). Despite this, there remains a continuing problem regarding inequality within educating, with core distinctions around outcomes relating to the disjuncture between developed urbanized areas and remote areas where impoverished people must essentially focus upon seeking a basic wage for labour rather than giving priority to an education for their child or children. Even though various

governments and other organizations are delivering an extensive range of support, underprivileged children are still palpably and measurably not receiving adequate education (Fujioka, 2002).

Fujioka (2002: 3) indeed revealed that, “hill tribe people are among the most disadvantaged groups within the country”. They have been associated with problems such as infrastructure-related limitations, similarly limited access to legal status and categorization as non-Thai on the part of outsiders. In addition, “Highland development, while seen as increasingly important, has not been integrated into mainstream development policies. Delayed by the difficulty in access, communication barriers, frequent migration of hill tribe people and to a certain extent, alleged illegal dealings among the hill tribes, assistance to highland communities has faced insufficiencies in many respects” (Fujioka, 2002:18). As briefly discussed earlier, hill tribes consistently prefer to live in small villages rather than being integrated into large villages and there are still some areas not covered by government agencies’ support.

Clearly, the provision of education in rural communities is influenced by cross-determining social, economic, political, technological and cultural factors (Bhola, 2014). Disadvantaged children from remote villages in Mae Hong Son province have struggled with a number of challenges, including living in very isolated areas, poverty and communication barriers. A parallel disparity in educational outcomes exists among these children, which is both evidenced and exacerbated by a lack of learning equipment, teaching media and study materials.

Another significant problem particularly pronounced in the context of hill tribe child education is that when pupils come to school, they will invariably use their own language to communicate with the practitioners and other students. If the practitioners are not from

the area, there might be obstacles to communication in the event of their not understanding the local language dialect. The children's parents are predominantly members of hill tribes who frequently cannot communicate in standard Thai at a fluent level and their hopes and aspirations that children will learn to communicate in Thai are grounded in an expectation that schools will have the human, technological and scholastic resources to teach them (UNESCO and Asia-Pacific Regional Network for Early Childhood (ARNEC), 2016). Furthermore, since parents in the highlands give priority to earning a living rather than getting children to study, children become at high risk of losing opportunities for obtaining appropriate education and care (Fujioka, 2002; Murphy, 2012; UNESCO, 2016). Consequently, instructors need to be particularly well prepared with their knowledge and understanding regarding learners' backgrounds.

Added to this, human and physical geographical issues relating to rural resources and climate phenomena mean that there is a food problem. Since the students generally come from remote areas with minimal infrastructural development, environmental conditions can affect students' food, often precluding the preservation of fresh food. From the informal observation undertaken in this study, the researcher found that rain was often accompanied by strong wind and storms, which consequently caused power cuts and rendered refrigeration ineffective. Likewise, some areas have only solar cells containing limited power, which must be utilized for instruction and teaching periods. Therefore, some CDCs have no refrigerator or even freezers to maintain fresh food and vegetables in order to make lunch for the young learners the next day.

In summation, the educational development opportunities available to hill tribe children cannot therefore be perceived as successful when evaluated against the projected and explicit aims of Thai educational policy. These young children find themselves in a

situation where they receive inferior support services and limited learning resources within schools which lack qualified personnel and teaching equipment. The quality of education for these disadvantaged children is low, which will invariably affect their quality of life in the future. This data is consistent with the results of the study of disadvantaged children living in the highlands of the upper northern region as conducted by the Office of Basic Education Commission (OBEC); this found that the children in those villages have a low quality of education and a very low standard of living as well as lacking access to key aspects of Thai citizenship (OBEC, 2009; Fry and Bi, 2013).

This situation is further exacerbated by communication problems occurring between the practitioners and the parents, who are not in a position to meet any additional costs involved with their child's development and learning. Finally, broader inequalities around access to, and developmental opportunities within, educational institutions for urban and rural children respectively constitute a particularly critical issues within Thailand as a whole since the majority of people live in rural areas (Fry and Bi, 2013).

According to Thai educational policy, MOE (2017: 3) states, "Thai Government in each period have attached great importance to education provision and promotion. Educational policies delivered have aspired to improve the quality of education as a whole so that all groups of the Thai population have equal opportunity to access quality education". This statement encompasses a broad commitment to supporting disadvantaged young children who are members of hill tribe groups, as they also live within Thailand's boundaries and hence are entitled to receive equal opportunities around education and study.

Therefore, this current research is concerned with the challenges surrounding hill tribe children's attendance at the CDCs and the provision of adequate education and care of them on the part of the practitioners in the context of fulfilling Thailand's educational

policy directives. Furthermore, this research also aims to deliver actionable information around the main factors and challenges impacting upon practitioners' performances, whilst identifying strategies which should better enable childcare providers within the province to provide suitable education to these underprivileged young children.

4.4 Summary

There is a large deficit in the quality of early years education provided to young learners within remote areas of Thailand when compared to that education offered to learners in urban areas. Travel restrictions in these areas imposed by the lack of good roads, lack of finances and the mountainous terrain make it difficult for people to travel easily throughout the regions. Additionally, parents often do not have the financial capacity to make choices about their child's education and most descend from hill tribes who traditionally cannot communicate Thai fluently due to their relative isolation and use of tribe-specific dialects on a day-to-day level.

Within educational institutions, the parents are understandably keen to for children to be educated in standard Thai, so that the children can communicate well and subsequently access a greater number of future opportunities for work. Despite this, the child caregivers are not only responsible for teaching the young learners to speak Thai but also for appropriately nurturing the young learners in order to enable them to overcome their socio-economic deprivation. The findings from this current study will therefore not only provide an understanding of child caregivers' practices, including the impact upon practitioners and young learners, but also offer recommendations for local authorities around developing the effectiveness of child caregiver's performances and improving educational practices within rural areas.

Chapter Five: Child Caregivers' Roles in the Education System

5.1 Introduction

The purpose of this project was to help the researcher gain an understanding of child caregivers' perceptions of their knowledge, understanding, general role, and aptitude of the surrounding educational context in order to educate young children. The qualitative data, as mentioned in the methods chapter, was acquired through in-depth interviews with child caregivers and educational officers, along with observations of child caregivers during their daily work. The findings are presented in this chapter (Chapter Five), and then in Chapter Six and Chapter Seven, each of which is based on the three research questions explicated in Chapter Two. This chapter will discuss insights derived from analysis of the data relating to the first research question, which is:

- *What role do current child caregivers think they are playing in the education system?*

Interviews were conducted with thirty respondents, including twenty-three child caregivers and seven educational officers over a period of three months. During the direct observations, four child caregivers from four Child Development Centres (CDCs) were selected and observations were conducted over a period of three months. All prospective participants who were approached to take part in the study agree to do so. General information about the respondents has been categorized within this study according to sample demographics. These groupings are composed of educational officers and child caregivers, segmented by gender within Figure 5.1.

Figure 5.1 Gender of the participants (N=30)

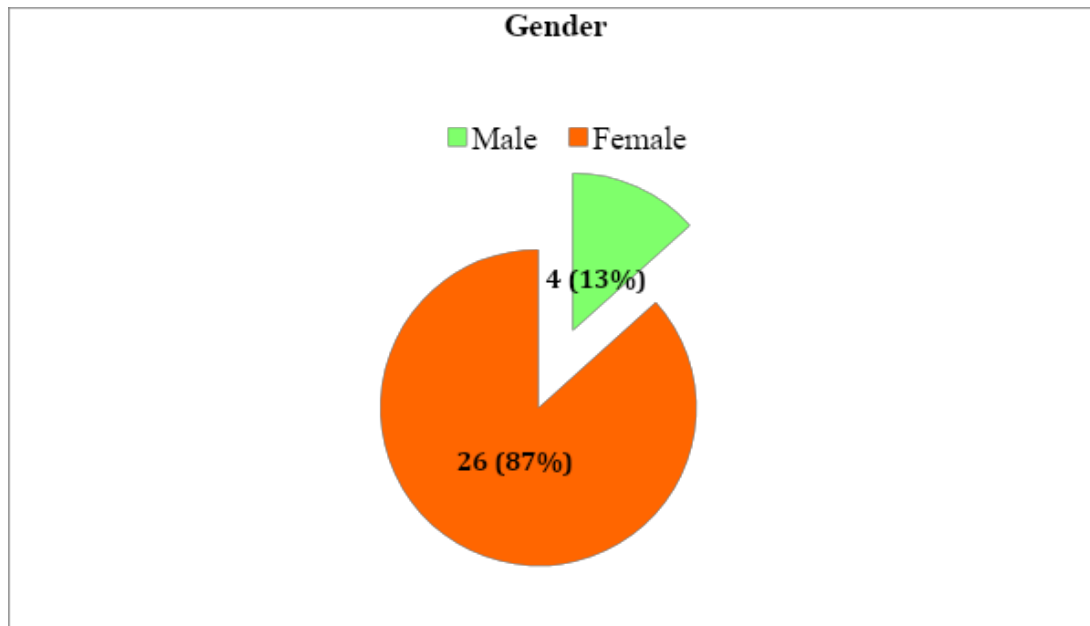


Figure 5.1 illustrates the gender division of the participants. The majority of respondents were female, with 26 (87%), while 4 (13%) were male. Table 5.1 below provides a comprehensive breakdown of educational officer demographics.

Table 5.1 Demographics of the educational officers (N=7)

Details	Frequency	Percentage (%)
Age		
25-30 years old	1	14.29
31-35 years old	2	28.57
36-40 years old	3	42.85
Over 41 years old	1	14.29
Qualification		
Bachelors' degree	6	85.71
Masters' degree	1	14.29
Years of experience		
Less than 1 year	2	28.57
1-3 years	3	42.85
4-5 years	1	14.29
Over 6 years	1	14.29
Total	7	100

The majority of educational officers were aged 36-40 (43%), with similar minority percentages of those aged 25-30 and those over 41 years old (14%). In terms of their

qualification level, most of the educational officers (86%) were educated up to Bachelors' degree level, while one (14%) of the educational officers had attained a Masters' degree. Regarding years of experience, the largest grouping (43%) consisted of educational officers had between 1–3 years' experience. In addition, 14% possessed 4–5 years' experience, with 14% falling within the most experienced band of 6+ years in the field. Nevertheless, it is salient to note that 29% of educational officers held very little experience, i.e. less than one year. Table 5.2, featured below, indicates broad general demographic divisions amongst the child caregivers.

Table 5.2 Demographics of the child caregivers (N=23)

Details	Frequency	Percentage (%)
Age		
25-30 years old	8	34.80
31-35 years old	6	26.08
36-40 years old	3	13.04
41-45 years old	3	13.04
46-50 years old	1	4.35
Over 51 years old	2	8.70
Qualification		
Lower than Bachelors' degree	7	30.43

Bachelors' degree in Early Childhood Education	10	43.48
Bachelors' degree in other areas	5	21.74
Masters' degree	1	4.35
Years of experience		
Less than 1 year	2	8.70
1 – 5 years	6	26.08
6 – 10 years	5	21.74
11 – 15 years	5	21.74
16 – 20 years	2	8.70
21 – 25 years	2	8.70
Over 26 years	1	4.35
Total		100.0

The greatest percentage of child caregiver respondents were aged 25-30 years old (35%), whereas 26% of the group was aged between 31-35 years old. Most of the child caregivers (43%) had a Bachelors' degrees in early childhood education, whilst a quarter of child caregivers (30%) had qualifications lower than a Bachelors' degree. In addition, 22% of child caregivers held a Bachelors' degree in other areas whilst 4% had graduated with a Masters' degree. From this information, it is clear that respondent demographics varied in terms of their caregiving experience. The highest percentage of child caregivers (26%) had between 1-5 years' experience; followed by 22% each falling within the ranges of 6-

10 years and 11-15 years. Conversely, a small proportion (4%) fell into the bracket of having over 26 years' experience.

In the following section, the findings of the study are presented, drawing on analysis of the interviews and observational data. The respondents' socio-demographic information is provided in brackets after each quote specifying whether they are an educational officer or child caregiver. The respondents were not identified by name to ensure anonymity. The discussion is structured in order to address the specified research question, and examines the following key issues regarding child caregivers' role in the education system:

- Child caregivers' perceptions of their role,
- The effectiveness of the child caregivers' performances, and
- The obstacles to child caregivers' performances

Themes were developed as a result of research interviews and observations, based upon the frequency of certain participant responses and terms during the interview processes, and relating to events and actions witnessed during observational sessions. Extrapolating from the types and frequency of terms extensively mentioned by many respondents in this research different perceptions of child caregivers' roles appear to be one of the key determinants influencing child caregivers' practices. The three themes above were constructed from the first research questions as mentioned earlier.

Categories were constructed by focusing on the participant's perspectives contained in the interview data in response to research questions. The respondents who took part in this study felt they had gained many benefits from their involvement in the study, including the opportunity to express concerns regarding early years education provision.

5.2 Child Caregivers' Perceptions of their Roles and Contribution

Eighteen out of twenty-three child caregivers perceived their roles as child caregivers and work at the Child Development Centres (CDCs) as a crucial part of developing disadvantaged young children, especially those residing within isolated areas. In the past, the CDCs sole responsibility was to care for children while their parents went to work. By contrast, providing education was regarded as a duty of the school system. Nowadays, the role of child caregivers has changed as indicated by the DLA's current policy stating that they intend to provide not only child-care, but also early years education; this makes them responsible for developing young learners' learning and essential skills in preparation next stages of their formal education. Thus, the educational content of the CDCs emphasized child preparation in all its aspects, including skill-improvement and self-reliance as preparation for further education and development within society. This can be seen from some practitioners' views:

“The educational management of the Centre is beneficial for the young children when they go to higher levels as they will be ready for the new input.”

(การจัดการศึกษาของศูนย์พัฒนาเด็กเล็กเป็นประโยชน์ต่อการเรียนในระดับต่อไป เพื่อจะเป็นการเตรียมความพร้อมสำหรับการเรียนรู้สิ่งใหม่) (Child caregiver 8)

“The Child Development Centre is part of the education system. Although it is not compulsory as in other schools in the state system, children are educated while being looked after.”

(ศูนย์พัฒนาเด็กเล็กเป็นส่วนหนึ่งของระบบการจัดการศึกษา ถึงแม้ว่าจะไม่ใช่ การศึกษาภาคบังคับเช่นเดียวกับระบบโรงเรียน แต่เด็กก็จะได้รับการศึกษา ไปพร้อมกับการให้การเลี้ยงดู) (Child caregiver 10)

These statements confirm the CDCs status as a key place for provision of basic skills and education for young children. Previously, the primary reasons for learners' limited school attendance in the remote areas, particularly those raised within hill tribe societies, were grounded within structural social discrimination. Due to limited Thai language skills, they were afraid of using government services which included the provision of early years education from local authority. The child education therefore was not generally valued in the hill tribe communities, whilst the right and value of education was not fully understood by parents (UNESCO and ARNEC, 2016).

Hence, statements on the part of the child caregivers also indicate that parents previously did not assign high priority to education. They would send children to the Centre in the late morning around 10-11 am and come to pick them up in the afternoon, around 12-1 pm. Occasionally, the children did not take showers prior to attending and came to the Centre in their nightclothes. Additionally, when it was raining there would invariably be no children in the Centre.

“Previously, a few children came to the Centre without taking a shower. Their parents were not aware that their child needed to be clean before coming to the Centre.”

(เมื่อก่อนเด็ก 2-3 คน จะมาศูนย์แบบที่ไม่ได้อาบน้ำ คือพ่อแม่ไม่รู้ดีกว่า ต้องอาบน้ำให้ลูกก่อนมาส่งที่ศูนย์) (Child caregiver 6)

Nowadays, regardless of circumstances, parents habitually bring their child to the Centre. Child caregivers have expressed and advocated to parents the value of education, which has led to greater realization on the part of the latter that young children should acquire

important literacy skills to enable them to enter the formal education system successfully. In addition, the children enjoyed attending coming to the CDCs and consequently engaged with the sessions. Parents themselves appear more educated both on the issues, and in general, and consequently understand how education is significant for their child. The practitioners revealed that they were proud to have played a role in changing parental perspectives, resulting from which parents would now send their young children to an early-years institution. Practitioners understood this as having made an important contribution to their society. One respondent thus stated that:

“I believe that what I did, had been considered from parents. Thus, they now realize the importance of education for their child more so than previously happened.”

(พี่คิดว่าพ่อแม่เห็นในสิ่งที่พี่ตั้งใจทำ ตอนนี้พวกเขาเลยเห็นถึงความสำคัญของการศึกษาสำหรับลูกของเขามากกว่าเมื่อก่อน) (Child caregiver 13)

From providers’ perspectives the value both of basic language-related education and essential life skills development, which children currently received, became more thoroughly understood and appreciated by parents. For example, during the period of observation (BO1), there was a heavy storm in the night which continued into the daytime. This meant it was difficult to drive, as the road was slippery and muddy. Nevertheless, all of the children showed up at the CDC and only two were late. This implies that the parents thought that attendance was really important despite the heavy rain and the storm. It was thus clear that the parents were committed to the education of their young children.

The child caregivers noted that it took time to make the parents understand the necessity of education for the young children. They tried to explain that taking the children out of educational institutions meant interrupting their education. Furthermore, child caregivers demonstrated their good intentions by looking after the children with demonstrable competence and care, leading parents to further recognize the benefits of education for their children. There was clear evidence that attendance of the CDCs increased learner well-being, along with intellectual, behavioural, physical, emotional, and social development (Pinyoanuntapong, 2013 and Buain, 2017). Early years practitioners perceived that their responsibility under the education system was, and is, to provide equal educational access to these underprivileged young learners.

The CDCs examined in this study were located in the highlands and represented the rural aspect of Thailand's education system. Accessing centres from main roads involved long travel across difficult terrain, confirmed by the researcher's experience when travelling to conduct the research. As discussed in previous Chapters when young learners initially attend these rural institutions, they speak their own hill tribe dialects and invariably start to learn the Thai language from their instructors. Consequently, the instructors need to communicate in both Thai and the ethnic languages. In addition to discussing their contribution towards changing perceptions around early years education, child caregivers discussed their roles within the education of young learners from hill tribes in relation to the following eight themes: protection (20)⁵; facilitation (17); pleasure (16); creation (13); devotion (11); care (10); investigation (7); and role model (5) see Table

⁵ The number in brackets refers to the number of child caregivers who were coded to these respective themes.

5.3. All of the respondents mentioned more than one option, which implied the multiple responsibilities that the child caregivers perceived themselves to hold.

Table 5.3 The child caregivers' perception about their roles

	Protection (20)	Facilitation (17)	Pleasure (16)	Creation (13)	Devotion (11)	Care (10)	Investigation (7)	Role Model (5)
CC1*	1	1	1	0	0	0	0	0
CC2*	1	1	1	1	1	0	1	0
CC3*	1	1	1	0	0	0	0	0
CC4	1	1	1	0	0	1	0	0
CC5	1	1	1	1	1	0	0	0
CC6	1	0	1	0	1	1	0	1
CC7	0	1	0	0	1	0	1	0
CC8	1	1	1	0	0	1	0	0
CC9	1	1	1	1	1	1	0	0
CC10	0	1	1	1	1	1	1	0
CC11	1	1	1	0	1	1	0	1
CC12	1	0	0	1	1	0	1	1
CC13	0	1	1	1	0	0	1	1
CC14*	1	0	0	0	0	0	0	1

CC15	1	0	0	1	0	1	0	0
CC16	1	1	0	0	0	1	0	0
CC17	1	1	0	1	0	0	0	0
CC18	1	1	1	1	1	0	1	0
CC19	1	1	0	1	0	1	0	0
CC20	1	1	1	1	0	1	0	0
CC21	1	0	1	1	0	0	1	0
CC22	1	1	1	0	1	0	0	0
CC23	1	0	1	1	1	0	0	0

*There are the child caregivers who were selected for, and agreed to participate in, the observational work.

The early years instructors' roles rely largely upon the individual circumstances and social setting each instructor works in, but in all cases child caregivers are expected to deliver knowledge, skills and experience in order to improve outcomes for young learners. Surprisingly, the child caregivers did not perceive themselves as early years educators primarily responsible for providing education to the young learners; however, they did perceive themselves as having more than one responsibility. This multifariousness can be found illustrated within table 5.2 and discussed further in light of evidence garnered from the participants' statements.

The majority of them (twenty out of twenty-three child caregivers) believed that child protection was undoubtedly the greatest concern for a classroom instructor. The child

caregivers commonly noted that they retained a key role in ensuring child safety while young learners attended the CDCs; this included both physical and mental safety. In respect of the physical safety, the following quotations, taken from interviewee responses, reflect recurring tendencies:

“I think I am a protector, which makes me concerned about the safety of children which I view as the priority of the Centre.”

(พื้คิดว่พื้อยูใ้ฐนษะพื้ดูแลควมปลอดภัย ซึ่งเรืองควมปลอดภัยของเด็กรว่ จะมเป็อันดั้หนึ่งสำหรั้คุณยนี้) (Child caregiver 12)

“My main responsibility is to protect the children from unsafe things and provide proper hygiene and nutrition.”

(หน้ที่หลักของพื้คือการดูแลในเรือง ควมปลอดภัยของเด็กรว่ จากอันตรรายต่างรว่ และจั้ดการในเรืองของสุขภาพและโภชนาการด้วย) (Child caregiver 17)

Protection was a major issue in the gathered responses. However, children’s safety was nevertheless understood as concerned with physical protection and holistic development, as evidenced by the following statements:

“Touching can make children feel warm and safe, and the key is to gain trust from them. So, when talking to them, I normally gently touch their arms, heads, and give them a hug.”

(การสัมผัสช่วยให้เด็กรู้สึกอบรรมและปลอดภัย และยังเป็นกฎแเจสำคั้ญได้รั้ควมไว้วางใจจากเด็กรว่ เวลาพื้คุยกับพวกรว่พื้ก็จะค้อยๆสัมผัสพวกรว่ที่แขนลุบหัวและกอด) (Child caregiver 6)

“What I normally do is to hug and talk to them nicely, so that they will feel safe while attending the Centre.”

(สิ่งที่พี่จะเป็นประจำคือพี่จะกอดพวกเขา เพื่อให้พวกเขารู้สึกปลอดภัยเมื่อมา อยู่ที่ศูนย์)

(Child caregiver 18)

This demonstrates that participants viewed themselves as playing a crucial role in protecting the children and that young children were seen as secure in the best environment when instructors could be trusted with their wellbeing when they were away from their families.

The child caregivers not only mentioned the importance of protection, but also discussed facilitation as an essential element with regards to young learners’ development and learning. In terms of the facilitation, seventeen out of twenty-three child caregivers mentioned that their roles could be seen as those of an organizer providing all of the activities in order to enhance young learners’ skills and education. They noted that stationary, materials, tools and equipment were provided even though the CDCs were located in areas with limited resources.

The child caregiver was responsible for preparing teaching materials, sometimes when there were insufficient numbers for all the children. They would ask the young learners to merge into groups of 3-4 learners in order to fully perform the activities. Besides this, they brought local materials into the classroom and also took the young learners out on field trips to learn from activities taking place in their village. This feature is elucidated within the following accounts:

“I would say I am a facilitator in this Centre in order to care and prepare various teaching aids for the young learners.”

(พี่อยากจะทำตัวพี่เองเป็นผู้อำนวยความสะดวกของศูนย์นี้ เพราะพี่จะดูแล และเตรียมอุปกรณ์การสอนให้มีความหลากหลายสำหรับเด็กๆ) (Child caregiver 13)

“I am a facilitator in order to bring local materials into the classroom. Sometimes I take the children out to learn from community activities as learning resources.”

(พี่เป็นผู้เตรียมการในการเอาสื่อในท้องถิ่นเข้ามาสอนในห้องเรียน บางครั้งพี่ก็จะพาเด็กๆ ออกไปเรียนรู้ตามแหล่งเรียนรู้ต่างๆ ในชุมชนด้วย) (Child caregiver 20)

As discussed, the Child Development Centres forming the basis of this study were located in isolated areas of Thailand and normally had problems around inappropriate and insufficient teaching materials. The child caregivers were keen to use their own skills so as to be able to run activities professionally and beneficially and ultimately in order that young learners could develop their own fundamental skills. Providing accessible learning resources from the local community is one method the practitioners use to arrange materials for young children’s learning even though they live in the midst of a shortage.

Despite this, sixteen out of twenty-three child caregivers were pleased to be a part of the early years education system, which they viewed as ensuring disadvantaged children access to educational services. They perceived themselves as having a transformative role in relation to those underprivileged children. They also noted that education for young learners was indeed significant for their life, a view evidenced by the following statements:

“It is my pleasure to make a transformation in their lives. I think nothing is more worthwhile than helping children to develop the essential skills required for life.”

*(พี่รู้สึกยินดีที่ เป็นผู้เปลี่ยนแปลงชีวิตของพวกเขา พี่คิดว่าไม่มีอะไรที่จะคุ้มค่า
ไปกว่าการช่วยให้เด็กๆ ได้พัฒนาทักษะที่จำเป็นสำหรับชีวิตพวกเขา)
(Child caregiver 4)*

This statement demonstrates that the child caregivers perceived themselves to be capable of changing the young learners' lives. In addition, it reiterates that even though the young learners live in remote areas, they possess rights to the same quality of education and proper care as the urban children. The interviews provide evidence that the child caregivers who were interviewed were born within the vicinity of the CDCs and very close to the local people. They therefore had a better chance of understanding each young learner's cultural background.

The child caregivers noted that there were many children from difficult families and therefore needed support and encouragement from instructors in order to fulfil their potential, stated here by one of the interviewees:

“This boy, he lives with his grandma and his dad got a new family and his mom had left him when he was very young. When he first attended the Centre, he was really naughty and needed attention from me. I always give him a hug.”

*(เด็กผู้ชายคนนี้อยู่กับย่า พ่อของเขาไปมีครอบครัวใหม่ แม่ก็ทิ้งไปตั้งแต่เขายัง
เล็กมากตอนแรกที่เข้ามา เรียนที่ศูนย์จะดี๊มากและจะเรียกร้องความสนใจ
พี่ก็จะกอดเขาตลอด) (Child caregiver 2)*

This can be seen to indicate the advantages of having local people as child caregivers, on the grounds that they understand when and why the young learners behave

inappropriately and ground their solutions to within this knowledge as well as consequent abilities.

According to the child caregiver's qualifications, they had opportunities to search for other careers within the urban work environment in order to avoid the poverty inherent within the remote areas. It can be discerned that child caregivers' direct experiences and understanding of rural young learners' status have caused the majority to relinquish urban work opportunities, to work with these children and enhance educational and care quality in remote districts.

In addition, eleven out of twenty-three child caregivers explicitly expressed the view that they devoted themselves to working with disadvantaged early year children in order to develop and educate these children. They worked with the limited resources and many challenges associated to engagement associated with young children's family circumstances, such as language barriers and economic restrictions. Despite this, the child caregivers still self-identifiably dedicated themselves to developing these hill tribe children in order to prepare them for starting primary school with confidence. Two respondents said:

"I am devoting myself to educate them and try to give them learning opportunities, which they would not otherwise have."

(พี่ได้อุทิศตัวเองเพื่อการสอนเด็กและสร้างโอกาสทางการเรียนรู้ต่างๆ ที่พวกเขาไม่มี)

(Child caregiver 5)

"Being able to teach young children who are from ethnic groups and where education is currently limited, is my willing duty and I am devoted to provide them with various learning opportunities."

*(การที่จะสอนเด็กเล็กๆ ที่เด็กชาวเขา ซึ่งจะมีข้อจำกัดในเรื่องของการให้การศึกษา
ที่รู้สึกเต็มใจและอุทิศตัวเพื่อที่จะจัดการให้พวกเขาได้ มีโอกาสทางการเรียนรู้
อย่างหลากหลาย) (Child caregiver 6)*

These comments imply that although young learners lived in remote areas, with their associated challenges to learning as well as practically ensuring that caregivers continued to reside within rural areas themselves, the child caregivers realized the social value of providing learning opportunities in the formative early years and were consequently enthusiastic around educating these children. On the other hand, some of the childcare providers explicitly indicated that they were happy to work in the area because they could live with their families. However, they still considered to seeking employment in the city in order to have a better life.

Due to limited resources, the child caregivers needed to ingeniously create activities for provision and maintenance of a friendly atmosphere within learning. Thirteen out of twenty-three child caregivers mentioned that most activities were not excessively serious and were orientated towards young children's interests, even as issue of limited resources was a significant continuing matter in deciding what to do and how sustainable activities were. The activities were likewise created to encourage young children to engage with local materials such as small banana trees, vegetables, and fruit which they could collect from within local communities, as well as village-centred field trips. Three child caregivers stated that:

“I created activities for the young learners in an enjoyable environment with various local learning materials to play with and took them on a field trip around the village.”

*(เพื่อออกแบบกิจกรรมต่างๆ สำหรับเด็กๆ ให้พวกเขาได้เล่นและเพลิดเพลิน
กับสภาพแวดล้อมพร้อมกับสื่อการเรียนรู้จากท้องถิ่น และพื้ก็พวกพวกเขาออก
ไปทัศนศึกษารอบๆ ชุมชนด้วย) (Child caregiver 10)*

“I always create activities based on the weekly learning theme and merge local materials into the events in my classroom.”

*(เพื่อออกแบบกิจกรรมต่างๆ จากหน่วยการเรียนรู้รายสัปดาห์ และก็เอาสื่อจาก
ท้องถิ่นเข้ามาช่วยในการจัดกิจกรรมในห้องเรียนด้วย) (Child caregiver 12)*

“Providing local authentic materials in my classroom is the way I can achieve activities while we have limited resources.”

*(การเอาสื่อที่มีในท้องถิ่นเข้ามาจัดกิจกรรมในห้องเรียนเป็นวิธีการที่พึงปรับใช้ เนื่องจาก
ศูนย์ฯ ราวอยู่ในพื้นที่ที่ขาดแคลนแหล่งเรียนรู้) (Child caregiver 17)*

These statements indicate that the child caregivers are required to provide the fundamental materials and equipment necessary for young learners' learning abilities, based upon their own access to resources. Being faced with living in rural areas and a lack of accessible learning supplies, the child caregivers need to adapt whatever resources remain or become available within their areas in order to provide young learners with a good standard of education.

Additionally, ten out of twenty-three participants perceived their duties included caring for and supporting young children in terms of developing skills for growth and social life development through CDC-based activities. This perspective is evidenced in statements from two of the interviewees:

“I believe that these children need to be taken good care of with proper development in accordance with their age.”

(พี่เชื่อว่าเด็กเหล่านี้ต้องการการดูแลที่ดี และการพัฒนาอย่างเหมาะสมกับช่วงอายุของพวกเขา) (Child caregiver 6)

“I provide good care and education at the same time in order to prepare them for their future learning.”

(พี่ให้การดูแลและการศึกษาพวกเขาในเวลาเดียวกัน เพื่อเตรียมความพร้อมให้พวกเขาสำหรับการเรียนรู้ในอนาคต) (Child caregiver 15)

Taking care of children while their parents go to work is perceived as the primary duty of educators. The learning opportunities for these disadvantaged children are minimal when compared to children in the city, partially since parents do not have enough knowledge to provide proper care (Suvansrul, 2013). Thus, when the children come to the Centre, child caregivers will be expected to provide appropriate care in order to ensure the children are properly developed.

Such conclusions were supported by educational officers' statements, which indicated that the officers had to go into the field to observe child caregiver's actual performances at least once per semester. These officers saw that young children were happy and enjoyed the activities they participated, suggesting that the practitioners provided stimulation. Likewise, the educational officers revealed that children's skills improved when gauged against their developmental level and age. This could imply that practices carried out within and through child caregivers' roles, consisting of activities delivered to the young learners, were objectively beneficial. One of the educational officers explained that:

“The child caregiver did her job quite well as it can be seen from the children who are happy, clean, healthy and enjoy participating in activities when I went to the Centre.”

(ผู้ดูแลเด็กทำหน้าที่ของตัวเองได้ดีมาก ซึ่งสามารถดูได้จากเวลาที่เด็กๆมาที่ศูนย์

แล้วมีความสุข, สะอาด, สุขภาพดี และสนุกสนานกับกิจกรรมต่างๆ)

(Educational officer 3)

Furthermore, three educational officers noted that not all child caregivers (twelve out of twenty-three) had graduated with a Bachelors’ degree in early childhood education. They had opportunities to attend essential training sessions around education and care for the young learners. As a result, they were able to provide enjoyable and appropriate activities with diverse experiences, serving to stimulate young learners. Information from educational officers confirmed that child caregivers made continuing efforts to develop their practices, as indicated below:

“Every time I go into the field to observe teaching, I see new activities with happy children. The teacher has more than one duty in a day, but she can handle all this and does her best.”

(ทุกครั้งที่มีลงพื้นที่สังเกตการสอน ก็จะเห็นกิจกรรมใหม่ๆ ที่ครูจัด และเด็กมีความสุข

ครมึภาระหน้าที่มากกว่าหนึ่งหน้าที่ในแต่ละวัน แต่เขาก็ทำหน้าที่ได้เป็นอย่างดี)

(Educational officer 1)

“I would say that my child caregivers, who I supervise, are pretty professional.

When I observe their teaching, I am always impressed with the set activities.”

*(พืพุดได้ว่าผู้ดูแลเด็กในการดูแลของพืดอนข้างจะมีความเชี่ยวชาญในการทำหน้าที่
เวลาที่พืดงพืดนที่สังเกตการสอน พืดจะรู้สึกประทับใจในกับกิจกรรมต่างๆ ที่เขาจัดเตรียม
ให้กับเด็กๆ) (Educational officer 3)*

This indicates that child caregivers have several responsibilities when dealing with the young learners, with insights derived from educational officers' direct observations of practitioners' practices.

A predominant perception identified within child caregivers' around their roles is the integration of more than one responsibility. They are not only there to educate the children, but also to perform numerous tasks preparing young children for various life experiences. Providing positively charged experiences for disadvantaged young learners can indubitably improve their learning and essential skills as part of entering the wider world.

In addition to the trends emergent from the interviews with child caregivers and educational officers, the data obtained from subsequent observational research also supports that claim that children were supported well. Early years practitioners were observed as enacting their responsibilities to deliver and facilitate care and education through ongoing activities.

Four child caregivers were observed over the course of their teaching sessions; these involved facilitating activities created by caregivers beforehand, then undertaking guidance and duties of care while young children were involved in events. The practitioners performed naturally, appeared happy and clearly intended to provide appropriate activities for the young learners. During the observations, the practitioners

cared for and protected young learners through creating and maintaining a safe environment, which included ensuring that:

- The activities areas were cleaned both before and after activities, and
- The children were reassured, with child caregivers gently touching the young learners at arrival and during the activities.

In addition, the observation found that the four child caregivers who were observed demonstrated how to engage young learners in the activities. Their other role was to facilitate and be involved in the activities until the children were able to do it themselves. They permitted the young learners to learn through direct instruction and by discovering other approaches for themselves. The practitioners encouraged the children to continue the activities until they completed them. The following are examples of phrases from the observed child caregivers:

Child Caregiver 1: "Wow, Ticha, you are doing a great job."

(OB2) (ว้าว ทิชาหนุทำได้ดีมากเลย)

"Oh! I like it."

(โอ้ว ครูชอบมากเลย)

"Thank you for doing this for your friends."

(ชอบใจมากที่หนูทำให้เพื่อน)

"Great! Tell me more what is the next step?"

(เยี่ยม! บอกครูสิว่าขั้นตอนต่อไปคืออะไร)

"It looks like you are happy to do this. And it is beautiful."

(ดูเหมือนว่าหนูจะสนุกกับการทำอันนี้นะ และมันก็ออกมาสวยมากเลย)

Child caregiver 1: "How about this one? What do you think Tanu?"

(OB1) (อันนี้หละ ตะหนูคิดว่ายังไง)

"That is beautiful. It can be more, so keep doing it."

(อันนั้นสวยมากเลย แต่จะสวยได้มากกว่านี้อีก ทำไปเรื่อยๆนะ)

"Really?"

(จริงหรือ!)

"You have nearly finished."

(หนูทำใกล้จะเสร็จแล้ว)

These are encouraging expressions, repeated by the early year instructors while the young learners were doing the activities to ensure that all young children complete the undertakings. This implies the practitioners cared and needed to confirm that each young learner had similar opportunities by asking and encouraging each of them to engage and complete the activities.

In summary, child caregivers have a profound influence on the quality of education and care offered within CDCs. Therefore, one of the child caregivers' roles under the education system is to make a difference for these hill tribe children, which they perceived as a great responsibility in order to enhance the learning opportunities, life experiences and appropriate care available to these disadvantaged young children. The practitioners also perceived that the quality of education made a difference to children's further educational opportunities. With increasing awareness of early years education's

significance within the context of the larger education system, the CDCs become crucial child development institutions explicitly geared around enhancing children's essential skills in light of their developmental level and age.

5.3 The effectiveness of child caregivers' performance

Data obtained from the project interviews shows that twenty out of twenty-three child caregivers were satisfied with their work. They worked in the area where they were born and raised, and were thus intimately acquainted with the local community, including their charges' parents, as the following statements indicate:

"I am feeling so happy having the chance to take care of these children because their parents and I, we know each other. So, these children are like mine."

(พี่รู้สึกดีที่มีโอกาสได้ดูแลเด็กพวกนี้ เพราะผู้ปกครองกับพี่เรารู้จักกันอยู่แล้ว เพราะฉะนั้น เด็กพวกนี้ก็เหมือนลูกหลานของตัวเอง) (Child caregiver 7)

"I was born here, and I also have a family here. Everyone knows each other and my job is to help improve their capabilities."

(พี่เกิดและก็มีครอบครัวที่นี่ ทุกคนรู้จักกันหมด และงานของพี่ก็คือช่วยพัฒนาความสามารถของเด็กเหล่านี้) (Child caregiver 9)

The child caregivers perceived their role to be beneficial for the local community by improving the quality of education available to children from remote small villages. Furthermore, the practitioners' desire to provide education and care to disadvantaged children can be identified as a result of their own background and connection with the

local community; indeed, a majority perceive young learners to be like their own children. From their perspective, as well as that of this study, therefore, the intention was to successfully seek ways to support their practices.

Consequently, the child caregivers were questioned about what would help their practices to be effective. Their responses categorize ‘effective performance’ as consisting of four main factors: cooperation from parents and communities; training; trustfulness of parents; and teaching techniques see Table 5.4. These themes relate to the first research question and emerged from interview discussions, as well as being evidenced and supported through direct observations. The detail of each theme will be presented in sections 5.3.1, 5.3.2, 5.3.3 and 5.3.4.

Table 5.4 Performance effectiveness factors

	Cooperation from Parents and communities (19)	Training (17)	Trust from Parents (16)	Teaching Techniques (10)
CC1	1	1	1	1
CC2	1	0	1	1
CC3	1	0	1	0
CC4	0	1	1	0
CC5	1	1	1	0
CC6	1	0	1	0
CC7	1	0	0	1
CC8	1	0	1	0
CC9	1	0	0	1
CC10	0	1	1	0
CC11	1	1	1	1
CC12	1	1	1	0
CC13	1	1	1	0
CC14	1	0	1	0
CC15	1	0	0	0
CC16	0	1	1	1

CC17	1	0	0	1
CC18	1	0	1	0
CC19	0	0	0	1
CC20	1	0	1	0
CC21	1	0	1	0
CC22	1	1	0	1
CC23	1	1	0	1

5.3.1 Cooperation from the parents and communities

Effective educational work in this study is exemplified through cooperation between practitioners, parents and communities. The majority of child caregivers (nineteen out of twenty-three child caregivers) expressed themselves as satisfied with the degree of collaboration and cooperation from parents. They articulated the crucial difference between children from disadvantaged backgrounds who did well and those who did less well in CDCs. It depended on positive attitudes of parents concerning their young child's development and learning. The parents were members of rural hill tribes who worked as agricultural cultivators, and predominantly communicated using regional dialects instead of the mainstream Thai language.

The local people always cooperated with child caregivers' requirements and requests not only relating to their own child, but also the CDC's facilities as well. The good cooperation between the child caregivers and parents is a significant factor in the effectiveness of child caregivers' performance and in accordance with their work under the education system. The following statement gives some indication of this:

“Parents here are very cooperative. They helped us build this fence. Anything or any assistance that I ask for has never been ignored.”

(ผู้ปกครองที่นี่ให้ความร่วมมือดีมาก รั้วที่เห็นอยู่นี้ก็ฝีมือผู้ปกครองช่วยกัน ทุกอย่างหรือทุกความช่วยเหลือทางเราร้องขอไปจะไม่เคยที่จะได้รับการปฏิเสธ เลยสักครั้ง)

(Child caregiver 2)

“The parents here have little knowledge about raising children, so we give them suggestions and they always follow these, and we always receive great cooperation as they listen to us.”

(ผู้ปกครองที่นี่มีความรู้เกี่ยวกับการดูแลเลี้ยงดูเด็ก ฟังก็ต้องให้คำแนะนำ พวกเขาพวกเขาก็จะฟังและให้ความร่วมมือที่ดี) (Child caregiver 18)

These statements confirm that the child caregivers and parents have a good connection in terms of cooperating with each other for the benefit of young learners. Both the educational institution and home environment exert educational influence on the learners in order to achieve good average results, so both groups need to closely collaborate. With regards to section 5.2, the child caregivers describe parents’ realization of education’s value as well as appreciation of practitioners’ intentions to deliver teaching and care for young learners. Accordingly, they provided enthusiastic encouragement and practical support to the practitioners’ requirements.

Similarly, the educational officers confirmed the strong relationship between child caregivers, parents and communities. The child caregivers received positive responses from parents and communities in all their requests. Even though educational officers’ responsibilities revolved around supporting all facets of child caregivers’ work, in practice it is apparent that they were not able to meet every resource requirement due to budgetary constraints amongst the local authorities. Moreover, within the village, there

was a monthly meeting held in the community, organized by a selected committee composed of local residents, which discussed various matters. When child caregivers submitted essential requirements, there is demonstrably no record of these requests ever being denied in principle, as partially evidenced within in the following examples:

“The child caregivers here are very well connected with the parents. They can gain a lot of trust from the parents, which makes it much easier to ask cooperation from the community in all matters.”

*(ผู้ดูแลเด็กที่ดีจะมีความสัมพันธ์ที่ดีมากกับผู้ปกครอง เขาได้รับความไว้วางใจจากผู้ปกครอง ซึ่งช่วยให้ง่ายในการขอความร่วมมือจากชุมชนในเรื่องต่างๆ)
(Educational officer 2)*

“I think that the child caregivers have more support from the parents in various matters of the Centre when compared to the local officers.”

(ที่คิดว่าผู้ดูแลเด็กได้รับการช่วยเหลือจากผู้ปกครองหลายเรื่อง ซึ่งมากกว่าได้รับจากทางหน่วยงานต้นสังกัด) (Educational officer 5)

Information from the educational officers implies that the child caregivers mostly received help from the community in contrast to the local authorities. The parents and local people all know that their children will benefit from all subjects, which the child caregivers request them to engage directly with. In addition, the child caregivers themselves tried to find alternative solutions in order to meet the needs of effective practice delivery in the context of resource shortfalls. Through experience, they discovered that cooperation between parents, communities and caregivers was the best solution for enabling caregivers to carry out their practices as mandated by the Thai

education system. Practitioners therefore seem to not unduly care whether or not local authorities provided appropriate support to them.

The primary goal of parents and instructors is that young learners engage in developmentally appropriate practices. Since they share the same concerns around the young children's development and learning, they should therefore work well together in order to achieve their common intentions successfully. The nature of cooperation depends on the local tradition and culture as well as the socio-economic status of areas (Cankar, Deutsch and Sentocnik, 2012: 37). Involvement in educational issues has become essential in order to effectively live together and benefit society, particularly with regards to the young learners.

5.3.2 Trust from parents

In the context of this research, the concept of parental trust is framed within positive co-operation between parents and practitioners (section 5.3.1), as extremely significant for young children's development and learning; effective partnership is developed based on trust (Reed and Canning, 2011). This project's research has situated child caregiver practice in terms of parental aspirations around sending children to attend CDCs and the changing trends around, as well as structural determinants of engagement. Therefore, parental trust constitutes is a significant factor within the success or otherwise of practitioners' practices in relation to provision for young learners' development and learning.

Sixteen out of twenty-three child caregivers mentioned that they gained trust from parents, although it took a while to do so. They discussed parents' status as representatives of ethnic minority groups, tribal groups' relative cultural remoteness and

the maintenance of individual ethnic linguistics. The participants noted that most parents lacked access to essential social services and a significant number experienced high-level poverty. It was within and through these structural conditions that they sustained their traditional way of living. One interviewee said:

“Some parents had limited access to Thai social responsibility because they lacked a sense of national identity, so they were afraid to become involved in government services for themselves and their child.”

(ผู้ปกครองบางคนยังไม่สามารถที่เข้าถึงสิทธิของประชาชนคนไทย เพราะพวกเขาไม่มีบัตรประชาชนเลยทำให้เกิดความกลัวที่จะเข้าไปเกี่ยวข้องกับบริการจัดการต่างๆ จากทางภาครัฐ ซึ่งก็หมายความว่าในเรื่องที่เกี่ยวข้องกับเด็กๆ ด้วย)
(Child caregiver 10)

The interviewees additionally revealed that nowadays parents were aware, whether through their own experience of formal education or exposure to attitudes and social inculcation, of how education would benefit their child or children. Child caregivers also declared that even as local residents who were socially intimate with the parents, they still needed to demonstrate a loving and caring attitude whilst formally managing the children’s developmental skills in order to gain and retain parental confidence. This enabled parents to develop trust in the child caregivers and their performances, as indicated in the following statement:

“I care for every one of the children here as my own children. Their parents will slowly see the development of their children and finally trust me.”

(เพื่อดูแลเด็กที่นี้ทุกคนเหมือนลูกตัวเอง พ่อแม่ก็จะค่อยๆ เห็นพัฒนาการที่ดีขึ้น ของลูก และพวกเขาก็จะไว้ใจตัวเอง) (Child caregiver 12)

These respondents also noted that they were afforded a privileged status, since parents perceived the practitioners to be knowledgeable, and as a result capable of simultaneously educating and providing good care for their child while parents worked. Therefore, if the practitioners suggested anything regarding young learners' development and learning, parents would invariably be happy to collaborate, on the grounds that suggested course of action would be of benefit to the children. This demonstrates the trust afforded by parents to practitioners in all aspects; the contention on the part of parents, practitioners and this study alike is that such trust is key to supporting practitioners in performing effectively their duties of provision toward young learners.

As discussed, the CDCs under this study were located within those distant areas where practitioners worked, which helped with gaining trust as well as providing access. Most of the attendee children were from hill tribes. Conversely, three out of the twenty-three child caregivers were originally Thai and came not only from other villages, but other provinces. They had subsequently married and started their own families within these rural villages. Initially, these outside caregivers could not speak the original ethnic language. Nevertheless, they have striven to become part of the villages and to become entrusted with the care of these young children. One child caregiver stated that:

“I am from Chiang Mai and to be part of this area, it took quite a while. I have attended and tried to help with all the affairs of the village until I gained their trust and I finally became one of the people here.”

*(พี่เป็นคนเชียงใหม่และกว่าจะปรับตัวได้เป็นส่วนหนึ่งของที่นี่ก็ใช้เวลาพอสมควร
ที่ต้องเข้าร่วมช่วยงานในกิจกรรมต่างๆของชุมชนจนกระทั่งคนในชุมชนให้
ความไว้วางใจและยอมรับพี่เข้าเป็นส่วนหนึ่งของพวกเขา) (Child caregiver 1)*

It is possible that living in isolated areas and maintaining a continuing reliance upon traditional linguistic dialects has influenced villagers to fear government intervention which involves using social services and standard Thai language to communicate with others. The child caregivers need to be part of communities in order to gain trust from hill tribe parents; this in turn takes time due to the relative cultural isolation accompanying ethnic minority groups' living practices.

During the direct observations, the researcher surprisingly found that grandparents, aged on average between 70 and 80, frequently walked the children to Centres and acted as both parents and guardians. Even though some needed to attend to their farms early in the morning, they would drop young learners around to child caregiver's homes around 6.15-7 am in order that learners could attend the Centres with the child caregiver. Sometimes the child caregiver brought the young learner back home with them once the Centre closed, in which instance either the parent would pick the child up later or the child caregiver send the learner home. This set of procedures results from the Centre's specific opening times, which are normally 7.30 am until 3 pm, in the context of hill tribe working adults' workdays.

The respondents additionally noted that young learners frequently arrived early in the morning and remained until late afternoon. A child caregiver who brought one of the learners back home with them provided the following account:

“His grandma called me this afternoon asking me to look after this boy after school and she will pick him up around 6.30 pm at my home.”

(ยายของเด็กโทรหาพี่เมื่อตอนบ่ายขอให้พี่ช่วยดูแลเด็กหลังจากเลิกเรียน แล้วยายจะไปรับที่บ้านพี่ประมาณ 6.30 น.) (Child caregiver 1)

“Half of the young children who attend this Centre live with their grandparents because their parents have moved to the city to seek employment.”

*(ครึ่งหนึ่งของเด็กที่มาเรียนที่นี่ยู่กับตายาย เพราะพ่อแม่ย้ายไปทำงานในเมืองกันหมด)
(Child caregiver 2)*

This shows that the child caregivers needed to provide learners with further care when their parents were not available to do so. The parents relied on child caregivers to be an available care person from the same cultural background and as well trustworthy. Furthermore, the parents did not wish their child to be absent from the class and knew they would be more secure with the practitioners than remaining with them while they worked. Therefore, the practitioners need to respond to family’s requests and consider those courses of action which will best benefit the child.

5.3.3 Training

Teaching young children is a career holding high expectations around personal responsibility in the process of providing learning environments and setting various activities which prepare children for engaging with Thai language and society whilst also developing their skills (Villegas-Reimers, 2003). Instructors need to have appropriate

knowledge in order to provide proper activities regardless of young learners' stages of learning and development.

Seventeen out of twenty-three child caregivers perceived that they had received new knowledge through attending training sessions organized by the DLA and other agencies; these sessions were aimed at promoting provision of age appropriate and well-timed activities so as to boost young children's learning and development. The child caregivers indicated that they applied knowledge and activities gained from the training to their classrooms, and that young learners consequently enjoyed engaging with the activities. Their appreciation of the training sessions can be found illustrated within the following statements:

"I always obtained new knowledge from the basic training, which was used in the classroom and the activities always appealed to my young learners."

(พี่ได้รับความรู้ใหม่ๆ จากการอบรมเสมอๆ ซึ่งพี่นำไปใช้ในห้องเรียนและในการจัดกิจกรรมที่ดึงดูดความสนใจจากเด็กๆ) (Child caregiver 5)

"Even though I did not finish an early childhood education degree, from the training sessions I could learn how to produce the teaching plans and how to set up appropriate activities for the children based on their developmental levels."

(ถึงแม้ว่าพี่ไม่ได้จบปฐมวัยมาโดยตรง แต่จากการที่พี่ได้ไปอบรมพี่ก็สามารถเขียนแผนการสอนได้แล้ว และรู้ว่าควรจัดกิจกรรมอย่างไรให้เหมาะสมกับระดับพัฒนาการของเด็ก) (Child caregiver 13)

This means that the child caregivers could gain the knowledge and skills for creating appropriate activities without having formally graduated within the field of early years

education. On the other hand, six of the participants mentioned that even though they technically had the right to attend training sessions, they were not able to access these as a consequence of insufficient budgets. As one child caregiver said:

“I have attended the training organized by the DLA once and the SAO (Sub-district Administrative Organization) never permitted me to attend any further training and the reason was that there was no budgetary support me.”

*(ไม่มีโอกาสได้ไปเข้าร่วมอบรมที่กรมส่งเสริมการปกครองส่วนท้องถิ่นจัดเพียง
แค่ครั้งเดียว เพราะทางอบต. ไม่อนุญาตให้ไปอีกเนื่องจากไม่มีงบประมาณสนับสนุน)
(Child caregiver 22)*

Childcare providers noted that they had received the same kind of training, organized by the local government, instead of the actual basic training organized by the DLA and other agencies. This kind of training concerned local government child caregivers related regulations, about which the practitioners were already aware. The people who attended the meeting commonly included executive members, educational officers and child caregivers belonging to this local government, illustrated within the following statement:

“We had several patterns of the various kinds of the meeting such as the up-to-date standards of the CDC and regulations stuff.”

*(เรามีการประชุม หลายรูปแบบมาก เช่น การอัปเดตข้อมูลเกี่ยวกับมาตรฐาน
ของศูนย์พัฒนาเด็กเล็ก กฎระเบียบที่เกี่ยวกับเจ้าหน้าที่) (Child caregiver 12)*

This information indicates that the local authorities had the power to manage all aspects related to child caregivers' work. The limited budget was likely to constitute an impediment to providing or allowing child caregivers to attend teaching training. There appears to be a lack of awareness within the local authorities about the importance of practitioner training in terms of quality of early years care and education. Early years training quality corresponds to standards of practitioner-led child development and care, enhancing the childcare providers' capacity to create rich and interesting environments which can better develop the young learners' perceptions as well as incorporating playing and learning into practice as part of developing children's elemental skills (Sommer et al., 2010). The conclusion was that local authorities ought to, therefore, consider making a training budget available for staff development.

Even so, nine out of twenty-three practitioners noted that there were other challenges to accessing the training. Two key ones included traveling to the place where training was organized, together with the duration of training courses themselves. The training usually was organized in Bangkok, approximately 900 kilometers from Mae Hong Son province (National Statistical Office, 2014). In addition, when attending training, child caregivers needed to find someone with sufficient qualifications to cover for them during their absence. The following is the excerpt from the response of one interviewee:

“The training which was organized by the DLA always took almost one week. I needed to hire someone to work on behalf of me and I paid her from my own money.”

*(การอบรมที่จัดโดยกรมส่งเสริมการปกครองส่วนท้องถิ่น ส่วนมากจะจัดอบรมเกือบ
หนึ่งสัปดาห์ พี่ต้องจ้างคนมาทำงานแทนในส่วนงานของพี่โดย ใช้เงินส่วนตัวพี่เอง)
(Child caregiver 3)*

*“The training was always organized in Bangkok, which is quite far from Mae
Hong Son as it took almost 2 days by bus. I could not afford the airplane’s price.*

*(การอบรมส่วนใหญ่จะจัดที่กรุงเทพซึ่งไกลจากแม่ฮ่องสอนมาก ใช้เวลาเดินทางเกือบ จะ
2 วันกับรถประจำทาง ตัวเครื่องบินแพง) (Child caregiver 11)*

Educational officers supported the child caregivers’ perceptions that the training organized by the DLA was not very accessible to the child caregivers in their area due to long travelling distance and duration of training, as can be seen within the following responses:

*“The training organized by the DLA was always placed in Bangkok and the
child caregivers needed to travel almost 2 days to arrive there by bus.”*

*(กรมส่งเสริมการปกครองส่วนท้องถิ่นจัดการอบรมให้แก่ผู้ดูแลเด็กซึ่งส่วนใหญ่จัดที่
กรุงเทพ ซึ่งผู้ดูแลเด็กต้องใช้เวลาประมาณเกือบ 2 วันในการเดินทางโดยรถประจำทาง)
(Educational officer 1)*

*“The training usually took 1 week, during which the child caregivers needed to
find someone to work on their behalf.” (การอบรมโดยปกติจะใช้เวลาหนึ่งสัปดาห์
ซึ่งระหว่างนี้ผู้ดูแลเด็กต้องหาคน ทำงานแทน) (Educational officer 2)*

As pointed out by the respondents, the majority of child caregivers who attended the training sessions organized by the DLA were satisfied with the contents of the programme and were able to apply the knowledge into their classes. Despite this, the

participants suggested that the DLA should re-consider organizing the training at a convenient location in each region due to travel difficulties. Since Mae Hong son is located in the high mountain ranges of the Northern region of Thailand this causes travel difficulties and accessibility issues between the province and wider country, as one practitioner points out:

“It would be better if the DLA arranged the training sessions in each region to serve the needs of the practitioners who live in the isolated areas like Mae Hong Son.”

(พี่ว่ามันจะดีมากเลยนะถ้าทางกรมส่งเสริมการปกครองส่วนท้องถิ่นจัดการอบรมตามภาคต่างๆ เพื่อให้ผู้ดูแลเด็กตามพื้นที่ห่างไกลเหมือนแม่ฮ่องสอนเนี่ย ได้เดินทางสะดวกมากขึ้น) (Child caregiver 18)

In addition, it has been suggested that the training should be more directly relevant to the demands and expectations upon child caregivers. These include how to deal with budgets, with the DLA having recently stipulated that child caregivers needed to operate the budget themselves. This had previously been the responsibility of educational officers. In a significant number of cases practitioners revealed that their working experience provided them with enough knowledge about the young learners’ developing and learning, suggesting also that in the event of wishing to update their knowledge, they could self-train through information on the Internet. One practitioner said:

“In my opinion, the training content should involve asking what the child caregivers would like to know, which we need to engage with, such as the expenditure system.”

*(ในความคิดของพี่เนื้อหาในการอบรมควรจะถามถึงสิ่งที่ผู้ดูแลเด็กต้องการที่จะรู้ เช่น
ในเรื่องของการเบิกจ่ายงบประมาณ) (Child caregiver 11)*

In addition, the DLA should invest in practitioners to operate the training in various topics related to provide education and care for young learners and other duties which were assigned, so they can deliver their performances effectively. As their role is to provide young learners with the appropriate fundamental skills within educational institutions, thus facilitating the crucial initial stage of education as codified under Thailand's education system.

5.3.4 Teaching techniques

Early year educators are expected to have an understanding of child development and early education issues and deliver rich, meaningful educational experiences for young learners within their care (Donoghue, 2017). Ten out of twenty-three child caregivers had a Bachelors' degree in early childhood education, and seven of them had obtained their degree through a scholarship from the DLA. They consequently considered themselves to have proper knowledge related to early years educational setting and care for the learners. Likewise, their personal teaching techniques were perceived to be appropriate for young children in terms of providing integrated early years learning programmes.

In addition, they had their special methods for stimulating learner's engagement around devised activities; these included bringing local materials into the classrooms and taking the young learners on field trips. Due to limited resources, the majority of participants used local materials and field trips regularly in their teaching delivery. The following statements extracted from two interviewees illustrate this fact:

“My Centre is on the mountain, which makes the journey quite difficult. Buying teaching aids is something almost impossible because of budgetary support, so I have to adapt what is available in the community into my classroom.”

(ศูนย์ของพี่อยู่บนเขา การเดินทางก็ค่อนข้างจะลำบาก ทำให้การซื้อสื่อการเรียนการสอนต่างๆ ก็ลำบากเช่นเดียวกัน เนื่องจากขาดงบประมาณสนับสนุน พี่ก็เลยต้องดัดแปลงสิ่งที่มีอยู่ในชุมชนเข้ามาสอนในห้องเรียน) (Child caregiver 7)

“I believe that learning by engaging with materials is the best method for young learners to learn. I always bring the real material from our village into the classroom and take them on a field trip.”

(พี่เชื่อว่าการเรียนรู้ผ่านการสัมผัสจับต้องสื่อจะเป็นวิธีการเรียนรู้ที่ดีที่สุดสำหรับเด็ก พี่ก็จะเอาพวกสื่อของจริง จากชุมชนเข้ามาสอนเด็กๆ และก็พาพวกเขาออกไปเดินเล่นในหมู่บ้านด้วย) (Child caregiver 11)

The child caregivers worked in the CDCs, which were remotely located and had limited resources. Therefore, the activities were undertaken with limited materials. Surprisingly, they played a role in organizing activities combining limited resources and using local supplies repurposed as learning materials. These accounts imply that the child caregivers applied their knowledge to their lessons in conjunction with integrating local materials and local resources as learning tools.

During the direct observation, the young learners were brought on a village field trip under the weekly theme of ‘My House’ in order to look through different kinds of houses in the village see Photo 5.1. The learners were asked to walk in one row holding a rope

as part of this exercise. The following photo details the practitioner and children enjoying a field trip in the village.

Photo 5.1: Field Trip (Fieldwork, 2017)



Practitioners constantly asked the young learners questions about things around them, using open-ended questions, while learners were engaging in different activities outside of this field trip's objectives. The following examples illustrate types of questions utilized by the practitioners:

"What are you seeing?"

(เด็กๆ เห็นอะไรบ้าง)

“What kind of the house is on the left-hand side?”

(บ้านทางซ้ายมือเป็นบ้านแบบไหน)

“Who knows whose house this is?”

(ใครรู้บ้านหลังนี้เป็นบ้านของใคร)

“What do you think this roof is made of?”

(เด็กๆ คิดว่าหลังคาของบ้านหลังนี้ทำมาจากอะไร)

“How many family members are there in your house? And who are they?”

(บ้านของหนูอยู่กันกี่คน และมีใครบ้าง)

The practitioners asked these questions in order to convince the learners to engage in expressive learning through conversations. Simultaneously, this method also equips children with information and a level of understanding about components integral to their daily life.

In addition, this practitioner was observed bringing local resources into the classroom, in this instance bananas and a small banana tree under the weekly theme of ‘*Banana*’ see Photo 5.2. The practitioner explained in the classroom about the elements of the banana tree along with their names in Thai and their original ethnic language alike. Further to this, they learned about the colours, sizes, shapes, and tastes of bananas.

Photo 5.2: Bringing local resources into a classroom (Fieldwork, 2017)



It is clear from the observations that incorporating local materials from the community into the classroom can be an ideal way to enhance children’s curiosity and develop the use of their senses to engage with the material. This technique also offers opportunities for children to discuss things from their own experience. Furthermore, this technique inspires the practitioner to think about what they have in their village and what can be used to create a weekly learning theme.

The information gathered from direct observations further revealed that each child caregiver had their own techniques in terms of asking questions. The child caregivers continuously gave instructions to children by asking questions in order to keep them focused upon their learning activities. The instructions were in turn used for achievement of learning purposes. Three out of four instructions used during teaching sessions consisted of open-ended questions deployed in contradistinction to closed questions during teaching sessions, such as:

Child caregiver 1: “How did that happen?”
 (OB2) (ทำได้ยังไงจ๊ะ)
 “Can you think of a new way to do it?”
 (ไหนลองวิธีอื่นดูสิ)
 “What did you do on the weekend?”
 (วันหยุดไปทำอะไรมาบ้าง)

Child caregiver 2: “Does anyone know where a pig lives?”
 (OB1) (ไหนใครรู้อันไหน)
 “What is your favorite animal?” Why?”
 (สัตว์ที่เด็กๆ ชอบคือตัวอะไร, ทำไมถึงชอบ)
 “What is it called?”
 (ตัวนี้เรียกว่าอะไร)

This establishes that when the young learners were directed by the practitioners through asking questions, sessions consequently consisted of discussions and responding to questions from the young learners. By extension, practitioners used their questions during the discussion sessions to develop and evaluate the young learners’ learning skills. In addition, it can be seen that even though the practitioners worked in the rural CDCs as carers, they intended to use their professional skills around enhancing the young learners’ development more broadly and creatively when they had an opportunity to do so.

Additionally, six out of twenty-three child caregivers also mentioned the techniques they had discovered and utilized for the promotion and development of young children's self-discipline. They explained that young children from hill tribe families frequently had parents with insufficient knowledge around raising and appropriately caring for their children with respect to education, and also lacked knowledge around promotion of self-discipline to their children including good behaviour and manners. The respondents further noted that they understood when the learners behaved inappropriately such as shouting or running around while other children were sitting doing activities. Due to this, the learners required attention from the practitioners in order to aid their behavioural development: this is partially demonstrated in the following responses:

“As the children here are poorly raised, it is the responsibility of the child caregiver to teach them self-discipline, sharing, and knowing how to wait.”

(เด็กที่นี่จะได้รับการดูแลที่ค่อนข้างแย่ ก็จะเป็นหน้าที่ของผู้ดูแลเด็กที่จะต้องสอนเรื่องระเบียบวินัย การแบ่งปันและรอคอยให้แก่พวกเขา) (Child caregiver 11)

“There are 8 students in my classroom. This makes it easier for adjusting some difficult behaviour, so whoever has problems, then they will be helped with ease immediately.”

(ห้องเรียนของพื้มีเด็กทั้งหมด 8 คน ซึ่งก็ง่ายต่อการปรับเปลี่ยนพฤติกรรม เด็กคนไหนที่มีปัญหาก็คจะถูกแก้ไขอย่างทันที) (Child caregiver 17)

“Ignoring is the one method for me to react with the negative behaviour of children in my class. I try to be more patient and ignored that improper behaviour until they tried and stopped by themselves.”

*(เวลาเด็กแสดงพฤติกรรมแปลกๆในห้องเรียน การแก้ปัญหาของพี่ก็คือ พี่ก็จะทำ
เป็นไม่สนใจ พี่พยายามที่จะ อดทนและไม่สนใจในสิ่งที่เขาทำจนเขาเหนื่อย
และเลิกทำไปเอง) (Child caregiver 22)*

It is essential to change's improper behaviour while they are young because this negative behaviour occurs to get attention from others. Child caregivers need to have skills around understanding and patience in order to manage this behaviour. Furthermore, practitioners perceived that they had a responsibility for improving a child's self-discipline as the basis for developing those behavioural skills crucial for them to live in this society. Therefore, they used their own techniques for correcting young learners' inappropriate behaviour as mentioned.

Based upon the adjudged effectiveness of the early childhood services delivered through the CDCs, child caregivers' self-perceptions and reflective judgements have led to implementation of the best performance strategies within the circumstances. The respondents in this study are highly satisfied with the co-operative relationship that exists between parents, communities and CDCs as it provides the encouragement and support deemed necessary for delivering quality service at the Centres. The practitioners demonstrated achievement to gather the parents' trust, with the result being that young children will have opportunities to study regularly. In addition, the practitioners mentioned opportunities to attend the professional career training and to maintain an up-to-date knowledge regarding early years development, therefore resulting in better provision for the young learners.

5.4 The obstacles to the child caregivers' performances

Analysis suggests that there are obstacles to the practitioners' practices, some of which this study has already touched upon in the case of lack of finances for training and the location of training. The respondents partly revealed through statements, indicated in section 5.3.3, that the local authorities were unaware with regards to the necessity of providing financial support for practitioners to attend training sessions. Furthermore, training was mostly organized in Bangkok, which produced associated travel difficulties.

In addition, when the child caregivers were directly interviewed regarding the obstacles, they revealed two main challenges preventing practitioners from providing a quality education for disadvantaged pre-school children: workload (18), and language barriers (16), as shown within Table 5.5.

Table 5.5 The obstacles of the child caregivers' performances

	Workload (18)	Language Barrier (16)
CC1	1	1
CC2	0	1
CC3	0	0
CC4	1	0
CC5	0	0
CC6	0	1
CC7	0	1
CC8	0	0
CC9	0	0
CC10	0	0
CC11	1	1
CC12	0	1
CC13	1	0
CC14	1	0
CC15	0	1
CC16	1	0

CC17	1	0
CC18	0	1
CC19	0	0
CC20	1	1
CC21	0	1
CC22	1	0
CC23	1	1

5.4.1 Workload

The overwhelming stress of work was perceived as another, significant challenge affecting the ongoing performance of child caregivers. According to child caregivers' perceptions of their roles (discussed in section 5.2), there were eight categories of practice child caregivers articulated with regards to their work around aiding young learners' development and learning. Despite this, eighteen out of twenty-three child caregivers indicated obstacles in their practice. As described within table 5.4, they indicated struggles with the additional work associated with running the Centres. Consequently, time was always tight, which influenced the quality of their day-to-day practices regarding delivery of education and care for young learners. This can be seen within the following examples:

“The proportion of other jobs influences the main accountability as the performance on young learners.”

(สัดส่วนของงานอื่นๆ มันมากกว่างานหลักของพี่ที่เกี่ยวกับสอนเด็ก)

(Child caregiver 11)

“I am responsible for a lot of work to do including teaching, looking after children, cooking, cleaning the Centre and also the dishes after the children have lunch, and paperwork, which influence the quality of my work.”

(พี่มีภาระงานเยอะมากทั้งงานสอน ดูแลเด็ก ทำอาหาร ทำความสะอาดศูนย์ ล้างภาชนะอาหารกลางวันเด็ก งานเอกสารต่างๆ งานพวกนี้มันกระทบกับงานหลักของพี่มากเลย)

(Child caregiver 14)

Many practitioners explicitly noted that they were required to be involved around the local authorities' events, be their Buddhist Lent, Thailand Constitution Day or Father's Day. Upon the advent of events, it befell practitioners to take primary responsibility for helping to run these within the local community in addition to educating and caring for young learners. The following excerpts from respondents' statements illustrating this point:

“When the local government had an event, the executive required all the employees to be involved in order to run the occasion smoothly and complete it faster.”

(เวลาที่ทางอบต. จัดงานต่างๆ ทางผู้บริหารก็จะให้ลูกจ้างทั้งหมดเข้าไป ช่วยงาน เพื่อให้งานมันเสร็จเร็วขึ้น) (Child caregiver 4)

“I needed to close the Centre when the local government had an occasion because my Centre has only me and I was required to participate in the event.”

*(ที่ต้องเปิดศูนย์เวลาที่ทางอบต. จัดงาน เพราะศูนย์นี้มีพี่คนเดียวและพี่ก็ต้องไป
ร่วมงาน) (Child caregiver 17)*

It appeared that the child caregivers were struggling with overwhelming anxiety resulting from the amount of work they had to do, particularly when the CDCs had only one child caregiver on site. The heavy workload was seen to disrupt child caregivers' ability to deliver a consistent and quality educational experience to young learners and the educational officers were aware of this issue. Four out of the seven educational officers used to be child caregivers before entering their present roles. Based upon their previous experience, they confirmed that child caregivers were obliged to hold multiple responsibilities, as shown in the following statement:

“I totally understand that the child caregivers have multiple responsibilities because I was in the position for 10 years before becoming the educational officer.”

*(พี่เข้าใจครูศูนย์เด็กมีภาระหน้าที่เยอะมาก เพราะพี่ก็เคยเป็นครูศูนย์เด็กมา 15 ปี
ก่อนที่จะมาเป็นนักวิชาการ) (Educational officer 1)*

Through the researcher's direct observations, it became clear that practitioners were overloaded with tasks during the day, including teaching, cleaning, cooking, doing paperwork, and accounts, whilst some child caregivers had to engage with orderings from their local governments' offices see Table 5.6.

Table 5.6 Child caregivers’ tasks during a day (N=4) (Fieldwork, 2017)

Different kind of jobs during a day						
Teaching	Cleaning	Washing (children’ s dirty clothes)	Cooking	Paperwork	Accounts	Extra work from local authorities
4	4	2	2	4	2	4

Elsewhere, during one of the direct observations, the practitioner was witnessed cooking lunch while the young learners played freely. After a few minutes, two children were fighting, and the practitioner had to pause their cooking in order to deal with the incident.

Child caregiver 3: “What is going on here?”

(OB 3) (เกิดอะไรขึ้น)

“I see you want that toy and Aung is playing with.

Let’s find another toy like that.”

(ครูเห็นนะว่าหนูอยากได้ของเล่นที่เอ็งเล่นอยู่

ลองหาตุ๊กต้อื่นที่คล้ายกันสิ)

Additionally, in the period of observation, one child caregiver needed to travel to the SAO’s office in order to sign and organize paperwork before submitting reports to the DLA. Consequently, she asked one of the mothers of a young learner who lived near by

the CDC to work on her behalf while she was not there; the caregiver subsequently stated that she had been obliged on several occasions to close the CDC for this same reason.

The evidence indicates that the practitioners were responsible for a lot of tasks during the day and required to identify solutions to these issues without any support. Consequently, completing these tasks impacted on the quality of children's development by disrupting the educational environment within CDCs and thus causing parents to doubt the quality of practitioners' care provisions.

5.4.2 Language as a barrier

Even though child caregivers were able to obtain full support from parents for their requests, as mentioned earlier (section 5.3.1), language often worked as a barrier in the relationship between child caregivers and parents. As discussed, the parents in the study regions were primarily members of an ethnic minority population of Thailand who use their traditional regional language dialects to communicate, although some of them can also partially speak standard Thai. Whilst at home young learners spoke their original languages, which was consequently an obstruction to speaking formal Thai.

Sixteen out of twenty-three child caregivers indicated that the predominant absence of fluency in Thai on the part of hill tribe children's parents and families operated as another challenge. These parents were mostly illiterate, with their occupations largely consisting of working in the fields as diversified agriculturists and/or in handicraft production. As a result, the parents did not have much time to spend with their children and used dialect language to communicate with them within any everyday interactions. Despite this, the respondents noted that the parents expected their children to speak and understand standard Thai language as a basis for foundational literacy which would enable them to

pursue further school study. The following responses on the part of interviewees clearly established the point:

“The learners all speak Lizu, which is an ethnic language, so I need to communicate to them with both, Thai and Lizu, otherwise they will not understand.”

(เด็กที่นี่ทุกคนพูดภาษาลีซูซึ่งเป็นภาษาของชนเผ่าของพวกเขา เวลาพูดคุยกับพวกเขาก็ต้องใช้สองภาษา ก็คือภาษาไทยด้วย ภาษาลีซูด้วย ไม่งั้นเด็กๆก็จะไม่เข้าใจ) (Child caregiver 1)

“The children speak their own mother tongue all the time, it is hard for me to teach them only in Thai language. Therefore, I need to use both languages in my class”.

(เด็กๆ พูดภาษาพื้นเมืองของพวกเขาตลอดเวลา มันยากสำหรับพี่ในการสอนโดยใช้ภาษาไทยอย่างเดียว พี่เลยต้องใช้สองภาษาในการสอน) (Child caregiver 18)

With regards to direct observations, four child caregivers were observed, all of whom used both Thai and ethnic languages to communicate with the learners. Within the following Photo 5.3 example, the practitioner engaged the young children in storytelling, using both Karen and Thai languages.

Photo 5.3: Story telling time (Child caregiver 2) (Fieldwork, 2017)



The child caregiver was asked to indicate after the session reasons for using both languages. She explained that:

“The young learners are used to their language. It is called the Karen language. If I speak only Thai, they will not concentrate on what I am saying. Actually, they can learn both languages from the story as well”

(เด็กๆที่นี่เคยชินกับการใช้ภาษากะเหรี่ยง ถ้าพี่พูดเฉพาะภาษาไทย พวกเด็กๆจะไม่สนใจที่พี่พูดเลย และจริงๆ แล้วเด็กได้เรียนรู้สองภาษาจากนิทานด้วยเหมือนกันนะ) (Child caregiver 2)

This implies that the child caregivers afford the children opportunities to use their language in studying. Therefore, the children become relatively confident in communicating their ideas and emotions to others, expressing themselves and sharing their thoughts and feelings freely within their mother tongue, while at the same time

learning the Thai language by dint of the practitioner's use of both within the learning sessions.

Even though the practitioners work within the CDCs - which are early years institutions organized through the DLA under the MOI - they still work as early years educators with primary responsibilities for educating and caring for young learners within the Thai education system. This study has focused on disadvantaged young children living in the remote areas of Northern Thailand where the practitioners indubitably face a range of challenges which include workloads and language barriers. Despite this, child caregivers visibly identified and implemented the best solutions for handling the most pressing issues relating to carrying out their work under specific socio-economic and cultural local conditions.

5.5 Summary

This chapter has reported the findings of the research as these relate to the first research question. The discussion was framed with regards to three main themes: (1) child caregivers' perceptions of their roles and contribution; (2) the effectiveness of the child caregivers' performances; and (3) the obstacles to child caregivers' performances.

Firstly, the analysis suggested that child caregivers' perception about their role involved recognition of more than one responsibility toward the young learners. Disadvantaged young learners were perceived to possess few opportunities for receiving appropriate care from their parents, and little access to learning resources within their home environment. The practitioners were therefore not only there to educate the young learners, but also to perform myriad duties in the course of preparing learners for further education and assuming future work-social-familial situations and responsibilities. In addition, they

delineated eight roles making up their larger field of practice around supporting underprivileged young learners' development and learning. These included: protection; facilitation; pleasure; creation; devotion; care; investigation; and acting as role models. One of most intriguing findings emergent from this ethnographic research that the practitioners did not perceive themselves in the first instance as educators; rather their self-reflective practice assumed numerous responsibilities regarding the young learners extending beyond what was definable (for them) as strictly educational provision.

In addition, practitioners noted that the effectiveness of their performance depended on two factors. Firstly, external support in the form of parental and community cooperation, including baseline trust on the part of parents. By their own accounts, child caregivers received more support from the parents and communities with regards to CDCs than was frequently available from the local authorities. Secondly, caregivers highlighted internal support through the education system, which included training sessions techniques. They revealed that the training sessions provided updated knowledge and proper practices for them to apply within their classroom settings. In terms of teaching techniques, practitioners expressed a belief that stimulating methods, both those showcased within the training and created through their own experience and ingenuity, had a measurable impact upon learner engagement. Practitioners therefore developed their own teaching techniques when approaching learning delivery. Based upon analysis of terminology used within their responses and of conceptual formulations it can be reasonably argued that the practitioners did not formally discuss the young learners' outcomes in accordance with formal learning; nevertheless, practitioners formulated effectiveness of practice in relation to how they handled challenges impacting upon their initial practice and young children's subsequent learning outcomes.

Finally, practitioners indicated the obstacles impacting upon their performances; these included workload and language barrier. Regarding workload, the practitioners revealed that not only they did have their own regular duties around providing education and care to the young learners, whilst manage the CDCs' core operation, but they also had additional duties assigned from the local government. The language barrier was another obstacle affecting their practices, since young learners lived in isolated areas which retained their own ethnic dialects. On the other hand, their parents they become competent in standard Thai in order to facilitate the young learners' future educational and broader life prospects. Despite this, the parents still spoke with children in their own dialects and learners' only opportunity to learn Thai language was whilst attending the CDCs. Therefore, the practitioners needed to utilize both languages in their teaching sessions for the purposes of facilitating language learning and wider skills acquisition alike.

Chapter Six: Child Caregivers' Level of Professionalism

6.1 Introduction

This chapter presents findings from the interviews and observations with the child caregivers and educational officers who participated in this study in relation to the second research question:

- *Does child caregivers' level of professionalism match the demands of the Department of Local Administration's policy and standards?*

The data obtained from the interviews and observations were analysed, and the themes discussed here provided towards answering this research question. The discussion is organized into four main sections, as follows:

- Curriculums and teaching plan management
- Daily activities in teaching and learning sessions
- Interaction between child caregivers and young learners
- Standards of child caregivers' performances

The discussion is thus structured to present the findings regarding child caregivers' professionalism in relation to their daily routines and working practices, and I draw here on my interviews and observational work. Firstly, the interviews explored child caregivers and educational officers' perceptions in relation to the practitioners' day-to-day practices in providing education and care for underprivileged young children. Then, the data obtained from the observations served to gain further understanding to support the interview findings and thereby to increase in depth details of the practitioner's professionalism in their day-to-day practices.

6.2 Curriculum and Teaching Plan Management

The Child Development Centre (CDC) has a responsibility to perform educational activities and provide care to children in accordance with early childhood education programmes designated by the Ministry of Interior. The CDC also has to create its own curriculum to comply with the context and location of the specific institution (ONEC, 1999; Buaraphan, 2013; MOI, 2016). Eighteen out of twenty-three child caregivers had established the curriculum for their individual Centres which integrated information existing in the local community with the activities for early childhood education. So, the children learn about and are aware of what they have in the community and the curriculum focuses upon the community as the fundamental basis for children's learning. The practitioners also mentioned that as the young learners have their specific ethnic background and cultural requirements, they need to be developing a positive awareness of their own identity. The following are the responses from two interviewees:

“As the young children are growing up, they do so in accordance with their culture and traditional events in their daily life. I think I am in part responsible for offering young children the chance to learn about their culture and cultural identity, so that the learners will make sense of and learn about their unique culture.”

(เด็กๆ เติบโตท่ามกลางวัฒนธรรมและประเพณีต่างๆ ในชีวิตประจำวัน พี่คิดว่าพี่ก็เป็นส่วนหนึ่งที่ต้องรับผิดชอบในการที่จะให้พวกเขาได้เรียนรู้เกี่ยวกับวัฒนธรรมและวัฒนธรรมที่เป็นเอกลักษณ์ของพวกเขา เพื่อจะช่วยให้พวกเขาได้เข้าใจและเรียนรู้เกี่ยวกับอัตลักษณ์เฉพาะของตนเอง) (Child caregiver 10)

“Every CDC needs to have its own curriculum to form a foundation for organizing early years development experiences. The curriculum must be

unique for each institution by using existing local materials to be a part of learning.”

(ศูนย์พัฒนาเด็กเล็กทุกที่ที่ต้องการหลักสูตรสถานศึกษาของตนเองเพื่อเป็นแนวทางสำหรับการจัดเตรียมกิจกรรมเพื่อพัฒนาเด็ก หลักสูตรสถานศึกษาต้องมีความเป็นเอกลักษณ์เฉพาะของแต่ละพื้นที่ โดยการที่นำเอาสิ่งที่มีในพื้นที่ชุมชนของตนเองเข้ามาเป็นส่วนหนึ่งของการเรียนรู้) (Child caregiver 16)

In addition, the interviewees were asked how the local context was integrated into their lessons. Participants revealed that they created activities based on their own communities, which provided local materials and other resources to be accessible in a constructive way during the children’s learning activities’ sessions. Two of the respondents stated how they have combined local activities into their lessons:

“The Centre’s curriculum integrates aspects of local culture into activities and I create the teaching to match that activity. When the community has organized a traditional event, I take the children to join the villagers in order to observe how they prepare work during the daytime activities. Then, we will discuss the event that they have watched, and summarize what children received from the activities.”

(หลักสูตรสถานศึกษาของพี่ก็จะมีการเอากิจกรรมที่เป็นวัฒนธรรมท้องถิ่นเข้ามาบรรจุอยู่ในการจัดกิจกรรมและพี่ก็จะออกแบบการสอนให้ตรงกับกิจกรรม เมื่อมีกิจกรรมในชุมชนพี่ก็จะพาเด็กๆไปร่วม เพื่อที่จะได้ไปดูการจัดเตรียมงานในช่วงกลางวัน และหลังจากนั้นก็กลับมาพูดคุยกันถึงกิจกรรมที่ได้ไปดูมา เหมือนเป็นการสรุปสิ่งที่เด็กๆได้รับจากกิจกรรมด้วย) (Child caregiver 1)

“To combine local culture with lessons through activities, I normally adapt my teaching plans to the events that the community has organized, taking children to the events during the day to see and discuss these the next day. Additionally, the children will be asked to dress in the hill tribe or traditional costume and sometimes they learn how to cook our local food as well.”

*(การนำวัฒนธรรมในท้องถิ่นรวมเข้ากับกิจกรรมการเรียนการสอน พี่ก็จะปรับเปลี่ยน
การแผนการสอนของพี่โดยการเอากิจกรรมในชุมชนสอดแทรกเข้าไป พาเด็กๆ ดู
กิจกรรมและกลับมาสนทนาพูดคุยในวันถัดไป และพี่ก็ยังให้เด็กๆ ใส่ชุดประจำเผ่ามา
เรียน และบางครั้งเราก็เรียนรู้การทำอาหารประจำท้องถิ่นด้วย)*

(Child caregiver 16)

With regard to the teaching plan, fourteen childcare providers mentioned that the Department of Local Administration (DLA), Ministry of Interior (MOI) had provided services and distributed handbooks and plans for daily activities to every CDC as a guideline for work. Fourteen child caregivers said that the teaching plan is like a guideline as to how they should operate, which they need to develop individually. Although it was dependent on the context and circumstances, which childcare providers will apply to their own situation, as pointed out in the following statements:

“I have my own lesson plans. Most of them are derived from the department but practically they have to be changed according to the context of each day. Sometimes my lesson doesn't necessarily follow the plan. The documents need to be done in order to satisfy the educational officer or executives who come to visit.”

(พี่มีแผนการสอนของพี่นะ พี่ก็ลอกมาจากแผนการสอนที่กรมส่งเสริมการปกครองส่วนท้องถิ่นส่งมาให้ศูนย์ แต่ก็มีมีการปรับเปลี่ยนเวลาเวลาที่ทำกิจกรรมจริงเพื่อให้สอดคล้องกับบริบทในแต่ละวัน บางทีก็ไม่ได้เป็นไปตามที่เขียนไว้ในแผนการสอน แต่ก็ต้องทำเตรียมไว้เผื่อเวลานักวิชาการหรือผู้บริหารมาเยี่ยมศูนย์)

(Child caregiver 5)

“Every child caregiver has been assigned to make individual teaching plan, to be ready when the educational officer needs to evaluate our performances. However, in practice, I will do what is convenient for us each day.”

(ผู้ดูแลเด็กทุกคนจะมีแผนการสอนประจำตัวเพื่อเตรียมไว้สำหรับให้นักวิชาการมาประเมินการปฏิบัติงาน แต่ในทางปฏิบัติพี่ก็จะทำในสิ่งที่คิดว่าเหมาะสมและสะดวกในแต่ละวัน) (Child caregiver 12)

“My lesson plan was taken from the DLA. Therefore, I use it as a guideline that I can rely on each day. I also realize that not all the activities in the plan will be completed, as sometimes the children are hard to control. I also need to set a second plan for that.”

(แผนการสอนก็เอามาจากที่กรมส่งเสริมการปกครองส่วนท้องถิ่นแจกมาให้ สำหรับพี่แผนการสอนเปรียบเสมือนแบบแผนสำหรับการทำงาน แต่ก็ไม่ใช่ว่าทุกกิจกรรมจะต้องเอามาให้เด็กทำให้หมดนะ เพราะบางครั้งเด็กๆ บางครั้งก็ควบคุมพวกเขาไม่ได้ แต่ก็มีมีการเตรียมแผนรองรับไว้) (Child caregiver 17)

Child caregivers produce a teaching plan to be a guideline for their work and a document to be ready for when executive bodies or educational officers come to evaluate their teaching and learning processes. In the researcher’s direct observational work, four child caregivers were observed in their daily practice in four CDCs. During the observations, the researcher requested to see the child caregivers’ weekly lesson plans in order to

examine the consistency of the lesson plans and the day-to-day activities. It was found that all four child caregivers were unable to organize most activities as specified in the planning guidelines and that most of the activities were designed for the whole class and not for small groups.

In conjunction, most learning activities were changed and adapted in terms of the materials the child caregivers had specified in the lesson planning regarding weekly themes as presented in Table 6.1. In fact, three of them (OB2, OB3 and OB4) organized the basic learning materials including conversing, colouring, and watching DVDs. It seems that the child caregivers create weekly lesson planning which is flexible enough to be adapted in terms of day-to-day practice, to suit the needs and interests of the young learners and any changes in circumstances.

In the first observation (OB1) the child caregiver organized a variety of activities and had clearly set her goal for daily learning under the topic of weekly learning. The topics taught over three weeks during the observations were 'House', 'Banana', and 'Ant'. The child caregiver had created activities for both inside and outside the classroom in accordance with the weekly topics, even though it was only partly consistent with the guideline mentioned in the weekly teaching plan. After asking the child caregiver why the activities were not the same as in the lesson plan, she responded that:

“Most of the activities organized for children on a daily basis are not the same as those written in the whole plan, but I try to arrange them as appropriately as possible. There are adjustments as appropriate each day, but I try to diversify the media and activities and make sure they achieve the learning objective.”

(เพื่อออกแบบกิจกรรมสำหรับเด็กวันต่อวัน ซึ่งจะไม่เหมือนที่กำหนดไว้ในแผนการสอนทั้งหมด แต่พี่ก็พยายามที่จะจัดเตรียมกิจกรรมให้เหมาะสมมากที่สุด ก็จะมีการปรับเปลี่ยนอย่างเหมาะสมไปในแต่ละวัน พี่ก็พยายามที่จะจัดให้ได้อย่างหลากหลายทั้งสื่อการสอนและกิจกรรมที่จัดเพื่อให้เด็กได้พัฒนาการเรียนรู้ของพวกเขา)
(Child caregiver 2: OB1)

The second and fourth teaching observations (Child caregiver 1: OB2 and child caregiver 14: OB4) did not appear to have clear weekly topics even though these were shown in the teaching planning. Their teaching mainly focused on organizing activities that helped promote the child's development as ordered by the DOH. In every sub-district, there is a District Health Promotion Hospital⁶, which has the task of evaluating young children in the area in terms of their development (see Photo 6.1). The Department provides the manual and accessories for child caregivers to practice with the young learners before the department doctor from the department comes to perform an assessment.

Both child caregivers spent an hour (9.30-10.30) almost every day practicing with the young children in order that they become familiar with the process and materials. In the course of each 10-day observation period the child caregivers were witnessed spending seven days (OB2, child caregiver 1) and eight days (OB4, child caregiver 14) respectively practicing this activity.

⁶ The District Health Promotion Hospital has a duty to evaluate child development once a month and find ways to help them according to their health issues especially those with development fatigue. With the evaluation results, the hospital will be able to identify the overall development of the children within the centre as well as the overall development of the children within the community.

Photo 6.1 An example of activity from the District Health Promotion Hospital
(Fieldwork, 2017)



According to Photo 6.1, it presented an activity to train young learners' cognitive potential and this activity was not defined in the teaching plan and practitioner spent a considerable amount of time focusing on this activity. Therefore, the young learners could miss the opportunities to engage in other learning activities. After asking both child caregivers about the purpose of practicing this activity every day, their responses are recorded below:

"I have to prepare the children ready for the check-up from a doctor next time. Children have to pass the development standards or otherwise the doctor will return to follow up again and again until they reach the standards and I am sometimes blamed."

*(ที่ต้องฝึกเด็กเพื่อเตรียมพร้อมในการประเมินติดตามของหมดครั้งหน้า เด็กต้องผ่าน
มาตรฐานการประเมินพัฒนาการ ไม่เช่นนั้นหมอก็คจะกลับมาประเมินซ้ำอีกจนกว่า
พัฒนาการเด็กจะถึงตามเกณฑ์มาตรฐาน และถ้าไม่ผ่านบางครั้งพี่ก็จะถูกตำหนิด้วย)
(Child caregiver 1: OB2)*

*“In my opinion, these activities are useful. It helps promote the children’s
development.”*

*(ในความคิดของพี่นะ กิจกรรมนี้เป็นกิจกรรมที่มีประโยชน์ มันช่วยส่งเสริมพัฒนาการ
เด็กได้) (Child caregiver 14: OB4)*

These two child caregivers did not organize a variety of activities for the children to perform as specified in the plan mainly because they spent excessive time on the activities to enhance the children’s development according to the assignment from the Department of Health. The child caregivers intended to familiarize the young learners with this activity and perceived that the learners would benefit from the activity as well. As a result, the young children did not have time to learn or engage with other activities.

In addition, during each of the ten days of observations, the researcher did not see these child caregivers arrange any activities outside the classrooms. Consequently, after the observation sessions, the child caregivers were asked about taking the young learners to do activities outside the classrooms and Centres. Both child caregivers revealed that their Centres had a single practitioner to look after young learners and it was therefore difficult to retain control when the learners went outside the Centres. The following statements illustrate these points:

“There is not enough space for the playground, and it is almost impossible to regularly take the children out into the community. This centre has only one child caregiver, me, and that is not enough to look after all the children in the field.”

*(ที่นี่ไม่มีพื้นที่สนามเด็กเล่น และก็มีโอกาสน้อยที่พี่จะพาเด็กออกไปเดินเล่นในชุมชน
ศูนย์นี้มีพี่คนเดียว ซึ่งพี่คิดว่าพี่ไม่สามารถดูแลเด็กได้ถ้าพาเด็กออกไปเดินทัศนศึกษา)
(Child caregiver 1: OB2)*

“I don’t want to disturb the villagers. Sometimes the children are too naughty to handle. As I am the only instructor here, I don’t think I can look after all of them very well, especially when everyone wants to run. So, I normally choose not to take them outside.”

*(พี่ไม่อยากรบกวนคนในชุมชน เพราะบางครั้งเด็กๆ จะชนมากรับมือไม่ไหว ซึ่งพี่เป็น
ครูคนเดียวของศูนย์นี้ เลยคิดว่าไม่สามารถดูแลเด็กได้ถ้าพาออกไป โดยเวลาออกนอก
ศูนย์เด็กๆ จะชอบวิ่ง พี่ก็เลยเลือกที่จะไม่พาออกไป) (Child caregiver 14: OB4)*

These childcare providers both supervised a number of children, taking charge of seven and thirteen children respectively. In each example the Centre had only one childcare provider who looked after the young learners. According to the concurrent interviews, both practitioners mentioned that their teaching plans replicated the one created by the DLA. In spite of this, it seemed that these practitioners arranged their teaching plans in a fashion which suggested they perceived that it was not necessary to follow the plans. This was despite the fact that they were tasked by the educational officers to do so and could be subject to assessment from local government executives and educational officers, as one interviewee stated below:

“My teaching plan was also taken from the guidelines, which the DLA provide to every Centre. But I do not follow every step due to my Centre being located in a rural area and there is a lack of appropriate learning materials. I only do what I think is suitable for the children.”

(แผนการสอนของพี่ก็เอามาจากแบบแผนที่กรมส่งเสริมการปกครองส่วนท้องถิ่นส่งมาให้ทุกศูนย์เหมือนกันทั้งหมด แต่พี่ไม่ได้จัดกิจกรรมตามทั้งหมดนะ เพราะว่าศูนย์นี้อยู่ไกลจากตัวเมืองมากและสื่อการเรียนรู้ต่างๆ ก็ไม่ได้มีอย่างเหมาะสมเท่าไร พี่ก็จัดกิจกรรมให้เด็กที่พี่คิดว่ามันเหมาะสมกับพวกเขา) (Child caregiver 1: OB2)

“In terms of performance assessment, there will be a section of document evaluation on top of teaching assessment. The academic of the local administration will evaluate documentary evidence, to see if activities are well organized.”

(ในการประเมินการปฏิบัติงานของผู้ดูแลเด็กจะมีส่วนหนึ่งที่เป็นการประเมินเอกสารประกอบการจัดการเรียนการสอน ซึ่งนักวิชาการจะประเมินเพื่อดูว่าจัดกิจกรรมเหมาะสมหรือไม่) (Child caregiver 14: OB4)

It is clear that the curriculum and teaching plans are documents which need to be in place as guidelines for the Centre to follow. While it is defined in the lesson plan what the young children’s attainment goals are and which activities will be performed, in reality, childcare providers are the ones who organize activities and can freely change the plans according to the needs of both the providers and the young learners.

The third observation (Child caregiver 3: OB3) noted that the practitioner’s weekly topics clearly created learning objectives for each week. Every morning, the caregiver spent 15-20 minutes (9.00-9.20) at the beginning of the learning session on discussion to interest the young learners in the weekly topic. The topics taught in the 3 weeks of observation

period were ‘Healthy Food’, ‘Safety’, and ‘Rainy Season’. The child caregiver showed her teaching plan to the researcher and also said that:

“I have a lesson plan in order to know what these young learners need to engage with to achieve the learning objectives regarding the weekly topics. In fact, it is difficult to achieve every activity mentioned in the plan, so I do what is suitable for me to arrange materials and for my children’s learning.”

(พื้มีแผนการสอนเพื่อที่จะบอกว่าเด็กต้องเรียนรู้อะไรบ้างในการที่สอดคล้องกับจุดประสงค์ของการเรียนรู้รายสัปดาห์ แต่ในความเป็นจริงมันยากเหมือนกันนะที่จะทำทุกกิจกรรมตามที่กำหนดในแผน พื้ก็เลยเลือกที่จะทำเฉพาะกิจกรรมที่เหมาะสมสำหรับพื้ในการจัดเตรียมและสำหรับเด็กๆ ในการเรียนรู้).

(Child caregiver 3: OB3)

Table 6.1 Summary of the direction observation regarding the teaching plans
(Fieldwork, 2017)

	Summary
<p style="text-align: center;">Observation 1 (Child caregiver 2)</p>	<ul style="list-style-type: none"> • Having weekly topics and teaching plans as assigned by the DLA and used as a guideline for setting daily activities • Daily activities set related to weekly topics • Daily activities set partly in relation to the teaching plans
<p style="text-align: center;">Observation 2 (Child caregiver 1)</p>	<ul style="list-style-type: none"> • Having weekly topics and teaching plans as assigned from the DLA and used as a guideline for setting daily activities • Daily activities set, but not related to weekly topics
<p style="text-align: center;">Observation 3 (Child caregiver 3)</p>	<ul style="list-style-type: none"> • Having weekly topics and teaching plans as assigned by the DLA and used as a guideline for setting daily activities • Daily activities set related to weekly topics • Daily activities set partly in relation to as a partly of mentioned in the teaching plans
<p style="text-align: center;">Observation 4 (Child caregiver 14)</p>	<ul style="list-style-type: none"> • Having weekly topics and teaching plans as assigned from the DLA and used as a guideline for setting daily activities • Daily activities set, but not related to weekly topics

As supporters and promoters of education management of the CDC, the educational officers further mentioned that the local authorities would provide child caregivers with training on written lesson plans, whilst the DLA also provided an instructional manual and documents. Every Centre will have to create its own curriculum and all child caregivers must have their own lesson plans as these documents are utilized for

performance evaluation. Additionally, in the case of civil servants, this will be useful for determining promotion and in cases of employed child caregivers this will be taken into consideration when renewing the contract with the local administrative organization.

“All the childcare providers must have their own lesson plans. This is essential, as the childcare providers must have goals for organizing daily activities in place. These lesson plans will also be used for their performance evaluation.”

(ผู้ดูแลเด็กทุกคนต้องมีแผนการสอนเฉพาะของตนเอง ซึ่งจำเป็นมาที่ผู้ดูแลเด็กต้องมีเป้าหมายในการจัดกิจกรรมประจำวัน แผนการสอนนี้จะใช้ในการประเมินการทำงานของพวกเขาด้วย) (Educational officer 3)

“At the Centre I supervise; every practitioner has to create the weekly lesson plans and submit them to me every month so that I can see what activities each will be performing. However, I normally do not participate in or monitor all the activities myself, but I will join in only when the evaluation is needed.”

(ผู้ดูแลเด็กในศูนย์พัฒนาเด็กเล็กที่ผู้ดูแลอยู่ต้องออกแบบแผนการสอบประจำสัปดาห์ และส่งให้พี่ตรวจทุกเดือน เพื่อที่พี่จะได้ดูว่ากิจกรรมที่พวกเขาจัดมีอะไรบ้าง แต่ส่วนใหญ่แล้วพี่จะไม่ได้เข้าไปยุ่งเกี่ยวหรือเข้าไปสังเกตการณ์อะไร จะมีก็เพียงแต่เมื่อถึงเวลาต้องไปประเมินการทำงานของพวกเขา) (Educational officer 4)

“There must be a meeting held every academic year in order for the personnel to brainstorm and draw up the Centres curriculum. This is to ensure that every Centre has the curriculum and that every practitioner has their own lesson plans, although, in practice, these lesson plans are only guidelines, and the practitioners are able to adjust the activities freely when it becomes to actual practice.”

(มีการประชุมทุกปีการศึกษาเพื่อที่จะระดมความคิดในการทำหลักสูตรสถานศึกษา เพื่อที่จะมั่นใจได้ว่าทุกศูนย์พัฒนาเด็กเล็กในการดูแลของพี่มีหลักสูตรและแผนการสอนของตนเอง ถึงแม้ว่าในแผนการสอนนี้จะเป็นเพียงแค่แนวทางการปฏิบัติงานให้ผู้ดูแลเด็กเท่านั้น แต่ในทางปฏิบัติผู้ดูแลเด็กสามารถที่จะเปลี่ยนแปลงกิจกรรมได้อย่างที่ต้องการ) (Educational officer 6)

It is obvious that even though the educational officers realized that the child caregivers did not organize activities according to the written plans, the officers understood and trusted in the child caregivers' efficiency to deliver education and care for the young learners and allowed them to fully perform their duties.

6.3 Daily Activities in Teaching and Learning Sessions

In the case of the daily practices of child caregivers, the researcher conducted interviews and observations concerning this issue and found that all the practitioners had similar activities settings. All Twenty-three practitioners started daily activities with a large group discussion. This was done by having the young learners get into a circle group activity (see Photo 6.2) either sitting on the floor or standing up with discussion learning topics and movement activities, which were instigated by the practitioners, as demonstrated by the following statements.

“During circle time, young children sit in a circle and sometimes they stand in a circle doing activities and I am part of the circle, too. We always have a discussion during the circle session which leads to the topic we are learning about.”

(ช่วงเวลาของการทำกิจกรรมวงกลม เด็กๆ นั่งเป็นวงกลม และบางครั้งก็จะยืน แล้วแต่กิจกรรม พี่ก็จะเป็นส่วนหนึ่งในวงกลมนั้นด้วย กิจกรรมหลักเลยก็จะเป็นการสนทนาพูดคุยกันซึ่งก็จะนำไปในสู่เรื่องที่กำลังเรียนอยู่) (Child caregiver 9)

“I would normally start the activity by having the children sit in a circle and let them talk about topics they have studied during the week by asking them questions in order to review their knowledge.”

(ส่วนใหญ่พี่จะเริ่มกิจกรรมในทุกวันด้วยการให้เด็กนั่งเป็นวงกลม และพูดคุยเกี่ยวกับเรื่องที่เรียนไปแล้วในสัปดาห์ โดยการถามคำถามเพื่อที่จะทบทวนความรู้ของพวกเขา) (Child caregiver 12)

“I begin daily activities with a circle session including singing songs, dancing and doing role play. After that I try to draw them in to the current learning weekly lesson.”

(พี่เริ่มกิจกรรมประจำวันด้วยการกิจกรรมวงกลม ซึ่งรวมไปถึงการร้องเพลง เต้น และบทบาทสมมติ หลังจากนั้นก็จะพยายามที่จะนำเข้าสู่การเรียนรู้ที่กำลังเรียนอยู่ในสัปดาห์นั้น) (Child caregiver 20)

Photo 6.2: Group activity (Fieldwork, 2017)



The child caregivers also revealed that they used the questions to lead the discussion and most of the questions were open-ended questions. These questions were created to encourage the learners to participate in a weekly review of their knowledge and it had also introduced them to the new activities for that day. Most of the discussion topic was focused on what had been learnt from the lessons. The respondents also mentioned that the young learners additionally enjoyed occasions when the practitioners led them by instigating learning games and movement activities in the circle session. The following statements illustrate these points:

“Circle time sessions are designed to support encouraging children with regard to the activities we are going to do. The learners love to sing songs and play games during circle sessions as well.”

(กิจกรรมวงกลมออกแบบเพื่อที่จะนำเด็กไปสู่กิจกรรมที่จะทำต่อไป เด็กชอบร้องเพลง และเล่นเกมสักระหว่างกิจกรรมวงกลมด้วยเหมือนกัน) (Child caregiver 18)

“I always lead them to sing songs and doing movement activities before leading them into the topic and plan for the day.”

(ส่วนใหญ่ที่จะนำพวกเขาร้องเพลงและทำกิจกรรมเคลื่อนไหวก่อนที่จะนำไปสู่หัวข้อที่กำลังเรียนและบอกเด็กๆ ถึงสิ่งที่จะเรียนต่อไป) (Child caregiver 21)

These statements confirm that the circle time session is important because as a large group activity, it promotes a positive relationship between young children and the practitioners. Additionally, it can help the young learners understand the topic and activities they are going to engage with. This information can be supported by the observation in order to ascertain consistency between the interviews and observations.

There were four child caregivers who were observed during their performances, and this revealed that the child caregivers were encouraged to put the young learners at ease by greeting each child when they arrived at the CDC. They had a quick conversation with each other, an example of such a conversation is as follows:

Child caregiver 1: Hello Nong Jane, how are you today? Have you had breakfast?

(สวัสดีคะน้องเจน เป็นยังไงบ้าง กินข้าวเข้ามาหรือยัง)

Child: Hello, I have had it already.

(สวัสดีคะ ทานมาแล้วคะ)

Child caregiver 1: How about milk?

(ได้ดีมันมาด้วยหรือเปล่า)

Child: Yes

(ค่ะ)

Child caregiver 1: Great, you will be strong.

(ดีมากค่ะ จะได้แข็งแรงนะ)

Child: (Smile)

(ยิ้ม)

This can be a good practice as it demonstrates that the practitioner is enthusiastically welcoming the child into the CDC with friendliness. This may also possibly connect the young learners and practitioners and provide a chance to construct a good relationship which will allow practitioners to effectively introduce new activities and prompt the young learners to engage with topics.

In addition, the observations of teaching found that when all the young learners arrived in the class, the practitioners started each day with circle time for their young learners. In order to stimulate the young learners and focus their attention on the lesson, the childcare providers led the activity by using conversations, most of which consisted of open-ended questions with a few close-ended questions. This 20-minute activity was important for linking the contents of the previous lessons with the new one. The following statements are sample questions from the participants, which persuaded the young learners to engage with the lessons.

Child caregiver 3: “Look at the picture in my hand and tell me what is shown in the picture that could be considered dangerous for children.” (Open-ended question)

(รูปภาพในมือครู ไหนบอกครูสิว่าสิ่งพวกนี้เป็นอันตรายต่อเด็กๆ ยังไงบ้าง)

Child: “A knife can cut our hands, and my hand will be bleeding.”

(มือบาดมือ แล้วจะเลือดออก)

Child: “Candles can burn our hands, as hot.”

(เทียน ไหมมือ ร้อน)

Child caregiver 3: “If there is a knife on the table, do you think you can play with it”? (Close-ended question)

(ถ้ามีมีดอยู่บน โต๊ะ เด็กๆ คิดว่าเด็กๆ ไปเล่นกับมีดได้ไหม)

Child: “No”

(ไม่ได้)

After large circle activities, the early years would sing songs and moved their bodies accordingly. From observing 4 practitioners, it was found that 2 of them performed the activities by dividing early learners into small groups with 3-4 learners in each group before starting the next activities. In contrast, the other 2 practitioners asked the early years learners to continue in one group and this might be due to the small children attending the Centre (7 and 13 children).

Seven practitioners mentioned activities which allowed the young learners to participate, both inside and outside the classrooms. The practitioners provided all the equipment and facilitated the activities all the way through. Respondents reasoned that if the young children had the opportunity to join the activity themselves, they were more likely to have

fun and therefore, they could learn appropriately according to their age. By doing so, the young learners were able to learn from their own experiences. The practitioners also stated that they were normally there for the young learners when activities took place so that the learners were confident to express their opinions and ask questions, as stated below:

“I like to take children out and let them learn outside the classroom as we grow vegetables, water the plants or do other activities just like what we adults do. But I just have to give them more time so that they can learn by themselves under my guidance.”

(พี่ชอบพาเด็กๆ ออกไปเรียนรู้นอกห้องเรียน ปลูกผัก รดน้ำต้นไม้ หรือกิจกรรมอื่น พี่ก็จะให้พวกเขาทำเอง ทำเหมือนที่ผู้ใหญ่ทำนั่นแหละ แต่ให้เวลาพวกเขามากขึ้น พวกเขาจะได้เรียนรู้ด้วยตัวเอง พี่ก็จะเป็นคนคอยแนะนำ) (Child caregiver 11)

“Children of this age are curious and want to try new things. What I normally do is to let them learn through their senses by themselves. They will finally learn from trial and error.”

(เด็กวัยนี้อยากรู้อยากเห็น อยากรลอง พี่ก็จะให้พวกเขาได้ทำกิจกรรมผ่านประสาทสัมผัสของพวกเขาให้เกิดการเรียนรู้เอง ผิดถูกก็ค่อยเรียนรู้กันไป)

(Child caregiver 12)

“I normally focus on art activities which the children must practice on their own. There are different art activities each day. Some days, if there is time left, the children have to present their own work in front of the class. But in every activity, I am the one who designs and prepares the equipment for them and I demonstrate how to do it.”

(กิจกรรมของพี่จะเน้นไปที่กิจกรรมศิลปะที่เด็กจะต้องปฏิบัติด้วยตัวเอง แต่ก็สลับเปลี่ยนไปในแต่ละวัน และบางวันก็จะให้เด็กนำเสนองานของตัวเองหน้าชั้นเรียนด้วย ถ้ามีเวลาเหลือ แต่ในทุกกิจกรรมพี่จะเป็นคนออกแบบและเตรียมอุปกรณ์ให้พวกเขา และก็จะสาธิตการทำกิจกรรมให้พวกเขาด้วย) (Child caregiver 23)

In addition, four child caregivers mentioned preparation for the activities, saying that they planned and organized activities and all the equipment, before starting sessions with demonstrations of how to do the activities with detailed explanations. Following demonstrations, practitioners allowed the children do the activities themselves under close supervision. One practitioner said:

“I normally have activities that are consistent with weekly learning guidelines. Each day, I will plan daily activities and then prepare the equipment. When it is the time, I will show how to do it and let them do their own activities. I won't interfere but will advise them when they have problems.”

(พี่จะมีกิจกรรมที่สอดคล้องตามการเรียนรู้ประจำสัปดาห์ ก็จะวางแผนไว้ว่าในแต่ละวันให้เด็กๆ ทำกิจกรรมอะไรบ้าง หลังจากนั้นก็จะเตรียมอุปกรณ์ พอถึงเวลา ก็จะบอกอธิบายให้ฟังว่าทำอะไรยังไงบ้าง หลังจากนั้นก็จะให้พวกเขาลงมือทำเอง พี่จะไม่เข้าไปยุ่ง แต่จะคอยให้คำแนะนำเวลามีปัญหา) (Child caregiver 4)

Thus, it is apparent that the practitioners share similar views regarding the application of materials to classroom activities. Practitioners are in agreement that as long as the young learners are allowed to play and have fun, they subconsciously learn and want to come to the CDCs. The practitioners are responsible for activity planning and all the facilities needed for the activities. Additionally, in the context of CDCs operation, practitioners

are the most crucial resource for knowledge being available to the young learners as they plan and coordinate activities. Despite inadequate teaching materials, the practitioner's role is to try their best to provide efficient lessons for the young learners.

During the interviews with the child caregivers, concerning the selection of instructional media for classroom activities, twelve out of twenty-three child caregivers mentioned the difficulty they faced when it came to the preparation of their classroom activities. These respondents stated the distance between the CDCs and the city centre made it problematic for the child caregivers to obtain a variety of teaching materials, and therefore existing materials had to be used for the classroom activities instead. The practitioners themselves accepted that there was not as much variety in the instructional materials as there should have been, and even though they realized the importance of using a wide range of materials there were many factors that limited their capacity to obtain these resources. Three of the respondents stated below:

“There is not a lot of media for the classroom activities. So, I have to change to the activities that allow children to move around instead. Art activities are also common in the classroom and after completing the activity, the children are normally allowed to play games together.”

(ที่นี่ไม่ได้มีสื่อการสอนอะไรมากมาย พี่ก็จะให้เด็กได้ได้ทำพวกกิจกรรมเคลื่อนไหวต่างๆ แทน แต่ก็จะมีพวกศิลปะด้วยเหมือนกัน และหลังจากนั้นพี่ก็จะให้เล่นพวกเกมส์การศึกษาที่พี่ทำขึ้นมา) (Child caregiver 2)

“I accept that the media used in teaching and learning are not diverse but due to many factors such as the distance and budget issues, I tried to change the activities for the children in order to keep them active. Activities like colouring are always used.”

(เพียงมรับนะว่าสื่อการสอนของที่นี่ไม่ได้มีหลากหลาย เพราะขึ้นอยู่กับหลายอย่าง เพราะจะไปหาซื้อที่ลำบากในการเดินทาง และก็ต้องใช้เงินของตัวเองอีกเวลาต้องการจะซื้อ พี่ก็จะพยายามเปลี่ยนกิจกรรมเพื่อให้เด็กไม่รู้สึกเบื่อ ก็จะมีใบงานให้เด็กได้ระบายสีก็ใช้เป็นประจำ) (Child caregiver 10)

With regard to the observations of the four childcare providers teaching activities, only one of the them had integrated existing learning materials from her village into the teaching and learning process. Additionally, she also organized an activity to take the young learners for a field trip, which also corresponded to the weekly theme. In contrast, in the observations of the other 3 practitioners' teaching, the activities were general activities such as colouring and drawing (see Photo 6.3).

Photo 6.3 Colouring activity (Fieldwork, 2017)



With regard to the question concerning the early learners' daily activities, eleven child caregivers mentioned a similar problem associated with the mixed age of the young learners. As the learners were aged between two and five years and there was only one classroom, all the learners had to be grouped into one class and they all participated in the same activity. Certain issues arose from the disparity in ages, as the child caregivers were aware that the learners would have dissimilar lengths of concentration, which can be regarded as a problem for both child caregivers and young learners. The following are extracts taken from child caregivers responses concerning this issue:

“There is always a significant problem when they do activities together. The older children are less encouraged in their academic learning due to the young children needing more attention.”

(เวลาทำกิจกรรมร่วมกันจะเกิดปัญหาตลอด และเด็กโตจะไม่ได้รับการเอาใจใส่ในเรื่องของการเรียนมากเท่าที่ควร เพราะเวลาส่วนใหญ่ต้องดูแลเด็กเล็ก)

(Child caregiver 6)

“A mixed-aged classroom is one reason that older learners do not seem to benefit as much from the practitioner as younger learners.”

(การเรียนแบบคละอายุทำให้เด็กโต ไม่ได้รับประโยชน์มากเท่าที่ควรจากครูเมื่อเทียบกับเด็กเล็ก) (Child caregiver 12)

In fact, even though the DLA requires the CDCs to provide an education service for children aged three to five years, most Centres will admit children from a younger age (two years old) to attend the CDCs in order to assist working parents. The executives of

local authorities have found it important to do this to support parents who need to seek employment. Furthermore, this has been done in order to prepare the children in readiness for future learning and facilitate learner's development according to their age. Therefore, the Centres accept the children despite their age not meeting the specified criteria. The following extracts illustrate the perspective of educational officers who support children's early admittance to CDCs:

“Most CDCs now accept children from 2 years because most parents have to work. If the CDCs are able to look after their children, the parents would be considering leaving their children with the Centre. The administrators saw the importance of this issue.”

(ศูนย์พัฒนาเด็กเล็กส่วนใหญ่จะเปิดรับเด็กอายุตั้งแต่ 2 ปี เนื่องจากผู้ปกครองต้องออกไปทำงาน ถ้าศูนย์สามารถที่จะช่วยดูแลลูกหลานของพวกเขาได้ ผู้ปกครองก็จะให้ลูกหลานมาเรียนที่ศูนย์ ผู้บริหารเลยเห็นความสำคัญในจุดนี้)
(Educational officer 2)

“The chief of local government wants to support employed parents back into work and improving children with essential skills. Therefore, he has allowed parents to send their children to CDC at 2 years old”.

(นายกองค์การบริหารส่วนตำบลต้องการที่จะสนับสนุนให้ผู้ปกครองไปทำงานและต้องการที่จะให้เด็กได้รับการส่งเสริมในด้านทักษะที่จำเป็นต่างๆ เลยเปิดโอกาสให้ผู้ปกครองส่งเด็กมาเรียนที่ศูนย์ตั้งแต่อายุ 2 ปี) (Educational officer 4)

Besides, another significant reason for accepting children aged under 3-year old is the fact that a lot of parents send their children into the school system at four years old instead of leaving them in attendance at the CDCs until they are five years old as the DLA

requirements specify. This leads to a reduction in the number of children attending the Centres. One educational officer said:

“The number of learners will be reducing when they become 4 years old and start to attend the school system. Therefore, the executives of the local government have a vision to maintain the amount of attendance and to give further opportunity for children aged 2 years old to attend CDC in order to be obtain appropriate care and education.”

(จำนวนของเด็กจะลดลงเมื่อเด็กอายุ 4 ปี และสามารถที่จะไปเขียนโรงเรียนในระบบได้แล้ว ทางผู้บริหารก็เลยมีวิสัยทัศน์ที่จะรักษาจำนวนเด็กที่เข้าเรียนที่ศูนย์ไว้ โดยการเปิดโอกาสให้เด็กอายุ 2 ปีเข้ามาเรียนได้ และเพื่อที่จะให้เด็กได้รับการดูแลและได้รับการศึกษาที่เหมาะสม) (Educational officer 4)

Nine out of twelve CDCs pertaining to this current study had one classroom in each Centre and were attended by mixed-aged learners. It was especially hard for the child caregivers to manage the classroom and the activities to suit the varied needs of young learners of different ages. Indeed, five out of twenty-three childcare providers revealed the methods which they would undertake in order to manage classrooms effectively.

Different age groups have different levels of development; children aged between 3 years and older will have a higher development and readiness to learn compared with younger children. Due to this reason, children aged three-years or older could pay more attention to activities which created difficulties in the Centres and had only one practitioner. The following are the excerpts from the responses of interviewees:

“This Centre has only one practitioner, which is me, who has to take care of all eleven young learners aged two to five years old. I have to manage classroom activities, and this is very difficult as older children are interested in the activity at the same time that the smaller children start to feel bored and want to do something new.”

(ศูนย์นี้มีพี่เป็นผู้ดูแลเด็กคนเดียว ซึ่งพี่ต้องดูแลเด็ก 11 คน อายุ 2-5 ปี พี่ต้องดูแลจัดการกิจกรรมในห้องเรียนทั้งหมดมันยากเหมือนกันนะเพราะเวลาที่เด็กโตยังมีความสนใจในกิจกรรม เด็กเล็กเริ่มเบื่อบ้างและก็อยากที่จะทำอย่างอื่น)

(Child caregiver 1)

“There is a problem which occurs when the smaller children are having fun playing, they will make loud noise, and this will be a distraction for the older children who are trying to complete the activity.”

(ปัญหาที่พบคือเด็กเล็กเวลาพวกเขาเล่นจะสนุกมาก เสียงดัง ซึ่งก็จะรบกวนเวลาที่เด็กโตกำลังทำกิจกรรม) (Child caregiver 8)

“My classroom is a mixed-age classroom with nineteen young learners. Normally, older children aged three to five years old can pay better attention to activities than the smaller learners. They can understand and participate in all activities with less problems while smaller children can pay less attention to things.”

(ห้องเรียนของพี่เป็นเด็กคละอายุ มีเด็ก 19 คน โดยทั่วไปเด็กโต 3-5 ปีเนี่ยจะสามารถที่จะมีสมาธิในกิจกรรมมากกว่าเด็กเล็ก เด็กโตจะสามารถเข้าใจและทำกิจกรรมได้ทั้งหมดโดยที่มีปัญหาน้อยมาก แต่เด็กเล็กจะมีความสนใจในกิจกรรมน้อยมากในเวลาเดียวกัน) (Child caregiver 17)

“This Centre has one classroom with mixed-aged children, which causes me a problem with the children aged two-five years old. The younger children

can only focus on one thing for a short period of time. What I need to do is to let them play freely while waiting for the older children to finish activities.”

(ศูนย์นี้มีห้องเรียนรับเด็กแบบคละอายุ 2-5 ปี ซึ่งทำให้พี่ปวดหัวมาก เด็กเล็กจะสนใจในกิจกรรมหนึ่งได้เพียงแค่วงเวลาสั้นๆ พี่ก็เลยต้องปล่อยให้พวกเขาเล่นของเล่นรอกลุ่มเด็กโตทำกิจกรรมจนเสร็จ) (Child caregiver 22)

On the other hand, there were four out of twelve CDCs which had more than one child caregiver with one classroom to educate and care for the mixed-aged young learners aged two-five years old. The practitioners revealed the advantage of having a colleague to help supervise the young learners and stated that this could increase the efficiency of their practices. Three child caregivers who worked in these CDCs said:

“The children at my Centre are mixed-age. Fortunately, there are two child caregivers, an assistant and I to look after eighteen young learners. When doing activities, the class will be divided into two groups, which are two-three years old and more than 3 years old, each being supervised by one practitioner, and each group participates in the same kind of activities. Having assistance makes my work run easily.”

(เด็กที่ศูนย์ของพี่เป็นเด็กคละอายุ โชคดีที่มีครูสองคน คือ น้องผู้ช่วยและพี่ดูแลเด็กทั้งหมด 18 คน เวลาทำกิจกรรมก็จะแบ่งเด็กออกเป็น 2 กลุ่ม คือ กลุ่มแรก เด็กอายุ 2-3 ปี และกลุ่มที่สอง เด็กอายุ 3 ปีขึ้นไป โดยที่พี่กับน้องอีกคนก็จะแบ่งกันดูแลคนละกลุ่ม แต่ทำกิจกรรมเหมือนกันนะ พี่ว่าการที่มีน้องอีกคนมาช่วยทำให้งานของพี่สบายขึ้นมาก) (Child caregiver 2)

“At this Centre, we have children from the age of two and so far, we have had twenty-two young learners and fortunately we have two child caregivers in charge of the classroom and activities, which are normally held together. The main problem is that the children pay attention to activities for different periods of time. The other child caregiver and I will help each other create further new activities for them.”

(ศูนย์นี้รับเด็กตั้งแต่อายุ 2 ปี และตอนนี้มีเด็กทั้งหมด 22 คน โชคดีที่มีผู้ดูแลเด็ก 2 คน ซึ่งโดยปกติก็จะช่วยเหลือซึ่งกันและกัน ปัญหาหลักที่พบคือเด็กจะมีช่วงความสนใจในกิจกรรมที่ต่างกันไป ครูอีกคนและพี่ก็จะช่วยกันคิดกิจกรรมเสริมให้พวกเขา) (Child caregiver 8)

“Normally, the younger children finish the activities faster or sometimes when they get bored, they want to start a new activity without completing the first one. So, I have to prepare educational games for the assistant to perform with them. These are created to help avoid the problem of loud noise made by the smaller children.”

(โดยปกติแล้วเด็กเล็กจะทำกิจกรรมเสร็จเร็วมาก หรือบางครั้งถ้าพวกเขารู้สึกเบื่ออยากทำอย่างอื่นก็จะหยุดทำกิจกรรมที่ทำอยู่โดยที่ไม่สนใจว่ายังไม่เสร็จ พี่ก็เลยต้องเตรียมพวกเกมการศึกษาให้ครูอีกคนช่วยดูแลให้ เพื่อให้ไม่เกิดปัญหาของการส่งเสียงดังรบกวน) (Child caregiver 10)

It was found that the problems outlined above stemmed from the fact that there were different age groups of children all in one class. As mentioned above, this created problems for classroom management, requiring child caregivers to prepare activities which provide support for the young learner's at different stages of development. In contrast, if the child caregivers fail to prepare suitable activities the children's

development progress and learning will be affected. Additionally, Centres which have more than one child caregiver to supervise the mixed-aged young children seem to perform more effectively.

In an effort to support working parents the local executives have allowed Centres to admit young children from two years old. As a consequence, the executives increase the burden upon the practitioners because usually the CDCs located in rural areas have only one classroom while the different ages of young children result in a diverse range of attention spans, meaning the practitioners need to organize activities in response to this issue. The direct observation discussion will offer further evidence in support of these findings.

According to the observation of four child caregivers, it was found that two out of the four were the only child caregivers at the CDCs. This created problems especially when the child caregivers were directing a large group activity, as some of the children would only pay attention to the activity for ten minutes or less before they started running around making noises and disturbing others. These were normally those children aged two years old. The child caregivers had to stop them repeatedly using a variety of words and expressions. Some examples of the words and expressions the child caregivers used are listed below:

Child caregiver 1: *“Be quiet, please.”*

(OB3) *(เงียบๆ น้อยคะ)*

“Play quietly.”

(เล่นกันเบาๆ)

“Could you play properly, please?”

(เด็กๆ เล่นกันดีค่ะ)

“I will not let you attend story telling time if you make any noise again.”

(เดี๋ยวครูจะไม่เล่านิทานให้ฟังถ้าเด็กๆ เล่นกันเสียงดังแบบนี้อีกครั้ง)

Child caregiver 14: *“Do not run please”.*

(OB4) (อย่าวิ่ง)

“Please come back to your seat”.

(กลับมาที่นั่งของตัวเอง)

“Anyone making noises will not be allowed to have snacks.”

(ถ้าใครเสียงดังจะไม่ได้อนุญาตให้กินของว่างนะ)

“Could you turn down your noises, please?”

(ลดเสียงลงหน่อยได้ไหมคะ)

As a result of the loud noises the small children made, the other children aged 4 to 5 years who were completing activities could not focus on their learning as much as they should. The childcare providers had to use words to encourage them to continue with activities until finished.

Child caregiver 1: *“Very beautiful indeed, keep doing.”*

(OB3) (สวยมากเลย ทำต่อเลยคะ)

“You are almost finished, and it looks beautiful.”

(ใกล้เสร็จแล้วค่ะ สวยมากเลย)

Child caregiver 14: “You can also play once it is complete.”

(OB4) (ทำเสร็จก่อนแล้วจะได้ไปเล่นนะ)

“How beautiful your painting is. Almost done. You can play

soon.” (ระบายสีสวยมากเลยคะ ใกล้จะเสร็จแล้วนะ เตี่ยจะได้ไปเล่นละ)

This demonstrates that the child caregivers used words to stop the disturbances from the youngest learners whilst simultaneously giving attention to the older learners to encourage their capabilities. Additionally, from the observations, the researcher found that there were times when a group of younger children did not want to do activities or they lost focus on their work, and then the practitioners allowed them to play freely. The practitioners did not try to encourage the younger children to do activities as they did with the older children and there was no extra activity prepared for the young ones.

This implies that the child caregivers produced similar activities with each, starting the day with a circle group discussion to prepare the young learners and stimulate them to engage with activities, whether these were related to a weekly theme or were instead daily activities. Despite this, the majority of child caregivers faced the similar problem of how to supervise a mixed-age group of young children attending the CDCs.

The educational officers revealed that they have noticed the issue of providing education and care for a mixed-aged group of young children in Centres with a single child caregiver. Additionally, the local authority could not afford to hire more staff to help because of the budgetary limitation. The uncertainty regarding the number of young children who will be enrolled at the Centres each year is another reason the local

authorities are reluctant to recruit additional staff. If the number of young learners decreases, the person hired by the local government will be dismissed from the position and will encounter the problems associated with unemployment.

Even though this problem should be immediately addressed, the educational officers believed that each child caregiver had their own way of handling the number of children and felt confident that they could find a solution if confronted with problems, as stated below:

“The role set by the DLA states that one child caregiver can supervise up to 20 early years. I agree with this idea, as I believe that each child caregiver has their own methods to handle different situations.”

(แนวทางการปฏิบัติงานที่กำหนดโดยกรมส่งเสริมการปกครองส่วนท้องถิ่นกำหนดว่า ผู้ดูแลเด็ก 1 คน ดูแลเด็ก 20 คน พี่ก็เห็นด้วยนะ เพราะพี่เชื่อว่าครูเขาก็จะมีวิธีการรับมือกับสถานการณ์ต่างๆ ได้) (Educational officer 7)

Additionally, the educational officers who supervised multiple child caregivers across a number of Centres further mentioned that the executive team of the local government were aware of practitioner’s responsibilities on top of teaching work such as cleaning, making lunch, and Centre management, as well as all the problems the practitioners encountered. Therefore, executives aimed to find ways to help improve the effectiveness of practitioners’ performances by recruiting assistant practitioner to provide support for the main practitioner. The following is an excerpt of the response:

“The administrators acknowledge the problems the child caregivers have to encounter and therefore hire people from the village to help them. This member of staff has been provided with training in teaching and caring for young children as well so that they can fully assist the child caregivers of the Centre.”

(ผู้บริหารรับทราบถึงปัญหาที่ผู้ดูแลเด็กเผชิญอยู่ก็เลยมีการจ้างงานคนในพื้นที่เพื่อที่จะได้มาช่วยในการทำงานของผู้ดูแลเด็ก น้องคนนี้ก็ถูกส่งให้ไปอบรมในการจัดการเรียนการสอนและการดูแลเด็กเหมือนกัน เพื่อที่จะได้สามารถช่วยผู้ดูแลเด็กได้อย่างเต็มที่)
(Educational officer 1)

Clearly, the educational officers have strong trust in the performance of the practitioners and are confident the child caregivers will be able to resolve any situations which arise. The vision of the local authority executives for Centre management also has a significant impact upon the performance of the child caregivers.

6.4 Interaction between child caregivers and young learners

Good interactions between practitioners and early years children will help the practitioners to respond to the developmental and learning needs of early years appropriately. According to the interviews concerning the importance of establishing a positive relationship with their young learners, seventeen out of twenty-three child caregivers mentioned a method which allowed them to get to know young learners better. This procedure involved encouraging the children to feel warm and safe and this is often achieved by reacting to them intimately. In the process of organizing learning activities, there are various teaching methods which enable good interactions between childcare providers and young learners as indicated by the following statements:

“I normally start a day by talking to children to make sure that they are happy and enjoy coming to the Centre.”

(ที่เริ่มแต่ละวันด้วยการพูดคุยกับเด็ก เพื่อให้พวกเขามีความสุขและสนุกในการมาที่ศูนย์)

(Child caregiver 4)

“I talk to the children like we are friends and need to make sure that they enjoy being at the Centre. If they enjoy the atmosphere, they will be looking forward to coming to the Centre and actively participating in the activities.”

(ที่พูดคุยกับเด็กๆ เหมือนเพื่อนนะ และก็จะต้องทำให้เด็กๆ สนุกในการอยู่ที่ศูนย์

เพราะถ้าพวกเขาสนุกก็จะทำให้พวกเขาอยากมา และเข้าร่วมในกิจกรรม)

(Child caregiver 13)

The child caregivers further stated the importance of building a good relationship with the young children, saying that the most important thing was to provide a warm and safe environment for the young learners and to immediately respond to the children’s needs. It can be perceived that when the learners feel comfortable and enjoy attending the CDCs, they will actively engage with all activities. This should be done, according to twelve child caregivers, to ensure that the young learners feel safe and moreover, to make them feel that they are important.

Most of the children who study at the Centre are from local areas and as this research focuses on the rural areas of Mae Hong Sone Province, an area where the majority of the people are members of the hill tribes, and the majority of the early years speak their own local languages. This makes it desirable for the practitioners to be recruited from the local

area in order for them to effectively communicate with the children in their language.

The following statements from two interviewees illustrate this fact:

“I always listen to the children when they talk to me. I think this is one of the ways to build their confidence and through this communication. I can also help and correct them when they don't speak Thai properly. Most of the children are hill tribes so they use their dialects in their conversations, and I try to teach them more Thai.”

(พี่จะรับฟังเวลาที่เด็กๆ มาพูดด้วย พี่คิดว่า การพูดคุยกับพวกเขาเป็นการสร้างความมั่นใจในตัวเองให้พวกเขาได้เหมือนกันนะ และพี่จะสามารถช่วยเสริมเวลาที่พวกเขาพูดไม่ถูก เด็กที่นี้เป็นเด็กชาวเขา พวกเขาจะพูดด้วยภาษาท้องถิ่น พี่ก็จะพยายามสอนภาษาไทยให้พวกเขา) (Child caregiver 6)

“Fortunately, I am from the area so I have spoken the local language with the children because at the beginning they couldn't speak Thai at all. After that I have tried to teach them some Thai words to describe objects around them. And nowadays, I am using both languages to communicate with them and trying to encourage them to use more Thai.”

(โชคดีที่พี่เป็นคนในพื้นที่ ในช่วงแรกพี่ต้องพูดกับเด็กๆ ด้วยภาษาท้องถิ่นก่อน เพราะเด็กๆ พูดไทยไม่ได้เลย หลังจากนั้นพี่ก็จะพยายามสอนภาษาไทยให้พวกเขา ชื่อเรียกของสิ่งของต่างๆ ตอนนี้พี่ก็จะใช้ทั้งสองภาษาในการพูดคุยกับพวกเขาเพื่อที่จะกระตุ้นให้พวกเขาใช้ภาษาไทยให้มากขึ้น) (Child caregiver 19)

According to nine child caregivers, verbal interaction with young children can help them better connect and learn about the young children's cognitive capabilities. Furthermore, participating in activities together with the young learners can assist the assessment of

knowledge as well as intellectual development. The following are the responses of the interviewees, which clearly established this point:

“I like talking to the young learners. It is the chance to get to know their thoughts and also, I can evaluate what I have taught them. This will be useful for my teaching preparation too.”

(พี่ชอบพูดคุยกับเด็กๆ เหมือนพี่ได้รู้ความคิดของพวกเขา ได้รู้ว่าสิ่งที่เราสอนไป พวกเขาเรียนรู้มากน้อยแค่ไหน และพี่จะเอามาประเมินตัวพี่เองด้วยว่าควรจะมีเติมตรงส่วนไหนให้พวกเขาได้บ้าง) (Child caregiver 2)

“I always enjoy talking to the children because they are innocent. Sometimes they tell me about their parents’ arguments and I normally teach them what is right and what is wrong.”

(เวลาพี่ได้พูดคุยกับเด็กๆ พี่ว่าเพลินดีนะ สนุก พวกเขาไร้เดียงสา บางทีก็มาแล้วเรื่องที่บ้านให้พี่ฟัง พ่อแม่ทะเลาะกัน พี่ก็สอนเขาว่าอะไรถูกอะไรผิด) (Child caregiver 9)

“The children here started to speak good Thai. They can speak Thai but only a short sentence. I always correct their mistakes and help them learn new vocabulary. These children are good memorizers as they can remember so quickly since the first or the second time, I teach them.”

(เด็กที่นี่เริ่มพูดภาษาไทยได้เก่งแล้ว สามารถสนทนาประโยคสั้นๆ ได้ พี่ก็จะช่วยแก้ไขถ้าผิด และก็ช่วยเพิ่มเติมคำศัพท์ให้ เด็กๆ มีความจำดี พวกเขาสามารถจำได้อย่างรวดเร็วหลังจากที่บอกไปครั้งหรือสองครั้ง) (Child caregiver 18)

In the interviews with the educational officers, the respondents confirmed that the relationship between the practitioners and young children was very close, as the child

caregivers themselves were local and thus were familiar with the area's community. The practitioners also had the chance to meet with the children on a regular basis, even outside CDCs hours. This helps create trust and a good relationship between the practitioners and young learners. The following are excerpts from the respondents' statements illustrating the point:

“The child caregiver is a local resident. Some learners who study at the Centre are her relatives, therefore, it is easier and more convenient for the practitioner to lead various activities each day.”

(ผู้ดูแลเด็กที่นี่เป็นคนในพื้นที่ เด็กบางคนที่มาเรียนก็เป็นญาติกับครู ก็จะทำให้ง่ายและสะดวกในการที่ครูจะจัดกิจกรรมต่างๆ ในแต่ละวัน) (Educational officer 1)

“Creating a good interaction between young learners and practitioner can facilitate the practitioner to work with ease. When children trust their practitioner, and enjoy learning, the classroom management is easy and efficient as planned.”

(การสร้างปฏิสัมพันธ์ที่ดีระหว่างนักเรียนกับผู้ดูแลเด็กช่วยให้การทำงานสะดวกมากยิ่งขึ้น เมื่อเด็กไว้วางใจครู และสนุกสนานในการเรียน การจัดการห้องเรียนก็จะง่ายและเกิดประสิทธิภาพตามเป้าหมายที่วางไว้) (Educational officer 6)

In conclusion, the practitioners and the young children have established a good relationship. This is mainly because the practitioners start getting to know the young children and use verbal collaboration to make sure that the young learners feel safe. This, in turn, benefits the practitioners themselves as they can use their professional knowledge according to young children's learning to evaluate the young learners' development through this collaboration.

According to the observations of teaching, it was found that all four child caregivers had good interactions with the children. Practitioners had good conversations with the learners, and there was no sign of shyness amongst the children or communication difficulties between the practitioners and the young learners. Whenever the young learners had problems or wanted some advice, they were not reluctant to express their feelings to the childcare providers and then the providers could respond to them immediately. This suggests that a good relationship between instructors and young learners is crucial as children are always stimulated to learn and participate in all activities.

In addition to forging a good relationship and assessing the young children's learning development, the practitioners can also gain other benefits from verbal collaboration. That is, the practitioners can attract the early years to classroom activities. This can be illustrated as follows:

- When the practitioner begins the activity by talking about the topic of the day, there are instant responses from the young learners.
- The young learners are more interested in the lessons if the practitioners have various teaching materials, and more importantly, they are more likely to understand and in fact learn from this variety of media.

It can be concluded that the fact that practitioners are from local areas is advantageous when it comes to communicating with the young learners. Therefore, the practitioners communicated with the early years in two languages, both the local ethnic dialect and Thai languages, so that the early years became familiar with using Thai in higher education. Moreover, the practitioners also have the advantage in that they can test their young learners' development and thoughts through verbal communication and ultimately the standards of the CDCs are met.

6.5 Standards of child caregivers' performances

The practitioners of the CDCs work under the DLA, MOI, which has specific standards for the practitioners to follow. The interviews with practitioners established that there are standard procedures which are to be followed by all the practitioners across the country. It was found that all the twenty - three child caregivers have a manual of the Standards Operational Guidance for Child Development Centre under the Department of Local Administration, Ministry of Interior, B.A.2559 (2016), which has been disseminated by the DLA throughout the LAOs, and the practitioners could show the evidence to the researcher.

In terms of practicing, fifteen out of twenty-three child caregivers revealed that the CDCs could not be well organized because of many limitations as discussed earlier including whether the importance of education was valued by the administrators, local administrative organizations and parents, the insufficient budgets allocated by the local government, or the isolated location of the Centre. In the case of Centre administration, this depended only on the management by the local government organization. The child caregivers had no right to interfere. Their only duty was to educate and take good care of young learners. As two child caregivers said:

“I think that the standards set in the manual are quite detailed and it would be beneficial if they were able to be accomplished. In my view, the Centres in urban areas should be able to perform as specified in the standard. For our Centre, on the other hand, it is very difficult as the management of everything is under the authority of the local government organization which does not administer properly.”

(พีคิดว่ามาตรฐานที่กำหนดมาในคู่มือมีความละเอียด และถ้าทำได้ตามนั้นจะดีมากเลย พวกศูนย์ที่อยู่ในเขตเมืองก็น่าจะทำได้ตามที่กำหนดไว้ในมาตรฐานนะ แต่ศูนย์ที่นี้จะยากหน่อยที่จะให้เป็นตามนั้นและด้วยความที่การบริหารจัดการทุกอย่างจะถูกจัดการโดยองค์กรปกครองส่วนท้องถิ่นซึ่งก็ไม่ได้มีความพร้อมมากเท่าที่ควร) (Child caregiver 9)

“The standard is like a model. But in practice, it all depends on a number of contributing factors. The fact that our Centre is isolated from the city Centre makes it difficult for getting access and this causes us a loss of opportunities.”

(มาตรฐานเปรียบเสมือนโมเดลในการปฏิบัติ แต่ในการทำงานจริงๆ ก็ต้องขึ้นอยู่กับความเหมาะสมและปัจจัยประกอบอื่นๆ ศูนย์ของเราอยู่ไกลจากตัวเมืองมาก การเดินทางก็ลำบาก ทำให้ขาดโอกาสหลายๆ อย่างไป) (Child caregiver 9)

From interviewing child caregivers about the concordance between the standards and the day-to-day performance, seventeen out of twenty-three child caregivers stated that there were times when not all the actual work was executed exactly as specified in the standards. Despite this, the child caregivers further stated they tried their best to apply their knowledge to developing and improving the children’s leaning through the means of providing a variety of sources of knowledge for their children. The following is an excerpt of a response:

“In practice, I have tried my best. I have tried to find various learning materials for the children so that they can be fully developed.”

(ในทางปฏิบัติพี่ก็พยายามทำให้ดีที่สุดนะ ก็พยายามที่จะหาสื่อการเรียนต่างๆ มาให้เด็ก และก็เติมเต็มให้เด็กได้รับการพัฒนาอย่างเต็มที่) (Child caregiver 10)

The practitioners also mentioned that the young learners were happy during the activities and this was good for their learning. This can be demonstrated by the young learner's participation in activities and how the children were willing to come to the Centre.

The standards of operation for the CDCs set by the DLA are considered as a guideline that has been established for the practitioners to follow. In spite of this, in practical terms, the work of the practitioners depends on a number of contributing factors as mentioned by the practitioners. The location of the Centre, the vision of the local administrators, and the practitioners themselves are all important for the educational improvement of the children attending the Centre.

From the above data, it can be seen that childcare providers have a consistent awareness of diverse work practices. When asked about the problems or obstacles encountered while working under the standards set by the DLA, twelve out of twenty – three child caregivers stated that they had to deal with pressure from many parties involved including the parents who wanted to see their children develop clearly and speedily. One of the respondents stated:

“The parents nowadays are instantly informed due to the prevalence of the media. They want to see clear development in their children. However, children should be developed according to their own potential and age.”

(ผู้ปกครองเดี๋ยวนี้เขาติดตามสื่อ เขาก็จะต้องการให้ลูกหลานได้รับการพัฒนาอย่างเด่นชัด ซึ่งในความเป็นจริงเด็กก็ควรจะได้ได้รับการพัฒนาตามศักยภาพและตามวัยของพวกเขาเอง) (Child caregiver 18)

Seven out of twenty-three practitioners further mentioned the main problem which affects their operations and efficiency is the fact that there are the standards set by the DLA, although there is no proper support from local authorities. One of the child caregivers indicated this in the following statement:

“The executives of the local government want the Centre to work under the standards set by the DLA and by the local government’s policy but there is no proper support. It is therefore impossible to operate following the standards completely.”

(ผู้บริหารส่วนท้องถิ่นของที่นี่ต้องการให้ศูนย์ทำงานภายใต้มาตรฐานของกรมและนโยบายของทางผู้บริหาร แต่ขาดแคลนการสนับสนุนอย่างเหมาะสม มันก็เป็นไปไม่ได้ที่จะดำเนินการได้ตามนั้น) (Child caregiver 16)

In addition, the child caregivers also had further suggestions which are consistent with the performance. The DLA assigned various standards for local governments and CDCs to follow, although the DLA did not evaluate whether performance of Centre meets these standards. This was especially true for remote CDCs which were under-equipped when compared to the Centres in the city. The following excerpt illustrates this point:

“The Department of Local Administration has never sent any personnel to visit the Centre. Therefore, they are unable to recognize the real problems of our operations. The standard that is set is good if it can be followed in actual practice. But in reality, with the context and circumstances, it is a different story.”

(กรมส่งเสริมการปกครองส่วนท้องถิ่น ไม่เคยส่งบุคลากรลงมาดูการทำงานของคุณย์พัฒนาเด็กเล็กเลย จึงไม่สามารถที่จะรับรู้ปัญหาที่แท้จริงว่าเกิดอะไรขึ้นบ้างในการปฏิบัติงานของพวกเรา มาตรฐานที่กำหนดขึ้นมานั้นดีนะ ถ้าได้ทำตามนั้นจะดีมากเลย แต่ในความเป็นจริงด้วยบริบทและองค์ประกอบต่างๆ มันก็เป็นคนละเรื่องกัน)
(Child caregiver 7)

Educational officers were asked whether the child caregivers' work is appropriate and consistent with the standards. All eight educational officers came to the same conclusion that the child caregivers under their supervision did their best, even though they might not meet all the standards assigned due to many factors and challenges. Although in general, the child caregivers fully performed their jobs, two educational officers reveal this in the following statements:

“With the context of the location of the Centre, there are some management problems. But the children who study here have improved their skills and knowledge. This also shows that the child caregiver is doing her own job very well.”

(ด้วยบริบทของพื้นที่ตั้งของศูนย์ การบริหารจัดการที่มีปัญหา แต่เด็กที่มาเข้าเรียนที่นี่ ได้รับการพัฒนาทักษะและความรู้ ซึ่งแสดงให้เห็นว่าครูทำหน้าที่ได้เป็นอย่างดี)
(Educational officer 1)

“The child caregivers here are dedicated to work. With their background as hill tribes who received educational opportunities from the DLA to work in areas where they grow up, I think this is an important factor that they do their job well and try their best to deal with the problems.”

(ครูที่นี่ทุ่มเทกับการทำงานด้วยสถานะของพวกเขาที่เป็นชาวเขา แต่ได้รับโอกาสทางการศึกษาจากกรมส่งเสริมการปกครองส่วนท้องถิ่นเข้าทำงานในพื้นที่ที่ตนเองเติบโตมา พิจารณาเป็นปัจจัยสำคัญเหมือนกันนะที่ทำให้พวกเขาตั้งใจทำงาน ได้เป็นอย่างดี และพยายามที่จะจัดการกับปัญหาที่พบเจอ) *(Educational officer 3)*

The above therefore means that the educational officers are aware of the problems encountered by the child caregivers undertaking their work. Despite this, due to the qualifications and the performances of the child caregivers, the educational officers have confidence in the child caregivers' abilities and believe that they could produce efficient work, even though not all the standards set by the DLA are met.

6.6 Summary

This chapter has presented the findings of the third research question, concerning whether or not child caregivers' level of professionalism matches the demands imposed by the Department of Local Administration's policy and standards. The collected data has been divided into four main themes: (1) curriculum and teaching plan management; (2) daily activities in teaching and learning sessions; (3) interactions between child caregivers and young learners; and (4) standards of child caregivers' performances.

Firstly, the obtained data from the interviews highlighted the need for a curriculum and teaching plan management and identified how every CDC needed to generate a unique curriculum based upon available community resources which could be integrated into teaching activities in order to provide various learning materials for young learners. The practitioners additionally produced their own teaching plans to be a guideline for their practice and which could also serve as evidence for performance evaluation conducted by the executives of LAOs and the educational officers.

Indeed, in practice, the practitioners did what was suitable for them each day because the Centres were located in isolated areas and had limited learning resources. Despite all this, the educational officers accepted that the child caregivers did not manage activities with

regard to the teaching plans written, although the officers were confident in the childcare providers' day-to-day practices and capabilities.

Secondly, the practitioners stated that they started the daily activities with a large group discussion in a circle concerning the topic which the children were learning about. The practitioners participated in this activity believing that the circle time session was important in terms of creating a positive relationship between themselves and the young learners. Additionally, these activities created the opportunity to encourage the young learner's participation and give children the opportunity to learn from their own experiences. Despite this, there were many factors that restricted the practitioners' capacity to provide a variety of learning resources for the young children, such as distance and budget issues.

A mixed-aged group of learners in one classroom, supervised by only one practitioner was another issue which affected the effectiveness of practitioners' performances as the young learners have different levels of development and dissimilar lengths of concentration. The mixed-aged group young learners were taught in the same classroom, as rural CDCs are normally smaller and only equipped with one classroom. In conjunction, the educational officers could not help the practitioners, because the local governments were unable to afford employing assistant practitioners due to the uncertainty regarding the number of young learners who would be enrolled each year.

Crucially, the officers believed that the practitioners could manage the classrooms very well even though they faced this issue constantly. In contrast, there were CDCs staffed by more than one child caregiver supervising a mixed-aged group of young learners. The LAOs were aware that child caregivers performed a number of duties, although primarily

they were responsible for educating and caring for the young learners. They therefore recruited assistants to support the main practitioners.

Thirdly, the findings indicated that the practitioners and the young learners developed good relationships with each other. The majority of the practitioners started to build a relationship with the learners through talking to them and ensuring that they were happy to attend the Centres. Besides, the practitioners stated that the verbal interaction could provide them with a better understanding of the learners' cognitive abilities in order to evaluate their learning development. According to the educational officers' interviews, respondents confirmed that the practitioners and the learners were familiar with each other because they lived in the same villages which was beneficial for both group when the young learners attended the CDCs. Consequently, this made it easier for the practitioners to arrange the activities and the young learners were therefore happy to participate in the activities.

Finally, the participants were investigated with regard to the standard of the child caregivers' performances. The findings identified the DLA-established standards for the CDCs' operation, as guidelines for the child caregivers and collaborators to achieve a consistent performance. In fact, in terms of practices, these CDCs are located in isolated areas and the young learners are from ethnic minority groups, with limited local resources and, of course the local authorities have the responsibility for the administration of the CDCs' procedures.

The child caregivers mentioned the main problem which impacted upon their standard of working was that neither the practitioners nor CDCs received sufficient attention from the local authorities. Practitioners noted that although the LAO executives instructed them to work in accordance with the DLA standards, there was inadequate support from

the local authorities. Specifically, the negligence of the DLA resulted in the department never following up on performance evaluations with regard to standards or practices.

Chapter Seven: Meeting the aims and objectives of early years education

7.1 Introduction

In this chapter presents the analysis of obtained data with a view to answering the third research question:

- *To what extent do child caregivers think that the Department of Local Administration's policy and standards on early childhood meet the Department's aims and objectives?*

Data collected from the interviews and observations outlined three main themes closely connected with the third research question. These are:

- Support from local government executives and educational officers
- The child caregivers' performances as perceived by the educational officers
- Recommendations to improve the DLA's policy and performance guidelines.

These themes were established through an analysis of responses given by participants during the interview sessions and the evidence from the observation.

7.2 Support from local government executives and educational officers

Local government appears to be one of the most significant elements influencing child caregivers and educational officers' performances in relation to young children's development and learning. The majority of respondents thought that the local government, and especially the executives' vision, was one of the most predominant in influencing the process of child caregivers' performances. Crucially, the executive body,

particularly the chief executive of the LAO, was appointed from within the central government to have decision-making powers in order to provide fundamental services and education management.

The executive members of the local government were seen as important for implementing and managing local educational policy. Child caregivers and educational officers explained that the leader's vision for education was reflected within their own performances. As each executive team has a distinctive vision and set of policies to provide public services to the villages, these result in varying levels of attention given to the performance of childcare providers in CDCs. This can be seen in the views of two practitioners:

“Different executive bodies give different levels of attention to education. Much depends on their vision and interests.”

(ผู้บริหารแต่ละคณะก็จะมี ความแตกต่างในระดับของความสนใจในเรื่องของการจัดการศึกษา ซึ่งขึ้นอยู่กับวิสัยทัศน์และความสนใจของผู้บริหาร) (Child caregiver 2)

“The vision and policy of the local authority executive members are very significant as they tend to give more attention to what they see as important to deliver to local residents.”

(วิสัยทัศน์และนโยบายของผู้บริหารองค์กรปกครองส่วนท้องถิ่นมีความสำคัญเป็นอย่างมาก พวกเขาจะให้ความสนใจเรื่องที่มีความสำคัญในการให้บริการแก่คนในท้องถิ่น) (Child caregiver 15)

In addition, the educational officers supervise the child caregivers' performances in order to meet the aims and objectives of providing education for young children. The officers

revealed their opinions about the role of the local administrators identifying that they have a duty to deliver public facilities including educational services, although the provision of these services is subject to budgetary constraints. The perspective of educational officers can be discerned from the comments of two of the interviewees who stated:

“If the local administrators have their vision on how education is significant to young learners, then I will do my job easier because I am an educational officer who encourages the community’s educational setting.”

(ถ้าผู้บริหารส่วนท้องถิ่นมีวิสัยทัศน์ในเรื่องความสำคัญของการศึกษาของเด็กเล็ก ก็จะทำให้พี่ทำงานได้ง่ายขึ้นในฐานะของนักวิชาการศึกษา ในการที่จะส่งเสริม สนับสนุนการจัดการศึกษาของชุมชน) (Educational officer 1)

“The chief executive of the local administration organization is the main person who provides a clear local policy to staff. If he has a vision for providing education to young children, my duty to support the CDC is going to be much easier and this will ensure that operational processes and practices are smooth and successful.”

(นายกองค์การบริหารส่วนตำบลเป็นคนออกนโยบายการทำงานให้แก่ผู้ปฏิบัติงาน ถ้าเขามีวิสัยทัศน์เกี่ยวกับการจัดการศึกษาสำหรับเด็กเล็ก การทำงานของพี่ก็จะง่ายขึ้นในการสนับสนุนดูแลศูนย์พัฒนาเด็กเล็ก และมั่นใจได้ว่าการทำงาน ก็จะสะดวกและเป็นไปอย่างเรียบร้อย) (Educational officer 3)

With its knowledge of local necessities and its existence on the front line of basic services provision, local government is significant for residents of local communities. In terms of the local educational setting, local authorities have a duty to ensure that every child is

able to receive an adequate and effective education (MOE, 2015). Sopchokchai (2001) argues that CDCs need support from local authorities, especially with regards to budgetary provision and its distribution, in order to take full advantage of the funds available. The chief of the LAO has the most significant role in this process, given that the central government transfers powers to the LAO for the purposes of assessing and supporting local educational practice.

7.2.1 Support from the executives of local government

The executives of the local government are considered to play a significant role, which is “to manage development and provide public services according to the needs of their constituents in the local community” (Sopchokchai, 2001: 4). CDCs are one of the public services that provide education and care for local young children. The local governments’ executives carry responsibility for the CDC’s administration and attend to the provision of additional support and resources, such as a budget, materials and equipment for the CDCs that fall under the local authorities’ system.

Despite this, nineteen out of twenty-three child caregivers mentioned that they did not receive adequate administrative support from their local authorities. Because of this, the child caregivers needed to seek alternative support from parents and communities (as mentioned in Chapter Five, section 5.3.1). Three of the respondents stated:

“Except for the budget from the DLA, there is no further funding support from my local government.”

(นอกเหนือจากงบประมาณจากกรมส่งเสริมการปกครองส่วนท้องถิ่น ที่นี้ก็ไม่เคยที่
มีงบประมาณที่เพิ่มเติมสนับสนุนจากหน่วยงานท้องถิ่นของพี่เลย)
(Child caregiver 7)

“Unlike other places, the executives here are not eager to support us. The projects we have proposed to the local authority have never been approved.”

(ที่นี้ไม่เหมือนที่อื่น ผู้บริหารท้องถิ่น ไม่มีการช่วยเหลืออะไรเพิ่มเติมให้พวกพี่เลย
โครงการต่างๆ ที่พวกพี่เสนอไปก็อวด. ก็ไม่เคยที่จะได้รับการอนุมัติ)
(Child caregiver 8)

“All of the budget we receive here comes directly from the DLA, which is a standard budget that all the Centres are given and my local government has never provided us with the extra funding for the Centre’s renovation or other necessities. However, I try to supplement the budget with other sources such as fundraising from parents or my family members.”

(งบประมาณต่างๆ ที่เราได้รับจะมาจากกรมส่งเสริมการปกครองส่วนท้องถิ่นโดยตรง
ซึ่งเป็นงบประมาณสนับสนุนที่ทุกศูนย์พัฒนาเด็กเล็กทั้งหมดจะได้รับและทาง
หน่วยงานต้นสังกัดของพี่ไม่เคยที่จะให้งบประมาณเพิ่มเติมในส่วนของการซ่อมแซม
ศูนย์หรือเรื่องความจำเป็นอื่นๆ ของศูนย์เลย พี่ก็เลยต้องไปหางบสนับสนุนจากแหล่ง
อื่นๆ เช่น ผู้ปกครอง หรือคนในครอบครัวพี่เอง) (Child caregiver 11)

“There are a number of times that we proposed to buy equipment that is beneficial to the young learners such as water filters or we requested improvement to the playground area. The supervisor was in agreement with me, but the proposals were rejected by the local executive body.”

(พี่เคยเสนอผู้บริหารในความต้องการที่อยากจะซื้ออุปกรณ์ เช่น เครื่องกรองน้ำ
หรืออยากทำสนามเด็กเล่นใหม่ พี่เสนอไปหลายครั้งมาก ซึ่งนักวิชาการก็เห็นด้วย
แต่สุดท้ายก็ถูกปฏิเสธจากผู้บริหาร) (Child caregiver 23)

These statements confirm that the local government paid little attention to the CDCs' operations. Respondents also suggested that the executives of the LAOs could resolve the issues associated with budget constraints, as demonstrated by the following statement:

“In my opinion, my work would be more effective if the executive body, particularly the chief executive of local government, sees the importance of the educational management of the CDC on equal terms with the provision of other facilities' delivered in our community and provides us satisfactory support particularly in financial.”

(ในความคิดของพี่นะ การทำงานของพี่จะมีประสิทธิภาพมากกว่านี้ถ้าผู้บริหารส่วนท้องถิ่นโดยเฉพาะนายกเห็นถึงความสำคัญของการจัดการศึกษาของศูนย์พัฒนาเด็กเล็กได้อย่างเท่าเทียมกับการดูแลจัดการในเรื่องของสิ่งอำนวยความสะดวกต่างๆในท้องถิ่น และจัดการให้พวกเราได้รับการสนับสนุนอย่างเต็มที่ โดยเฉพาะในเรื่องของการสนับสนุนด้านงบประมาณ) (Child caregiver 2)

Since the CDCs are under the supervision of the local administrative organizations, the Centres are dependent on financial support from these agencies. Where such budgetary support was lacking, the educational officers criticized the chief executives' performances. These educational officers argued that a significant obstacle to child caregivers' capabilities was the lack of financial contributions. As the Centres are dependent upon funding from local authorities, the approval of administrators was integral to ensure financial aid, whilst insufficient support may create consequences stifling the Centres' ability to operate and survive. The following quotations outline the respondents' attitudes and concerns in relation to the local authorities and executives:

“The main problem for the management of the CDC is the fact that the local authority’s executives do not value the importance of the management of the CDC as much as they should. I, as an educational academic, can then do nothing.”

(ปัญหาหลักของการจัดการศูนย์พัฒนาเด็กเล็กคือทางผู้บริหารหน่วยงานท้องถิ่นไม่เห็นคุณค่าในความสำเร็จของการจัดการศึกษาของศูนย์พัฒนาเด็กเล็กมากเท่าที่ควร พี่ในฐานะของนักวิชาการศึกษาก็ไม่สามารถจะทำอะไรได้นะ).

(Educational officer 1)

“The fact that I used to be a child caregiver at a CDC makes me realize and understand the problems faced. If the local administrators acknowledge the importance of education, we will have additional support. Unfortunately, most of the Centres including ours do not obtain any assistance and the child caregivers therefore struggle to raise funds by themselves.”

(คือจริงๆ แล้วพี่เคยเป็นผู้ดูแลเด็กของศูนย์พัฒนาเด็กเล็กมาก่อน ซึ่งมันทำให้พี่รู้และเข้าใจถึงปัญหา ถ้าผู้บริหารรับรู้ถึงความสำคัญของการศึกษานะ เราจะได้รับ การสนับสนุนที่มากมายเลยแหละ แต่มันไม่ได้แบบที่เราต้องการ ศูนย์พัฒนาเด็กเล็กส่วนใหญ่ซึ่งก็รวมถึงที่นี่ด้วย ไม่ได้รับการดูแลช่วยเหลืออะไรเลยและผู้ดูแลเด็กก็ต้องพยายามที่จะหางบประมาณสนับสนุนกันเอง)

(Educational officer 2)

This implies that the educational officers tend to perform their work based on directions or commands from superiors rather than making decisions by themselves. The power to make decisions resides with the local authority administrators. Some projects examples related to the improvement of the CDCs have been turned down because of financial difficulties. The participants also revealed that the local authorities had sufficient funds,

but these did not allocate the funds in an equal way across different services. The successful approval of applications for CDCs improvement projects depends on the vision of the executives and whether they consider the issue of education management a priority. No matter how much the educational officers want to provide assistance, the final decision will always rest with the local administrators.

On the other hand, with regard to the executives' support, only four out of twenty-three child caregivers who undertaken in this current study revealed that their local authorities supported them by providing an increased budget, extra equipment and materials. Indeed, one of the child caregivers indicated this in the following statement:

“Our local government is very supportive. The executive team will assign responsibilities to the educational officer to deal with both the teaching and the Centre management. If the Centre needs further support, we submit the request and the team will provide us with the workers as well as more budgetary support.”

*(หน่วยงานต้นสังกัดของเราให้การสนับสนุนเป็นอย่างดีเยี่ยม คณะผู้บริหาร
จะมอบหมายให้นักวิชาการศึกษาดูแลจัดการในเรื่องของการจัดการเรียนการสอน
รวมถึงการบริหารจัดการศูนย์ด้วย โดยถ้าทางศูนย์ต้องการการสนับสนุนในเรื่องไหน
และทางเราเสนอความต้องการไป ทางผู้บริหารก็จะจัดคนงาน
พร้อมทั้งงบประมาณสนับสนุนมาให้) (Child caregiver 4)*

This clarifies the importance of the executive teams in administering young children's education in the context of providing support to the CDCs' management. In this study, there were twenty-three practitioners who worked in the CDCs and only four of them were satisfied with their local authorities' support.

The two educational officers who supervised these four child caregivers confirmed that the child caregivers had obtained sufficient support from their local authorities. They pointed out that the local authorities provided several resources for the practitioners such as budget, materials and equipment:

“Fortunately, our executives’ pay attention to and value the importance of education. There will be a budget from this local authority to support such things as building, maintenance or appliance purchase and excursion arrangements for these young learners. If the practitioner wants to take the learners on a daytrip, there will be a bus service to support this for example.”

(เป็นโชคดีของเราที่ทางผู้บริหารให้ความสนใจและเห็นคุณค่าในความสำเร็จของการศึกษา ทางหน่วยงานของเรามีงบประมาณสนับสนุนในเรื่องของการต่อเติม ซ่อมแซม หรือการซื้ออุปกรณ์เครื่องมือ และการออกไปทัศนศึกษาสำหรับเด็กเล็ก ถ้าทางผู้ดูแลเด็กต้องการที่จะพาเด็กออกไปเรียนรู้ นอกสถานที่ก็จะมีรถบริการ)
(Educational officer 3)

“Our executives supported the educational management by allocating the resources that the practitioners required such as budget, materials, and equipment.”

(ผู้บริหารของทางเราสนับสนุนการศึกษาโดยการจัดสรร สนับสนุนสิ่งที่ผู้ดูแลเด็ก ต้องการ เช่น งบประมาณ เครื่องมือ และอุปกรณ์) (Educational officer 7)

The executive body’s vision is very significant for the practitioners’ practices given that such local authority executives hold the power to administer the CDCs’ operation. This implies that the CDCs’ management largely depends upon the attitude of local government executive members, mainly the chief of local agencies. The educational

officers and practitioners could accordingly collaborate around provision of education and care to disadvantaged young learners efficiently in the event of local authorities providing adequate support. Photo 7.1 and 7.2 are examples of toilets which apparently show the different support levels from local authorities.

Photo 7.1 Proper toilet with sufficient support from local authority (Fieldwork, 2017)



Photo 7.2 Improper toilet with insufficient support from local authority

(Fieldwork, 2017)



This current study concerns twenty-three child caregivers with seven educational officers, with the majority of the child caregivers (nineteen out of twenty-three) revealing that they received more support from external agencies and persons than from their own local governments. Further to this, only four child caregivers were satisfied with the support from their local authorities. This evidence thus partially corroborates earlier accounts from educational officers.

The educational officers whose duties included oversight and support of nineteen practitioners defined a core part of their roles in terms of direct responsibility for supervision of the child caregivers' performances. In fact, the executive bodies of local authorities had existing power to create considerable opportunities for community services to in turn serve the needs of villagers; such power thereby included educational

operation policy making and resource support. On the other hand, the educational officers who have responsibilities for those four practitioners in receipt of support from the local government perceived themselves to be lucky that their local authorities paid attention to and valued the educational provision.

7.2.2 Support from the educational officers

The educational officer has a core responsibility for supervising child caregivers in their day-to-day practices, thus ensuring that teaching and learning activities are organized professionally in order to enhance young children’s development and learning within CDCs (MOI, 2016). In interviews discussion with twenty-three practitioners about the relationship between the educational officers and child caregivers, eighteen of the participants explicitly stated that they had good working relationships with their supervisors. These practitioners talked about their supervisors displaying smiles and positive expressions, apparently signaling that good quality relationships existed between them. Three respondents commented:

“My educational officer used to be a practitioner, so it is not difficult for him to understand the role of the child caregiver and he usually tries his best to help solve the problems we encounter here at the Centre.”

(นักวิชาการของพี่เคยเป็นผู้ดูแลเด็กมาก่อน ก็เลยทำให้เขาเข้าใจในบทบาท หน้าที่นี้ และเขาพยายามที่จะช่วยแก้ปัญหาที่พี่เจอในศูนย์อยู่ตลอด) (Child caregiver 6)

“The supervisor always gives me suggestions and support. Even though she does not visit the Centre often, but we always keep in touch.”

*(นักวิชาการศึกษาค่อยให้คำแนะนำที่ดีๆ นานๆ เขาจะมาที่ศูนย์สักครั้งแต่เราก็
ติดต่อกันตลอด) (Child caregiver 21)*

It is therefore feasible to suggest that the majority of child caregivers and educational officers have good relationships with each other, and that practitioners appreciated the support from the educational officers.

Conversely, with regard to work, the abovementioned practitioners also revealed that the supervisors did not have sufficient time to supervise the CDCs at the level required. This lack resulted from competing commitments as educational officers, where they also had other responsibilities designated by their executives. These priorities were in turn determined by the local authorities, which hierarchy of duties practitioners in turn understood. Apart from encouraging education, the educational officers also had additional duties in respect of local government service. Consequently, the educational officers did not have chances to visit the Centres frequently. The following are excerpts from interviewee responses on this point:

“The educational officer does not visit this Centre often, also the same with the SAO executive members. They, therefore, do not realize the actual problems. When the problems are reported or when help is needed, it is normally considered unimportant and sometimes is neglected or even rejected.”

*(นักวิชาการศึกษาไม่ได้มาที่ศูนย์บ่อยนัก ผู้บริหารอบต.ก็เหมือนกัน ไม่ค่อยได้มา
พี่ว่าก็จะทำให้พวกเขาไม่เข้าใจในปัญหาจริงๆ ที่เราพบเจอนะ เพราะเวลาที่ทางเรา
เสนอถึงปัญหาที่เราเจอ หรือต้องการความช่วยเหลือในเรื่องอะไรก็ตาม ก็จะถูกมอง*

แบบไม่เห็นความสำคัญ บางครั้งถูกเพิกเฉย หรือแม่กระทั่งถูกปฏิเสธ)

(Child caregiver 7)

“My supervisor has a lot of duties. In addition to educational responsibilities, he must take care of sport, cultural and other Sub-district administrative organization activities. He was appointed as the head to arrange most activities with our local government.”

(นักวิชาการของที่นี่มีภาระหน้าที่มากมาย เพิ่มเติมจากภาระหน้าที่ด้านการศึกษา เขาต้องดูแลในเรื่องของกีฬา วัฒนธรรม และกิจกรรมต่างๆ ของทางอบต. เขาจะได้รับการมอบหมายให้เป็นหัวหน้าจัดการในกิจกรรมส่วนใหญ่ของทางหน่วยงานของเรา)

(Child caregiver 19)

“My academic officer does have other responsibilities in addition to educational purposes. She must take care of the various activities organized by the local authority.”

(นักวิชาการของที่นี่มีภาระหน้าที่เพิ่มเติมนอกเหนือจากเรื่องการศึกษา เขาต้องดูแลในเรื่องการจัดกิจกรรมต่างๆ ที่จัดโดยหน่วยงานของเรา) (Child caregiver 23)

In the interview process, the educational officers also confirmed they had obligations beyond encouraging and supporting educational management. These responsibilities were compulsory and educational officers had to be involved in all the activities, which the local government organized. Despite this, the educational officers believed that the child caregivers at the CDCs could manage their main responsibilities, including educating and caring for the young learners themselves. As a result, when problems are initially identified, it was necessary for childcare providers to attempt to resolve issues. If there were continuing problems, the providers could report concerns and request

assistance and involvement from the educational officers. The following excerpts illustrate this point:

“What I normally do is to visit and see how the practitioner created the activities and how they look after the young learners once a month. But there are some months that I have a lot of work as instructed by the local authority, and I cannot visit the Centre. Therefore, the practitioner and I always keep contact to see what I can provide in case she needs some support.”

(ปกติพี่ก็จะไปเยี่ยมที่ศูนย์เพื่อไปดูผู้ดูแลเด็กจัดกิจกรรมและการดูแลเด็กของเขาเดือนละครั้ง แต่บางเดือนงานที่พี่ได้รับมอบหมายก็เยอะมากเลย พี่ก็จะ ไม่ได้ไป แต่เราก็ติดต่อกันตลอด และถ้าเขาต้องการอะไรพี่ก็จะ พยายามหาทางดูแลจัดการ)
(Educational officer 1)

“The child caregiver here is highly experienced. I trust her in accordance with her duties for teaching and managing the Centre. I have a lot of work on my hands already and I do not have enough time to observe her teaching regularly.”

(ผู้ดูแลเด็กของที่นี่มีประสบการณ์มาก พี่ไว้วางใจในการทำงานของเขาในเรื่องของการจัดการเรียนการสอนและการดูแลจัดการงานของศูนย์ พี่มีงานเยอะ มากที่ต้องทำให้ไม่ค่อยมีเวลาไปดูผลการจัดการเรียนการสอนของเขาที่ศูนย์บ่อยมากนัก)
(Educational officer 4)

“I trust the child caregiver regarding her performance in teaching, caring for the young learners and managing the centre. She has more than ten years’ experience in accordance with this job, so she can handle every difficulty.”

*(พี่ไว้วางใจผู้ดูแลเด็กทั้งเรื่องการสอน การดูแลเด็ก รวมถึงการบริหารจัดการศูนย์
เขามีประสบการณ์ในการทำงานด้านนี้มากกว่า 10 ปี เขาจัดการได้ทุกปัญหา)
(Educational officer 3)*

As can be seen, the educational officers generally believe in the practitioners' ability to problem-solve whilst the additional duties assigned to the educational officers by the executive bodies makes it almost impossible for them to have time to visit the areas and the child caregivers as they should.

According to four child caregivers, the remoteness of the CDCs was another reason preventing supervisors from visiting regularly. Since CDCs were located quite far from the local government offices, this made it more inconvenient for regular supervision visits or for follow-up sessions. The following statements from two interviewees illustrate this issue:

“The Child Development Centre where I am working is 45 kilometres away from the main road, but it takes 3 hours to travel here and another 3 hours to travel back. This is due to the fact the centre is located up on the mountain and the road is dirt, making it difficult for anyone to visit often.”

(ศูนย์พัฒนาเด็กเล็กที่พี่ทำงานนี้ห่างจากตัวถนนหลัก 45 กิโลเมตร แต่ต้องใช้เวลาในการเดินทางขึ้นมานั้นถึง 3 ชั่วโมงและอีก 3 ชั่วโมงในการเดินทางกลับลงไป เพราะว่าศูนย์อยู่บนเขาและถนนก็เป็นถนนลูกรังทำให้ การเดินทางมาที่นี่ค่อนข้างลำบาก) (Child caregiver 6)

“Traveling to the centre is another issue. It will be difficult and very dangerous if a driver is not familiar with the journey. During the rainy season, the storms hit this area and the centre will be literally closed. I mean nobody can go in

and out of the village. The parents do not want to take their children to the Centre while it is raining.”

(การเดินทางมาที่ศูนย์ก็เป็นอีกหนึ่งปัญหา เนื่องจากการเดินทางค่อนข้างยากลำบากและอันตรายมากสำหรับคนขับที่ไม่ชินกับหนทาง ถ้าช่วงฝนตกพายุลมเข้าในพื้นที่นี้ ศูนย์จะถูกปิดโดยปริยายเพราะไม่มีใครสามารถที่จะเข้าหรือออกจากหมู่บ้าน ไปไหนได้เลย พ่อแม่ก็ไม่อยากพาลูกตากฝนมาส่งที่ศูนย์)
(Child caregiver 22)

These statements demonstrate that the distance of travel to the CDCs' location in remote areas constituted another obstacle to the effective management of the CDCs. These geographic impediments to educational officers making regular visits to the centres potentially creates misunderstandings concerning issues challenging the practitioners within their work.

7.2.3 Consideration of child caregivers' performances regarding promotion and welfare

In terms of teaching and learning in CDCs, young learners are taught the same as in comparable state or private schools and the practitioners in the centres have the same qualifications as those in the equivalent schools. In contrast, the child caregivers perform under the jurisdiction of the Local Administrative Organization (LAO) under DLA, which divides the providers into two types, including civil servants and hired employees. In this study, there were twenty-three child caregivers interviewed, comprising nine local government civil servants and fourteen employees of local authorities.

Child caregivers who have been recruited as civil servants, receive welfare from the department, which consists of tuition fees for their children and medical expenses for them and their children. Any incremental salary increases, or bonuses will be assessed by the executives in each area. However, the evaluation results will be transferred for a final decision to be made by the chief executives of the local administration. The following are the responses of the interviewees concerning evaluation:

“In the assessment of the agency’s performance, a committee will be appointed to evaluate the work at the centre. There will be one executive officer, one academic educator, and an external teaching staff member who will come to the centre in order to observe the process of teaching and caring for the young learners. The evaluation will be held for the whole day and I have to do the evaluation documents as well.”

(ในการประเมินของหน่วยงาน จะมีคณะกรรมการมาประเมินที่ศูนย์ ก็จะมีผู้บริหาร นักวิชาการ และก็ครูจากโรงเรียนที่ได้รับการแต่งตั้ง มาประเมินที่ เพื่อที่จะสังเกต การจัดการเรียนการสอนและการดูแลเด็ก คณะกรรมการจะมาประเมินตลอดทั้งวัน และที่จะต้องทำเอกสารประกอบการประเมินด้วย) (Child caregiver 3)

“I have to prepare documents to assess work for promotion. The documents include teaching materials and documentary evidence of training, which I have to present demonstrating my abilities to the evaluators and reasons for requesting a promotion. At this point, an educational officer will come to observe my teaching and learning materials as well.”

(ที่ต้องเตรียมเอกสารในการประเมินเพื่อเลื่อนชั้น เอกสารก็จะมีหลักฐานที่เกี่ยวกับการจัดการเรียนการสอน การอบรมต่างๆ ซึ่งจะต้องเป็นเอกสารที่จะโชว์ให้เห็นถึง

ความสามารถของการทำงานของพี่ ก็จะมีนักวิชาการ เข้ามาสั่งเกณฑ์การจัดการ
เรียนการสอน การใช้สื่อด้วย) (Child caregiver 11)

The educational officers noted that the issue of salary promotion is mainly considered by the local administrators. The process for awarding a promotion included a detailed consideration of the practitioners' work, both previously and currently, during the academic year. The process of evaluation also included an assessment of the use of innovative teaching materials, evidence of practitioners training certifications, and demonstrating that knowledge from training has been applied to increase the young learner's development and learning. These criteria were only used for those hired as civil servants and the process was then approved by the chief executive of agencies. The methods used to evaluate practitioners for promotion is discussed by two interviewees who state:

"I will be the one who will consider the work of the child caregiver according to the young learners' development and this includes listening to the parents' feedback as well. Also, it includes assessing the relationship between the child caregivers and the community."

(พี่จะเป็นคนพิจารณาการทำงานของผู้ดูแลเด็กซึ่งก็จะดูให้สอดคล้องกับพัฒนาการ
ของวัยของเด็ก และรวมถึงพี่ก็จะฟังความคิดเห็นของผู้ปกครองด้วยเช่นเดียวกัน
และก็จะดูถึงความสัมพันธ์ที่ผู้ดูแลเด็กมีต่อชุมชนด้วย) (Educational officer 2)

"There will be an assessment of work twice a year, in March and October. The evaluation will mostly observe a child caregiver's performance according to teaching, caring, and innovations used in the development of young learners."

*(ที่นี่จะมีการประเมินการทำงานปีละสองครั้ง คือเดือนมีนาคมและตุลาคม
การประเมินก็จะเน้นไปที่การสังเกตการทำงานของผู้ดูแลเด็กเกี่ยวกับการจัดการ
เรียนการสอน การดูแลเด็ก การใช้นวัตกรรมเพื่อการพัฒนาเด็ก)
(Educational officer 3)*

In comparison the child caregivers employed directly by the local government were hired under an employment contract in the role of childcare workers, and their contracts have to be renewed yearly and every four years which depended on the form of employment contract, whereas the official practitioners have no contract. Since most of the hired child caregivers lived in the areas where the centres were located, they were willing to continue to work according to these terms and conditions.

The employed caregivers revealed that they received a lower salary than practitioners who were recruited as civil servants, despite the fact that they did the same duties. Their salary is paid from the local government budget expenditure. Additionally, employed child caregivers also have their work evaluated, although assessment is used to have employment contracts extended rather than for promotion. This evaluation is generally less complicated and requires less preparation of documents by the practitioners than the civil service providers. The practitioners were evaluated by academic officers who advised executives about whether or not to renew contracts. Employed caregivers all wished to demonstrate their value as teaching practitioners to the local authorities in order to secure permanent employment and associated welfare benefits. This point is illustrated in the following statements:

“I have been working as a child caregiver for more than 10 years, in the position of an employee on a contract renewal every 4 years, but the local government has not yet offered me a government official position.”

(พี่ทำงานเป็นผู้ดูแลเด็กมามากกว่า 10 ปีแล้ว ตำแหน่งของพี่คือพนักงานจ้าง ซึ่งจะมีการทำสัญญาทุก 4 ปี ทางอบต.ก็ไม่มีวิเวกที่จะบรรจุให้พี่เป็น ข้าราชการเลย)
(Child caregiver 2)

“I have been working at this kind of duty for more than 10 years, however, it seems that there is no opportunity for me to be promoted to the position of a government official.”

(พี่ทำงานนี้มามากกว่า 10 ปี และคิดเหมือนว่าจะไม่มีโอกาสที่จะ เป็นข้าราชการ เหมือนคนอื่นเขา) (Child caregiver 17)

“An educational officer will come to the centre to evaluate my performance and propose to the chief of the agency to renew the contract. Once it is at the end of 4 years, the staff will contact and inform me. My second term renewed contract will come in the next month.”

(นักวิชาการจะเข้ามาประเมินการทำงานที่ศูนย์ และก็จะเสนอไปที่นายกอบต. เพื่อที่จะต่อสัญญาจ้างพี่ พอครบกำหนด 4 ปี ทางเจ้าหน้าที่ก็จะแจ้งให้พี่ทราบ พี่จะต่อสัญญารอบที่ 2 เดือนหน้านี่ละ) (Child caregiver 18)

The child caregivers who held positions as employees also mentioned they received welfare from the Social Security Office rather than the Department of Local Administration. Therefore, they only received medical benefits for themselves. Employee caregivers felt they received unequal treatment, although they had the same work obligations, they only receive limited welfare. In terms of tuition fees and medical

expenses for their children, they do not receive the same as government officials, which they used to highlight the injustice and insecurity of the job:

“The benefits I have received are only medical expenses for myself and it depends on the contract. If the local authority does not renew the contract, I cannot get anything.”

(สวัสดิการที่พี่ได้รับก็จะมีแค่เบิกค่ารักษาพยาบาล ได้แต่ก็ขึ้นอยู่กับสัญญาจ้างด้วย ถ้าทางหน่วยงานไม่จ้างพี่ต่อพี่ก็ทำอะไรไม่ได้) (Child caregiver 2)

“Now I am working in the position of a hired employee and have my contract renewed every 4 years. I cannot withdraw tuition fees for my child. There are only the medical payments for me. If the local agency appointed me to the position of a civil servant, it would be better because it is more secure.”

(ตอนนี้พี่ทำงานในตำแหน่งลูกจ้างของอบต. ทำสัญญาจ้างทุก 4 ปี พี่เบิกค่าเล่าเรียนของลูกพี่ไม่ได้ พี่เบิกได้แค่ค่ารักษาพยาบาลของตัวเองเท่านั้น ถ้าทางอบต.เปิดตำแหน่งบรรจุให้พี่เป็นข้าราชการ ก็จะดีมากมาย พี่ก็จะคุ้มกันคงมากกว่านี้) (Child caregiver 22)

The employed child caregivers received a fixed rate salary, which the DLA allocated to the local authority. The local government does not usually raise the salaries of child caregivers due to the department’s allocation of the budget. As a result, any extra money the practitioners receive is allocated as a bonus and is only given when budget constraints allow.

“The employed child caregiver will not get a raised salary because the local government already pays an amount according to what the DLA has determined. In some years, the child caregiver will receive some extra money as a bonus, if the agency has money left from the annual management and the chief of the agency approves giving it to the employees for the New Year.”

(ผู้ดูแลเด็กที่เป็นลูกจ้างจะไม่มี加薪เงินเดือน เนื่องจากทางหน่วยงาน ของเราจ่ายเงินเดือนเต็มอัตราที่กรมส่งเสริมการปกครองส่วนท้องถิ่นกำหนดมาให้ แต่ในบางปี เขาก็จะได้รับเงินพิเศษเป็นโบนัส ถ้าเงินงบประมาณต่างๆ ของอบต. เหลือจากการใช้จ่าย และถ้านายกอบต. อนุมัติที่จะจ่ายให้ลูกน้องในช่วงของปีใหม่)

(Educational officer 7)

In conclusion, insufficient support from local authorities can be seen as a significant issue underpinning child caregivers’ performance quality. Most authorities focus less on education than on public services in order to try to increase the quality of life among rural people. In other words, they tend to emphasize concrete things rather than abstract ones, since the latter changes take much longer to become evident, even though they are more worthwhile for the children in the long run. Furthermore, the impact of apparent disequilibrium or inequality upon child caregivers’ positions and performances remains a contentious rather than settled issue, based upon the available interview-based evidence. Participants merely mentioned that the civil servant practitioners had distinct advantages over the local government casual employees without further elaboration.

7.3 The child caregivers’ performances as perceived by the educational officers

Educational officers have a duty to conduct the LAO’s educational management and supervise the work of child caregivers, making sure they performed in accordance with

the standards established by the DLA. This is to ensure that the development and education of young children is sufficiently appropriate and efficient. Educational officers' roles are crucial for identifying educational needs, in particular, within those isolated, mountainous and remote rural areas. In these instances, the educational officers' roles need to be more supportive in terms of encouraging the practitioners' in their performances; such encouragement in turn should look to help children who live among scarce learning resources fulfill their potential.

7.3.1 The educational officers' roles

Seven of the educational officers perceived themselves to have a duty to support and promote the educational management of the CDCs. If a policy document is issued by the DLA relating to the CDCs and child caregivers, the educational officers are the ones responsible for implementing procedures. The following are the educational officers' verbatim responses:

“If there are issues to deal with financial matters, I submit the proposal to the executives to approve. When it comes to the purchase of teaching aids and materials, I normally ask for the practitioner's opinions on what they want before ordering the materials.”

(ถ้ามีเรื่องเกี่ยวกับพวกงบประมาณ พี่ก็จะส่งต่อให้ทางผู้บริหารอนุมัติ แต่ถ้าเป็นเรื่องของการซื้ออุปกรณ์การเรียนการสอน พี่ก็จะถามผู้ดูแลเด็กก่อนว่าพวกเขาต้องการอะไรก่อนที่จะสั่งของ) (Educational officer 2)

“I work here as a coordinator. When there are projects or any announcements from the central and local government, it will be my responsibility to inform the child caregivers.

(ผมทำงานในฐานะผู้ประสานงาน เวลามีโครงการต่างๆ ที่จะต้องแจ้งให้ทางศูนย์ หรือทางหน่วยงานทราบ ผมก็จะเป็นคนประสานแจ้งให้ทางผู้ดูแลเด็กได้ทราบ)
(Educational officer 4)

In addition, educational officers have been asked about their satisfaction with regard to their duties supervising and educational management of the LAOs. Three of the officers claimed they were very satisfied with their work and two of the respondents stated that:

“I am happy with my work as I have a chance to help child caregivers with all necessary requirements. The fact that I myself used to be a child caregiver at the DCD helps me understand the problems and obstacles that the child caregiver encounters.”

(ผมมีความสุขในงานที่ทำนะ เพราะที่มีโอกาสที่จะช่วยเหลือผู้ดูแลเด็กในเรื่องต่างๆ ที่พอจะช่วยได้ คือจริงแล้วพี่เคยเป็นผู้ดูแลเด็กในศูนย์พัฒนาเด็กเล็ก มาก่อน ซึ่งมันช่วยให้พี่เข้าใจถึงปัญหาและอุปสรรคต่างๆ ที่พวกเขาต้องเผชิญ)
(Educational officer 3)

“I am very satisfied with my work. I personally like the fact that this job involves social services and communication with local people. I am delighted not only because I can help and facilitate others, but I can also manage the service and ensure everything runs smoothly. My responsibilities also include paperwork and the financial management of the Centre.”

*(ผมพอใจในการทำงานตรงจุดนี้ โดยส่วนตัวผมชอบที่งานนี้ได้เข้าไปมีส่วนร่วม
ในการบริการสังคมและชุมชนท้องถิ่นอยู่แล้ว ไม่เพียงแต่ได้อำนาจความสะดวก
แต่ก็ยังได้จัดการในเรื่องต่างๆ เอง ซึ่งจะได้มั่นใจได้ว่าทุกอย่างจะเป็นไป
อย่างราบรื่น หน้าที่ของผมก็จะรวมถึงในเรื่องของเอกสารการเบิกจ่ายต่างๆ
ให้ทางศูนย์ด้วย) (Educational officer 4)*

Four educational officers mentioned that they were satisfied with their work to a certain level. These officers believed they could do a better job if the executives paid more attention and valued the importance of education. They indicated:

“I personally want to help practitioners in many ways including recruiting those who have been working for a long time as government officials.”

(โดยส่วนตัวที่ต้องการที่จะช่วยเหลือผู้ดูแลเด็กให้มากกว่านี้ ซึ่งก็รวมถึงการที่จะช่วยให้คนที่ทำงานมาหลายปีได้เข้าบรรจุเป็นข้าราชการด้วย) (Educational 2)

A further challenge which the educational officers identified concerned CDC budget allocation. The educational officers do not have the authority to make budgetary decisions, but rather the local government requires that proposals for essential materials be submitted to them with the executive being able to reject requests for funds allocation at their discretion. This is a major issue impacting the work of educational officers, as stated below:

“I know the Centre needs maintenance due to the fact that it has been in use for more than ten years. I have already proposed this issue to the executive body, but it was rejected. Unluckily, most of the projects I proposed to the

management team were turned down and there was nothing else I could do to help.”

(พี่รู้ว่าทางศูนย์ต้องการซ่อมแซมหลายจุดเลยเพราะศูนย์นี้ใช้มานานมากกว่า 10 ปี พี่ได้เสนอผู้บริหารไปแล้วแต่ก็โดยปฏิเสธ ซึ่งโครงการส่วนใหญ่ที่พี่เสนอผู้บริหาร ไปก็จะถูกปฏิเสธ และพี่ก็ทำอะไรไม่ได้) (Educational officer 1)

“I did my best but whether the proposals are received and approved or not, will be the executive’s decision.”

(พี่ทำหน้าที่อย่างดีที่สุด ไม่ว่าโครงการที่พี่เสนอจะได้รับอนุมัติหรือไม่ ก็จะขึ้นอยู่กับ การตัดสินใจของผู้บริหารเท่านั้น) (Educational officer 6)

“I am satisfied to a certain extent, but I wish it were better. It is not possible for me to do everything as it depends on the budget from the local government. More importantly, the final decision is in the hands of the executives as to whether or not projects are approved. They allocate the budget for the Centre and I have to accept their decisions.”

(พี่ก็พอใจ ณ ปัจจุบัน แต่ว่าพี่อยากให้ดีกว่านี้ คือมันไม่ง่ายสำหรับพี่จะ ทำทุกอย่าง เพราะมันขึ้นอยู่กับงบประมาณจากทางหน่วยงานต้นสังกัด ที่สำคัญคือ การตัดสินใจสุดท้ายก็จะขึ้นอยู่กับผู้บริหารเท่านั้น ไม่ว่าจะตอบมาว่ายังไงใน ประเด็นของการอนุมัติโครงการหรือการจัดสรรงบประมาณ พี่ได้แต่ต้องยอมรับ) (Educational officer 7)

When the educational officers were asked about the means used to resolve these issues the respondents referred to the senior executive, the official in charge of administration under the local administration organization. The educational officers stated the senior executive is the chief of the LAO and holds absolute authority in managing and approving the budget as well as projects proposed by the staff at the Centres. As such, the

educational officers highlighted that the senior executive’s approval is required for all matters, as stated below:

“The final decision will be made by the executive body, even though I give proposals, if they do not agree, they will refuse. And I do not want to get in trouble with them.”

(การตัดสินใจสุดท้ายจะขึ้นอยู่กับผู้บริหาร ถ้าพวกเขาไม่เห็นด้วยโครงการที่เสนอ ก็จะถูกปฏิเสธและพี่ก็ไม่อยากที่จะมีปัญหาเกี่ยวกับพวกเขา) (Educational officer 4)

“I cannot do much. I have tried to propose ideas for improving the CDC and also to show the executive member that the educational institution needs to be taken care of and maintained. Ultimately it is under their authority.”

(พี่ทำอะไรมากกว่านี้ไม่ได้ พี่พยายามที่จะเสนอความคิดต่างๆ ที่จะพัฒนา ศูนย์พัฒนาเด็กเล็ก และก็เสนอให้ทางผู้บริหารเห็นว่าทางหน่วยงานของเรายังมี สถานศึกษาที่ต้องการการดูแลด้วยนะ) (Educational officer 1)

“When the CDC’s improvement project got rejected by my local authority, I found another solution which was to ask for some support from the local community in order to complete the project.

(เวลาที่ทางโครงการต่างๆ ของทางศูนย์พัฒนาเด็กเล็กถูกปฏิเสธจากทางอบต. พี่ก็จะหาทางอื่นในการแก้ปัญหา นั่น หลักๆก็คือการขอความช่วยเหลือจากทาง ชุมชนเพื่อให้งานนั้นเป็นไปตามเป้าหมาย) (Educational officer 3)

The executive members, particularly the chief of the local government, are in charge of approving the CDCs’ operations and the participants felt that they received inadequate support from their local authorities. Despite this, Thais are encouraged to respect people

in high positions of responsibility and culturally there is much emphasis on avoiding conflict and maintaining social harmony. Therefore, they seek other options in order to complete their requirements.

It is clear that the educational officers have a direct role in promoting and supporting the teaching and learning management of the CDCs. In spite of this, in terms of management, there is an executive of the local government organization who is ultimately in charge.

7.3.2 The educational officers' perceptions of child caregivers' performances

This research involved interviewing seven educational officers about their perceptions and attitudes towards the child caregivers' performances and it was found that all the officers perceived that the child caregivers worked professionally. The following are excerpts of their responses:

“The practitioners are very good at their job. They are very experienced in what they are doing. With both experience and knowledge, they take very good care of the young learners. I have never been worried about this Centre at all.”

(ผู้ดูแลเด็กทำงานได้ดีมาก เขาสองคนมีประสบการณ์ในการทำงานมาก ด้วยประสบการณ์ทำงานและความรู้ที่มีเขาให้การดูแลเด็กได้ เป็นอย่างดีที่ไม่เคยที่จะเป็นกังวลเลย) (Educational officer 1)

“She works very well, and she is determined, enthusiastic, and selfless. Traveling to the Centre by a motorcycle is not easy but she has many years of experience. Although, she is not local, she has been accepted by the people in the area.”

(พี่เขาทำงานได้ดีมาก มีความมุ่งมั่น กระตือรือร้น และไม่มีความเห็นแก่ตัว การเดินทางไปที่ศูนย์โดยรถมอเตอร์ไซด์ไม่ใช่เรื่องง่าย แต่พี่เขาก็ทำแบบนี้ มาหลายปีละนะ พี่เขาไม่ใช่คนในพื้นที่นะแต่เขาก็ได้รับการยอมรับ จากคนในพื้นที่) (Educational officer 4)

“The child caregiver graduated in early years education. She knows the principles of arranging activities for children. In addition, the fact that there are a lot of children at the Centre, no fewer than 25, indicates that parents trust her and let her take care of the children.”

(ผู้ดูแลเด็กเข้าจบการศึกษาเรื่องเกี่ยวกับเด็กมาโดยตรง เขารู้หลักการจัดกิจกรรม และเด็กมาเรียนที่ศูนย์นี้เยอะ ไม่เคยต่ำกว่า 25 คนเลย ก็เหมือนกับว่าผู้ปกครอง ที่นี่ก็ไว้ใจให้เขาดูแลลูกหลาน) (Educational officer 5)

In conclusion, the educational officers work closely with the childcare providers in order to organize and promote local education. The officers also need to help the child caregivers find other solutions to overcome existing barriers. The support from local government is the most significant factor determining the successful operation of the childcare provision.

7.4 Recommendations from educational officers and child caregivers for improving the DLA’s policy and performance guidelines

In terms of the limitations of the DLA’s policy and operations, the child caregivers and educational officers have provided suggestions in order to improve policy and performance guidelines to meet their needs, which the participants considered to increase their work capability. The educational officers suggested that the following

improvements ought to be made: (1) providing clearer criteria relating to finances and ringfencing finances for maintenance; (2) generating new forms of incentives for staff; and (3) some further and different suggestions were made associated to the disbursement procedure.

Firstly, five educational officers mentioned finance for maintenance or for developing the CDC as necessities. Most Centres in rural areas required improvements or additions to meet operational requirements. CDC's normally do not obtain maintenance budgets directly from the DLAs. Rather, it is the local authorities that must allocate the budget from its revenue to the Centre. The Centre must make staff requests as well as budget approval from local government executives, most of which are unfortunately rejected for a number of reasons. In those instances, claims relate to budget non-allocation or the lack of funds on the basis of these having been allocated to other community facilities. Consequently, educational officers and child caregivers have to rely on a good relationship with the people in the community for help; this help comes in the form of physical and financial assistance alike.

In addition, the educational officers stated that it would be helpful if the DLA allocated resources to enable the renovation of CDCs to be undertaken. According to the regulations, the DLA should clearly allocate funding in order to avoid the local government using it to fund other services, as the following statements demonstrate:

“The budget is the main problem here. Additional budget from the local government means almost nothing. What we have to do is ask the parents and the people in our community to help with the tools and equipment, which they already have at home. Any help counts.”

(ศูนย์พัฒนาเด็กเล็กที่นี้จะมีปัญหาในเรื่องของงบประมาณ งบประมาณเพิ่มเติมจากองค์กรปกครองส่วนท้องถิ่นแทบจะไม่มีอะไรมาให้เลย ก็จะขอให้ผู้ปกครองและคนในชุมชนเข้ามาช่วยทำให้ พวกอุปกรณ์ เครื่องมือ พวกเขาก็จะมีอยู่แล้ว ใครมีอะไรที่พอจะช่วยได้พวกเขาก็จะเอามาช่วยกัน) (Educational officer 1)

“I want the DLA to have the budget for the redecoration of the building which according to the regulations comes under the auspices of the local government organization. But sometimes we received the unhelpful answer that the budget does not exist, or the budget is there for other parts of the community.”

(อยากให้ทางกรมส่งเสริมการปกครองส่วนท้องถิ่นมีงบให้ในส่วนของการ ปรับปรุงซ่อมแซมอาคาร ซึ่งตามระเบียบแล้วบส่วนนี้ทางองค์กรปกครองส่วนท้องถิ่นต้องเป็นผู้จัดการให้เรา แต่ว่าบางครั้งก็จะได้รับคำตอบว่างบประมาณ ไม่มี เอาไปทำส่วนอื่นๆ ในชุมชนหมดแล้ว เราก็ต้องขอ ความช่วยเหลือจากทางอื่นก็ คือจะขอความช่วยเหลือจากผู้ปกครอง ไม่ว่าจะเป็นแรงงานหรือเป็นเงินสนับสนุน)
(Educational officer 7)

Secondly, a specific recruitment process ought to be established, which would allow the childcare providers currently employed on a temporary basis to be recruited as government officials. Three educational officers commented that various practitioners had worked in the locality for more than ten years but were still employed as local government employees, complete with associated precariousness of employment. The officers also suggested that the DLA should consider taking appropriate action to recruit child caregivers, many of whom have been working at the Centres for a long time and have qualifications, as government officials. These respondents also noted that if such contracted caregiver employees were to find better employment options and chose to

leave, it would be a big loss for the local authorities. The following are excerpts from interviewee responses:

“The child caregivers here are excellent at their work. With their experience and educational background in early childhood education, I would say they deserve a position as government officials. If they receive a better opportunity at another organization, we will lose qualified staff.”

(ครูที่นี้ทำงานเก่งและจากประสบการณ์และวุฒิการศึกษาทางด้านการศึกษาปฐมวัย เขาควรจะได้รับบรรจุเข้าเป็นข้าราชการ เพราะถ้าเขาไปสอบบรรจุได้ที่หน่วยงานอื่นทางเราก็จะเสียบุคลากรที่มีคุณภาพไป) (Educational officer 1)

“The Sub-District Administrative Organization has opened the examinations for practitioners who want to work as civil servants. Despite this, the process takes a very long time and it is often complicated. Most of the people who have managed to pass the exam are the young practitioners or the new graduates. Those who have been working for a long time often cannot compete with the younger generations, so they miss their chance to be official child caregivers.”

(ทางอบต. ก็เปิดสอบบรรจุเข้าเป็นข้าราชการครู แต่ว่าทำเรื่องนานมากและมีความยุ่งยากพอสมควร และส่วนใหญ่คนที่สอบได้ก็จะเป็นครูรุ่นเด็กๆ ที่จบใหม่ และส่วนครูที่มีประสบการณ์จริง ทำงานมานานก็จะสู้เด็กที่จบใหม่แต่ไม่มีประสบการณ์ ไม่ได้) (Educational officer 3)

“The child caregiver in this Centre is highly experienced in the field. I think the DLA should set up new criteria, which will allow them to be part of the system as a civil servant practitioner. This will encourage better morale among child caregivers who are dedicated and have been working for a long time.”

*(พื้คิดว่ทงกรมส่งเสริมการปกครองส่วนท้องถิ่นควรรที่จะกำหนดเกณฑ์ ในการ
บรรจุครูที่เป็นลูกจ้างที่มีคุณสมบัติเหมาะสมให้เป็นข้าราชการ เพื่อเป็นขวัญและ
กำลังใจให้แก่ครูที่หม่เทกกับการทำงานมานาน) (Educational officer 6)*

Thirdly, two educational officers discussed the latest order from the departments indicating that childcare providers within CDCs will have to carry out the disbursement of resources themselves. The officers believed this order to be impractical on the grounds that it was not easy for the practitioners to perform this task which normally be taken care of by the local government staff. This has caused stress among the practitioners, and the educational officers have stepped in to help in those circumstances where practitioners are not equipped to carry this duty themselves. One educational officer said:

“I want the DLA to reconsider this order. As the department does not provide training on disbursement to the child caregiver, there could be errors or mistakes and it could cause more problems. Besides, the child caregiver already has a lot of responsibilities on their hands.”

*(พื้อยากใ้กรมส่งเสริมการปกครองส่วนท้องถิ่นพิจารณาในเรื่องการที่ใ้ครูดำเนินกา
รในเรื่องเอกสารการเบิกจ่าย เพราะกรมฯ ไม่ได้มีการเปิดอบรมใ้ มีแต่สั่งการ
ลงมาใ้ปฏิบัติ เรื่องเงินงบประมาณถ้เกิดข้อผิดพลาดแล้วจะ เสียหายมาก
และอีกอย่างครูก็มีภาระมาอยู่แล้ว) (Educational officer 2)*

As a result of interviewing twenty-three child caregivers, it was found that the child caregivers had in turn identified three main issues where the DLA could make improvements: (1) opening up positions as government officials to childcare providers who are presently employees of the local government organization; (2) budget allocation

support for improvement and repair of CDCs; and (3) provision of regional training for child caregivers. Of these three main recommendations, the first and second were shared by the educational officers.

With regards to the first issue, fourteen out of twenty-three child caregivers discussed appointing employees of the local authority to civil servant roles. The child caregivers felt they deserved all the welfare they would consequently derive from being civil servants and they wanted a new appropriate strategy, (specific recruitment processes) to enable such transitions. This idea is highlighted in the following accounts:

“I got a scholarship from the DLA to further my study. After graduating with a BA in Early Childhood Education, I have been in this role for seventeen years as an employee of the local agency, but there has been no progression in my career. So, I think the DLA should set up the specific criteria for qualified child caregivers like myself to become civil servants.”

(พี่ได้รับทุนของกรมส่งเสริมการปกครองส่วนท้องถิ่น ไปเรียนจบปริญญาตรี สาขาการศึกษาปฐมวัย ทำงานในหน้าที่นี้มา 17 ปี ตำแหน่งของ พี่คือพนักงานจ้าง ซึ่งก็คือลูกจ้างของอบต. แต่เหมือนทำงานอยู่กับที่ไม่ได้ พัฒนาเลยตลอด 17 ปี ทางกรมน่าจะทำเกณฑ์พิจารณาคุณสมบัติเป็นกรณีพิเศษเพื่อเปิด บรรจุให้คนที่ มีคุณสมบัติแบบพี่นะ) (Child caregiver 2)

“Since I have finished my BA, I have worked here since the opening of the centre as an employee of the local government and that is eleven years. When I ask the executives about becoming a government official child caregiver, I normally receive the same answer: We cannot provide it yet.”

(พี่ทำงานที่ศูนย์นี้มาตั้งแต่ เริ่มเปิดศูนย์พี่ทำมา ตลอด 11 ปี เรียนจบปริญญาตรี ด้านปฐมวัยแล้วก็ยังเป็นพนักงานจ้างของ อบต. อยู่เหมือนเดิม พอถามทางผู้บริหาร

ว่าเมื่อไหร่จะเปิดบรรจุให้เป็น ข้าราชการ ท่านก็บอกว่ายังทำไม่ได้)

(Child caregiver 17)

Secondly, with regards to allocation of budgets for the renovation of the CDCs buildings, eleven out of twenty-three childcare providers suggested that it was essential that the local government allocate a specific budget to support maintenance and renovation of the Centres. Their CDCs had been constructed many years ago and subsequently subject to heavy prolonged usage consequently, CDCs' conditions had deteriorated and left them in need of repair. As discussed, one major issue is that the local authority is currently obliged to set aside amounts of money for other services in the community. The respondents suggested the DLA should therefore allocate a ring-fenced budget for Centres. This should be clearly separated from the local government budget, thus preventing this budget from being used in other ways. As one of the interviewees stated:

“I would like to suggest to the DLA to increase the budget for maintenance and renovations for the Centre as the local authority has never had any budget for us. We must ask for cooperation from the parents and the local residents to help with the repairs.

(เพื่อยากเสนอแนะให้ทางกรมส่งเสริมการปกครองส่วนท้องถิ่นเพิ่มเติมในส่วนของงบประมาณในการปรับปรุง ซ่อมแซม อาคาร และบริเวณศูนย์ เพราะอบต. ของพี่ไม่เคยมีงบในส่วนนี้ให้เลย พี่ก็ต้องขอ ความร่วมมือจากผู้ปกครองและคนในชุมชน มาช่วยซ่อมแซมให้) (Child caregiver 11)

Thirdly, the child caregivers mentioned the training sessions organized by the DLA, which were held in Bangkok. Participants stated that it was, and continued to be, quite

difficult for them to travel and attend the training there. The majority of them could not afford the flight, so they had no choice other than to take buses; such logistical demands made joining the session in the capital inconvenient and time-consuming for them. As mentioned in Chapter Five (section 5.3.2), participants argued that attending training would enhance their knowledge, making it possible to apply this to their lessons, and aligning their practice with the guidelines around education and care of young learners outlined within the DLA's policy and performance documents. The solution to this, according to statements made by seven of the child caregivers interview subjects, would be for training sessions to take place regionally in order. One child caregiver stated:

“I would like to make some suggestions about personal development training. I want the sessions to be organized in the region due to difficulties in travelling because my CDC is located high in the mountains, far from the city.”

(เพื่ออยากจะเสนอแนะในส่วนของการพัฒนาบุคลากร จัดอบรม อยากให้มาจัดตามภูมิภาค เนื่องจากความลำบากในการเดินทาง เพราะศูนย์เราอยู่บนเขาและไกลจากตัวเมืองมาก) (Child caregiver 10)

In some cases, the local government did not have the financial clout to support training or seminars. If the practitioners desired to attend the training sessions, they were required to pay for themselves. The following interviewee specifically mentioned this challenge:

“If the DLA holds the training session near the Centre or in the area, it will help reduce travel expenses. For me, sometimes I pay for my own travel if I

want to attend the training, but on the condition that it is not too excessive and that I can afford it.”

*(ถ้าทางกรมมาจัดอบรมใกล้ๆ ก็จะช่วยลดค่าใช้จ่ายในการเดินทาง บางครั้งถ้าพี่
อยากจะไปอบรมแต่ทางอบต. ไม่สนับสนุน พี่ก็จะออกค่าใช้จ่ายเอง ถ้ามันไม่
มากเกินไป) (child caregiver 13)*

In conclusion, there is evidence that the educational officers and child caregivers are supportive of similar strategies, and consequently are prepared to offer similar suggestions, around the issue of financial support, especially for the maintenance and renovation of the CDCs. In addition, both groups also support the idea of opening positions for childcare providers who are employees of the local government to serve in government positions. For them, this is essential as it will create greater job security. These two issues are the main ones which both the educational officers and the practitioners agreed upon, for the reasons already mentioned.

Despite this, the responses from practitioners regarding the preparation of budget disbursements have not been forthcoming. This is because the power to make decisions lies with local authority executives. The practitioners are not directly concerned about this issue since they do not yet have to take full responsibility for disbursements. With regards to provision of more training and relocation of training sessions, all practitioners interviewed agreed that because of the difficulties in commuting and travelling, these sessions should be held regionally so that child caregivers unable to travel long distances would find it easier to participate in the training sessions.

7.5 Summary

This chapter presented empirical findings aligned to three themes that relate to the second research question and comprised: (1) support from local government executives and educational officers; (2) the child caregivers' performances as perceived by the educational officers; and (3) child caregivers' recommendations for improvement the DLA's policy and performance guidelines.

Firstly, the data revealed that the majority of child caregivers did not receive adequate support from their local government, and, in particular budgetary support. Practitioners needed to seek external support from parents and communities and seemed not to care if the local authorities rejected their requirements. The educational officers confirmed that the main obstacle to child caregivers' practices was the lack of financial contribution from local government. This means the executives' vision for education is of significance with regard to the impact upon child caregivers' performances.

In terms of length of service and the qualifications of the child caregivers, the practitioners who held unofficial positions claimed it was unfair that they performed the same duties but were employed directly by the local government under a fixed-term four-year contract and consequently received less welfare in comparison with the civil servant child caregivers. In conjunction with this, support from the local government can significantly determine the relative efficacy of child caregivers' day-to-day practice.

Secondly, the findings suggest that the educational officers were satisfied with their work supervising the child caregivers. Nevertheless, officers also believed that they could do a better job should executives of LAOs in turn provide more attention to the CDC education. Ostensibly, educational officers' roles included supervising and supporting the practitioners' work in order to meet the aims and objectives of the DLA. In practice,

officers argued, they do not possess the authority to provide full support around practitioners' real requirements.

In terms of administration, the executives of the LAOs have the power to approve and process every matter relating to child caregivers' needs, including the provision of financial and other support. In addition, the educational officers found that the practitioners performed professionally to the best of their ability (given resource availability), invariably utilizing relevant methods in order to provide education and care for the young learners which enhanced learners' development and essential skills.

Finally, the recommendations from the educational officers and child caregivers around improving DLA's policy and performance guidelines were similar concerning in two key areas. The provision of a set budget for the CDCs maintenance was the first suggestion. Respondents suggested that the DLA should clearly allocate funding to the Centres in order to enable renovation of the CDC buildings, along with other needs. Presently, in the latter regard, practitioners critically perceived themselves as receiving inadequate budgetary support from their local authorities. The second suggestion involves creating new criteria for the recruitment of government official child caregivers, especially in respect of child caregivers who continued to be employed on a temporarily through the local government.

Additionally, the educational officers provided another suggestion in reference to the latest assignments' issues by the DLA to the practitioners around expenditure management processes. Prior to these new duties, practitioners already assume a significant number of key duties during the day whose volume frequently let to stress on the part of child caregivers so the officers suggested the DLA should reconsider this order. Finally, the practitioners themselves suggested that the DLA's policy and

performance guidelines could be improved through arrangement of training sessions on a regional basis. This would make them significantly more accessible to practitioners living in rural areas.

Chapter Eight: Discussion and Conclusions

8.1 Introduction

This section draws on the analysis presented in Chapter Five, Six and Seven to discuss some of the main findings of the research. This research, it will be remembered, examines the intricacies of the instructional model for early childhood care and education in rural Thai Child Development Centres (CDCs). The discussion is therefore organised under the following main headings related to three research questions: the role of child caregivers in early childhood care and education, the child caregivers' day-to-day practices in early childhood care and education provision, and the Department of Local Administration's policy and standards on early childhood care and education. Following this, the conclusion then will present in four sections: the original contribution of the research, limitations, professional recommendations and recommendations for future research.

8.2 The role of child caregivers in early childhood care and education in Thailand

In this section, the discussion focuses on the child caregivers' practices within rural Thailand where the majority of the disadvantaged young children are found (Komut, 2015). This discussion presents ideas and formulates a model of 'quality' early childhood care and education for the disadvantaged young children in line with the Thai Ministry of Education's policy that every child in Thailand must have an opportunity to receive a high quality education irrespective of their location and circumstances (MOE, 2015). Conversely, empirically obtained data in this study has demonstrated marked regional disparities in achievement. The significant findings in this section fall into three main

areas: the contribution of child caregivers' performances, the effectiveness of practitioners' practices, and the obstacles to their delivery of educational services in Northern rural Thailand.

8.2.1 The contribution of child caregivers' performances

The discussion in this section is about the child caregivers' perceptions on their day-to-day operation within rural CDCs and the role which child caregivers play in this context. The reason is that this study focuses on what comprises appropriate education and care provision for young learners in preparation for the next level of study and the main factors and challenges which impact on the practitioner's day-to-day performance.

As discussed in Chapter Five (see section 5.3, Chapter Five), my findings show that the child caregivers in this study understand that their core roles within the educational system include considerations of protection, facilitation, pleasure, creation, devotion, care, investigation, and being role models (see Table 5.3). However, it was interesting that the practitioners did not realise themselves as educators who provide education for young learners in educational institutions. In what follows, these main facets will be discussed in further detail.

The research reveals that the learners' parents rely on the child caregivers to look after the children while they are working. It is believed that the children will be safe in the CDCs as the result of what parents perceive to be full engagement in their work on the part of caregivers. The research also revealed that practitioners delivered a warm and safe feeling to children through reassuring them with tactile contact and a smile upon them reaching the Centre. This strategy arises from particular circumstances of hill-tribe children, raised among their highland indigenous communities and thus having limited

opportunities to engage with other people, whether using the Thai language or their own dialect. Such isolation may cause the children to lack confidence when away from their parents and such practices in turn improve the relationship between the practitioners and young children (Bhulpat, 2016). This research argues that greeting, smiling, hugging and gentle, socially permissible tactile contact with learners within these specific contexts cumulatively provides an avenue for developing positive relationships between child caregivers and learners. Provision of such conditions allowed learners to enhance confidence levels, self-esteem, and dignity (Black and William, 1998; Hay, 2015) as well as constituting good learning environments.

In terms of teaching and learning activities, most practitioners were aware of their role as facilitators in preparing materials for organising activities which facilitated children's development and learning. With the shortage of teaching materials, childcare providers had to solve the problem by letting the children work as a group in order to engage with the limited resources at the providers' disposal. Likewise, the child caregivers also took the children out to the village and utilised equipment from within the village setting in their lessons. This in turn constituted salient examples of an early years' activity setting within a disadvantaged CDC location.

This represented the practitioners' knowledge and capability around their ability to adapt to limited available resources. This finding significantly invited the drawing of a conclusion: notably that practitioners recognised the significance of early years' learning processes and the role that engagement with materials played in these processes (Hendrick, 1994; National Institution of Child Health and Human Development (NICHD) Early Childhood Child Care Research Network, 2000). Improvising with limited learning resources and materials, the practitioners identified solutions based on

incorporating accessible material from local communities into their classrooms. These findings contrasted however with Jerajaturapornkul's study (2017) which indicated that child caregivers performed due to the lack of knowledge and CDC-based teaching resources were insufficient to provide appropriate education for the young learners.

Importantly, the child caregivers lived in the same communities as the young children who attended the CDCs, and thus the practitioners knew the children's backgrounds very well. There were occasions when children not only performed in a different manner from their peers but acted inappropriately, for instance shouting, crying without reason, running around while others were engaged in activities; since the practitioners recognised each child's background, they were aware of the causes underpinning those behavioural problems. Consequently, the practitioners knew to deal with the issues from their situational and local knowledge combined with their understanding of early years' theory, applying strategies such as hugging and ignoring. Elicker and Fortner-Wood (1995) who believed that diverse interactions between practitioners and young children bolster young learners' development and proper behaviour and are predicted upon sensitive and reactive interactions.

The study observed that, despite child caregivers working in remote areas and mostly with a shortage of learning resources and a tendency to have to serve as sole practitioners within Centres, they demonstrated a positive and enterprising attitude towards the performance of their duties. They perceived themselves as having an essential role to play in transforming the educational opportunities for young hill tribe children and in turn, through educational access, in providing an improved chance at a higher quality of life. The existence of these beliefs and responsibilities alike was significantly confirmed by direct empirical observation, which found them performing activities using appropriate

expressions and techniques such as smiling, employing a pleasant tone of voice, and creating a friendly environment. This corresponds with qualitative data gathered through the project's interviews which indicated that, by their own accounts, practitioners were very pleased to work as a child caregiver in rural CDCs, located in an environment with a shortage of recourses.

The other significant finding related to the practitioners' performances was found from observations at the beginning of the activity, when the practitioners first demonstrated how to perform activities before joining in the activities with the children. When the practitioners were confident that the children could do activities on their own, they changed their roles into those of supporters. They supported the children when taking part in activities, using stimulating words until all the children had completed the activity (see Chapter Five). It can thus be concluded that the practitioners perceived their roles as focused on improving the young learners' development and learning. They performed every task in an effective manner and promoted perseverance by encouraging the preschoolers to complete the activities they were engaged in.

Interview findings derived from educational officers confirmed that the practitioners under their guidance performed their duties very efficiently, based upon demonstrating the necessary knowledge, ability and capability around early years' development and learning. This was also the case in the study conducted by Tepyorachai and Cheunarrom (2018), whose research engaged with practitioners in the local educational service and revealed that child caregivers perceived their work within the CDCs as important: by delivering proper education and care for early years, they were preparing those learners for their subsequent education. In this current research, it is further found that child caregivers roles involved more than providing education and care for young learners, as

early years education is essential for developing the young children's foundational skills. Practitioners also worked to provide young learners with love, warmth and a caring environment which the learners seem lack of.

There were many roles child caregivers had to play in one day, and they were still able to perform these duties very well. This research study implies that the practitioners' performances can be read as replacing parental roles in some degrees, on the grounds that they assume provision of education and also good care as foundational measures for developing these disadvantaged young children's potential (Udchukwu, 2011; Essary, 2012; Heikka, Halttunen and Waniganayake, 2018). Since most hill tribe parents are uneducated and have very limited knowledge of how to raise their children properly (MOE, 2015; Keawsomnuk, 2016), practitioners consequently assume the dual role of providing proper education and care.

8.2.2 The effectiveness of child caregivers' performances

This section will discuss the effectiveness of practitioners' day-to-day practices. Findings derived from child caregivers' interviews demonstrate the factors that made child caregivers' practices more effective which were mentioned in Chapter Five (section 5.3, table 5.2). They illustrate that when practitioners were asked about the effectiveness of their practices, their responses focused on the *processes* throughout their performances rather than the outcome of the young children' learning.

➤ Collaboration's capability

Firstly, the child caregivers underlined the degree of co-operation on the part of parents and communities as the most important factor for influencing their performances. The

fact that the CDCs were located in the communities precipitated appreciation of education's significance, where signs of excellent cooperation between communities and child caregivers were increasingly visible. Such hypotheses were supported by the data gained from the educational officers, supporting the contention that it was advantageous for Centres on the grounds that communities demonstrated a willingness to participate, including in facilitation services. In turn this support could be seen to boost performances as a whole. The child caregivers focused on the practice process to achieve their aims, even though they mentioned that their local authority provided inadequate support, particularly in terms of financial aid.

Additionally, the child caregivers were in no position to delay or suspend their delivery of education and care for young learners in light of these shortfalls, given that demand remained high and a lead priority. Significantly, they tried to find support from other sources, in the form of cooperation from parents and communities. Fortunately, such engagement proved to be a successful decision. The communities were appreciative of the significant educational provision for the local children and their children would accrue benefits from such a co-operation. They voluntarily collaborated with practitioners around CDCs' operations in order to bolster the efficacy of early years' educational programmes (Preankom and Jindapol, 2017). This finding significantly indicates that the educators' best methods included actively creating opportunities for parents and communities to co-operate with young children-centred activities within the educational institution; parents and communities in turn willingly delivered services when the child caregivers needed their support (Thiamthad, 2016; Tepvorachai and Cheunarrom, 2018).

In terms of the CDCs' operation, central government allowances have underpinned CDCs' educational management. Conversely, as noted earlier, the local government reasoned that there were factors that obstructed the delivery of assistance to the Centres which consequently lead to insufficient funding being allocated for activities at the Centres. The process of budget allocation on the part of the central government, and transferring funds to local authorities for educational management, was found to be relatively complicated. Budgets were allocated to the Centre but could not meet the needs of the practitioners (Buranakanon, 2010; Tumthong et al., 2014). This current study found a gap in the acceptance of receiving insufficient support from local authorities, which will be further discussed later in this chapter (section 8.2). Therefore, the practitioners sought another form of support to help them perform their duties proficiently.

➤ **Relationship building's capability**

As discussed, hill people, whose children make up the majority of those attending CDCs, constitute ethnic minority groups dwelling within relative cultural isolation and employ their own intergroup dialects within daily social practice (as mentioned in Chapter 4) (Sutamongkol, 2006; Kaewnuch, 2010). Three child caregivers examined as part of the current study came from outside of the communities and did not belong to any ethnic groups. Initially, they had to adjust to be in accordance with the local people in order to gain parents' trust whereby they needed to be involved in all traditional events to show their sincere respectfulness. Subsequently, the parents and communities did not hesitate to support the practitioners in the CDCs' operation. This finding shows that the significance of trust from parents and communities' engagement is a vital part of educational institutes' management and practitioners' ability to provide education and care for young children productively (Karakus and Savas, 2012).

Additionally, the findings derived from the cumulative observation confirmed that the parents had a great deal of trust in the practitioners; observations to this extent included conversations between parents and child caregivers when parents brought children to the Centres, as well as a parent being observed dropping their child at the practitioner's house very early in the morning (a residence where the researcher stayed during the observation sessions) with practitioners hosting the child within their home until the parent came to pick up the child in the evening. From this behaviour it can be concluded that the parents sincerely trusted the practitioners, which is consistent with the project's more general thesis around the parents and community providing support to practitioners during activities, with a view to maintaining the quality of educational and care provision for the young learners. Furthermore, the parental association with educational institutions generates benefits to educators in terms of planning and setting applicable objectives for learners (Larocque, Kleiman and Darling, 2011).

➤ **Training attendance's capability**

This research also identified the significance of attending basic training sessions for practitioners to increase their knowledge and understanding with regard to day-to-day practice. This can address one point before moving on, concerning the fact that ten out of twenty-three child caregivers have graduated with a bachelor's degree in early childhood education (see Table 5.2, Chapter Five). As a result of their additional training course attendance, they also acquired knowledge applicable to their classroom practice and, in particular, made the learning experiences for the young learners more professional. The majority of practitioners revealed that they found the opportunity to attend the basic training sessions which were organised by the DLA compelling. The training was a preliminary step in their career and the only opportunity throughout the duration of their

work where they could gain knowledge and understanding around the guidelines regulating the provision of childhood education.

On the other hand, the research revealed that there were also child caregivers who experienced difficulties securing the requisite financial support enabling them to attend training, both in relation to transportation and accommodation. Practitioners' general right to be supported by their local authorities in this regard was therefore compromised. The majority of the practitioners did not receive what might be deemed satisfactory financial support from their local governments in this regard. This issue has also been discussed within several studies (e.g. Kenmok, 2010 cited in Nammanee, Ketsiri and Pakotang, 2014; Selaruk and Asawaphum, 2015), where local administrative organisations failed to grant permission for practitioners to attending training sessions for the reason that there was no supporting budget, or that the budget for this part was not sufficient since the local government had spent the budget on other 'essential' facilities.

Consequently, some practitioners were unable to afford their travel expenses and accommodation costs and hence missed the opportunity to gain this self-development. They now might not be in a position to perform their duties well enough as a result of structural failures or at least priorities established at a higher level. However, in this current research, it was found that some practitioners who wanted to attend the training sessions willingly paid the costs themselves, including accommodation, travelling and, importantly, the substitute caregiver because they perceived the benefits arising from the training were worth it. It is clearly necessary to develop knowledge and understanding of organising learning activities for children in a cost-effective manner (Rhodes and Hennessy, 2001; Burchinal et. al., 2002; UNESCO, 2011).

Some childcare providers also mentioned that they wanted the DLA to inquire about their needs in terms of formulating training topics. They perceived that, stemming from a lack of consultation, the Department constantly provided similar topics which they found repetitive. Therefore, it can be concluded that practitioners realised the significance of attending the training sessions, through which they can gain additional knowledge, which can increase their professional performance to enhance the disadvantaged young children's capacities (Burchinal et. al., 2002), but that the creation and running of these sessions could still be improved.

➤ **Instruction's capability**

Additionally, instructional and practically acquired knowledge of appropriate teaching techniques was mentioned by the practitioners as one key factor determining the efficiency of their practices. The findings significantly found that the practitioners did not focus on the consequences of the young children's learning; rather, they paid more attention to processes during their day-to-day performances relating to development and learning. It is believed that if the practices are appropriate and effective, they would eventually have a positive impact on young learners' development and learning' outcomes. Early years practitioners play an important role in providing education and care for young children. The practitioners' teaching processes are influential in early years' development and learning (Fenech, 2011).

Given the rural location of the CDCs utilised in this study, there was a shortage of learning resources as mentioned earlier (see section 8.2.1). The child caregivers revealed that they normally selected materials accessible from within communities for classroom sessions, sometimes taking children out to do activities outside the classrooms and asking them to wear a tribal dress. These teaching practices showed the practitioner to be focused

upon teaching and learning that brings the lives, communities, traditions and culture of children into teaching and learning activities (Prasartpornsitichoke and Takahashi, 2013), particularly bearing in mind that these children came from hill tribes and thus had their own distinctive cultures. Consequently, the practitioners provided opportunities for the learners to absorb their own identity.

8.2.3 The obstacles to child caregivers' delivery of educational services in Northern rural Thailand

Early years practitioners who worked in the rural CDCs faced a number of challenges leading to struggles for their practice to the fulfilment of disadvantaged young children's learning and development needs. These challenges include the location of, and budgetary constraints to attend training sessions, as discussed in section 8.2.2.

This section discusses the obstacles which practitioners faced in their daily work. The theme most frequently commented on by child caregivers as posing an obstacle in their work was the heavy workloads (as mentioned in Chapter Five, section 5.3). The additional roles that child caregivers mentioned in their interviews were also perceived to impact on the main duties of educational provision and care; these caregiver assertions are in turn substantiated by critical analysis. The practitioners faced workload pressures, thereby not being able to fully focus on supporting young learners' development and learning. These pressures included cleaning, cooking, washing children's dirty clothes, paperwork and expenses (see table 5.4 in Chapter Five).

In addition, this current study further found that not only were local authorities unaware of childcare providers' daily duties, but they also increased their responsibilities by requesting practitioners to get involved with special events organised by local authorities.

This claim was corroborated by educational officers who had formally been practitioners; as a result of their background, they understood the cumulative pressure of multitasking and confirmed practitioners' excessive workloads.

This was also confirmed by the observational work of four practitioners. The practitioners were directly assigned certain tasks, while there were multiple additional tasks to do each day as well. The practitioners had lead responsibilities for teaching and looking after young learners (as the main duty), cleaning the Centre, securing various documents and co-operating with the local authorities when help was needed. The researcher points out that practitioners experienced problems during lunch time, during which they had to cook lunch for the children whilst letting learners play freely. During the observation, children started fighting and the practitioner consequently had to pause their cooking and take care of the situation.

Another example during the observation was child caregivers having to travel to the local government urgently in order to sign documents. Consequently, they had to ask the parents for help during this time of absence. In the unfortunate event that there was nobody to assist, the practitioners had to close the Centre for the duration of their trip. It is clear that the child caregivers were experiencing an overload of tasks. Difficulties were particularly noticeable within Centres that had only one practitioner responsible for handling all these responsibilities (Sueliorm et al., 2008; Torquati et al., 2007). In situations where one practitioner was responsible for coordinating an entire education institution or CDC, it invariably results in an inability to reasonably meet the full requirements relating to the administration of the Centre along with direct childcare and educational commitments. One possible solution could be the recruitment of local residents as practitioner assistants in order to facilitate the work of the practitioners and

to solve the problem of task overloads within Centres (Roa and Sue, 2010; Thianthad, 2016).

Apart from the obstacles relating to workload, there was another considerable obstacle which the child caregivers inevitable had to face; that of language. As previously discussed, the CDCs are located in the high mountainous regions whose residents primarily come from ethnic minorities. They share common features such as religion, culture and, most pertinently here, language. Parents perceived the value of learning the Thai language for their young children, particularly in the context of their children's future education and work opportunities. Despite this, when children were with their parents, they spoke their dialect, largely owing to the parents' lack of fluency in Thai.

Consequently, it was only during the CDCs attendance hours that learners had the opportunity to practice the Thai language. According to Suwannasuan et al.'s (2015) study, the academic management of disadvantaged children whose families live in deprived conditions is identified as a major problem. In conjunction with the diminished educational opportunities resulting from impoverished conditions, Suwannasuan et al. concluded that disadvantaged children are unpracticed in the standard Thai language as the majority originate from ethnic groups and continue to communicate in local dialects. In fact, most of the child caregivers in this current research study were bilingual, which enhanced their ability to deliver instructional provision.

The majority of practitioners (twenty out of twenty-three child caregivers) in this study were fluent in the ethnic languages of young learners; such a linguistic faculty facilitated more effective educational provision (UNESCO, 2011). The learners were not familiar with Thai, so the practitioners had to provide bilingual teaching and support (Wei, 2000). The Thai language was used in combination with the learners' own dialect during basic

communication, storytelling and providing instructions while children were attending the CDCs. Previous findings were consistent with what this current research study has observed in relation to the practitioners' bilingual classroom and general CDC performances. This research therefore notes that a bilingual faculty exhibits evident advantages when it comes to social development on the part of the learners. The young learners appear to acquire better social, cognitive and other education-related skills as well as Thai language abilities, consequently developing a stronger foundation for further education and living (Blalystok, Craik and Luk, 2012).

Conversely, if childcare providers were to only employ Thai speakers within teaching and learning, the young learners would be impaired in their understanding. Regardless of the region in which Thailand's students are situated, as the official language of the country, it is compulsory under the Thai educational system to learn the Thai language and to receive instruction around other areas which is all conducted in Thai.

8.3 Child caregivers' daily practices in early childhood care and education provision

As this study has discussed, early years practitioners are important in the provision of young children's education. Significantly, essential knowledge and skills around developing and caring for early years students are a prerequisite in this regard; practitioners must be adequately professional in their career (Abbott and Rodger, 1994; Gambaro, Stewart and Woldfogel, 2015; Lindon and Brodie, 2016). As detailed in accounts by practitioners involved with this current study, the child caregivers that worked in CDCs had access to the standards and policies that were established by the DLA to ensure that performance around provision of equal and appropriate education and

care for young learners was to an acceptable standard (MOI, 2016). Practitioners' qualifications profile has been enhanced significantly in order to ensure that early years' teaching stages meet the aims and objectives underpinning early years educational services.

8.3.1 The context of management in early years education

This section will discuss the significant findings relating to the curriculum and teaching plan management. It is crucial for educational institutions to have their own school curriculum framework in order to support practitioners' practices and focus on the most significant aspects of young learners' development and learning (Hay, 2015).

This study found that child caregivers had prepared their own school curriculum as determined by the DLA. The practitioners characteristically identified material and cultural resources available within their local area such as customs, cultural uniqueness, local food, and traditional dress as part of the teaching and learning activities in the curriculum. The young children's attention was thus drawn towards independent learning sources contained within their immediate environment. In these cases, awareness of customs was particularly salient; the children are hill tribe children and it is by learning about the specific culture of their own tribe that they therefore gain what might be deemed as the necessary recognition of their identity (Sala, Ruangmontri and Jitnun, 2016; Apriso and Sornphet, 2018). Furthermore, they brought along objects that were accessible in the local area as part of their teaching and learning management and in accordance with curriculum requirements.

During the present study, when discussing teaching plan management in relation to the teaching of the child caregivers, it was found that practitioners prepared *individual*

teaching plans. The practitioners revealed that they created their own teaching plans by implementing the DLA guidelines. In practice, practitioners revealed that they did not organise activities as exactly specified in the teaching plan since the daily activity settings were based on suitability and adjusted according to what child caregivers deemed appropriate for their young learners. Teaching plans were specifically intended to be evidence of their day-to-day practices for evaluation by educational officers and staff as well as to assist with classroom practice. This finding supports the assumption that practitioners did not give priority to strict adherence in regard to the plans laid down in the teaching plans when engaging in teaching. They provided learning activities for early years students by bringing accessible local materials into activity settings.

This was further supported by the direct observations; these confirmed that the practitioners did not pay much attention to the teaching plans, which they had set themselves. Before conducting the observation, the researcher proposed seeing the teaching plans whilst observing the performance of the four selected child caregivers throughout the ten-day period of each practitioner. All practitioners were able to present their teaching plans. However, as became apparent to the researcher after studying these teaching plans before observing their day-to-day teaching performance, all four practitioners failed to perform as defined within the teaching plans. Subsequently, when engaged within verbal reflections, they recognised these gaps and explained that it was very difficult to follow the teaching plans as a result of previously discussed factors relating to unavailable resources and unsatisfactory support from their local government (see section 8.2.1). In conjunction with these structural issues, there were fewer than two practitioners in the class, and some Centres had only one practitioner – a feature which will be further discussed in section 8.3.2 below.

Despite these reasons, it was found that the practitioners attentively performed their duties to provide activities regarding the early years' development and learning levels, even though this might not translate into providing young children with substantially greater opportunities for engaging with various activities and material. Due to the location of the CDCs within rural regions and run mostly without significant attention from local authorities, they could only nurture the early years students deprived of educational and proper care provision.

Ineffective provision was also a matter of concern in Goonchamorin and Phudee's study (2014), which indicated that practitioners failed to understand early years' learning processes and consequently, the instructional materials were not really appropriate for young learners to engage with. Nevertheless, this current research argues that practitioners' ability to shape educational attainment rests not only upon their knowledge and understanding in respect of early years development and learning, but also upon the location of the early years' institutions.

Additionally, the research observations showed that two of the four observed practitioners had set the foundations of early years' developmental training within material providing and guidebook, which delivered by the Department of Health (DOH), relating to assessment of childhood development (see section 6.2 in Chapter Six). This relates to the assessment activities were not mentioned in the school curriculums or teaching plans as provided by these two child caregivers. These practices were constructed and occurred in reference to the DOH's principles around the supervision of child development within the community, including young children studying at the CDCs. The practitioners provided this training so that young children became familiar with the material and instructions and the specific concepts were realised in line with the

training offered (see Photo 6.1 in Chapter Six). This activity encouraged the development and learning of young learners, nevertheless, during the observational period (ten days) the practitioners spent more than an hour each day on this activity, during which children were able to engage in other activities developing alternative skills.

8.3.2 Child caregivers' daily early years learning activities

With regard to the daily activities, most practitioners revealed that they focused on large group activities, starting with the circle activities as morning meeting routines. Child caregivers were a part of the circle activities as well, which began with greeting conversations in order for the children to feel relaxed. Following this, the practitioners used conversations as an opportunity to review the children's learning attainments in relation to the weekly theme, including organising additional activities for children to have fun; such as singing songs and playing games. Besides, they used the instructional materials for constructing appropriate activities within the circle format in order to inspire children's interest in the subject being studied.

Arguably, such activities could also help build good relationships between the children and practitioners, given that practitioners also participated in the circle, albeit through the distinct role relating to guiding group activities through asking leading questions. For children and practitioners to become better acquainted and developing relationships based on trust and affectivity, these activities made up for shortfalls in socialisation and general child-rearing provision within the communities themselves springing from land settlement, communication obstacles and legal status (Kaewnuch, 2010; ONESDB, 2018). That is, such structural factors affected parental engagements with basic government services and precluded them from having dealings with others. The result of

these circle activities also speaks to the power of enhanced young learners' ability to cooperate with one another, improve their self-esteem, and develop their communication skills as well as extracting greater enjoyment from attending the Centres (Lown, 2002; Canney and Byrne, 2006).

The study also found that most activities organised by child caregivers during the day were *large group* activities. This may be explained by the fact that the number of children of each Centre was not large. Significantly, some of the CDCs had only one practitioner to take care of the children, so large group activities were, relatively, easier to manage. Each practitioner had primary teaching activities and was committed to the belief that the young learners benefited from learning by doing activities themselves as acts of self-learning. Importantly, the practitioners played a role as facilitators during the activities. Therefore, the significant findings in this activity regarding the discussion in section 8.3.1 which highlighted that childcare providers did not organise activities according to their teaching plans, do not necessarily mean that practitioners organise inefficient activities. It is apparent that flexibility constitutes one of the key factors for practitioners regarding the consistency of their teaching plans and day-to-day practices.

Essentially, it is reasonable to assume from the available evidence that practitioners arranged activities appropriately, based upon an evaluation of numerous factors and challenges such as the number of children, location, learning resources, available teaching materials, and so on. In this research, practitioners spoke about the limitations on organising learning activities for young children which included the remote location of the CDCs alongside the circumstances that resulted in practitioners being unable to provide diverse teaching and learning materials. Therefore, practitioners chose to apply

existing local materials in terms of organising activities for children which may not be as varied as they ought to be.

The practitioners demonstrated their efforts and intentions around teaching and leading children towards advancing in both development and learning. This is also cited in the work of Panpheng (2017), who found that the practitioners evidenced skills around teaching young children whilst facilitating teaching and learning experiences which were and are transactional. Consequently, Panpheng argued that they applied knowledge to practice to deliver quality education and care to the learners even whilst performing with limited resources.

Nevertheless, the findings identified issues with the childcare providers in terms of organising daily teaching activities. This was particularly pronounced in those circumstances when Centres had a single child caregiver who provided education and care to young children aged between two and five years. Despite the DLA mandating that Centres accept young children from three to five years old, at present most local governments had appointed the DCDs to accept children from the age of two. This practice was attributable to two reasons:

- Firstly, increasing the opportunity to help ease the burden of parents who have to work. In this case, the children should be properly cared for while also developing essential skills.
- Secondly, the school's system accepts young children starting from the age of four. Consequently, most children attending at the Centres reaching the age of four moved to school system, rather than staying at the Centres, which resulted in the number of children being reduced.

These multi-aged children have different developmental requirements for, and relationships with, the learning process, including variable interests in learning, a universal but differential need to learn, differing capacities of concentration, and consequent requirements for different levels and types of close practitioner care (Jensen and Green, 1993; Stone, 2012). Attendee children can be divided into two bands, those aged between two to three years and three to five years. However, due to the limitations of the location and staff numbers, practitioners must provide collective teaching across these age bands. Furthermore, regarding the data obtained from observing practitioners, in the case of two out of four child caregivers, it was found that they were challenged by the issue of mixed-age students. This fact meant difficulties arose in terms of organising activities as part of providing mandated care and education for children of various ages.

When the practitioner performed the same activities, younger children (those aged two) could only concentrate on activities for a short time; in these circumstances, practitioners permitted them to play freely, enabling the practitioner to focus on the older children. Apparently, such an issue might lead to a significant concern whether practitioners would be accurately arranging varied classroom activities in practical situations. The implication provided in this circumstance is to employ more than one practitioner to nurture mixed-age young learners (Suelierm et al., 2008; Roa and Sun, 2010; Apriso and Sornpphet, 2018; Thianthad, 2018), so that the practitioners could divide the groups of learners based on their age range and deliver them the appropriate education and care.

In conjunction with this issue, such independent activities by younger children always caused noise disturbance and attracted attention from the older ones. At that point, practitioners were required to remind younger children to play quietly whilst also encouraging the older children to complete their activities. These circumstances all

represented pedagogic obstacles within the context of there only being one working child caregiver who was responsible for providing teaching duties and care for the mixed-age children.

The CDCs consisting of two practitioners providing education and care to mixed- age groups did not find themselves as troubled, since both staff members helped each other around taking care of the children. In terms of running academic activities, children were divided into two groups: older children (three to five years old) and younger children (younger than three years), whilst both practitioners shared the duties of looking after the learners with one assigned to each group; this allocation of responsibilities in turn caused the work to proceed efficiently.

Additionally, theoretical and empirical evidence from several studies has discerned the value of having mixed-age groups within one classroom (e.g. Jensen and Green, 1993; Simon, 1996; Gray, 2011; Justice et al., 2019); however, these classrooms ought to have more than one practitioner sharing the duties. For instance, Justice et al. (2019) revealed that being part of multi-age groups correlated with the highest improvements in rates of vocabulary acquisition. Gray (2011) further pointed out that mixed-age groups provide broader opportunities for children's development and learning since younger children learn more from older children compared to when the same kinds of social and educational interactions take place solely with their peers.

The data gained from the educational officers in relation to dealing with mixed-age groups, revealed that these circumstances resulted from LAO's administrator visions. It is the policy of executives assigned to the Centre to accept children from various age groups in order to support working parents and ameliorate the problems by providing children's services as mentioned earlier. Originally, when parents had to go to work, they

would be obliged to leave their children with grandparents and without proper care. The CDC was then established for the purpose of providing an appropriate education to children of different ages, together with developing their various skills. Despite this, if the executives are not aware of the problems encountered by practitioners which impact on the learners' development and learning, the education management of the Centre will not be sufficiently enough, even though practitioners put a lot of effort into providing educational administration and childcare. Therefore, the individual circumstances of each CDC should be considered by the local authorities to ensure the provision of appropriate support.

8.3.3 Child caregivers and young learners' relationship building

This section focuses on discussing another area where practitioners' responses were in step with current research on the relationship building between child caregivers and young children. It aims to create a strong learning atmosphere in which children and practitioners gain opportunities to get to know each other better. As explored within this research study, child caregivers emphasised the verbal interaction as the basis for relationship building in order for children to associate learning with a friendly, warm and safe environment as well as a familiar one. This emphasis upon familiarity is in line with the practitioners' discussion regarding their roles in section 8.2.1; these mention the need for both the physical and mental security of children. Practitioners spent long periods of time having conversations with the young learners on their arrival, in order to provide them with a warm welcome. The practitioners also used questions to lead the teaching lessons and the practitioners responded to every question from the learners. This research resonated with the idea that encouraging responsive interactions is essential to engage young learners' curiosity and enhance their learning and the development of good

relationships is a key component of practitioners' effective practices (Kontos and Dunn, 1993; Scroggins and Powers, 2004).

Interestingly, the children attending the CDCs came from hill tribes that use their local language when communicating with each other. Therefore, practitioners from the area will have the advantage of being able to easily communicate with young children, causing children to not feel alienated, but able to communicate with practitioners confidently. Even though some young children and practitioners knew each other before, learners attending the Centre without their parents may begin to feel worried and insecure (as discussed in section 8.2.1). However, upon experiencing the opportunity to speak with the practitioners in the same language, they were able to develop trusting and healthy relationships with practitioners. Consequently, the young children felt safe with the child caregivers without their parents; in turn, this impacts effectively on the teaching and learning management. The instructors were required to use both the local language and the Thai language to communicate with young children, in order for the children to gradually begin to have an understanding of the Thai language, leading to the creation of good interactions between practitioners and early years students.

8.3.4 Expertise and proficiency of child caregivers

The child caregivers worked under the guidelines and standards set by the DLA (DLA, 2016). The subject guidelines and standards are effectively principles that every CDC must follow. As discussed, the Centres that were researched in this study were located within remote areas which had many practical restrictions and obstacles to overcome. These included limitations on budget support, travelling methods, and insufficient

practitioners. How these limitations impacted on the Centre further varied depending on the condition of each Centre's infrastructure and the remoteness of its location.

When the practitioners encountered limitations that could not be avoided, they tried to search for a means by which they could address these and thereby meet their aspirations of supporting young learners' development and learning rather than providing education and care amidst the shortage. For example, as discussed in section 8.2.2 practitioners looked to develop good cooperation with parents and communities to support their requirements in the event of their local authorities failing to deliver sufficient support. As discussed in section 8.2.1, practitioners brought materials that were accessible within their local communities into the classrooms whilst taking the young children on field trips in order to provide various learning resources.

Accordingly, they performed their duties as efficiently as possible in terms of providing education and care, thereby supporting children in their development of knowledge and proficiency. Supporting these conclusions were findings from the interviews with educational officers. These confirmed that the performance of practitioners was in accordance with the policies and standards of operations established by the DLA. The child caregivers had the expertise to work both from their own experience and from knowledge acquired through past courses, resulting in their performance being trusted by parents (see section 8.2.2). Given their ability and knowledge, it is feasible that many could find more stable jobs, such as becoming official teachers in state schools following the successful passing of exams; nevertheless, these practitioners continued to work as employees of the LAO.

Regarding the standard of practitioners' performances specified by the DLA, the practitioners' day-to-day practices in the Centres may conform to all of these standards

as a result of the restrictions already mentioned. However, with respect to the standards of teaching and learning as well as childcare services, based upon data obtained through interviews and by observing the practitioners' performances, it can be legitimately asserted that the practitioners perform very well. This judgement applies to their professionalism as well as their understanding of the principles underpinning young learners' development and learning in each age range. These findings seem to contrast with several studies (e.g. Keenmok, 2010; Jerajaturapornkul, 2017; Sricharatchanya, 2016; Tepyorachai and Cheunarrom, 2018), which indicated that the child caregivers who worked in CDCs lacked the relevant knowledge and understanding required to provide education for early years students, meaning practitioners delivered a low quality of education to young students attending the CDCs.

8.4 The support from local authorities regarding policy and standards on early childhood education and care

This research aims to fill a gap in the literature of early years' provision in respect of in-depth research which focuses on CDCs where education and care are delivered to early years students, particularly in rural communities. The DLA has authorised the LAO to support the CDC's operation (OEC, 2012). The LAO has a key responsibility for supporting early years educational management of the CDCs, which constitutes a basic public service for local children, in various key aspects of service delivery, from the provision of support to the delivery of teaching, the professional training of practitioners, funding, and quality supplements (Sopchokchai, 2001).

8.4.1 General support from executives of local government and educational officers

The local authority's responsibility in early years education is critical for supporting early years practitioners in providing appropriate quality care and education to local young children. In this section, the discussion returns to the support and supervision provided by the local governments, particularly LAO's executive bodies and educational officers, toward CDCs' operation in relation to practitioners' day-to-day practices.

The LAO's executive body's vision and management practices are important and have a direct impact on the performance of practitioners with regards to early years provision of education and care within CDCs. Educational officers are principally responsible for supervising practitioners' activities. These include offering assistance and support for around activities related to educational operation and care for young children attending CDCs. The state government transfers applicable functions as well as financial subsidies to local authorities. Then, local administrators have the freedom to administer improvement and provide public facilities, so the local basic services' procedures must be approved by the local administrative organisation (Komut, 2015; MOI, 2016).

Within this study, practitioners and educational officers agreed that effective management of CDCs, including the practitioners' operations, and receipt of appropriate support from the local authorities, depended on the vision of the executive bodies. Seen as particularly important was the vision of the LAO's chief. This is because all operations falling within the local government's remit must ultimately be approved by the administration (DLA, 2010b). In addition, the variation in degrees and type of support afforded by respective administrations might be explained by the fact that the executives have a four-year term of office and each of them invariably has a different level of interest relating to CDC educational management.

The practitioners revealed that the problems and obstacles which they faced appeared largely to stem from local authorities' administrators lacking understanding of how important early years education is. Problems arose from the absence of priority extended by local administrators to CDC management, and impacted directly upon the practitioners' practices (Boonmee, 2011; Kaenmok, 2010; Gongphet, 2016). Areas affected included curricular formulations, activity management, evaluation of child development, CDC's standards, as well as funding for teaching aids and playgrounds.

As mentioned, educational officers have a direct responsibility for supervising the practitioners in Centre support services. These include responsibility for improving standards of educational provision; monitoring the practitioners' practices; and supporting practitioners in a range of other ways in order to perform efficiently (DLA, 2010b). However, the educational officers noted that they had limited independence to perform their duties because all the necessary support they asked for (CDCs' operation and practitioners' practices support) required the LAO's administrators' approval. Accordingly, the officers disclosed that most of the requirements were rejected, with the main reason always given as the lack of sufficient budget.

With regard to the educational officers' experience, four of the seven officers interviewed had been child caregivers at CDCs, and they consequently understood the situation and the limitations affecting the practitioners' practices. Nevertheless, officers were unable to provide much assistance on the grounds that they were simply acting as intermediaries between the practitioners and the local authorities. As such, officers were unable to independently assist with practitioners' needs in the event of the authorities not valuing the importance of early years education as mentioned above. In addition, educational officers themselves would clearly have liked to provide the requisite support needed for

practitioners to maximise operations of the CDCs. The findings showed that the majority of child caregivers unfortunately encountered problems regarding their day-to-day performances stemming from LAO's administrations' lack of sufficient support. Although, it should also be noted that this study found that practitioners did not appear to mind that they did not receive adequate support from local authorities. This may result from an aspect of the Thai culture in which respect toward those holding position of seniority is high, and people tend to avoid exacerbating a difficult relationship with those socially or professionally above them. The child caregivers thus sought support from local communities and parents to accomplish their requirements (as discussed in section 8.2.2).

Furthermore, childcare providers accordingly claimed that, since local administrators rarely paid a visit to the Centres, it was consequently difficult for LAO's executive bodies to truly understand the conditions and problems encountered by the practitioners. Inpet and Boonsong's (2016) study also suggests that the local administrators should prioritise the CDCs' operations more in relation to other services, particularly the practitioners' performances, in order to drive quality of early years learning within quality of early years education management. If the executives visited the Centres, they could directly observe the actual hindrances that caregivers face and could subsequently provide appropriate resources as requested by the instructors.

Interview findings also revealed that many educational officers had other duties to perform on top of the basic tasks concerning CDC educational management. They did not have much time to observe the childcare providers' day-to-day performances themselves. Accordingly, they relied on the practitioners and believed that they would perform their jobs, including dealing with the difficulties efficiently. Nevertheless, on the

occasion of help being needed by the child caregivers, the educational officers would seek to provide them with practical solutions such as sending requests to the local authorities and contacting the communities around them to assist with the practitioners' needs in case of the authorities rejecting their requests.

This research found that child caregivers did not receive appropriate support from their own LAOs. In terms of budgetary issues, the main budget is allocated came from central government and channeled through the DLA. This was then allocated to LAOs for the purposes of carrying out CDCs' teaching operations and childcare activities. The majority of practitioners stated that the DLA-allocated budget was insufficient, and the local authorities did not provide any additional budget, which they have from income derived from council tax and fees/charges, despite their power to do so. The practitioners believed that their work could be done more efficiently if the administrators of the local government allocated greater priority to the management of early years education and the Centres' operations. This is consistent with the academic officers' interviews. These revealed the main problems of the Centre were founded within the undervaluation of Centres on the part of local governments who did not perceive the benefits of early years education as being particularly fundamental. From the evidence provided it seems that the education operations governing CDCs under the supervision of LAO relied on the executive body's vision and in particular their decisions to approve all requirements providing full support in order to deliver education and care for early years.

Disappointingly, this study found that amongst twenty-three child caregivers working within twelve CDCs, only four practitioners from two CDCs received satisfactory support in terms of budget and equipment necessary for teaching, and where requested, support for early years educational management was potentially forthcoming. The educational

officers supervising these two CDCs further added that their LAO's administrators recognised the importance of early years educational management and regularly allocated additional budgets and other essential support when the practitioners requested them to do so. Thus, it can be concluded that the vision and role of the LAO's administrators constituted a most important and directly impactful factor regarding the CDCs' operations for ensuring the effectiveness of early years educational provision.

Funding support is an essential factor for facilitating improvement in educational management, education and care for local young children in this rural Thai region. Local authorities should be concerned with providing effective monitoring and support arrangements around practitioners' day-to-day practices in order to deliver appropriate care and education for local children whilst improving the quality of early years' programmes (Chinsri, 2009; Komut, 2015; Worain and Rukpanmongkol, 2017)

In terms of performing various activities at the Centres, practitioners will clearly not be able to undertake activities successfully unless supported by the executives. As mentioned above (section 8.2.2), in the cases of those CDCs without proper financial support, requests for support were directed at parents and communities. The study thus posits that receipt of support from LAOs as needed was integral; even in those cases where educational officers wished to provide assistance to practitioners, in reality, they were unable to provide this on the grounds that approval was solely dependent on the executive of the local authorities. The research also found that the LAOs' administrators must provide essential support for early years education, as organized in the form of CDCs, and in doing so recognise practitioners' requirements. This suggestion regards the significance of LAO executives' visions around CDCs' operation and practitioners'

practices as being in line with the results of previous studies (e.g. Donchuanom, 2009; Saninat, 2009; Saengjan, 2015; Sala, Ruangmontri and Jitnun, 2016).

In addition, the child caregivers vocalised other concerns regarding their respective positions as government practitioners, occupying either the position of government officials or of contract practitioners, with the latter employed through the LAO. As previously discussed, this study consisted of twenty-three child caregivers. Nine of them were government officials, with the remaining fourteen employed by their local government on temporary contracts lasting 4 years. Civil servants are accountable for and assessed by LAO's administrators, educational officers and appointed committees that conduct performance evaluations and review salary increases. Conversely, whilst contract practitioners employed by the LAO were also assessed, such assessments solely related to the extension of their employment contracts.

The employed practitioners claimed that regardless of whether they were civil servants or employed practitioners, they were obliged to provide the same education and level of care to young children. Therefore, the employed practitioners who were hired by local government felt a certain inequality in obtaining welfare and security through their work because they received lower salaries and less welfare than the official practitioners. Some of them had worked as contract child caregivers under a local government administration for over ten years, whilst remaining in the same contractual position. This caused them to feel that they were not stable in their work since the contract needed to be renewed every four years as they provided the recommendation to the DLA. This is further discussed in the next section (section 8.4.2). Therefore, if one day the local authority was not to hire them anymore, they would be rendered unemployed.

The educational officer provided additional confirmation that employed practitioners had fewer opportunities for salary increments, since the local government pays salaries according to the rates specified by the DLA. The salary provided to employed practitioners is derived from the local government's income budget; conversely, official practitioners receive more opportunities for salary increases, since these are in compliance with the salary increase rates afforded to government officials working under the DLA. As already discussed, the results showed that the executives' vision and policies affect the CDCs' operations, impacting especially upon resolution of issues pertaining to children providers' performance. Conclusions to be drawn from this include:

- 1) When administrators appreciate the importance of education management of the CDC, they will perceive how and why practitioners are struggling with regard to their day-to-day performances, and thus provide full support for the practitioners' needs whilst granting approval for supplementary requirements.
- 2) Educational officers are responsible for facilitating child caregivers' running of Centres; they consequently deal with various matters related to early years teaching and efficient learning, quality-assurance around educational management, and ensuring young children are nurtured by the CDC. Nevertheless, they did not have as much autonomy as they ought to have in fulfilling these responsibilities. The LAO is authorised to approve the final budgets and various support mechanisms as these correspond to the executive's vision.

This research study therefore posits that the LAO is indubitably authorised by the central government to manage local affairs in order to maximise the benefits for the community, and that it aims to do so according to the principles and standard operating procedures set by the central government. The education management of the CDC is a service

provided by the LAO for the community which seeks to ease parents' burden and allow them to work, thereby meeting their essential financial obligations. Practitioners are recruited by the local authority to perform educational in addition to care duties. They ought therefore to be afforded the opportunity to perform these duties to the best of their abilities (Suethusnaphasit, 2014; Sukhnet and Subruangthong, 2015). Consequently, the executive body should give them comprehensive support and thereby commit to upholding the key role that education management of young children plays in those young people's development.

8.4.2 Strategy choices for improving DLA's policy and performance guidelines

The educational management and care of young children by the CDCs under the DLA throughout the LAOs has specific policies and guidelines formulated and administered by the DLA that practitioners are expected to adhere by (Goonchamorin and Phudee, 2014). As discussed, the practitioners operating in the field faced various problems and challenges whilst educational officers confirmed these problems. Regarding the participants' experiences, they therefore suggested the development of further policies and guidelines in order to make the CDC operation and practitioners' practice more effective. Both child caregivers and educational officers invariably proposed the same two solutions as discussed briefly below.

Firstly, the educational officers and practitioners proposed that the DLA should clarify the budget allocation by determining a funding formula for CDC equipment and maintenance. According to the principles of the LAO, this budget should provide an allocation supporting the work of CDCs, including practitioners' additional requirements. Nevertheless, from this study results demonstrate that practitioners revealed the local

authorities are not amenable to their requests and unable to support, citing insufficient budget or no budget allocated for the resources in question. This periodically causes CDC operations to not meet set objectives and causes difficulties for practitioners in their daily work. It seems that the ignorance of the central government has also resulted in negligence from the local organisations when it came to the education management of the CDCs.

Secondly, the practitioners and educational officers consistently proposed to place childcare provider posts within the category of local government official staff (as mentioned in section 8.2.1) in order to encourage greater career stability for these practitioners. The majority of the practitioners worked as employed child caregivers under the LAO, not as government officials. As mentioned, some of them had bachelor's degrees in early childhood education and had worked in childhood education for more than ten years. They were therefore fully qualified but were nevertheless still not in posts as government officials; a status which adversely impacted upon the stability of their life. If the local government does not re-employ them anymore, they therefore cannot seek any compensation. Furthermore, the welfare benefits associated with this role are not equal to those awarded to government officials. They suggested that the DLA ought to consider determining a special formula in order to promote caregivers to the position of government officials, for instance those child caregivers with full qualifications and ten years of work experience should be confirmed in a post as official practitioner.

Educational officers made further suggestions based upon DLA directives, pertaining to assigning child caregivers responsibility for budget disbursement documents. Educational officers stated that child caregivers were not in a position to execute these responsibilities because of their pre-existing obligations and workload. The DLA

assigned these duties to the practitioners without providing training, which would have enabled them to apply proper procedures regarding completion of documentation. This conclusion corresponded with the results of instructors' interviews which raised this issue, as detailed within section 5.3.2 (Chapter Five); these results specified that the DLA should provide training around practitioners' requirements. This showed that the educational officers were concerned - based upon their prior practitioner experiences - that the practitioners had an inordinate amount of work to do in a day; consequently, should the DLA provide more duties without initial instruction, it would cause problems for them later on.

The practitioners also suggested that additional training be held regionally, since most of this was currently held in Bangkok (as previously discussed in section 5.3.3, Chapter Five). The child caregivers explained that they encountered difficulties with travelling to the city; the Mae Hong Son province is located in the northern part of Thailand within high mountainous terrain, consequently causing travel beyond the area to be lengthy and often treacherous in bad weather. Conversely, on various occasions child caregivers found that they were not awarded financial support from the local authorities even when committing to attend the training in Bangkok; they were therefore expected to pay for the cost themselves. Nevertheless, there was a recognition of the training's beneficial qualities, including the potential for updating knowledge and developing techniques by applying that knowledge within their own classrooms.

Accordingly, the evidence of this study seems to suggest that practitioners and educational officers working in the rural areas were aware of the problematic circumstances in which they worked, including the structural obstacles which impacted and impact on their practices. The absence of sufficient support from the local authorities

was also identified within this current research study. Conversely, the policy makers designing policies and guidelines were often unaware of problems occurring around ground-level operating procedures because of their unfamiliarity with local conditions (Wallance and Athamesara, 2004; Sala, Ruangmontri and Jitnun, 2016). Consequently, the LAO, as local service leaders, have an imperative to support and improve the quality of local communities (Pattaravanich et al., 2005; Kantabutra and Tang, 2006). Such support ought to be predicated upon increased awareness of child caregivers' performance and ability to deliver on their obligations regarding the provision of education and care for the early years students within CDCs.

Chapter Nine: Conclusion

9.1 Introduction

The main aim of this study was to investigate the issues relating to child caregivers' day-to-day practices, knowledge and understanding of disadvantaged young children's development and learning within the Northern Thai rural CDCs, throughout LAOs under the broader supervisory framework of the DLA. The young learners in question were from hill tribe villages whose homes were found within the isolated and mountainous territories of Mae Hong Son Provinces, Thailand. Areas under consideration included the effects of learning resource shortages along with a further examination of the main factors and challenges impacting upon practitioners' performances.

Poor early years educational attainment had not only been correlated with, but causally linked to structural economic disadvantages faced by parents (Arnold and Doctoroff, 2003; Ready, 2010). As a result of financial precarity and dispossession, parents primarily focused on seeking employment rather than sending their young children to school; young children, meanwhile, were likely to require appropriate care and education in order to counteract their geographic, economic and cultural capital-related disadvantages.

Based upon consultation and critical reflection and as discussed in Chapter Three, I chose to utilize a qualitative approach for this research, and obtained data in two ways: firstly, from interviews and secondly, through direct observations at CDCs. The study involved twelve rural CDCs where interviews were carried out with twenty-three child caregivers and seven educational officers, (numbering thirty participants in total) and followed by observations of four practitioners' performances.

This study indicated that the child caregivers who performed under the LAOs had certainly intended to perform their duties judiciously using knowledge, understanding, and skills in order to provide adequate education and care for disadvantaged young learners. Nevertheless, CDCs suffered from an area-specific and funding-related unavailability of learning resources and the child caregivers did not receive sufficient support from local authorities. Furthermore, several key findings emerged over the course of this study, relating to the three research questions that were introduced and discussed in Chapter Two, and which were presented in the discussion section above (sections 8.2, 8.3, 8.4). The following statements therefore present my final conclusions and a discussion of the original contributions of this research project.

9.2 Original contribution of the research

This study aimed to fill a gap in the existing empirical literature concerning Thailand's programme for early years education provision in respect of rural CDCs regarding child caregivers' day-to-day practices. The genuine understanding of the factors and challenges identified in the research findings which impact on child caregivers' performances will provide great opportunities for the DLA to pay more attention to the needs and concerns of child caregivers who work in the form of rural CDCs. This research intends to be of benefit to those rural child caregivers which have thus far not received a great deal of attention from policy providers or academic researchers. Therefore, the practitioners deserve to have the conditions of their work highlighted and explained, and it is important that the DLA considers these in order to develop a genuine understanding of practitioner's situations. This is necessary as these practitioners who worked in the rural educational institutions suffer from a shortage of learning resources whilst they are required to provide quality education and care for underprivileged young learners to the

same standard as practitioners who work in urban areas in fully resourced Centres with materials and adequate budgets.

I reviewed various approaches and existing studies involved in the discussion of Thai child caregivers' practices. It can be concluded that many studies (e.g. Nitain and Keatsiri, 2016; Sricharatchanya, 2016; Buain, 2017; Jerajaturaphornkul, 2017; Thianthad, 2018), which indicated that the practitioners within CDCs have insufficient knowledge and understanding regarding young learners' development and learning. Young children who attended early years provision within CDCs did not receive proper services to develop their leaning and essential skills. The quality of the CDCs' educational programme was identified as being in need of improvement

The findings from this current research project argue, however, that the child caregivers performed their duties with appropriate levels of enthusiasm and relevant knowledge and understanding to effectively provide proper early years education and care. Specifically, the practitioners recognized that their duties working in rural CDCs with disadvantaged learners were not only associated with educational provision. Child caregivers also mentioned eight roles associated with protection, facilitation, pleasure, creation, devotion, care, investigation, and being role models throughout their performances to meet the needs of the young learners. The practitioners also changed parents' perspectives to recognize the value of early years education as important, as the parents were members of isolated and impoverished hill tribe communities, the majority of them were focused on seeking employment and often lacked a cohesive sense of national identity. These parents were therefore frequently fearful of accepting basic services offered by the government and did not understand the advantages of mainstream education for their children.

In terms of teaching and learning sessions, the practitioners improvised activities whilst making appropriate arrangements and adjustments by bringing local materials into classrooms and taking the learners out into the local communities for learning purposes. Child caregivers worked pragmatically according to the context and availability of materials for them each day. As discussed, the practitioners performed their duties in the rural CDCs, which were located in the isolated highland regions, and these Centres frequently suffered from an absence of various learning resources. These circumstances were continuously reflected upon quality of the practitioner's everyday performances regarding early years education and care provision. The findings were derived from interviews and observations in relation to the practitioners' role and their performances showed that the young learners were very well supported by the practitioners.

This finding contributes to the understanding of hill tribe young children education in relation to the performance of child caregivers who work in rural CDCs has never been previously studied. The practitioners commit themselves to working in these areas with the goal of improving those learners' life chances, based upon the conviction that those learners ought to have opportunities to receive quality education and care. Even so, their teaching and care was delivered in a context of many challenges, such as, the shortage of learning resources, language barriers, mixed-age children, overload of work during a day which disrupted the instructors' capability to deliver core and discretionary activities in developing the early years students' essential skills. Additionally, this study adds to our understanding of quality education and care for hill tribe young children by exploring the assimilation of accessible cultural identity into learning activities in order to create opportunities for early years students to learn about their own unique and valuable culture.

This study also contributes towards understanding of the best practice in early years' education in terms of determining the effectiveness of the child caregivers' daily performances. Practitioners highlighted the processes involved in the provision of education and care for early years students and consequently how these processes impacted upon young students' learning outcomes. The cooperation from local communities and learners' parents is one of the most significant factors impacting upon the child caregivers' practices. The practitioners endeavored to create a good relationship with local communities and parents, and resultingly often received a greater degree of support from then the local authorities (as discussed in section 8.4). This finding presents substantial evidence that when confronted with the challenges of limited learning resources and insufficient support from local authorities, the practitioners did not neglect their duties, but instead attempted to resolve these issues through the means of seeking external support to meet requirements in order to provide education and care for early years students.

In terms of local early years education management, CDCs are responsible for providing education and care for young children and gaining support from the DLA through local government. The findings revealed that the practitioners measurably did not receive sufficient support from their local governments and additionally, CDCs were given less attention than other basic services. Different executive bodies exhibited dissimilar levels of attention regarding early years education management. This finding contributes to understandings over how the local government administrators' vision and practices impact on the practitioners' performances. Thus, the persistent work of early years education management within CDCs appears to be effective in changing attitudes of the administrators about defining what are appropriate practices in providing support for CDCs' operations regarding early years educational provision.

9.3 Professional recommendations

In this section, I provide recommendations to the DLA and LAOs who have direct responsibilities for provision of support to those undertaking local education management. Due to disparities within Thailand regarding levels of educational settings, education management within rural area is lower than in city settings (MOE, 2008b; Chongcharoen, 2009; Chanbanchong, 2014, MOE, 2015; Chiengkool, 2018). Consequently, a major aim of this study was to critically analyse the factors and challenges, which impact on the effectiveness of practitioners' practices, particularly in rural CDCs.

This study hopes to improve support and provided benefit to child caregivers who provide education and care to disadvantaged young children dwelling in areas of deprivation, by arguing that educational institutions should be better equipped to provide quality education to students. The satisfactory equipment of educational institutions is specified and defined within central government policy and relates to the problematic of delivering equal of educational provision for all Thai citizens (MOE, 2015).

Recommendations for the Department of Local Administration and Local Administrative Organization

Many challenges were identified within this study, such as the limitations of financial support both from the DLA and LAO. The main struggles and limitations around LAO's support can be divided into two aspects: (1) inequity of promotion and welfare allocation for practitioners; and (2) limitations over support for CDCs' operations and practitioners' performances. The following improvements to the criteria underpinning the DLA and

LAOs' policy and guidelines in terms of early years educational management are suggested:

- The DLA is responsible for the CDCs' operations toward educational and care management for early years students. The Centres are directly supervised by LAOs and child caregivers perform under the authority of the LAO. The most significant administrative measures revolve around determining financial capacity and administrative procedures. Budgetary support largely comes from the DLA and administered by LAOs which allocate resources for the CDCs' operation. Therefore, the DLA should follow up on how the LAOs utilize budgets, particularly with regard to CDCs, which benefit young learners through the provision of education and care programmes and thus requires resources necessary to meet children's basic care and pedagogic demands. In addition, it is recommended that the DLA should provide the LAOs with specific criteria through which budgetary support so the CDC's maintenance can be administered and awarded. Consequently, local authorities should not be able to reject the allocation of additional budgetary support to the CDCs when the practitioners submit properly articulated requests with regards to maintaining Centres and fulfilling their core functions. Alternatively, the Department could determine an allocation criterion against which specific requests for support by Centres is automatically approved.
- In addition, the local authority ought to establish itself a specific criterion with regard to allocating budgets; this system should be based on the authorities' earned income and structured in order to better guarantee support to CDCs' operation regarding to education management.
- In terms of training provisions, the DLA should reconsider organizing key training sessions in each region in order to make it easier for the child caregivers to access the

training. A number of practitioners wish to attend training sessions but are unable to access support from their local authorities. This regionalized training may help them to attend. In conjunction with evaluating training locations, the DLA should provide a training needs assessment programme in order to identify individualized training needs amongst practitioners. A suggested training method would be for suitable peer-driven workshop training formats to be devised in which practitioners are able to share their experiences of implementing teaching techniques and acquire a varied range of methods to employ within their classrooms. Accordingly, this study argues this format of training will become more meaningful and beneficial to practitioners' performances.

- As policy and regulation designer, the DLA should genuinely pay more attention to educational management and other related elements that constitute requisite support. This attention is especially important with regard to deeply understanding overall conditions from a rural perspective and thus maximizing rural capacities in under-served areas. Subsequently, the Department will be able to provide more precise support tailored around practitioners' needs, hopefully serving to reducing the inequality of educational settings.
- The LAOs have complete authority to supervise the education management settings within the CDCs. This administrative capacity is imperative in terms of providing support to CDCs' operation and practitioners' performances. Consequently, LAOs should provide sufficient support in order to develop education in their local community.
- The local authorities should plan and launch a programme of family literacy provision to educate parents in basic Thai language and teach parents how to support their children's learning and care for the children. This in turn will cultivate a highly

cooperative and collaborative approach to improving education for the early years' learners. Accordingly, the parents should be able to provide quality care for their children as well as supporting their learning through communicating with them in the Thai language.

- The local government should consider and allow the educational officers a greater degree of autonomy in enabling an independent judgement of the educational management support required by individual practitioners. As educational officers work closely with the practitioners, they have a clear understanding of the resources necessary for caregiver to perform their duties and the Centres continuing operation, as well as the challenges which confront practitioners

9.4 Recommendations for future research

This section provides a number of recommendations based upon the gaps which I have identified within my research which would thus benefit from further investigation. My research has highlighted the child caregivers' performances regarding underprivileged young learners' development and learning. I have therefore gathered data from the child caregivers and educational officers. In future studies, data gathering, and analysis might prove to be more comprehensive and illuminating if the parents were able to form one of the participant groups within the research study; such research could survey their perspectives in relation to their children's development and learning upon having attended the CDCs.

From the research findings, it was found that many employed practitioners were concerned about their work status as they need to renew their temporary contracts every four years, so these caregivers had unstable working conditions when compared with the

civil servant practitioners. Despite this, the work duties of both groups were similar. Future research may compare employment conditions across other regions in Thailand in combination with an investigation of child caregivers' performances regarding education and care provision for disadvantaged young children within rural CDCs. This may provide significant and varied information such as the factors and challenges, motivations, and different effectiveness of teaching strategies used in practitioners' day-to-day performances.

In addition, this study focused on the child caregivers who worked in the rural CDCs, although I conducted data from both the child caregivers and educational officers, the study appears to investigate only the dimensions of the practitioners' performance as a consequence of the factors and challenges they face in relation to delivering education and caring for underprivileged young learners. In a future study, data gathering, and analysis might prove to be more comprehensive and illuminating if the parents are able to form one of the participant groups within the research study; such research could survey their perceptions. The perceptions of the parents could be investigated in a similar manner to the investigation of practitioners' performances and provide a comprehensive understanding of the challenges faced from different perspectives.

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Appendices

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Observation Field-Notes

Appendix One

Ethical Approval



Ref: ERP2316

24th February 2017

Duangkamol Chongcharoen
School of Social Science and Public Policy
Keele University

Dear Duangkamol,

Re: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Thank you for submitting your revised application for review. I am pleased to inform you that your application has been approved by the Ethics Review Panel.

The following documents have been reviewed and approved by the panel as follows:

Document(s)	Version Number	Date
Letter of Invitation (Officer-Interview)	1.2	January 2017
Information Sheet (Officer-Interview)	1.3	January 2017
Consent Form (Officer)	1.4	January 2017
Consent form for the use of quotes (Officer)	1.5	January 2017
Interview Guide for Officer	1.6	October 2016
Letter of Invitation (Caregiver-Interview)	1.7	November 2016
Information Sheet (Caregiver-Interview)	1.8	January 2017
Consent Form (Caregiver- Interview)	1.9	January 2017
Consent for the use of quotes (Caregiver-Interview)	1.10	January 2017
Interview Guide for Caregiver	1.11	October 2016
Letter of Invitation (Caregiver Observation)	1.12	October 2016
Information Sheet (Caregiver Observation)	1.13	January 2017
Consent Form (Caregiver Observation)	1.14	January 2017
Letter of Invitation (Parent)	1.15	November 2016
Information Sheet (Parent)	1.16	November 2016
Consent Form (Parent on behalf of Children)	1.17	November 2016

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If the fieldwork goes beyond the date stated in your application, **31st July 2017**, or there are any other amendments to your study you must submit an 'application to amend study' form to the ERP administrator at research.governance@keele.ac.uk stating **ERP2** in the subject line of the e-mail. This form is available via <http://www.keele.ac.uk/researchsupport/researchethics/>

If you have any queries, please do not hesitate to contact me via the ERP administrator on research.governance@keele.ac.uk, stating **ERP2** in the subject line of the e-mail.

Yours sincerely

pp *C H Bonnerman*

Dr Colin Rigby
Chair – Ethical Review Panel

CC RI Manager
Supervisor

Appendix Two

Interview Guide for Child Caregiver and Educational Officer

Interview Guide for Child Caregiver

All participants will be informed in advance that their contributions are private and confidential. (Make sure consent is obtained)

Background information

- 1 To begin, I'd like to get some basic information about you. Tell me about yourself?
 - Age
 - Work experience
 - Education, qualification

Section A: The roles of the caregivers within the education system

2. Tell me about your daily routine work?
 - Since when
 - What is your daily routine
 - How do you feel about your routine of work
3. What is your role within education system?
4. If they are going to make the current policy better, what do you think should include or remove from the current policy? Why?
5. Do you feel the curriculum is adequate to bring about developing physical, mental, social and cognitive skills?

Section B: The perceptions of caregivers about their jobs

6. What is your understanding of 'good education' especially in early childhood education? Why?
7. Do you feel that you are adequately trained to do this job? Why?
8. In your opinion, what are children like?
9. What do you think about child's development and learning? Why?

10. How do you feel about your job? Why?

11. Are you motivated to do this job? Why?

Section C: The level of professionalism of caregivers

12. Do you think your role is effective in developing children? Why? and How?

- Physical
- Emotional
- Social
- Intellectual

13. What method do you use for your teaching? Why? and How?

- Inside classroom
- Outside classroom
- Outside Child Development Centre

14. Do you face any challenges you in the process of doing your work and how do you deal with its/them? Why?

15. Do you feel you have the skills as required by the Department of Local Administration to carry out your work?

16. What knowledge and skills levels do the policy and curriculum prescribe of caregivers?

Interview Guide for Educational Officer

All participants will be informed in advance that their contributions are private and confidential. (Make sure consent is obtained)

1. To begin, I'd like to get some basic information about you. Tell me about yourself?
 - Age
 - Work experience
 - Education
2. What is the current practice in your institution?
3. Can you tell me your role in supervising caregivers? Why?
4. Are you satisfied with the caregiver's practice? How? and Why?
5. What are the policy standard in your institution? (In relation to caregiver)
 - What institution provides to caregiver
 - What caregiver provides to institution
6. What is your opinion in relation to caregivers' training? Why?
 - Programme
 - Quality
 - Duration
 - Adequacy
 - Practical
7. What do you think about caregiver's role (in general)? Why?
8. How do you deal with caregiver if they have some problems? (Give some example)
9. What is the criterion for promoting caregivers?
10. What is your understanding of 'good education' especially in early childhood education? Why?

Appendix Three

Invitation Letter for Educational Officer



Dear [participant name], (Officer - Interview)

Letter of invitation to participate in a research

My name is Duangkamol Chongcharoen. I am a PhD student at the School of Social Science and Public Policy, Keele University. I am doing my doctoral degree in education under supervision of Dr. John Howlett (email: j.howlett@keele.ac.uk) and Dr. Lydia Martens (email: l.d.martens@keele.ac.uk). In my research, the main focus is on caregivers' practices in rural Child Development Centres under the Department of Local Administration.

The study's title is: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres.

The general objective of the research is to study perceptions of caregivers regarding how effective caregivers' practices are developing children physical, emotional, social and intellectual skills in Thailand's rural Child Development Centres.

I am contacting you to take part in my study because you are responsible for supervision the caregivers. I would like to interview you about your role, and the interview will take approximately 40 minutes. If you are interesting, I am happy to tell you more about my project, and about the interview I would be conducting with you. If, following this information, you are happy to participate; we would both sign a consent form that clarifies your interest in taking part in my research.

If you have any questions regarding my research, please contact me at d.chongcharoen@keele.ac.uk or my mobile phone number is 08xxxxxxx.

Thank you for your kind cooperation

Your sincerely,

.....

Duangkamol Chongcharoen

Appendix Four

Information Sheet for Educational officer



INFORMATION SHEET (Educational Officer- Interview)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Invitation

You are being invited to participate in the research “**An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres**”. This project is being undertaken by Duangkamol Chongcharoen, a PhD student in the School of Social Science and Public Policy at Keele University (UK). The project is supervised by Dr John Howlett and Dr Lydia Martens. Your contribution will be invaluable and will enrich this study.

Before you decide whether or not you wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. If there is anything that is unclear, and you would like more information, you may contact me via email at d.chongcharoen@keele.ac.uk. or my mobile phone is 08xxxxxxxxxx.

Aims of the Research

The aim of this research is to study perceptions of caregivers regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills in Thailand’s rural Child Development Centres.

Why have I been invited?

You have been invited to participate in this research because you are responsible for supervising the caregiver. Your responses will help the researcher to identify and understand caregivers’ perceptions regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills.

Do I have to take part?

You are free to decide whether you wish to take part or not. If you do decide to take part you will be asked to sign the consent forms. One form is for you to keep and the other is for our records. You are free to withdraw from the study at any point in time during the interviews or within 1 month after completing the interviews by informing the researcher without giving reasons. The records from the interviews made to the point of withdrawal will be destroyed and not used for the purposes of analysis and reporting.

What will happen if I take part?

If you take part in this research, you will then be asked to choose a convenient time for the interview. The interview is expected at least approximately 40 minutes and I will use a digital audio-recorder to capture your responses. The audio data will be transcribed into a textual format for the data analysis. All data will be analysed as part of the research study. Only researcher and research supervisors will have access to the data.

What are the benefits (if any) of taking part?

You will have the opportunity to reflect on your working experience in term of supervision, which will be benefit to the Department of Local Administration in order to develop the policy and curriculum on early childhood education and can be guided for caregivers' practices.

What are the risks (if any) of taking part?

There is no anticipated risk to you as participate in this research because all participants will be informed in advance that your contributions are private and confidential. Moreover, the anonymization techniques will be used to replace personal information.

How will information about me be used?

Data from your interview will be analysed and published as a part of my PhD thesis. It also will be published subsequently as part of research papers in academic journals. All data will be treated as confidential and anonymized.

Who will have access to information about me?

Only the researcher and research supervisor will have access to your personal information. All research data will be anonymized, and consent forms with your name will be stored separately from the data. This data will be saved in the electronic system with password to protect the data. Hardcopies of documentation containing personally identifiable information about you will be

kept secure in a locked cupboard during the period of data collection. All records will be destroyed after five years.

However, I have to work within the confines of current legislation over such matters as privacy and confidentiality, data protection and human rights and so offers of confidentiality may sometimes be overridden by law. For example in circumstances whereby I am concerned over any actual or potential harm to yourself or others I must pass this information to the relevant authorities.

Who is funding and organising the research?

This research is being conducted as a requirement to obtain a PhD degree in the School of Social Science and Public Policy at Keele University. The researcher is funded for her degree by Suan Suanandha Rajabhat University in Thailand.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do her best to answer your questions. You may email Duangkamol Chongcharoen as a researcher at d.chongcharoen@keele.ac.uk or her mobile phone is 08xxxxxxxxx. Alternatively, if you do not wish to contact the researcher, you may contact one of the academic supervisors Dr. John Howlett (j.howlett@keele.ac.uk) or Dr. Lydia Martens (l.d.martens@keele.ac.uk).

If you remain unhappy about the research and/or wish to raise a complaint about any aspect of the way that you have been approached or treated during the course of the study please write to Nicola Leighton who is the University's contact for complaints regarding research at the following address:-

Nicola Leighton
Research Governance Officer
Directorate of Engagement and Partnerships
IC2 Building
Keele University
ST5 5NH
E-mail: [n.leighton@ keele.ac.uk](mailto:n.leighton@keele.ac.uk)
Tel: 01782 733306

Contact for further information

If you have any questions or require any further information, either now or at any time during the study, please contact Duangkamol Chongcharoen at d.chongcharoen@keele.ac.uk. T: xxxxxxxx.

Appendix Five

Consent Form for Educational officer



Consent Form (Educational Officer)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I confirm that I have read and understood the information sheet dated (- - 2016) for the above study and have had the opportunity to ask questions.
2. I understand that my participation is voluntary and that I am free to withdraw within 1 month after completing the interview.
3. I agree to take part in this study.
4. I agree to allow the dataset collected to be used for future research projects.
5. I agree to be contacted about possible participation in future research project.
6. I agree to the interview being audio recorded.

_____	_____	_____
Name of participant	Date	Signature
_____	_____	_____
Researcher	Date	Signature



Consent Form (Officer)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I agree for my quotes to be used.
2. I do not agree for my quotes to be used.

Name of participant

Date

Signature

Researcher

Date

Signature

Appendix Six

Invitation Letter for Child Caregiver (Interview)



Dear [participant name], (Caregiver- Interview)

Letter of invitation to participate in a research

My name is Duangkamol Chongcharoen. I am a PhD student at the School of Social Science and Public Policy, Keele University. I am doing my doctoral degree in education under supervision of Dr. John Howlett (email: j.howlett@keele.ac.uk) and Dr. Lydia Martens (email: l.d.martens@keele.ac.uk). In my research, the main focus is on caregivers' practices in rural Child Development Centres under the Department of Local Administration.

The study's title is: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres.

The general objective of the research is to study perceptions of caregivers regarding how effective caregivers' practices are developing children physical, emotional, social and intellectual skills in Thailand's rural Child Development Centres.

I would like to interview you about your practice, and the interview will take approximately 40 minutes. If you are interested, I am happy to tell you more about my project, and about the interview I would be conducting with you. If, following this information, you are happy to participate, we would both sign a consent form that clarifies your interest in taking part in my research.

If you have any questions regarding my research, please contact me at d.chongcharoen@keele.ac.uk or my mobile phone number is 08xxxxxxx.

Thank you for your kind cooperation

Your sincerely,

.....

Duangkamol Chongcharoen

Appendix Seven

Information Sheet for Child Caregiver (Interview)



INFORMATION SHEET (Child Caregiver - Interview)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Invitation

You are being invited to participate in the research “**An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres**”. This project is being undertaken by Duangkamol Chongcharoen, a PhD student in the School of Social Science and Public Policy at Keele University (UK). The project is supervised by Dr. John Howlett and Dr. Lydia Martens. Your contribution will be invaluable and will enrich this study.

Before you decide whether or not you wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. If there is anything that is unclear, and you would like more information, you may contact me via email at d.chongcharoen@keele.ac.uk. or my mobile phone is 08xxxxxxxxx.

Aims of the Research

The aim of this research is to study perceptions of caregivers regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills in Thailand’s rural Child Development Centres.

Why have I been invited?

You have been invited to participate in this research because of your general role in rural Child Development Centre will help the researcher to identify and understand caregivers’ perceptions regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills. You are invited to express your knowledge and understanding.

Do I have to take part?

You are free to decide whether you wish to take part or not. If you do decide to take part you will be asked to sign the consent forms. One form is for you to keep and the other is for our records. You are free to withdraw from the study at any point in time during the interviews or within 1 month after completing the interviews by informing the researcher without giving reasons. The records from the interviews made to the point of withdrawal will be destroyed, and not used for the purposes of analysis and reporting.

What will happen if I take part?

If you take part in this research, you will then be asked to choose a convenient time for the interview. The interview is expected at least approximately 40 minutes and I will use a digital audio-recorder to capture your responses. The audio data will be transcribed into a textual format for the data analysis. Only researcher and research supervisors will have access to the data.

What are the benefits (if any) of taking part?

You will have the opportunity to reflect on your working experience in the rural Child Development Centre, which will be benefit to the Department of Local Administration in order to develop the policy and curriculum on early childhood education and can be guided for caregivers' practices.

What are the risks (if any) of taking part?

There is no anticipated risk to you as participate in this research because all participants will be informed in advance that your contributions are private and confidential. Moreover, the anonymization techniques will be used to replace personal information.

How will information about me be used?

Data from your interview will be analysed and published as a part of my PhD thesis. It also will be published subsequently as part of research papers in academic journals. All data will be treated as confidential and anonymized.

Who will have access to information about me?

Only the researcher and research supervisor will have access to your personal information. All research data will be anonymized, and consent forms with your name will be stored separately from the data. This data will be saved in the electronic system with password to protect the data. Hardcopies of documentation containing personally identifiable information about you will be kept secure in a locked cupboard during the period of data collection. All records will be destroyed after five years.

However, I have to work within the confines of current legislation over such matters as privacy and confidentiality, data protection and human rights and so offers of confidentiality may sometimes be overridden by law. For example in circumstances whereby I am concerned over any actual or potential harm to yourself or others I must pass this information to the relevant authorities.

Who is funding and organising the research?

This research is being conducted as a requirement to obtain a PhD degree in the School of Social Science and Public Policy at Keele University. The researcher is funded for her degree by Suan Suanandha Rajabhat University in Thailand.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do her best to answer your questions. You may email Duangkamol Chongcharoen as a researcher at d.chongcharoen@keele.ac.uk or her mobile phone is 08xxxxxxxxxx. Alternatively, if you do not wish to contact the researcher, you may contact one of the academic supervisors Dr John Howlett (j.howlett@keele.ac.uk) or Dr Lydia Martens (l.d.martens@keele.ac.uk).

If you remain unhappy about the research and/or wish to raise a complaint about any aspect of the way that you have been approached or treated during the course of the study please write to Nicola Leighton who is the University's contact for complaints regarding research at the following address:-

Nicola Leighton
Research Governance Officer
Directorate of Engagement and Partnerships
IC2 Building
Keele University
ST5 5NH
E-mail: [n.leighton@ keele.ac.uk](mailto:n.leighton@keele.ac.uk)
Tel: 01782 733306

Contact for further information

If you have any questions or require any further information, either now or at any time during the study, please contact Duangkamol Chongcharoen at d.chongcharoen@keele.ac.uk. T: xxxxxxxx.

Appendix Eight

Consent Form for Child Caregiver (Interview)



Consent Form (Child Caregiver - Interview)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I confirm that I have read and understood the information sheet dated (- - 2016) for the above study and have had the opportunity to ask questions.
2. I understand that my participation is voluntary and that I am free to withdraw within 1 month after completing the interview.
3. I agree to take part in this study.
4. I agree to allow the dataset collected to be used for future research projects.
5. I agree to be contacted about possible participation in future research project.
6. I agree to the interview being audio recorded.

Name of participant

Date

Signature

Researcher

Date

Signature



Consent Form (Caregiver - Interview)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I agree for my quotes to be used.
2. I do not agree for my quotes to be used.

Name of participant

Date

Signature

Researcher

Date

Signature

Appendix Nine

Invitation Letter for Child Caregiver (Observation)



Dear [participant name], (Child Caregiver - Observation)

Letter of invitation to participate in a research

My name is Duangkamol Chongcharoen. I am a PhD student at the School of Social Science and Public Policy, Keele University. I am doing my doctoral degree in education under supervision of Dr. John Howlett (email: j.howlett@keele.ac.uk) and Dr. Lydia Martens (email: l.d.martens@keele.ac.uk). In my research, the main focus is on caregivers' practices in rural Child Development Centres under the Department of Local Administration.

The study's title is: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres.

The general objective of the research is to study perceptions of caregivers regarding how effective caregivers' practices are developing children physical, emotional, social and intellectual skills in Thailand's rural Child Development Centres.

I would like to observe your general practice, and the observation will be involved for 10 days. If you are interesting, I am happy to tell you more about my project, and about the observation I would be conducting with you. If, following this information, you are happy to participate, we would both sign a consent form that clarifies your interest in taking part in my research.

If you have any questions regarding my research, please contact me at d.chongcharoen@keele.ac.uk or my mobile phone number is 08xxxxxxx.

Thank you for your kind cooperation

Your sincerely,

.....

Duangkamol Chongcharoen

Appendix Ten

Information Sheet for Child Caregiver (Observation)



INFORMATION SHEET (Child Caregiver - observation)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Invitation

You are being invited to participate in the research “**An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres**”. This project is being undertaken by Duangkamol Chongcharoen, a PhD student in the School of Social Science and Public Policy at Keele University (UK). The project is supervised by Dr. John Howlett and Dr. Lydia Martens. Your contribution will be invaluable and will enrich this study.

Before you decide whether or not you wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. If there is anything that is unclear, and you would like more information, you may contact me via email at d.chongcharoen@keele.ac.uk. or my mobile phone is 08xxxxxxxxx.

Aims of the Research

The aim of this research is to study perceptions of caregivers regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills in Thailand’s rural Child Development Centres.

Why have I been invited?

You have been invited to participate in this research because of your general role in rural Child Development Centre will help the researcher to identify and understand caregivers’ perceptions regarding how effective caregivers’ practices are in developing children’s physical, emotional, social and intellectual skills. You are invited to express your knowledge and understanding from your general role.

Do I have to take part?

You are free to decide whether you wish to take part or not. If you do decide to take part you will be asked to sign the consent forms. One form is for you to keep and the other is for our records. You are free to withdraw from the study at any point in time during the observation or within 1 month after completing the observation by informing the researcher without giving reasons. The field-notes taken from the observations made to the point of withdrawal will be destroyed and not used for the purposes of analysis and reporting.

What will happen if I take part?

If you take part in this research, you will then be observed your general practice as a caregiver for 10 days and the data will be recorded as field-notes. All data will be analysed as part of the research study. Only researcher and research supervisors will have access to the data.

What are the benefits (if any) of taking part?

You will have the opportunity to reflect on your working experience in the rural Child Development Centre, which will be benefit to the Department of Local Administration in order to develop the policy and curriculum on early childhood education and can be guided for caregivers' practices.

What are the risks (if any) of taking part?

There is no anticipated risk to you as participate in this research because all participants will be informed in advance that your contributions are private and confidential. Moreover, the anonymization techniques will be used to replace personal information.

How will information about me be used?

Data from your interview and observation will be analysed and published as a part of my PhD thesis. It also will be published subsequently as part of research papers in academic journals. All data will be treated as confidential and anonymized.

Who will have access to information about me?

Only the researcher and research supervisor will have access to your personal information. All research data will be anonymized, and consent forms with your name will be stored separately from the data. This data will be saved in the electronic system with password to protect the data. Hardcopies of documentation containing personally identifiable information about you will be

kept secure in a locked cupboard during the period of data collection. All records will be destroyed after five years.

However, I have to work within the confines of current legislation over such matters as privacy and confidentiality, data protection and human rights and so offers of confidentiality may sometimes be overridden by law. For example in circumstances whereby I am concerned over any actual or potential harm to yourself or others I must pass this information to the relevant authorities.

Who is funding and organising the research?

This research is being conducted as a requirement to obtain a PhD degree in the School of Social Science and Public Policy at Keele University. The researcher is funded for her degree by Suan Suanandha Rajabhat University in Thailand.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do her best to answer your questions. You may email Duangkamol Chongcharoen as a researcher at d.chongcharoen@keele.ac.uk or her mobile phone is 08xxxxxxxxx. Alternatively, if you do not wish to contact the researcher, you may contact one of the academic supervisors Dr. John Howlett (j.howlett@keele.ac.uk) or Dr. Lydia Martens (l.d.martens@keele.ac.uk).

If you remain unhappy about the research and/or wish to raise a complaint about any aspect of the way that you have been approached or treated during the course of the study please write to Nicola Leighton who is the University's contact for complaints regarding research at the following address:-

Nicola Leighton
Research Governance Officer
Directorate of Engagement and Partnerships
IC2 Building
Keele University
ST5 5NH
E-mail: [n.leighton@ keele.ac.uk](mailto:n.leighton@keele.ac.uk)
Tel: 01782 733306

Contact for further information

If you have any questions or require any further information, either now or at any time during the study, please contact Duangkamol Chongcharoen at d.chongcharoen@keele.ac.uk T: xxxxxxxxxx.

Appendix Eleven

Consent Form for Child Caregiver (Observation)



Consent Form (Child Caregiver - Observation)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I confirm that I have read and understood the information sheet dated (- - 2016)
for the above study and have had the opportunity to ask questions.
2. I understand that my participation is voluntary and that I am free to withdraw within
1 month after completing the observation.
3. I agree to take part in this study.
4. I agree to allow the dataset collected to be used for future research projects.
5. I agree to be contacted about possible participation in future research project
6. I agree to the observation being field notes taken.

Name of participant

Date

Signature

Researcher

Date

Signature

Appendix Twelve

Invitation Letter for Parent



Dear Parent,

Letter of invitation to participate in a research project

My name is Duangkamol Chongcharoen. I am a PhD student at the School of Social Science and Public Policy, Keele University (UK). I write this letter to inform you about my intention to conduct research as part of my doctoral degree. The title of the research is 'An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres'. The main objective of this research is to study perceptions of caregivers regarding how effective caregivers' practices are in developing children's physical, emotional, social and intellectual skills.

The research will involve observation of one caregiver in the Centre during his/her work with children. The aim of the research is not to observe your child in any specific way, though I may be writing up notes on my observation of the work of the caregiver with your child. I am therefore asking your permission for me to observe the work of the caregiver in the classroom attended by your child.

You are free to decide whether you wish to consent your child to involve or not. If you do decide to permit your child to be involved in this study, you will be asked to sign the consent forms instead of your child because your child is very young to give or withdraw his/her consent to research.

If you are unhappy about any aspect of the research and/or you do not wish for your child/children to be involved in any way, please do not hesitate to contact the researcher or the caregiver. Rest assured that no observation will take place if you do not provide your consent. In addition, if you wish to discuss anything about the research or find out more about it, please contact me on d.chongcharoen@keele.ac.uk (email address) or 08xxxxxxx (mobile number).

Your sincerely,

.....

Duangkamol Chongcharoen

Appendix Thirteen
Information Sheet for Parent



INFORMATION SHEET (Parent)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Information

My name is Duangkamol Chongcharoen. I am a PhD student in the School of Social Science and Public Policy at Keele University (UK). I am doing the research in the above title and under supervision of Dr. John Howlett and Dr. Lydia Martens.

Before you decide whether or not you wish your child to involve in this study, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. If there is anything that is unclear, and you would like more information, you may contact me via email at d.chongcharoen@keele.ac.uk. or my mobile phone is 08xxxxxxxxx.

Aims of the Research

The aim of this research is to study perceptions of caregivers regarding how effective caregivers' practices are in developing children's physical, emotional, social and intellectual skills in Thailand's rural Child Development Centres.

Why has my child been involved in this study?

The researcher will examine the caregivers' knowledge, understanding, their general role and aptitude to develop children appropriately. The observation will focus on what actually happens in the rural Child Development centres and interacts between children and caregiver, children's activities in that setting. Thus, your child will be involved in this observation. The researcher will not initiate interaction with children, even though she will observe what caregivers are doing inside and outside the classrooms.

Do I have to consent my child to involve this study?

You are free to decide whether you wish to consent your child to involve or not. If you do decide to permit your child to be involved in this study, you will be asked to sign the consent forms instead of your child because your child is very young to give or withdraw his/her consent to research. One form is for you to keep and the other is for our records.

What will happen if my child is involved in this study?

If your child is involved in this research, your child will then be in the classroom and do the daily setting's activities, meanwhile, the researcher will observe the caregiver in general practice. The researcher will not initiate interaction with children. The observation will take part for 10 days. The data will be recorded as field-notes. All data will be analysed as part of the research study. Only researcher and research supervisors will have access to the data.

What are the benefits (if any) of taking part?

This research will be benefit to the Department of Local Administration in order to develop the policy and curriculum on early childhood education and can be guided for caregivers' practices.

What are the risks (if any) of taking part?

There is no anticipated risk to your child as involve in this research. The data will be recorded as field-notes in the part of what actually happens inside and outside the classroom in contexts of the caregiver's practice. This has no consequences which relate to your child/children.

Who is funding and organising the research?

This research is being conducted as a requirement to obtain a PhD degree in the School of Social Science and Public Policy at Keele University. The researcher is funded for her degree by Suan Suanandha Rajabhat University in Thailand.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do her best to answer your questions. You may email Duangkamol Chongcharoen as a researcher at d.chongcharoen@keele.ac.uk or her mobile phone is 08xxxxxxxxx. Alternatively, if you do not wish to contact the researcher, you may contact one of the academic supervisors Dr. John Howlett (j.howlett@keele.ac.uk) or Dr. Lydia Martens (l.d.martens@keele.ac.uk).

If you remain unhappy about the research and/or wish to raise a complaint about any aspect of the way that you have been approached or treated during the course of the study please write to

Nicola Leighton who is the University's contact for complaints regarding research at the following address:-

Nicola Leighton
Research Governance Officer
Directorate of Engagement and Partnerships
IC2 Building
Keele University
ST5 5NH
E-mail: [n.leighton@ keele.ac.uk](mailto:n.leighton@keele.ac.uk)
Tel: 01782 733306

Contact for further information

If you have any questions or require any further information, either now or at any time during the study, please contact Duangkamol Chongcharoen at d.chongcharoen@keele.ac.uk T: xxxxxxxxxx.

Appendix Fourteen

Consent Form for Parent



Consent Form (parent on behalf of children)

Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres

Name and contact details of Principal Investigator:

Duangkamol Chongcharoen

Email: d.chongcharoen@keele.ac.uk

Keele University, School of Social Science and Public Policy, Staffordshire, ST5 5BG

Please tick box if you agree with the statement

1. I confirm that I have read and understood the information sheet dated (- - 2016) for the above study and have had the opportunity to ask questions.
2. I agree to permit my child to be involved in this study.
3. I do not agree to permit my child to be involved in this study.

_____	_____	_____
Name of participant	Date	Signature
_____	_____	_____
Researcher	Date	Signature

Appendix Fifteen

Poster



Study Title: An Investigation into the Intricacies of the Instructional Model for Early Childhood Education in Rural Thai Child Development Centres.

My name is Duangkamol Chongcharoen as a PhD student at the School of Social Science and Public Policy, Keele University. This study takes part of my doctoral degree in education under supervision of Dr. John Howlett (email: j.howlett@keele.ac.uk) and Dr Lydia Martens (email: l.d.martens@keele.ac.uk).

The main objective of this research is to study perceptions of caregivers regarding how effective of caregivers' practices are in developing children's physical, emotional, social and intellectual skills in Thailand's rural Child Development Centres under the Department of Local Administration's policy and curriculum, which caregivers have to uphold and adhered to practices in order to develop children.

The research will be working with caregivers' practice. She will observe how caregivers' practices in the Child Development Centre for 10 days. If you wish to discuss about the research or find out more information, please contact Duangkamol Chongcharoen on d.chongcharoen@keele.ac.uk (email address) or on 08xxxxxxx (mobile phone number).

Researcher's contacts details: Duangkamol Chongcharoen PhD student, School of Social Science and Public Policy, Keele University, Keele, ST5 5BG.

If you are unhappy about any aspect of the research and/or wish your children not being involved in the observation, please do not be hesitated to contact the researcher or caregiver. In addition, if you have any issues during the course of the study, please write to Nicola Leighton who is the University's contact regarding research at the following address: Nicola Leighton, Research Governance Officer, Research & Enterprise Services, Dorothy Hodgkin Building, Keele University, Keele, ST5 5BG. E-mail: n.leighton@uso.keele.ac.uk; Tel: 071782 733306

Appendix Sixteen

Interview Transcripts of Educational Officer and Child Caregiver

Interviewer : Duangkamol Interviewee : Officer1

Date : 23rd March 2017

Q1: Can you provide some general information about yourself?

OF1: I am 35 years old, graduated with the BA in Early Childhood Education. So far I have been an educational officer for one and a half years. I used to work as a teacher at the Child Development Centre for 10 years and I would say I have more experience as an educational officer than as a teacher. I totally understand that the child caregivers have multiple responsibilities because I was in the position for years before becoming the educational officer.

Q2: What made you change from teaching expertise to becoming an educational officer?

OF1: I wanted to improve myself, so I decided to sit the exam and got lucky. Having worked as a teacher for a while in the past, I could understand more about the teacher's role and duties. And from this understanding, I could provide appropriate assistance and support to teachers. It's my experience as a teacher that helps.

Q3: What are your main responsibilities as an educational officer?

OF1: Well, the main part of my job is to provide support and any relevant assistance to all the teachers of the Child Development Centre. When there is an instruction from the Department of Local Administration, it will be my responsibility to pass the information on to the Child Development Centres, or when there are problems at the centres, either about teaching management or any other related issues, I will try as much as I can within my authority to solve the problems. The final decision is all, however, dependent on the board of director. For example, in the case of requesting teaching equipment or requests regarding maintenance or renovation, we educational officers can only propose the project to the SAO and all we could do is to wait for the approval from the board.

It is unfortunate that most of the requests are not approved and I will have to find other ways to help the teachers and the centres. One of the main supporters for the teacher is the community as well as the children's parents.

In addition, I am also in charge of internal assessment. I am responsible for teaching management and ensuring the teachers can bring out their students' best potential.

Normally the teachers have lesson plans though they are not strictly followed. Instead, they adjust according to the context and I totally understand this. What I will consider is how much they understand the activities and can adjust according to the students' ability. Also, the fact that most students at the centre are hill tribes who cannot speak Thai properly makes it essential for the teachers to speak both Thai and their dialect. And it is my duty to occasionally pay a visit.

Q4: How is the performance of the teachers in your opinion?

OF1: Teachers here are good at their job. They have a lot of experience, a lot more experience than I do. They have been working here for over ten years. They were born and bred here,

and some got the scholarship to study in the university level, which made them highly knowledgeable and experienced. In terms of children's supervision, they also perform their job very well. The children who study with them all are happy. I'm not worried about the activity management held in this centre, as there are two teachers to take care of 10 students or so. Besides, the the children's parents and the teachers know each other very well, making it much easier for the cooperation between the school and the community.

It is the people here. Graduation. Bachelor's degree. Department of scholarship has both knowledge. Both experience He takes care of children quite well. Organized activities for children throughout. Children are happy here. Organizing activities, I'm not worried about this place. Because the children are not much more than ten people but there are two teachers These children are children in the village. Parents know each other with teachers.

What I normally do is to visit and see how the practitioners created the activities and how they look after the young learners once a month. But there are some months that I have a lot of works as instructed by the local authority, and I cannot visit the Centre. Therefore, the practitioner and I always keep contact to see what I can provide in case she needs some support. Every time I go into the field to observe teaching, I see new activities with happy children. The teacher has more than one duty in a day, but she can handle all this and does her best.

Q5: Are you satisfied with the role of the teachers under your supervision?

OF1: I am quite satisfied with their performance. They know their job very well. The practitioners are very good at their job. They are more experienced in what they are doing. With both experience and knowledge, they take very good care of the young learners. I have never been worried about this Centre at all.

Q6: Is there any policy involving or any guidelines from the Department of Local Administration?

OF1: Of course, the Department of Local Administration has provided guidelines for the centre and teachers. They involved child care, teachers' qualifications, plans for developing and training teachers. The teachers have to hold a BA in Early Childhood Education and the Department of Local Administration provides scholarships and grants for those who are interested. Also, there are a number of trainings for teacher development from time to time. In my view, the Department of Local Administration provides appropriate support, but the most important is the vision of the SAO's executives. Even though educational officers agree with the projects or activities of the centre, we cannot do much as the decision is on the SAO's hands. The centre I am in charge of is trying their best to manage the centre themselves, and I am trying to do my best in aiding their activities. One problem is that the condition of the centre does not yet meet the specification; the classroom, the kitchen, or even the surrounding area of the centre are not safe enough for the children. Unfortunately, we can do nothing about this. Previously, the condition was worse; the centre areas were covered with dust, but it was much better since the teacher and parents helped each other build basic road with mortar; other maintenances are helped by the community as the SAO has no budget for such tasks. Though we have budget from the Department of Local Administration, it was insufficient. I know the Centre needs maintenance due to the fact that it has been in use for more than ten years. I have already proposed this issue to the executive body, but it was rejected. Unluckily, most o the project I proposed to the management term were turned down and there was nothing else I could do to help.

Q7: How about rewards or any other welfares for the teachers?

OF1: We do receive some rewards and benefits, but not often. Fringe benefits for us as a teacher will be different from as a government official or a teacher under SAO; a government official normally receives more benefits such as free health care, tuition fee for their children, pay raise under certain conditions. So, we could say job security for a government official is higher when compared to temporarily-employed teachers; they have to renew the contract every 4 years and receive less benefit (only free health care for themselves). The child caregivers here are excellent at their work. With this experience and educational background in early childhood education. I would say they deserve a position as government officials. If they receive a better opportunity at another organization, we will lose qualified staff.

Q8: What is your opinion on the role of the teacher to the agency, the Child Development Centre, and the Department of Local Administration?

OF1: I would say that the teacher works excellently, and by doing so, they have the chance to pay back to their agency. I think they look after the children very well and manage interesting and appropriate activities for their students. Also, the center is located in their own community, and the students are either their children or relatives, making easier for setting up activities. The activities they came up with are well-organized, interesting, and appropriate for the students. This is in contrast to some other centres, which do not organize such activities as held here. Of course, the teachers here are not good at document or administration work, they are excellent in setting up activities. The children here have fun and look forward to coming to the center. The responses from parents are also excellent, not because the teachers are local, but because of what the teacher really does for the centre and the children. However, there are some complaints from the parents

who would say that they do not see any development at all. In fact, the teachers are doing their job and they are paying back to the agency who gave them scholarship to study.

Q9: Will there be any training sessions that the caregiver can participate in?

OF1: Of course, there are some sessions but not often. Actually, it's been quite a while after my last participation. The SAO reasoned that they had no budget for the teachers to join trainings. In my view, this caregiver is always developing her skills; she always searches for information to ensure that organizing activities for the students runs smoothly. In fact, I often see her with new activities with the children.

Q10: What is your opinion about the appropriateness of the trainings held by the the Department of Local Administration?

OF1: Each training lasts approximately 5-7 days depending on courses. I think The Department of Local Administration has chosen topics that are considered useful for teacher development. When these teachers came back from the training, we called the meeting and had discussions about what they had gained from the training. Normally they will be asked the topics and the speakers at the training, most of whom are university professors who are knowledgeable. After the training, teachers reported us what they had gained from the training and I will observe how they work, whether their performances are beneficial for the children or not. As I said it was not often despite some instructions from the Department. Sometimes the SAO reasoned there was no budget and I couldn't do anything. In fact, the reimbursement could be done for personnel development, but the SAO has to support them. In addition, there is also another problem involving. The training organized by the DLA was always placed in BKK and the child caregivers needed to travel almost 2 days to arrive there by bus. Which I believe will be useful if there are held regionally as it will be more convenient for the teachers' traveling.

Q11: What do you think about the caregiver daily responsibilities?

OF1: The main duties for them are to promote child development, take care of children's cleanliness, and oversee activities to improve children's learning. The children here are not aware of their sanitation; they do not even wear shoes and their parents do not care much about this. Another main concern for the teachers is appropriate nutrition for children. The teachers have to cook for the children for the reason of cost; it wouldn't be cost effective to buy food from the merchants considering the 20 Baht per head budget.

Q12: Is there any problem here?

OF1: There is no problem involving teaching management. I think it is good for some extent, but of course, we cannot compare the standard here with the parents. The child caregiver is a local resident. Some learners who study at the Centre are her relatives, therefore it is easier and more convenient for the practitioner to lead various activities each day. The parents believe that then their children are at the centre, they are in good hands. All of the children here are Karen and according to the assessment of children development, the Department of Health will be in charge. Classrooms are mixed-aged classrooms and we are lucky to have one teacher with one assistant each class. I was the one who proposed this to the executives. The administrators acknowledge the problems the child caregiver have to encounter and therefore hire people from the village to help them. This member of staff has been provided with training in teaching and caring for young children as well so that she can fully assist the child caregiver' performance. I have proposed the problem many times until received an approval. I would say the only problem here is the executives' vision on importance of the centre and mostly is related to the budget issue. If the local administrators have their visions on how education is significant to young learners, then, I will do my job easier because I am an educational officer who encourages the community' s educational setting.

Q13: As an educational officer, do you have any suggestions or solutions to the problem?

OF1: I cannot do much. I have tried to propose ideas for improving the CDC and also to show the executive member that the educational institution needs to be taken care of and maintained. Ultimately it is under their authority. The budget is the main problem here. Additional budget from the local government means almost nothing. What we have to do is to ask the parents and the people in our community to help with the tools and equipment, which they already have at home. Any help counts.

Q14: What do you think are the definition of “Quality Education Management”, especially in terms of Early Child Development?

OF1: I think the quality must be clearly seen and education has to be met with the needs of both the government and the community. All of the students here are hill tribes who can rarely speak Thai, and considering this issue, the teachers have done their best. I think they are highly devoted to their job. They did not have to do this good as nobody is monitoring them 24 hours, but they do their job perfectly; they take very good care of the children and provide well-organized teaching and learning experience to children. The parents trust enough to voluntarily leave their children here. Taking everything into consideration, I think they are qualified teachers, who scarify themselves for the children of their own community. With the context of the local of the Centre, there are some management problems. But the children who study here have improved their skills and knowledge. This also shows that the child caregiver is doing her job very well.

Thank you for your time.

Interviewer : Duangkamol Interviewee : Caregiver 2

Date : 24th March 2017

Q1: Can you provide some general information about yourself?

CA2: I am now 34 years old. I have been working as a child caregiver for more than 10 years which is actually 17 years in the position of an employee on a contract renewal every 4 years, but the local government has not yet offered me a government official position. I got a scholarship from the Department of Local Administration to study in the university level and I have now graduated with a bachelor's degree in Early Childhood Education and have obtained the professional teaching certificate. I think the fact that I got a scholarship from the Department of Local Administration was a great opportunity for me. I have gained invaluable knowledge and had the chance to develop myself considerably during my studies.

Q2: How many children are there all together?

CA2: We have 18 children this semester. Here, I am the main caretaker, and there is another assistant working with me. Half of the young children who attend this Centre live with their grandparents because their parents have moved to the city to seek employment. Their grandparents just raise them as they were raised as a child. They will leave the children with the centre during the day while they start working in the field.

Q3: Can you tell us about your daily routines?

CA2: I have tried to arrange a wide variety of activities for the children. I normally do this by setting weekly theme for them, most of which are organized for children on a daily basis are not the same as those written in the whole plan, but I try to arrange them as appropriately as possible. There are adjustments as appropriate each day, but I try to diversify the media and activities, and make sure they achieve the learning objective. The day starts with children gathering and lining in rows to sing the national anthem as seen in all Thai schools, and then the children will do a variety of activities such as meditation, singing the songs, art activities, storytelling, playing with toys, eating and sleeping, reviewing some lessons after sleeping, playing while waiting for their parents to pick them up. Sometimes I would take the children out for a walk in the village. There are times that I bring materials found locally into classroom activities, all of which are consistent with weekly units. Honestly, it is difficult to say. Our centre is far from the community centre. Everything here is rather limited; the building is neither beautiful nor convenient; there is only one room for all activities. I only do what I can for the children, adapting activities and making it suitable for the context of our community.

Q4: What time do the children start arriving at the school?

CA2: The children start arriving at school at around 7 o'clock as that is the time their parents have to start work in the farm. At 8.30 am., the children have morning ceremony: raising the flag and doing morning greetings. Normally, the children are at the centre until around 4pm. though some parents start picking up their children earlier at around half past three or so. In cases that their parents do not show up until late, I would take them home with me and they will wait for their parents there. Sometimes if their parents are too busy to pick them up, I will have to walk them home myself and normally there are grandparents waiting at home.

Q5: As the Child Development Center focuses more on preparing children rather than teaching courses as in other school in the system, do you still think your responsibility is a part of the Thai education system?

CA2: Of course, I still think it is a part of the system. I don't just take care of them while their parents have to work, but I do organize education for children and prepare them for higher education. This is what I consider a part of the education system. I work under the policies of the Ministry of Education, the policies of the national Early Childhood Education, as well as the policies of the Department of Local Administration, which is the agency that directly supervises and supports all the operations within the centre.

Q6: Do you think your work is important to the community in which you live?

CA2: Absolutely. Every kid here goes to a child center before going to school. The children who have undergone a child center will be more ready for the school. Most teachers at the school always say that these children can do many things according to the instructions. Actually, many parents from other villages also want to bring their children to our centre, but whether they can take their children here or not depends on the distance of their villages. I think what I am doing now plays a part in improving the education system. I believe that if children are provided good basis and appropriate care and development, they will grow up with necessary skills and if, by contrast, they do not have sufficient basis, the reverse will occur.

Q7: Do you feel satisfied with your position?

CA2: I would say yes, I have been doing this job for quite a while now. The fact that the centre is not far from my house makes it even more convenient for walking. My life here is

good; I can be with my family who are also local, and I do not have to worry much about any other things. However, the drawback is that there is no opportunity to progress my career nor any job security. I have been convinced by friends to try applying for a position in the government agency. I haven't decided yet as I am still worried about the children here, some of whom I have seen before they were born, and I feel connected to them. I am happy to be contributing to their good foundation for their future.

Q8: Now I want to ask you about the Department of Local Administration as an agency that designates policies and action plans as well as provides various support to the Child Development Center. What would you like to suggest to the agency in order to ensure the efficiency of the policies and all relevant action plans?

CA2: I am quite satisfied with the policies and action plans available now. I think the current specifications and criteria are for the children's benefits. The only main concern for us as the caretakers is about the development of the children. Also, I would like to suggest employing the caretakers who have worked for more than 5 years as government officials. It's about job security. I myself have been working for over ten years but haven't been appointed any position in the government office. I think I am qualified as with all the qualifications and the degree I hold. Besides, I also have the essential experience working with children and parents. I think the Department should consider anyone who have the same qualifications as I do. The department should have special rules for teachers who are qualified as older people who have worked for 17 years as an SAO employee. But acts like a teacher who is every civil servant. The benefits I have received are only medical expenses for myself and it depends on the contract. If the local authority does not renew the contract, so I cannot get any welfare.

Q9: As for the curriculum and lesson plan, how do you proceed?

CA2: The Department of Local Administration normally distributes the pattern for teaching plans to every Child Development Center under the department's authority. There were trainings provided in the past, but I didn't participate because the request to join the training session was not approved by the SAO. The reason offered was that there was not enough budget for this part and as I had been working for a long time, I was supposed to thoroughly understand the lesson plan. So, I ended up studying the lesson plan provided by the Department on my own and adjusting it accordingly. For the curriculum part, I would follow the Primary Education Program of the Ministry of Education with some additional as designated by the Department.

Q10: Do the educational officers have provided assistance regarding the teaching and learning management?

CA2: She has been a caretaker before, so she understands the system and also how the centre works pretty well. She always coordinates and gives us supports whenever there are problems. But most of the teaching and learning activities are my responsibilities. She sometimes lends a hand with document work as she has a lot to take care of and there are other two more centres She has to oversee, not to mention other responsibilities of hers as educational officer.

Q11: Do you consider managing education for young children important?

CA2: It is very important. It is preparation and a foundation for higher education. The center will train and prepare children for the study in school. Children are small adults but may not yet a complete version. He understands almost everything. Some argue that they do

not understand anything, but I disagree and believe if they are correctly and appropriately guided and supported, they will grow up and make complete adults.

Q12: What do you think is the development and learning of children?

CA2: Development and learning is an important part to fulfill the children. As a teacher, I have to ensure that the activities are for their good and appropriate development. Children of this age learn quickly, remember quickly but also forget quickly. Therefore, the consistency is important; if they come to the centre regularly they will be able to learn but if not, it will be easier for them to forget what they have learnt, and we have to start teaching all over. I notice that the children generally do not like serious lessons, but they are more attracted to storytelling and teaching.

Q13: Did you have the chance to attend the training organized by the Department?

CA2: Yes, but only since the beginning of my career. The Department organized training on teaching and learning to young children as a basic step that teachers need to understand. But after that I have never had the chance as the SAO has no budget for this.

Q14: If you want to gain more knowledge or skills, what will you do if the SAO does not approve the budget for training?

CA2: I normally search for information from the internet. Sometimes I was told about the training in the area and I wanted to join, I decided to do it with my own money. But the problem is that most of the trainings are held in Bangkok and it is not convenient for me to travel.

Q15: In terms of operations, what do you think is your role?

CA2: For me, I don't consider myself only as a teacher; I am in charge of many tasks including taking care of the children's cleanliness and safety. The parents leave their children with us in the hope that in addition to knowledge, we will also provide their children safety. It is our priority. All the children at my centre know each other. So, it is useful if there are strange behaviors, we will be able to relate them to their needs. This boy, he lives with his grandma and his dad got a new family and his mom had left him since he was very young. When he first attended the Centre, he was really naughty and needed attention from me. I always give him a hug. When organizing activities, we have to prepare all the equipment and facilitate everything as much as we can.

Q16: What are your teaching techniques that you think unique?

CA2: At the beginning of their days at the centre, we cannot teach much. What they need is a hug. This will help keep them warm and it is a good way to gain trust from the children. After a while, we can start teaching and asking them to join activities such as singing and listening to stories. While small children do not pay much attention, older children can sit and listen well. I like talking to the young learners. It is the chance to get to know their thoughts and also, I can evaluate what I have taught them. This will be useful for my teaching preparation too.

Q17: How do you think your work has contributed to the development of child development?

CA2: I normally encourage them to do exercises through body movement and hand muscle activities. Art activities are often used to boost their creativity and social acumen. When they play with friends, they will learn to share and help each other. Of course, there are some arguments between them but every time it happens, I will teach them how to live

harmoniously with each other, how to share and love friends. In terms of brain development, I teach them various things in order to enhance this development.

I think the children are developed in all aspects. Some knowledge I apply at the centre is from the education and some is from my experience.

Q18: How do you manage the classroom as your class is a mixed-aged class?

CA2: The children at my centre are mixed-age. Fortunately, there are two child caregivers, an assistant and I to look after 18 young children. When doing activities, the class will be divided into 2 groups, which are 2-3 years old and more than 2-year-old, each being supervised by one practitioner, and each group participants in the same kind of activities. Having assistance make my work runs easily.

Q19: Do you encourage them to participate in the community events?

CA2: Yes, I always do this. Sometimes I take them out to the planting field, sports fields and local learning resources. There are also times when I take them out into the community to talk to the elderly in the village. I find that the children love this activity and so do their parents. I think this is a better idea than asking old people to come to the centre as they are vulnerable.

Q20: What are the challenges for your work?

CA2: Different executive bodies give different levels of attention to education. Much depends on their vision and stimulation. In my opinion, my work would be more effective if the executive body particularly the chief executive of local government sees the importance of the educational management of the CDC on equal terms with the provision of other

facilities' delivery in our community and provides us satisfactory support particularly in financial.

Secondly, parents do not have the necessary knowledge to look after their children. Some parents want us to teach their children to read and write even though the children are too young. They don't understand what is needed for the children of this age, so I explain to them. The researcher also noticed that most parents don't have time for their children as they have to work in the city and leave the children with grandparents. This leads to problems in children's behaviour; some don't pay attention to class; some are stubborn, and some are very demanding. Thirdly, I normally teach two languages to children as they are Karen. The young learners are used their language. It is called the Karen language. If I speak only Thai, they will not concentrate on what I am saying. Actually, they can learn both languages from the story as well.

Q21: Can they speak Thai?

CA2: Not really, they can understand Thai, but they don't often speak Thai. When they are at home, they normally speak their own language, Karen with their parents. Thus, the languages used in the class are both Thai and Karen with Karen as the main one, or otherwise the children will lose concentration.

Q22: Is there any other problem to mention?

CA2: Yes, we want the fence and a good-conditioned road, but whenever we propose the project to the SAO, we never have any approval. What we can do is to ask for help from the community, which are well received by the residents in the village. The community here is good; everyone is eager to help the children and always cooperate with the centre. Actually, the community plays a significant role in helping us achieve the goals. We

cannot wait for the assistance from the SAO as there is no sign of when to receive it, whereas the community never refused to help us.

Q22: And aside from the cooperation from community, do you think there is any other factor that helps?

CA2: For me, the assistance from parents and the community is the most important factor. Also, the fact that we have gained trust from the parents has considerably helped us; they leave their children with us at the centre with trust and whenever we ask for help, we always receive it. Another factor, I would say, is how I organize the activities for the children. I can tell that they sing the songs, tell stories, and do activities with happiness.

Thank you for your time

Appendix Seventeen
Observation Field-Notes

20 | 7 | 17

* เด็กโรงเรียน 07.04 ข. ทำอะไรต่อๆไป ส่วน ครูตัวมกรอกที่โรงเรียนตั้งแต่ 6 ครั้ง

ครูให้เด็กเล่นรถหัดเดิน: ครูไปโรงเรียนอาหารกลางวัน, ครูตัวช่วยดูขลุ่ยเด็ก เด็กบางส่วนเล่นขลุ่ยเล่น
ตามชม 3 คน ขวส่วน 1 ขี่รถเล่น และอยู่กับครู 3 คน (ดูครูเล่นที่หน้าโรงเรียน)

8.33 ครูให้ลูกบอกให้เด็กเก็บของเล่น เพื่อเตรียมตัวเสกพรเสกธาติ สวดมนต์กับบศร์สสร
ถาวรวิหาร

8.44 ครูให้เด็กเข้าแถวไปงานหน้าวัด ฝนเข้าที่วัดที่วัดธรรม ครูตัวช่วยเดินไปดูเด็กที่หน้าวัด

8.46 ครูจับมือเด็กเป็นวงกลมทำกิจกรรมเคลื่อนไหวและร้อง: วัฒพลและทำท่าทางประกอบ

8.58 ครูให้เด็กดู นักร้องวงเพลงลูกทุ่งใจเจ้า สมพงษ์ใจดี และนักร้อง 1 นาที

หลังจากนั้น ครูถามว่าทุกคนทักทาย ได้ยินเสียงอะไรบ้าง ครูถามเด็กทุกคน เด็กบางคนตอบ
เป็นภาษาถิ่นบ้าง ภาษากรุงเทพฯบ้าง

9.03 ครูเล่าถึงนิ้วสวดมนต์อาหารเช้า ว่าเด็กดู ถิ่นที่วัดที่โรงเรียน เด็กดู ตามภาษาถิ่น
ภาษาถิ่นแล้ว ครูก็ปรับเปลี่ยนเป็นภาษาไทยให้ขึ้นพื้นฐาน

9.05 ครูเอาสื่อเรื่องบ้านแม่สอนทบทวนให้เด็กฟัง ครูถามเด็กว่าเป็นภาษาไทย เด็กตอบเป็นภาษาไทยได้
ชัดดี 1 คน ไม่มีตัวอื่นในบทเรียนที่สอนไปอ่านขอเล่น ครูเรียกมาช่วยจัดสื่อ
เด็กที่บวกรู้จักทำอะไร

9.09 ซักได้เดินป่าลงในหัวโรงเรียน เด็กบอกครูว่าได้ ดู ครูคุยกับเด็กว่าเด็กได้ดูครูพูด
ตัวบ้านขอสื่อ " ปันของได้ เร็วกว่าอะไรล่ะ " หู , ไม้ , นก , ภูเขา
ลักษณะของบ้านขอสื่อ อยู่ในดิน อยู่บนต้นไม้ อยู่ในรู

9.13 ครูบอกเด็ก ๆ ว่าถ้าวันไหนอากาศดี ก็จะไปดูบ้านขอสื่อ และบ้านขอสื่อ ขอบทง ขอบทงต่าง
ๆของดี ของป่า แล้ววันรุ่งขึ้นจะไปดูบ้านขอสื่อของครู ครูจะให้เด็กช่วยกันดู

9.15 ครูให้เด็กไปใส่รองเท้า เพื่อเอาใส่เดินสำรวจชุมชนอย่างมีวินัย หรือเปล่า

เด็ก ๆ เดินออกสำรวจวินัย รอบด้าน 1 ชั่วโมง ครูจับใจเด็ก ๆ ดู เด็ก ๆ ลืมนั่น

9.12 ครูชวนเด็กทำห้องไปช่วงกินข้าวกลางวัน 1 เด็ก ๆ ดูขึ้นยืน รับประทานอาหาร

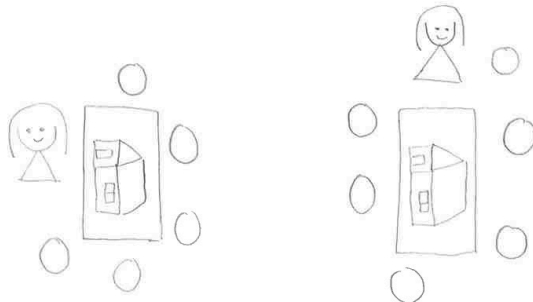
ครูไปโรงเรียนดูปกติ ครูช่วยหาเด็กที่กลัวเวลาจะวิ่งเล่น ปรบมือ ๑๐

9.24 ๑ ครูนำสื่อภาพบ้าน ๑๐๐๐๐ ๒ รูปใหญ่ ครูแบ่งเด็กออกเป็น ๒ กลุ่ม ครูสุ่มคนละกลุ่ม



แจกกระดาษกระดาษให้เด็กทำห้องภายใน
ให้เด็ก ๆ ช่วยกันคิด และแบ่งตามส่วนต่าง ๆ
ของบ้าน

เด็ก ๆ ที่ไม่สนใจและตั้งใจในกิจกรรม ครูต้องคนจัดกิจกรรมให้เด็ก ๆ สนใจ
สังเกตการณ์กับกิจกรรม มีสื่อที่สนใจและจัดกิจกรรมที่สนใจของเด็ก ๆ ทำให้เกิดแรงจูงใจ
จากเด็กได้เป็นอย่างดี เด็ก ๆ ทำกิจกรรมอย่างตั้งใจ ครูควรจัดกิจกรรม ครูเพื่อเพิ่มแรงจูงใจ
ครูควรจัดกิจกรรม เด็ก ๆ สนใจและสนใจ ครูควรจัดกิจกรรม ครูควรจัดกิจกรรม ครูควรจัดกิจกรรม
ไม่ใช่ปล่อยให้เด็กทำกิจกรรมของตัวเอง



ครูที่สอนตามใจตัวเอง ทำกิจกรรมหรือเล่นกับเวลาแล้ว จึงทำใจเด็ก ๆ สนใจเวลา และสนใจเวลา
ในเวลาที่กิจกรรม ครูควรจัดกิจกรรม ครูควรจัดกิจกรรม ครูควรจัดกิจกรรม ครูควรจัดกิจกรรม