

**PROCEEDINGS OF NATIONAL SEMINAR**

**ON**

**QUALITY OF LIFE:**  
**CONCEPT, MEASUREMENT & ENHANCEMENT**

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**PROCEEDINGS OF NATIONAL SEMINAR  
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QUALITY OF LIFE:  
CONCEPT, MEASUREMENT & ENHANCEMENT**

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**March, 2018**

*@ Jnana Prabodhini's Institute of Psychology (JPPI), Pune*

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## TABLE OF CONTENTS

❖ Preface	v
❖ Inauguration & Keynote Address	1
❖ Symposium 1	15
Exploring the Concept of Quality Of Life	
❖ Panel Discussion 1	27
Measurement of Quality Of Life	
❖ Symposium 2	41
Changing Concepts of Quality Of Life Across Generations	
❖ Panel Discussion 2	49
Enhancement of Quality Of Life	
❖ Experiential Activities	63
❖ Invited Speech & Felicitations	67
❖ Valedictory	79



*Take risks in your life.  
If you win, you can  
lead.  
If you lose, you can  
guide.*

*Swami Vivekananda*

## PREFACE

With great pleasure I present the Proceedings of the National conference on ‘Quality of Life: Concept, Measurement, Enhancement’ held during 17<sup>th</sup> and 18<sup>th</sup> November, 2018 organised by Jnana Prabodhini Samshodhan Sanstha’s Jnana Prabodhini’s Institute of Psychology, Pune. It is a valuable document covering the discourses given by many stalwarts and professionals thinking and working towards the betterment of quality of human life.

Quality of life itself is a very broad term. People have been interpreting it from different perspectives. For some a good and healthy life represents QOL while for some others, basic safety can be of paramount importance. Some may consider rising material wealth as indicative of their quality life while some may point out the ‘Paradox of Affluence’ and desire for peace of mind as the absolute requirement to represent fulfillment in life.

However, it is like the story of the seven blind men describing an elephant. Everyone thinks that his perception of the elephant is the ultimate truth and complete form of the elephant. While talking about quality of life many times we may repeat the same blind view restricted by our own small experiential world. Also we may have our own pre-set hierarchy of what comes in the first place as the basis of QOL. Here I remember the story of Bhagvan Buddha (*Tathagata*). While traveling he and his disciples reached a small village. The disciples toured through the village and announced that *Tathagata* will address the people in evening regarding self-emancipation and everyone should attend it for their own benefit. However in the evening two of the disciples saw very old man at the bottom of a large banyan tree, lying down. They ran towards him and requested him to accompany them to the lecture. He did not answer, neither he moved. Disappointed, both of them returned to *Tathagata* and complained about the old man’s resistance to come for the lecture. *Tathagata* listened carefully and asked, ‘Did he open his eyes while you talked?’ they said, ‘No. he didn’t. But he was listening for sure. He was moving his hand and was pointing to stomach all the time.’ Hearing this, *Tathagata* smiled, took out a piece of Roti and said, ‘Take me to him. He needs no lecture on self-emancipation, what he needs right now is food. Let us give it to him, then he might turn his ears on to what I say about world.’ I think that quality of life begins with survival, which was rightly acknowledged by *Tathagata* but

obviously, ‘it has other steps in the ladder which one should not ignore’ was his message. One can keep on trying to raise the QOL of oneself as well as that of others through the path one chooses. सर्व देव नमस्कारः केशवं प्रति गच्छति I in the same way every one’s efforts can direct to the common good addressing the QOL of different social groups covering different aspects.

We at JPIP, have been working in this direction through the channel of psychology. “Identifying and nurturing intelligence ‘is the mission statement of JPIP. Since last 50 and odd years it has proven the ways of identifying talents and applications of the research in diverse fields through its service sections. Quality of life was taken up as one of the thrust areas to only extend this journey of enhancement of human potentials to the main aim of the parent trust Jnana Prabodhini: ‘Motivating Intelligence for social cause’. Number of researches pertaining to different aspects of QOL lying in the purview of psychology and its related fields were undertaken in the last few years. Various studies in the Bio- psycho- socio sphere have been completed and are in progress. Number of enrichment programs have been introduced as a result of these research findings. Thus the idea of arranging a national seminar on this topic emerged.

It was really a pleasure to see how professionals and students interested in this field responded to the call of papers based on this theme. This book of proceedings gives us an idea of how much work is being undertaken across India on it. This is just a glimpse of it. I am really thankful to all these dignitaries for finding out the time from their utterly busy schedules to unveil their knowledge and insight through their discourses in the seminar.

An invited speech by Dr. Girish Bapat (Director JP, Chairman, JPSS) enlightens us over the concept of ‘How the Life workers view QOL’ in an intriguing manner. The felicitation of four such iconic personalities added value to his though provoking discourse.

The TEAM JPIP is the main source of inspiration behind every one of us in driving any small or big mission like this one. Professor Usha Khire, our mentor and founder member of JPIP has her blessings with us all the time. Professor Arun Nigvekar, (President, JPSS), boosted our confidence with his best wishes. Dr. Bapat gave us a free hand in organising and offered his valuable guidance at crucial junctures. Professor Vanita Patwardhan (former Head, JPIP) with

her critical and perfectionist approach helped us in scrutinizing each and every aspect of the seminar. Along with her, Dr. Sujala Watve, (Secretary, JPSS) is also the kind and understanding parent for all of us who offers her unconditional support to all ventures.

Dr. Sucharita Gadre the co-convener of the seminar, invested all her efforts to make the planning up to mark and properly placed while Ms. Dhanashree Sovani (the faculty representative) also took keen interest in the planning and offered her timely suggestions.

Dr. Pranita Jagtap, took a lot of pains as the organizing secretary of the seminar and has really put in extensive efforts in making this seminar a piece of significant academic value. Ms. Kanchan Pande, the coordinator of the seminar was our ears and mouth, who mediated almost every task with help of her computer and kept everybody on track by providing timely feedbacks of all planning details.

Ms. Kaumudi Joglekar-Phadnis took efforts to compile the extensive material gained through the panels and symposia to articulate it neatly in optimum words without losing the value of content. Mr. Rohit Kokil, long associate of JP, charted the cover design and many other displays reflecting the concept very artistically and meaningfully. Ms. Manjiri Mhaskar took up the responsibility of technical processing and printing the content of the proceedings which facilitated this publication task.

Most importantly many people and institutions stood behind us with their generous contribution to fulfill the mission successfully. Indian Council for Social Sciences and Research (ICSSR) provided a strong backing by providing partial financial support. Prabodh Udyog Samuh, Dr. Alka Mandke, Cosmos co-operative Bank and Janaseva co-operative Bank generously backed the purpose. Last but not least, as mentioned earlier, each and every member of JPIP, including the associate members and frontier members of the parent trust JP have offered their helping hands at each stage which has boosted our enthusiasm and moral both.

Thus I am sure that the contents of the seminar and that of this book of proceedings will prove to be foundations for many more future research questions and projects to be undertaken at JPIP as

well as for those attending the seminar at their own work places. A separate book of abstracts published during the seminar has covered the gist of papers and posters presented during the parallel sessions. It is available in soft as well as hard form.

I offer my best wishes to everyone and once again express my pleasure in presenting this Book of Proceedings to all of you.

Anagha Lavalekar

Convener of the seminar & Director, JPIP



## INAUGURATION & KEYNOTE ADDRESS

The national seminar on Quality of Life: Concept, Measurement & Enhancement began with the registration of all participants. Dr. Anagha Lavalekar ushered in all the dignitaries and welcomed all.

### *Dignitaries on the Dais*

- *Dr. Mohan Agashe - Chief Guest, Renowned Actor and Psychiatrist*
- *Dr. Ashok Kukade - Keynote Speaker, Founder Director, Vivekanand Hospital, Latur  
Topic - Mystery and Mirage of 'Quality Of Life'*
- *Dr. B. G. Sahastrabuddhe - Chairperson , Member of Executive Committee of JPSS*
- *Dr. Sujala Watve - Secretary, Jnana Prabodhini Samshodhan Sanstha*
- *Dr. Anagha Lavalekar - Member of Executive Committee of JPSS, Director - JPIP & Conference Convener*

As is the Indian tradition, the inaugural function commenced with a melodious rendition invoking the Lord followed by the chairperson for the function felicitating the chief guest and the keynote speaker. Everyone on the dais then lit the auspicious lamp marking the beginning of the two day seminar.

Dr. Anagha Lavalekar delivered the welcome speech wherein she spoke about the thoughts and reasons behind organizing a conference on a subject like QOL and the possible reasons which attracted stalwarts from the industry to be a part of the same.

She elaborated as:

In the recent years, Quality of Life (QOL) has been a prominent subject for research in positive psychology. The popularity of this construct can be attributed to the fast growing domain of positive psychology. The construct of Quality of Life is relevant to everyone because of its universal appeal as every individual is always striving for improving the quality of their life, at every level. Though it seems simple and relevant to all, the subject in itself is challenging for researches owing to its inherent nature of complexity and subjectivity to an individual.

She further added “As noted in our literature, there are three identified life domains- “Being, Belonging and Becoming”. Being refers to the existence of an individual. It can be related to one's physical being, psychological or spiritual being. Belonging has more to do with a person's adaptation to his or her environment which can be physical, social or community belongingness. The third aspect of becoming is the crux of why the conference was planned. Becoming is associated with activities planned and done with a purpose. It can be relative to one's personal goals, leisure goals, financial goals or growth goals.

Quality of life and its measurement are now being looked at with two varied viewpoints. Both these viewpoints contradict one another. One talks about the objective assessment of an individual's parameters of quality of life like financial status, education and so on, while the other claims that the measurement of quality of life is specific to each individual, through his or her own life experiences and cannot be generalized.

Dr. Anagha explained this fact as being similar to the story of seven blind mice, where each one believed his perception of the elephant as perfect, while the reality was far from that. Similar to the story, every person could have a prejudiced and restricted view points about Quality of Life and base its measurement on the same.

The second simile was drawn from the biography of Lord Gautam Buddha (Tathagata). The story talks about the time when Tathagata and his disciples were traveling through a village wherein he was keen on speaking to the villagers about self emancipation. The disciples requested all villagers to gather in the evening for this lecture. On their way to the lecture, the disciples saw an old man lying down under a banyan tree. They requested him to join them, but all he did was raised his hands and point them towards his stomach. Disappointed, the disciples left and informed Tathagata. Tathagata explained to his disciples, that the old man was hungry and at that moment it was only food that mattered. The learning from this story is the need to pay attention to something as basic as the issue of survival before jumping steps to talk about self emancipation or quality of life. The story also highlighted the need to consider every minute detail and not ignore the fundamentals before reaching a conclusion and to remember that

everything has a base with steps and every step counts. What is important is to choose a path to raise ones bar of quality of life and also help others to do the same.

JPIP has been working in this direction to help others through its channel of psychology and allied fields. The mission statement of JPIP is identifying and nurturing intelligence. QOL has been considered by JPIP as an extended arm in achieving this enhancement of human potential. For the past couple of years JPIP has undertaken a number of research projects linked with QOL wherein certain studies on bio psycho socio sphere have been completed along with the introduction of newer enrichment programs based on these research findings. It was these findings and the research being undertaken on QOL for the past 2 years, that JPIP felt the need of a national seminar to learn and discuss various concepts concerning QOL, its measurement and enhancement.

Dr. Lavalekar ended her introductory speech summarizing the content of the two day seminar as one which would witness dialogues from eminent speakers from across the country, researchers who would throw light on their scholarly work through lectures, experiential learning sessions and presentations along with poster sessions.

She announced that throughout the course of the conference, four stalwarts would be felicitated for their exemplary work in the field of raising QOL in the disadvantaged section of our society.

She dedicated the whole conference to the founder director Late Dr. V.V. alias Appa Pendse who had inspired the lives of many with his vision and work. She mentioned that had he been present, he would have been pleased to see the efforts being taken by the institute towards improvement of quality of life and in turn addressing such a topic for the betterment of every citizen of India.

Before ending her welcome note, Dr. Lavalekar introduced Shri. Aakash Chowkase as the conference emcee.

Shri. Chowkase took on the dais and spoke on how the conference was aimed at bringing together thoughts from across the globe, i.e. a convergence of the Indian and the western

concepts of QOL. It was also intended at bringing together a confluence of agreements and disagreements along with discussions to gain knowledge about QOL and liberate oneself from ignorance to awareness.

He thanked Dr. Mohan Agashe and Dr. Ashok Kukade for accepting the invitations to grace the inaugural function.

### **Introduction of Dr. Mohan Agashe - Chief Guest**

Dr. Mohan Agashe is a well-known theater and film personality who was awarded the Sangeet Natak Academy award in 1996. Along with this, he is also an eminent psychiatrist. He completed his M.B.B.S and post graduate studies in medicine from Pune's prestigious B J Medical college. He was also a professor of psychiatry at this institute and practiced the same at Sassoon Hospital, Pune. His students have fared well to become established psychiatrists in India and abroad. Apart from professing, Dr. Agashe was also actively involved in clinical psychology and psychopharmacology. He was also the honorable chairperson for the organizing committee meetings of the Annual National Conference of Indian Psychiatric Society held at AFMC Pune. He is the Founding Director of Maharashtra Institute of Mental Health (MIMH), which conducts state level vital research and trainings in mental health sciences.

A research project was initiated by the Indian Council of Medical Research following the Latur Earthquake in 1993, where Dr. Agashe was appointed as the principal investigator to understand mental health effects of the earthquake.

In 1998, Dr. Agashe's project to improve mental health education & service led to the formation of a new policy on Mental Education by the Maharashtra Government. He also served as the advisor to the Maharashtra Government on mental health education & service and is currently the principal investigator of an Indo-US program on Cultural Disorders, Fatigue and Weaknesses.

Dr. Agashe was drawn towards theatre in the days of his medical studies and he ensured he pursued his passion alongside his dedication as a medical practitioner. He was the Director

General of Film and Television Institute-Pune (FTII) between 1997 and 2002. He has rendered some phenomenal performances in films like Valoo, Deool, Dr. Prakash Baba Amte, Viheer, Kaydyache Bola, Astu and Jnana Prabodhini's award winning short film-Silvia.

With this Shri. Chowkase handed over the podium to Dr. Agashe.

**Chief Guests Address:**

Dr. Agashe in his humorous style began his speech requesting all to ignore his introduction, as he said introductions are not so much for a person than for his image. He said he was curious to attend the conference on QOL, a concept which had gained tremendous momentum in the recent past. He thought there were two reasons for this sudden surge in the need to address the issue of QOL. One was the fact that the QOL in the past must have been better that the need to address this as an issue was not considered.; Life back then was consumed more like a delicacy which one relishes over time, as against today's greed to consume life at a fast pace. The second reason he thought was the longevity in human life which extends the non performing retired life of a person, which technically is of benefit to no one. It is in these times, when one becomes dependent on others for their QOL that the real questions of Being, Belonging and Becoming come into picture.

Modestly Dr. Agashe accepted that he was not a voracious reader to attribute certain thoughts and sayings, however the reason for that as he believes is that he spends most of his time living life and experiencing it, as against reading and thinking about how to live life. For Agashe, who calls himself cognitively challenged, it is imperative to understand what today's cognitively evolved society thinks of the complexities of what quality of life is all about. He attributed the cognitive behavior of human race to the fact that printing technology preceded digital technology by 350 years, making it mandatory for people to read. He stressed on the fact that today, the importance of reading has taken over all other aspects like oral skills and has percolated so deep into our education system that a human being is now expected to read and write even before he or she gets enrolled into a formal school.

The system does not care if the person grows up to be a chef who would need to utilize more of his sense of taste and smell, he still needs to be able to read and write. Today we are giving unnecessary importance to 'intelligence', a factor that is a result of being so called educated. Our education system does not look into increasing sensitivity, which is the key to quality of life. Sadly even the current scientific approaches only considers QOL of that of one's own perception, an individual approach and not look beyond oneself selflessly.

According to Dr. Agashe, to bring in harmony of life, there is a need for simultaneous growth in sensitivity along with intelligence and only then will there be balanced levels of existence, be it physical, psychological and spiritual.

Speaking further, he mentioned that  $7/8^{\text{th}}$  of one's mind caters to the subconscious and the unconscious being, where as only  $1/8^{\text{th}}$  is the conscious one, and it is this  $1/8^{\text{th}}$  that we are bombarding with pre-conceived information, that we deprive ourselves of any virgin experiences. Before information revolution, one would experience every small bit that life had to offer, for instance the growing phase itself lasted a longtime. Medically there is a phase called anabolic phase, which is when humans are most creative which normally exists anywhere between the age of 25-35years, following which the catabolic phase sets in, and so it is not relevant to say that QOL has anything to do with the longevity of one's life.

The experiences even early on in life point to a huge chunk of what QOL is all about. In the earlier times, the pace and information was at a pace which allowed every individual to experience life before they reach the ability to extrapolate knowledge by reading. Today with information overload, over thinking has set in and the minds are already corrupt with cognitive thoughts and these cognitive filters are used by ones minds to analyze the experience. Too much information today is also the cause of confusion and second hand pre-thought experiences.

Today the educated are all well informed and thorough with their bookish knowledge, and if you seek information from them, they know it all, but ask them to implement it practically and they fail. This is more so because they have not gathered the experiential wisdom which comes

through years of practice and thinking about all that one has gained on job. The experiential wisdom is a combination of emotions, thoughts and action.

In terms of researchers, he had observed that they are an isolated group which talks in esoteric terms only understood by researchers as a community. This is a worrisome situation as the researchers are primarily working on life situations to derive conclusions applicable for the masses; whereas it is these masses they have secluded themselves from, making their research findings questionable.

Another interesting factor which Dr. Agashe read was about unhealthy pursuit of health. In this context he referred it to people today who boast as counselors of QOL. He said before grasping any such preaching, one should consider whether the quality they are referring to is a marketed one, natural one, desired one or an imposed one. Similar to addressing a situation when one is unwell. The person can seek advice of a doctor, visit a temple or talk to a friend, similarly while considering ones QOL, one may approach it in various ways, but what is important is to get relief from the uneasiness that is bothering oneself, as is the case when one is unwell. The important aspect is to restore life as per one's own definition and desired levels of QOL and not as what is the targeted level of the person who is helping out. The point made was that the subjective element in the QOL of a person is more important than the objective definition of the person from who help is sought. What is thus required is the contextual and comprehensive thinking of quality of life to be able to do justice to the concept of QOL and the research on QOL.

### **Introduction of Dr. Ashok Laxmanrao Kukade (Key Note Speaker)**

Running energetically into the 8<sup>th</sup> decade of his life, Dr. Kukade is a luminous personality who pursued his M.B.B.S and MS from Pune University where he went on to stand first and was awarded a gold medal. In 1966 he founded Vivekanand Hospital in Latur. In 1979 he established Vivekanand Medical Foundation and Research Centre which has contributed to the development of a unique multispecialty hospital in Marathwada.

He has a number of papers to his credit in national and international conferences. A multifarious personality, Dr. Kukade brings with his a varied experience as a doctor, a medical college professor, an altruistic president of Rashtriya Swayam Sevak Sangh Jan Kalyan Samithi, a relief volunteer in the Latur Earthquake, which in turn made him set up permanent healthcare institutions, educational set up and the overall rehabilitation of the region of Killari.

A proud volunteer of the Rashtriya Swayam Sevak Sangh, Dr. Kukade has held many positions with the Sangh with the likes of Paschim Kshetra Sanghchalak and Rashtriya Karyakarini Sadasya.

His valuable contribution in the field of medicine and social cause has led him to receive many honors and awards. He was recently decorated with the Sant Seva Sanman Vishesh Puraskar in New Delhi.

His life's journey can be well witnessed through his autobiography- Katha Eka Dheya Sadhanechi (Passion to Mission). One of the many students of Dr. V.V. alias Appa Pendse, Dr. Kukade has been associated with Jnana Prabodhini since its inception. As a token of his gratitude to his mentor Appa Pendse, Dr. Kukade has authored a brief biographical sketch on him titled 'Smriti Shalaka'.

Post the introduction of Dr. Kukade, all dignitaries on the dais were invited to release the book of abstracts- **the Souvenir of the seminar.**

**Keynote address: Mystery and Mirage of 'Quality of Life'**

Humbly accepting his being out of place in the conference in terms of his professional qualifications, Dr. Kukade introduced himself as a surgeon practicing medicine in Latur. He chose to speak about the vast topic of QOL limiting it to his field of work and daily undertakings. Taking from the lines of Dr. Agashe, Dr. Kukade began his note addressing the concerns of QOL on senior patients living life dependent on medical support. The question that haunted him was the purpose of pulling on life and who it benefitted? Was it the individual patient himself, the relatives or the hospital? And where was QOL in doing so?



Every human at any given point in time is running after bettering their QOL, looking at ways to improve their lives, knowingly or unknowingly. It is a subject difficult to study and every time one ponders over the various facets, the topic opens up newer doors making it a mystery. One feels it is right there to study but the reality is far from the mirage created and hence the key note topic being named as Mystery and Mirage of QOL. The concepts of QOL do not have any agreed definition nor any standard measurements, however it is important to deliberate this topic in the coming two days, not for any theoretical noting, but study the lives of human beings and try and lay down certain parameters or standardize a few parameters of the idea of QOL.

QOL is a very dynamic concept as it not only changes with every individual, but also changes for the same person in different phases and stages of life. This thought makes one wonder whether the brainstorming would be useful at all, however more than this thought what is important is to try and relate the resultants of all the deliberations to make it work for the people at large.

Talking about Gautam Buddha's Jataka Katha, Dr. Kukade spoke about the story wherein Gautam Buddha was reincarnated as a Pig. His disciples were disappointed when they recognized him and asked him to revert to his Godliness, however Gautam Buddha refused saying he was happy being a pig. Relating this to QOL, it can definitely prove that QOL is person specific and need not match the QOL expectations of people around. People thought it must have been a punishment for Gautam Buddha to be born as a pig, whereas his individual perception of life and its quality made him happy with being born as a pig.

In 1960 WHO defined health on only two parameters- mental and physical well being. At that time, the stress was on the physical being and psyche was not given the required importance. It was much later that it was accepted by WHO that psyche played an important role in wellbeing as did the physical aspects of a human body. Post this acceptance. WHO also considered social environment as an important factor in the wellbeing of an individual and today we are at a place where WHO has even acknowledged the importance of spiritual well being as a key in maintaining human health.

Coming back to the conference Dr. Kukade said that the aim of this symposium was to come to certain standards and considerations for QOL which would vary basis a person's age, economy, education, social status, personality, family background and so on. He stressed on the importance of studying the subject as a whole and not in fraction as is done in most cases.

He further cited the examples from Ramayana and Mahabharata speaking on the importance of mental attitude in addition to one's physical well being. In Ramayana during the 14 years of Vanvaas, Laxman had mentioned that it's the mental peace and happiness that mattered and made any place, even the jungle, pleasurable to live. Similarly, In Mahabharata, Droupadi had mentioned that she preferred the vanvaas as against the agyatwas as physical torture in the vanvaas was preferred over the mental one in the agyaatwas.

In all, stressing on the various aspects of OQL, Dr. Kukade reiterated the significance of psyche in ones QOL and the need to take up discussions on the same, not just at individual levels, but more so at family, society and national levels.

In a country like Bhutan, the pledge aims at being ecologically rich rather than economically rich. This right approach eventually helps raise the QOL and we need to work towards how to inculcate such values and thoughts in all our generations to come as well.

Dr. Kukade bewildered the audience with abundance of information, however the key points he picked out was to take up tasks which are doable and come up with some minimum coefficients and norms which can be enunciated in one's day to day practice to give maximum justice with judicious efforts in studying subject like sound mental health, physical well being, satisfactory social recognition, conjoin social and natural environment, satisfaction about one's self esteem and so on. He specifically mentioned that he had not included a person's economic status as he thought that the same today is in a much better situation than the past. Reiterating that spiritual well being is also now officially being considered by WHO, the same should be included in our studies as well.

He further stressed on the need is to look at QOL subjectively and objectively, to give it a holistic approach in order to bring about an overall improvement in comprehensive health and positive social change, which is the main reason why everyone had gathered for the seminar. HE said that one must aim at bringing this positive social change as it will enhance human potential, improve individual lives ultimately reaching out to the society at large as is the case in the western world.

Speaking about the western concepts of QOL assessment, he stated that in certain ways their QOL policies and norms were advanced as they have been able to achieve better results in improvement of QOL. The reason for this is also their efforts in improving QOL with thorough research, modern technology, and organizational skills along with sustained efforts. This was evident with people wanting to immigrate to these western countries as it provided life with minimum resistance and the social and political will had shown tangible outcomes, resulting in the Welfare state concept. This concept is still in the nascent stages in India.

Today what one sees is efforts to pull on with lives with ventilators and pacemakers, however if this is viewed rationally, it is seen that this is only compromising the QOL, not just for the individual as a patient, but the family and eventually the society and it is here that the spiritual well being comes into the picture.

Indians come with a strong lineage of spirituality. It is proved over time that people who have been able to achieve some amount of spiritual strength are far ahead in terms of QOL. Not mentioning the big names like Vivekanand, Mahatma Gandhi etc but common man who has been able to learn the art of spirituality inherited as a tradition and as a 'sanskar'. It was 125 years back that Swami Vivekanand spoke about reaching the highest level of QOL for humanity if one judiciously combined western achievements and Indian spirituality.

Dr. Kukade stated that it is only humans who have been blessed with the capacity to think and act and bring about a change unlike any other animal. It is the dutiful efforts that one needs to take along with sanskar to work towards a positive change in QOL. It is time to bring in some pace, rationalize the approach, add spirituality to it and one should be able to achieve it.

Dr. Kukade ended his speech quoting our magna carta of the Indian cultural ethos from the Bhagvat Gita - *Om Sarve Bhavantu Sukhinah, Sarve Santu Nir-Aamayaah, Sarve Bhadraanni Pashyantu, Maa Kashcid-Duhkha*, which in basic words means - May all become happy, may all be free from illness, may all see what is auspicious and may no one suffer.

### **Introduction of Dr. Bhalchandra Sahastrabuddhe, Chairperson**

Dr. Sahastrabuddhe served as a medical officer in Pune and Sangli post his M.B.B.S. and other medical qualifications. In the eighties, he was professor of preventive and social medicine. From 1976-2000 served as a management consultant and a chief researcher. He was associated with Sancheti Hospital.

Currently he devotes his management consultancy at various hospitals and medical institutions in and around Pune. He has numerous academic achievements, research publications, key notes, papers and presentations to his credit. He has worked as a subject matter expert and was on the advising committee for any academic institutions and examination boards.

He is also affiliated with various international institutes as an international consultant with the likes of the American Public Health Association.

He is also a life member of Association of Physical Medical and Rehabilitation, Society of Equal opportunities for Handicapped-Mumbai and a member of the governing council of Jnana Prabodhini Research Organization.

In 1990, he founded Medi Project Consultancy Associate, an isolate organization with provides solutions for Hospital Planning & Management.

### **Chairpersons address:**

Dr. Bhalchandra Sahastrabuddhe agreed to his introduction as an academician and a researcher, but also called himself a practical worker as he believed that in most cases the gap between theory and practical was far reaching and being practical worked.

Dr. Sahastrabuddhe endorsed Dr. Agashe and Dr. Kukade as the icons of QOL as they brought with them a very rich experience of the life they had lived rather than theoretical studying alone. He said humans had forgotten to think about why they were born, had stopped looking for the purpose of their life and were instead wasting time on achieving materialistic goals. This is why people searched for satisfaction outside of oneself, when in reality the real satisfaction came from within. He said people are in a constant chase for worldly pleasures which were leading to dissatisfaction, unhappiness and in turn lowering the QOL.

He added that with advanced technology and information; there was longevity of life, which had given rise to different problems all together. What humans are doing is consuming information without utilizing the knowledge required for a balanced outcome. Experts are preparing models and prototypes, but they fail in the implementation as the models do not have a knowledge backing.

In his subject of epidemiology, the agent factors which affected QOL, were one's exposure, his reaction, the resultant changes in him and the environment. According to Dr. Sahastrabuddhe, the most important factor is to put a practical approach to anything one undertake rather than just conducting research and writing papers and publishing them at conferences. He congratulated Dr. Agashe for highlighting this point in his speech.

Drawing from what Dr. Kukade said, he said it was a well covered speech about the importance of holistic approach which included various factors and has given everyone a lead of how to achieve us utmost QOL.

Dr. Sahastrabuddhe was troubled with the current scenario wherein everyone was in awe of the life our ancestors lived and everyone appreciated it verbally, but no one was taking any efforts to review even a few factors to help enhance our QOL. Indians come with a rich culture of meditation and yoga, but it is not valued unless it is endorsed by western countries. It is our sanskar which is the backbone of QOL and this can be changed on an individual level if one starts accepting the old golden ways of our culture. Bring back the concepts of a joint family and Gurukul. One needs to inculcate the value systems right from childhood as it is in these

formative years when individuals get shaped to create a smooth path of QOL. It first needs to be done by everyone for themselves and then it will spread to the society and the country at large.

Speaking about the concept of QOL academically, Dr. Sahastrabuddhe said that according to him the concept of QOL is dynamic and complex. It is depended on a number of factors, right from ones childhood to old age. Different stages and phases of life look at QOL differently and along with this there were several external factors like physical, mental, occupational, educational, economy, religion, culture, environment, safety etc which also played a significant role. He pointed out that QOL should not be confused with standard of living and an individual's subjective assessment of his or her QOL is more important than the objective academic approaches and hence while formulating QOL concepts, adequate weight needs to be given to individual perceptions. In everyone's life there are triggering factor which also should be considered as they change a person's attitude and approach towards ones QOL.

Reiterating Dr. Kukade's point of holistic approach, Dr. Sahastrabuddhe urged experts to look into the concept as a whole. He said that in the last 10 years over 50 models were developed on QOL, however the reason for developing so many models was that all work was done in fragments without the holistic consideration of the concept.

Speaking about Columbia University's World Happiness Status Report, he said that for a concept as vague as happiness it was surprising that they could identify measurement parameters and said he thought the whole report was false as the happiness quotient cannot be documented or generalized like that for a country as a whole when every individual is different.

Ending his speech Dr. Sahastrabuddhe said that one's health is one's own hand; enrichment of life is also in one's own hands, so it was now up to every individual to introspect and work towards a better QOL by making a sincere attempt to bring in satisfaction, happiness and peace of mind.

The vote of thanks was delivered by Shri. Chowkase on behalf of JPIP.

# SYMPOSIUM 1

## EXPLORING THE CONCEPT OF QUALITY OF LIFE

### *August Dais*

- *Dr. Madhav Gadgil - Renowned Ecologist*  
*Topic - Human Evolution and the Quality Of Life*
- *Prof. Lilavati Krishnan - Senior Academician and Professor – IIT, Kanpur*  
*Topic: Reflection of QOL in Indian Culture*
- *Dr. Manas Mandal - Honorary visiting professor at IIT Kharagpur- Psychology Department*  
*Topic: Well-being: The Science of Happiness*
- *Dr. Sunita Kulkarni - Chairperson, Member of Scientific Advisory Committee - JPSS*

#### **Speaker 1 :**

#### **Introduction of Dr. Madhav Gadgil**

Dr. Madhav Gadgil is Eminent Ecologist, Academician and writer. Born amidst the Western Ghats of Maharashtra, he was intrigued about nature from the very beginning. He has a naturalistic intelligence and curiosity for nature which led to his lifelong quest of pursuing ecology. He completed his education in India from Pune and Mumbai following which he studied at Harvard, where he was the first student to receive a Ph.D. in Biology for a thesis based on mathematical modeling. This also won him the illustrious IBM fellowship of Harvard Computing Centre.

Post his Ph.D., Dr. Gadgil returned to India and was associated with Indian Institute of Science - Bangalore for glorious 31 years. It was he who founded the centre for ecological sciences at the IIS. He was also the lecturer for biology at Harvard, UC Barkley and Stanford, some of the world's Ivy League education institutes.

His Contribution to ecology has been pioneering and innovative. His focused work area has been ecology, evolutionary biology, conservation biology, human ecology and natural resource management.

He has written over 200 scientific papers and over 400 editorial pieces in English and Marathi. He has also served on various policy making bodies like the National Advisory Council and the Western Ghats Ecology Expert Panel and has chaired for four years The Science & Technology Advisory Panel of Global Environment Facility. Dr. Gadgil has also been honored with many prestigious awards like Shanti Swaroop Bhatnagar Award, Vikram Sarabhai Award, Ishwarchandra Vidyasagar Award, Harvard Centennial Medal, Tyler Award for Environmental Achievement, Karnatak Rajutsav Award and Padmabhushan, the third highest civilian award by the Government of India.

### **Speech: Human Evolution and the Quality Of Life**

Drawing from Dr. Agashe's speech, Dr. Gadgil mentioned that he had read a few books in his life, but nothing on the topic of QOL. When he was invited to talk at the seminar, he began to introspect on his own life to realize that he had managed to live a life of good quality. He decided to delve deeper and understand what could have been the reasons for this.

Going back to his childhood, Dr. Gadgil thanked his fate that he was born at a time when he did not enter any formal schooling up to the age of six. He grew up at a place amidst guava orchards and hills where he gallivanted bare feet enjoying every moment. It was from very early on in life that his parents encouraged spending time with nature. His father was a bird enthusiast and spent hour's bird watching. This interested him in nature and its offerings. He read a book on Bird Watching & Bird Behavior wherein he learnt two important life lessons. One was that if one loves nature, birds, plants and animals then one was never without a friend. One was always surrounded by creatures one loves, need not be humans. And the second lesson was that, the happiest being was the one who could manage to convert his or her hobby and passion into profession.



Taking inspiration from this, Dr. Gadgil decided to study biology and was well supported by his parents in his decision. He also learnt that more than the mythologies of Ramayana and Mahabharata, it was the four billion year old epic of evolution of life that was the greatest epic of history, including that of human evolution.

This history intrigued him and speaking about QOL in this context he said that he was trying to interpret within the frame work on his understanding of how humans evolved and what therefore must be their innate tendencies which in many ways decided how they perceived QOL.

Human lineage was traced down to about 50 lac years to the highly diverse and biologically rich tropical regions of Africa as chimpanzees. Humans evolved as tool loving social animals preferring to cluster stay in a group with a well-developed system of communication.

Humans have superseded any other life form of evolution with its resource of information. Humans began communicating with a collection of symbolic data, a language that was developed about 60,000 years back. Talking about QOL in terms of beauty concepts, it was seen that million years back, women wore necklaces. It was also around the same time that death, life and burials came into picture. This has led to the development of the concept of resources and these resources were such that they did not deplete with sharing. This resource he pointed out was unique to humans with which they dominated the world. The information gathered as this resource was being spread across, and was not limited to just blood relatives. Adding further he said that Humans were the only form of animal that communicated with others of the same species without them being related. This led to the development of the concept of humanity, which in turn brought in superiority to the human race. The concept of reciprocating human feelings has evolved over time and was documented in books written on evolutionary psychology. Feelings like gratitude have mentions in these books. It was this development of social circles that lead to psychological emotions which today made human being the most dominating life form. The reason for this was also that it was the only form that sought, gave and shared information.

He further elaborated that humans were seen to be drawn towards other life form. This phenomenon was called Biophilia. They liked the association with other living beings and enjoyed cohesiveness where there was fairness in mutual exchange. Fairness counted for improved QOL amongst human societies, as unfair deals continue to be looked down upon and affect QOL negatively.

As per his speculation of QOL in terms of human evolution, QOL was high in an egalitarian society. People perceived QOL as good when there was equality and fairness irrespective of any factor of class, hierarchy, economy etc. Even for competition, moderation was the key to higher QOL as any excess in competition, led to more grabbing than giving. In a society QOL was high where humans were given the opportunities to seek and learn and garner information. Also basis the evolution theory, QOL was elevated in highly bio-diverse natural settings.

As per the human history, probably around a few lac years back, humans lived in small groups with a good amount of give and take of food. About 12000-13000 years back, this changed as people started developing the art of cultivation and domestication of animals, leading to surplus at some places and deficit at others. This led to a mismatch and hierarchy set in. This altered the QOL standards as it improved for a few while for the majority it decreased.

In India about 2500 years back Buddhism tried to bring in equality and preached egalitarian concepts of human life. In medieval England, common lands were taken over by feudal lords, whose QOL bettered where as the QOL of the commoner suffered. In Britain and Europe, importance was given to information over monopoly of church, which allowed them to develop science based technologies and overwhelm the world. With colonization of the rest of the world, Europe witnessed an increase in the QOL, but the colonies apart from a few elite, saw the lowering of their QOL.

In India, British introduced the notion of criminal tribe, i.e. a person became a criminal as soon as one was born in that tribe. The British rulers got away with poaching where as the people of these tribes were sentenced harsh punishments. It brought in inequality leading to lowering of the QOL of these tribes.

This legacy of feudalism and colonialism continued, however in the world today economically developed and nature loving communities like Europe, Norway, Denmark, Sweden and other Scandinavian countries were better in terms of QOL as against only economically developed country like USA.

He ended saying he was not sure how one measured happiness, but the ones who have measured say that Sweden, Norway and Denmark were one of the happiest places in the world and Bhutan was stated as the happiest country in Asia because of their nations motto of protection of ecology and their four pillar of beliefs- protection of environment, good governance, social harmony and Buddhism.

Lastly he added that happiness was not restricted to these regions itself, but was prevalent in India as well, especially in tribes which followed egalitarian concepts and preserved nature. A number of tribes had been given community forests which helped in their economic growth making them self sufficient adding to their self respect and making them happier than other places in India.

**Speaker 2 :**

**Introduction of Prof. Lilavati Krishnan**

Prof. Krishnan is a senior professor of psychology associated with teaching for more than 45 years, most of it being with IIT Kanpur. She was the Head of Psychology at Department of Humanities and Social Sciences at IIT Kanpur from 2009-2012. She has been given the Distinguished Teacher Award and was awarded the lifetime fellowship of National Academy of Psychology. Her area of work is analysis of traditional Indian concepts on justice and she has also carried out two ICSSR projects on this subject along with papers in national and international journals on concepts like distributive justice. She is passionate about Hindustani Classical Music and has been trained in the same.

### **Speech: Reflection of QOL in Indian Culture**

Thanking Dr. Anagha Lavalekar and her team for inviting her to speak at the seminar, Dr. Lilavati began her speech stating that the concept of QOL needed redefining as there were preexisting ideas and concepts that did not leave one with much choice.

Questioning the audiences with an everyday question like- How are you? She went on to say that the answer to this, especially if one was abroad was I am fine thank you. How are you? No one was allowed to give the real picture saying one was terrible or was sick or limping. The answer in itself was a temporary reflection of a person's QOL.

If one reflected upon the concepts of what one thinks of QOL, there were three things that came to mind. 1. Wellbeing 2. Happiness and 3.Satisfaction

Not willing to step onto the topics likely to be covered by Dr. Mandal, she continued to ask for reasons to redefine QOL. She opined that it was needed as everyone was aware that the current definitions had limitations and no one was sure of how to do away with them. She urged everyone in the audience to try and look at some ways, more to do with culture in her context. She further clarified that when she meant looking at things with culture as a parameter, she in no ways meant it as any sort of propagation. She added that there was no need of propagation, as these thoughts were so well rooted in Indian cultural that rarely did anyone get taught about them. One learnt it on their own and only when one made a conscious effort and thought about them, did one draw parallels with the western ideologies. So if one found a parallel it should be pointed out.

Incidentally she chanced upon reading a book written by an author by the name if Paul Anand. The name struck her as the name had happiness in it and this was what everyone was seeking at all times, however the question was whether the author himself was really as his name suggested. Moving to the next aspect of QOL, she questioned as to how one was missing out on the economic status being used for years to define QOL. It was assumed and taken for granted that QOL was being considered only after a certain basic level of economic status was fulfilled as no one was talking about the downright hungry people. Citing an example she narrated an incident

she came across on television. The show was interviewing a few non-sighted photographers. For a sighted person, it seemed like something a non-sighted person could never do, however the people being interviewed mentioned that because they were blind, they did not restrict their creativity to what one saw and perceived, but had an advantage of adding dimensions difficult for sighted persons to think of. For sighted people it felt like their QOL was low as they could not see, and their immediate reaction would be sympathy or even pity, but for them, their QOL was on a level which the sighted could never fathom. This brought into picture the aspect of optimism which she said was way beyond any economics. It played a significant role in ones QOL.

Focusing on the Indian cultural aspects, she deliberated on the few concepts which had a non economical, non materialist basis, something one could internalize in the way one looks at life. It was the attitude that one had towards life that changed the whole perspective of one's QOL. Interestingly, she pointed out that the word ATTITUDE summed up to 100, and was the only word to do so. It basically meant that attitude came from within. It could be termed as spiritual or religious or by any other name, but what remained a fact was that it was practical along with being non-economical or materialistic in nature.

Happiness when seen in a traditional view meant avoidance of pain. In India when people were questioned about happiness, most called it *sukh*, more in the reference of it being the opposite of *dukh*. As per the Buddhist concept, *sukh* was the lasting of one's wellbeing, freedom from mental illness, the joy of moving towards ones inner freedom and loving kindness that radiated towards others. Narrating an interesting episode from *Mahabharata*, from the section called *Yaksha Prashna* she said that all Pandav's except Yudhishtir died because they did not listen to *Yaksha* and would bring them back to life if Yudhishtir answered his question. *Yaksha* asked him, who was happy? Yudhishtir replied saying, one who ate a frugal meal late in the day was happy. This meant the one who was free from debts and the one who was not continuously away from home. But the message was very clear; one does not need a lot of resources to be happy.

Talking further, she said that the third widely accepted meaning of happiness was anand. This was the difficult part as it brought with it spiritual elements along with a very basic mundane

aspect. Blissful view of anand depended on the trigunas. The other aspects like swasthi, kshema, swasthya also brought out aspects of happiness through wellbeing, security, self-health; which were also the aspects of mental health. Another important aspect in Indian culture was 'santosh' that is being content, which was not seen in the western ways. *Stithpragya* state was something one must get into and answer whether it brought about happiness and QOL.

She ended by saying that QOL and QO Living were different, and what one needs to look at was QO Living to achieve QOL.

### **Speaker 3 :**

#### **Introduction of Dr. Manas Mandal**

Dr. Mandal is an expert in cognitive sciences and neuropsychology and has made a significant contribution in the area of military psychology. He is currently serving as a distinguished visiting professor at IIT Kharagpur. He was the former Scientist and Director General at Life Sciences India. Prior to this, he was a Chief Controller of R&D at Life Sciences DRDO. He was also the Director of Defense Institute of Psychological Research for nine years.

He was awarded his Doctorate degree by Calcutta University. He began his career as a lecturer at the Banaras Hindu University in 1983 and completed post doctoral research at Delaware University as a Fulbright fellow and at Waterloo University as an International Scientific Exchange Awardee in Canada 1993-94. In 2003 he was a Fulbright visiting lecturer at Harvard University USA.

Dr. Mandal has been decorated with many awards like the Indo-Canadian Shastri Fellowship, Fulbright Fellowship USA, Career Award UCG and in 2005 Dr. Mandal and his team were honored with the Agni Award for Excellence in self reliance for the contribution towards development of computerized pilot selection system for the Indian Air force. He was also given the Scientist of the year award in 2006 at the hands of the Prime Minister of India for his contribution to Military Psychology.

He has 12 books to his credit with 85 research papers in international journals along with 20 national papers with more than 1500 citations.

### **Speech: Methodological challenges in research on Wellbeing**

Dr. Mandal began his speech stating that he was there at the seminar to not answer any questions, but to ask more questions as he was the youngest among the retirees present at the seminar. After retiring from the Indian Armed Forces, i.e. the Ministry of Defense, as a Research Scientist, he decided to spend more time on researching happiness as IIT Kharagpur, which had recently set up a centre of excellence for Happiness. Science of happiness was the identified area where engineers were now working to make others happy. The goal was to see how technology could change peoples' lives.

Referring to Dr. Lilavati's statement on happiness, he said that she was right in mentioning that happiness was an important component of QOL. The idea of conducting research on happiness struck him when he was retiring from DRDO. Much of his time was spent in Siachen glacier, in Khardungla Pass, in jungles, deserts or under the sea. In the last 15 years of his association with the armed forces it was his responsibility to maintain the QOL of the forces.

Narrating one incident he said, in Sept of last year, he was visiting Changla Pass which is about 18000 ft above sea level, where they had set up a laboratory by DRDO. On reaching the pass Dr. Mandal saw one soldier crying. On asking him the reason, he said he was missing his mother. To this, Dr. Mandal asked him if he wanted to go home. The soldier immediately retorted that he was only missing his mother and was not looking for any leave. He said crying made him happy and that Dr. Mandal should not stop him from that. He said he was not keen on leaving work and going anywhere.

Dr. Madal was stunned to see that a young soldier who was facing the enemy at -40 degree was ready to take things on to himself from the enemy, but was not willing to take leave and was happy in expressing his emotions of missing his mother in the form of tears. This incidence lead to Dr. Mandal wanting to find out more about what happiness was and what it meant to people.

Dr. Mandal believes in three aspects that affected ones QOL- affluence, authenticity and appreciation of life. He said that if one goes by the western models, it was evident that 80% of the theories were built on 20% of the population. Very few theories were based on Indian or Chinese subcontinents which actually had the largest human population.

He pointed out that very few researchers had worked on Happiness. One of them was Nobel Prize winner Daniel Kahneman who talked about objective happiness, i.e. the feeling of happiness one felt at that moment as against reflective happiness in attitude. The other scientist was Martin Seligman who stated that objective happiness was no happiness and one needed authentic happiness, which was meaningful engagement and accomplishment. So these two conflicting theories have been studied worldwide and what one needed to see was which theory could be followed in India. When thinking about the concepts of developing happy cities, these theories were being pondered over and it was realized that In India the theory of objectivity could not be considered and one needed to look for authentic happiness which one got from relationships, intimacy, accomplishments, engagements, and so on.

IIT students had responded well to the course on happiness. The reason why IIT decided to start a course on happiness was because it believed that it was important to not only look at the quality of one's career but also the quality of life. Dr. Mandal believes that career lies within life and not the other way around and that one should go by the science of living rather than the art of living. Talking about the Harvard study on happiness, Dr. Mandal said that it was the longest study ever undertaken. It has been conducted since 1938 and it primarily concluded that relationships were more important than economic affluence and that loneliness killed more people than smoking and alcoholism.

However, beyond all this, there were a couple of questions that were still bothering Dr. Mandal and he put forth them for the audience as well.

1. What made a person really happy? Was it abundance or scarcity? This he said was a researchable question and one must find an answer to this as everyone wants to be happy. Also another interesting aspect in happiness was that happiness did not save anyone from dangers. One needed negative emotions to counter dangers and survive. Being a neuropsychologist he said that the surprising aspect about brain is that it did not have a happiness centre. The brain looked at happiness as a resultant of the need of humans to communicate, which meant that when one was happy, one wanted to communicate.



2. Could one remain happy without economic affluence? He said there were people in India who were not economically affluent; however that did not stop them from being happy. Economic affluence was more connected with quality of living. So were quality of living, economic affluence and a certain standard of living the main criteria to make someone happy? Or could someone be happy with the limited resources one had? This was one of the research questions he had in mind when working towards making cities in India happy.

3. If happiness was a choice, why were so many people unhappy? Were some people predisposed to happiness or predisposed to being unhappy? Was it the genes or was it something one nurtured?

4. Were people working hard to think about negative thoughts? Everyone was designed to follow the flight or fight methods and research showed that all negative thoughts like anger, sadness, fear, disgust etc had locations in the brain, where as there was no centre for happiness. Why so? Speaking about ones state of mind, he said it depended on what level they were at. The level began from information. When information was taken in, it became knowledge. When knowledge was utilized it became experience. When one combined knowledge and experience, one understood truth. Then one realized that truth was not the fact. Combining truth, knowledge and experience, one got wisdom. When this wisdom was exercised, one attained bliss and supreme happiness. So depending on what level one was in this chain, one would experience that as their then state of mind.

5. Does one over rely on their best choices to be happy? A number of times people wait for the best and remain unhappy. What was more important was to be right rather than being or wanting the best.

He said that there were three kinds of decisions in life-1. Best decision, 2. Good decision and 3.Right decision. In the best decision, there were no alternatives. In a good decision, there were alternatives and one chose the best out of that. Right decision was the one which could be self defeating at that moment but would eventually result in happiness. So most wise people, who experienced bliss and supreme happiness banked on right decisions as there was nothing like the best.

6. Hypothetical missed opportunity: why did one repent for something they could not achieve? People say that, such a thing if happened would have been the best thing for them, but in reality there was nothing like best for something that is hypothetical. It was just an assumption. It was a

self created unhappiness which either led to aggression or depression. This unhappiness was a result of the asynchrony of context, content and intent. The three needed to synchronize to generate happiness.

It was also interesting that intent came from attitude rather than aptitude. Citing the example of Deepa Malik, the Paralympian, he said that happy people were more resilient, they knew how to bounce back when they faced difficulties as they did not want to get unhappy. This also makes one think about resilience as one factor affecting happiness.

7. Placebo or nosebo? It was seen that for some people the placebo effect worked beautifully while for some the nosebo effect got developed. This he said should be studied to know why and what it relates to in terms of that persons attitude towards happiness.

He said these were all research questions and one must try and seek answers for them.

He ended his speech with a message that he gives his students.

Choose to be happy in life with each shade of color and every ray of light as seeing the negative is as much important to be able to cherish the positives.

The chair summarized the symposium post which she was given a token of gratitude by Jnana Prabodhini.

The symposium broke for lunch post a round of questions and answers.

# PANEL DISCUSSION 1

## MEASUREMENT OF QUALITY OF LIFE

- *Dr. Anagha Lavalekar- Panelist, Head, Jnana Prabodhini's Institute of Psychology  
Topic - Developing QOL instruments - A challenge*
- *Dr. Anuradha Sovani - Panelist, Head, Department of Psychology, S.N.D.T. Women's University, Mumbai  
Topic - Measurement of QOL - Scales & Procedures*
- *Dr. Manas Mandal- Panelist, Honorary visiting professor at IIT Kharagpur- Psychology Department  
Topic - Methodological challenges in research on well-being*
- *Dr. Vanita Patwardhan- Chairperson, Senior Research Consultant and Ex-Head of Jnana Prabodhini's Institute of Psychology*

### **Panelist 1: Dr. Anagha Lavalekar**

#### **Introduction:**

Dr. Anagha Lavalekar is a meritorious student with a Bachelors and Masters degree in Psychology where she topped the university exams. She continued her studies in social educational psychology and also received her Doctorate. She has earned the junior research fellowship along with a post graduate diploma in Women's studies, again topping her examination.

Dr. Lavalekar joined JPIP as a research associative and assistant professor in 1994 and today she heads the same. All through these years, Dr. Lavalekar has helped develop 20+ psychological tools, provided institutional support and research guidance to graduation students settled abroad. She is recognized as an able guide by the University of Pune for doctoral students and has four students currently seeking her guidance for their PhD research. She has 25 publications to her credit and enjoys professional memberships of well known institutes. She has read papers in many national and international conferences.

### **Speech: Developing QOL instruments - A challenge**

Thanking the dais, Dr. Lavalekar said that she was delighted and nervous at the same time to be speaking at such an august gathering of academic stalwarts. She said she was delighted as the topic was close to her heart and was relative to what she had worked on for years like relationships, social awareness, child development and emotional intelligence, concepts which were close to the concepts of QOL. She said the nervousness was because of the vastness of the topic and the thought whether justice could be done to it in one session within the limited timeframe and her modestly accepted fact of limited knowledge. However she said she would try her best to trigger the thought process for herself and the audiences via this seminar.

She began with a small story of two mice: A country mouse invited his cousin who lived in the city to visit him. The city mouse was disappointed seeing the sparse meal of a few kernels of corn and a couple of dried berries. The city mouse said, 'my poor cousin, you hardly have anything to eat. I do believe that an ant could eat better. Please do visit me in the city and I will show you rich feasts readily available.'

So the country mouse left for the city with his cousin. He was offered a lavish feast. The country mouse could not believe his eyes as he had never seen so much food and so much variety ever before. As soon as both the mice sat down to eat, they were intruded by a big fat cat. Both the mice fled and hid in a small uncomfortable hole till the cat was gone. They came out of the hiding and went on to eat, however they were again interrupted by another cat. The cats around were also aware of the feast they had in store. This repeated 2-3 times when the country mouse decided to leave. He said, 'you do live in a city of abundance, but I would like to go home where I can enjoy my meal in peace.'

Reflecting on the story, Dr. Lavalekar said that the city mouse was okay with the hustle bustle and dangers of living in the city as long as he got his feast to eat, however the country mouse preferred his mundane food and security & peace of mind was more important than rich food.

Now a similar question had come up as had been asked multiple times since that morning. What was QOL and who decided the parameters. When it came to the measurement of QOL it

depended on the decision that one took. It was not possible to decide the parameters unless there was a common platform for tracking and providing some basic thresholds. She said that the concepts of QOL were fluid, sometimes abstract and multifold and had it been a concrete concept the measurement tools would have been developed easily.

The initial measurement of QOL was started for health as it was a tangible concept and could be concretely measured. When speaking to her students, Dr. Lavalekar asked them to help her with an instrument that could be used to read their minds as there was no such instrument. She explained to them that one's mind was like air; one could not see or hear it, but could feel it. She said QOL was a similar concept as one could not show it but it could be felt.

The assessment of QOL was complex as the factors on which QOL depended were both objective and subjective i.e. it had binary dimensions, in fact it was multidimensional. So when initially people started thinking about how to measure ones QOL, the theory of item measurement was introduced. This theory stated that indirect measurement of QOL was possible by asking a series of questions. These were then answered and converted into numerical scores. Item scores were obtained which were combined to get scale scores which again were put together to get domain scores depending on the comprehensiveness and multidimensionality of the model. This was how the measurement of QOL began.

Talking about the pluralistic model of QOL, she said that there was a need to address both objective and subjective elements. There were subjective open ended questionnaires which were difficult to access as the interpreters subjectivity interfered with the analysis. Hence if one looked at such measurements, the subjectivity was an intricate part and could not be separated for isolated evaluation. Then what needed to be done next was to check the validity and reliability of these tools, which to some extent could be addressed with developed statistical tools. For the assessment of subjects like QOL through interventions, two more aspects played an important role- sensitivity and responsiveness.

Defining briefly Dr. Lavalekar said that when one referred to the true value of one's QOL (item score +scale score +domain score) e.g. when Rational Emotive Behavioral Technique was taught

to participants in a workshop, may be their QOL in terms of emotional wellbeing, self management would improve. To prove this, initially it needed to be pretested on set parameters and derive a score with respect to QOL, and this value which one got was the true value. The ability of the measurement to reflect the true changes in the true value was defined as the sensitivity of the instrument, which was difficult to ascertain and establish. The second aspect was of responsiveness, which was the measure of association between the change in the observed score and the change in the true score. This association also had its own characteristics and it had to be established whether this association was there in the first place adding to the challenges for people who were developing instruments for measurement of QOL.

JPIP had taken up QOL as one of its thrust areas for research for the past 10+ years. There had been varied efforts made to access all the micro aspects pertaining to QOL.

Dr. Lavalekar pointed out the scales which have been established so far as:

1. First scale was developed by John Flanagan
2. Perceived QOL scale by Donald Patrick
3. Comprehensive and multi axel scale by Cummins
4. Specific tests like older peoples QOL, work related QOL and so on

Limitations being faced during the development of these tests were that the evaluations could be momentary as the tests were conducted in certain environments, common to all in a classroom setup. In such a set up, it was assumed that everyone was in a similar mode, whereas this being an assumption could not reflect the true value. Also there could be a halo effect, which meant that a person feels good about his or her QOL if that day or the previous one was pleasant or could be the other way around as well. There could be some opinions and responses of special situations which get omitted or generalized for e.g. the compulsion of someone needing to stay at home because of certain reasons, cannot be reflected in the true sense of it is, which actually affects the QOL.

Continuing her talk on limitations, she spoke about the research being done on QOL of suicide cases and suicide survivors, family members of terminally ill or mental health patients. If this

special condition was not considered, the evaluation got completely paralyzed and was a major limitation in research.

The last limitation was that the assessment of specific areas of life could get flattened or marginalized when one focuses on the total concept. To address these limitations, JPIP had worked and are still relentlessly working on developing tools that could cater to as much specificities as possible. Its team members had dedicated over a decade in tool development to ensure maximum precision in test output. So tool development was a long drawn process which required following all set protocols as one could not afford to lose its comprehensiveness and accuracy. Some of the tools JPIP has developed are:

1. Life satisfaction scale
2. Marital satisfaction scale
3. Family Culture Inventory
4. Work Life Balance (open ended hence not standardized)
5. School Quality of life
6. Screening of Mental Health assessment and so on.

Talking about the scope of research being done for QOL, Dr. Lavalekar said that the scope of research had now widened. It was no more restricted to an individual, but more so for the society and nations as well. Also initially it was predominantly limited to financial status, however today many more factors like gender parity, availability of hygiene, good governance, sustainable development of nations, manageable speed of life, social belongingness, etc played an even more significant role.

Talking about her preferred theory, Dr. Lavalekar mentioned that the model put forth by Abraham Maslow was close to her heart. She believed that Maslow's Need of Hierarchy could be considered as the base of the ladder of QOL for measurement. She questioned if any assessment tool could be developed on this theory, wherein satisfaction of the D needs- i.e. deprivation needs that he had quoted, which were the physiological and safety needs referring to economy, health, productivity and safety components as per the model suggested by Robert Commencier, while the growth needs of love and belongingness referred to other domains, namely intimacy

and place in community could be considered. The fourth and fifth growth needs of self-esteem and self actualization overlapped with the place in community and emotional wellbeing aspects of QOL. It would be interesting to see if certain types of personalities could be associated with certain aspects. She also pondered over whether a tool based on the Triguna model (*Satva, Raja and Tama*) could be developed to assess one's QOL for the ones who had a dominance of one *guna* in them.

In conclusion, she said that though QOL had always been a challenge for researchers across the globe, efforts were being taken to unveil this complex nature, to make its assessment more valid and wholesome. Adding further she said that the social relevance of the assessment of QOL should not be ignored as the real crux was to research for bettering one's QOL to bring it up to an optimum level, post which people were free to follow their ways for further enrichment.

So in a nutshell, if the individualistic parameters of the western world and the collectivist approach of eastern world were fused together in the future, a more meaningful assessment of one's QOL could be possible.

## **Panelist 2: Dr. Anuradha Sovani**

### **Introduction:**

Dr. Anuradha Sovani is a psychologist and a psychotherapist. Presently she is a professor and HOD of Psychology at SNDT Women's University, Mumbai. She has formerly headed Dept of Applied Psychology, University of Mumbai and has been a trustee and a consultant at the Institute of Psychological Health-Thane, Maharashtra. She has done her M.A., M.Phil. and Ph.D. from University of Mumbai and has earned the Chancellors Gold Medal at the Masters Level.

She is a proud recipient of various scholarships and awards including the UGC Research Fellowship, the NTS Scholarship, and the Maankar Prize by the University of Mumbai. She has guided 12 doctoral students with 6 more currently studying for the same. She has authored 10 books in Marathi, 4 on child mental health, 1 on QOL, 1 on couple relationships and couple counselling, a popular new series called *Manas Rang* and 1 book on personality disorders along with over 65 research papers being published in national and international journals.



The UGC's major research project on schizophrenia was completed by her along with her colleagues and is now published as a book. She is currently working on a SHAGE book (Study for Healthy Ageing) in the field of psychology and cognitive neurosciences. She also serves as a consultant at various state and national level bodies.

### **Speech: Measurement of QOL - Scales & Procedures**

Thanking the organizers for inviting her to speak at the seminar, Dr. Sovani mentioned that she was going to add population to her topic as it was something that had crept up quite a number of times in the seminar as well as there was a need to address the aspect of different populations, be it in India or abroad.

She said that the 20min was aimed at being a kaleidoscope and that she was going to only touch upon a number of things and not delve too deep into them.

She showed a video clip and asked everyone to ask themselves at the end of the clip as to whose QOL were they looking at?

The clip narrated a story titled 'The Given Tree'.

The story was about a boy who loves a tree and the tree loves him back. The tree gives the boy an apple and he eats it. The tree asks him to play with him and swing on the branches and the boy does so happily. Then the boy grows up and tells the tree that he did not like swinging anymore and that he now needed money. So the tree asks him to take his apples, sell them and make money. So he does that and earns a good amount. Now that he had enough money, he tells the tree that he wanted to travel. So the tree tells him to take the branches, make a boat, travel and have fun. So the boy does that. Once he is back, the tree asks him to play with him. The boy says no. He says he was in love and now that he had money and had traveled, he wanted to get married and stay, but he did not have a house. To this the tree tells him to cut it down, build a house and stay happy. Many years pass by and the boy is now an old man. He comes to the tree and tells him that he wanted to rest and the tree asks him to rest under him as that was the best

place for anyone to get his rest. The story basically depicts this lovely association between the tree and the boy and gets us thinking.

Dr. Sovani said she showed these clips to students or parents and questioned them as to whose QOL were they looking at. She asked the parents who they were in the story, were they the tree or the boy? Because in a lot of cases, it was the child who was the giver, it was the child who was giving them all the joy even though one might feel it was the parent. She said it was a very dynamic concept and could not be standardized. This showed that physical measures were not enough, they were relative.

The three areas of QOL chosen by Dr. Sovani were Schizophrenia, Epilepsy and Ageing.

Schizophrenia: Referring to a chapter she wrote for a Canadian publication on disabilities, she said she was keen on writing in this book not only because it would be widely read across the world, but because she got to use the word Shubhartis against schizophrenics. So in QOL, the scales and procedures change with the change in the way one uses words. Shubhartis talks about people who are on the path to wellness and are not labeled as people who are sick and need to be kept away in asylums. Dvij Puraskar (life reborn) is an award institutionalized by IPH laude the journey of people who have come back to life, come back to wellness from schizophrenia. The award ceremony was always a huge glamorous one second to no other award functions and some beautiful life journey stories came out of these award functions which according to Dr. Sovani, needed to be included in scales and measures of QOL.

The second area was that of Epilepsy. Here her focus was not to talk about the conditions but to elaborate on a lot of good work that has come out of India in measurement QOL in epilepsy. The measurement was not restricted to only the condition, but the associated neurobehavioral conditions which the person and the caregivers' experience. Building self-reliance and psychosocial support was subtexts everywhere particularly in India as there were well established networks and family support. This was something that also needed to be included in Indian scales and procedures. In the western world, one did not have as much psychosocial support. The international definition of a caregiver was the number of hours the person spent

with the patient in a week. When related to the Indian scenario, it was seen that the caregivers spent those kinds of hours with the patient in a day. So it was clear that the same measurement and scales prescribed internationally could not be utilized in the Indian scenarios for any studies. The third area was on ageing: Dr. Sovani stated that this was one huge area for research. She referred to a newer book published in the west on Positive Neuropsychology. It talked about how healthy ageing did not have to only be physical healthy ageing but also mental, social, emotional and spiritual healthy ageing. Referring to a paper published by IPH recently worked on by her colleague Ms. Shubha Thatte, called the SHAGE study, she detailed out saying that the study was aimed at learning the importance of self reliance and people's perception of self. The study looked at people's perceptions of how young they were and how young they felt. This aspect she said required being included in procedures and the way one looks at their own ageing aspects needed to be considered into the scales.

Burden and caregiver burnout: This she stated was a huge factor in the west. This burden was not only because of any illness or diseases, but could be caused due to distress caused by things like stress, work life balance, single parenting, migration, etc. The QOL changed for a circumscribed period only and one knew when it was likely to end and yet the QOL was poorer, but it was accepted as it was by choice.

Talking about post trauma growth, Dr. Sovani said that India had very good post traumatic growth stories. The positives that came out post a trauma, like a person who had survived cancer came out saying he learnt so much, or someone saying they were not aware of being so resilient and so on. The same was even applicable to post traumatic mental illness like schizophrenia. Such people have a gallery in Canada (Mad Pride Mad City) where one of the painters said that some days he felt strong to hold his head high to the world and shout to the world that he was there and on other days he just could not.

She questioned the audience as to why schizophrenia journals had a first person account? Why did they have covers of all such post traumatic paintings? QOL assessment had to do with all this. Post traumatic growth of the experience of illness or distress. What good came out of that? It did not have to be a black and white distinction of what were bad events and good events.

The next question she threw at the audience was: why does one assess QOL? Her opinion on this was that it was assessed because one wanted to locate specifics versus generalities and wanted to generate specific symptoms. Giving an example, she said, a schizophrenic had positive symptoms of delusion and hallucinations, positive formal thought disorder. The caregivers were miserable. The same person later developed negative symptoms like apathy, alogia, did not want to mix, anhedonia, and sat quietly in a corner. The family was happy as he was not a trouble anymore. But the question was whether the patient was better off? The answer was definitely a no, because positive symptoms get better much faster with medicines and therapy. So the idea was to understand the textures of the illness, as to which aspects improve sooner and which aspects hits one hardest.

Now another question was, in such scenarios, who was approached? It was the family, the doctor or the caregiver and they all had a different opinion. So who was the scale for? One of her students was attempting an experiment where she wanted to use three scales, e.g. depression: She first took the scale used by the professional, like the Hamilton Depression Rating Scale (HDRS). Then she took one used by the patient- Bed Depression Inventory (BDI). She was keen to develop another one which was to be rated by the caregiver, because for patients of epilepsy or schizophrenia, it was assumed that the patients could not give their own ratings so it had to be that of the caregiver, where as for depression patients, it was assumed that the person himself could rate the problem and so caregiver ratings were not available. She wanted to correlate these three scales and check the outcome. If they correlated, then it made sense to give the scale for rating to caregivers only. If this worked, it would lead to detection of so many more cases of depression, because a friend, a sibling, a parent can give a much better rating of their loved one if they see depression symptoms. Also she pointed out that along with the rating, the efficacy of that scale or the utility of that scale in the society was also important.

To end she asked a couple of questions for one to ponder

1. Could QOL be reduced to a number? She opined negatively
2. Was scale, life stage dependent?-She opined affirmatively

Nun study: David Snorden.

She summarized the findings in a nut shell saying there were many nuns who were seen to live beyond 100 years. On postmortem it was revealed that many brains showed Alzheimer's changes, but they are very fit. They could remember, they could learn, they worked, took care of themselves. David Snorden studied this to understand how this was possible? And the answer he got was that there was spirituality, community living, and a sense of wellness which made all this possible.

**Panelist 3: Dr. Manas Mandal**

**Speech: Methodological challenges in research on well-being**

He began by talking about the hurdles in research. He said that if one was really interested in researching wellbeing, QOL or happiness, one needed to clear some basic fundamentals. He said he thought research was done in two ways. Either it was explorative studies or exploitative studies. In explorative studies, one went from no knowledge to new knowledge where as in exploitative studies; one used existing methodologies and paradigms to extract best out of it. He added that, most explorative studies were experimental studies whereas most exploitative studies were test based.

If one tries to understand the difference between test and experiment, one needs to get the clarity on whether one is keen on finding out the generality of the population or is one looking out for the differences between two individuals. If it is the difference, then it is a test and if it is a generality of a trait or a character then it is an experiment. So in short, when two individuals are similar it becomes an experiment and when two individuals are different it becomes as test.

Now, once one decides to go ahead and research either with an experiment or a test, then there were three ways research could be done. One was to get no knowledge to new knowledge. If not possible then at least challenge the existing knowledge, and if still one fails, then accept the existing knowledge and add a surprise element to it. If all these three were not satisfied, then the research would not be a serious one and would otherwise be replicated.

Long back a student asked him what the difference was between classroom practical and the research that was being undertaken. The student was interested in the wellbeing research. The

answer to that kind of a question was the fundamental to making any effort that was required to be taken up after the seminar. What he was trying to hint at, was that people needed to make an effort to do something collectively.

He elaborated on the answer stating that in a classroom practical one had two known variables and a known outcome. In a serious research, one again had two known variable and a known outcome, but one needed to find an additional unknown outcome. So research should be done in such a way that an unknown outcome is obtained that speaks about the relationship between the two known variables, because nothing is new otherwise, and such a research is a serious one. When one aims at such a serious research, then it could be generally done in eight stages. These stages were not from any book but came from Dr. Mandal's experiences of conducting researches over the years.

He said that in India people concentrated on one or two kinds of research. One was the research to get from no knowledge to new knowledge and the second one being from new knowledge to building a theory. The third kind of research which was done was from theory building to principles of application and 98% did this kind of research. The forth type was from principles of application to discovery of solution which was called directed basic research and was done by engineers and IIT students within the psychological field. The fifth type of research was discovery of solution to translation into a form of deliverable. If the deliverable were not there, the research was not fructified. The deliverable could be in the form of filling the gaps in the knowledge or creating a knowledge grip. The sixth type of research was the one that went from discovering to translation and from translation to production and after production it went on to becoming end user integration. So what one needed to think was, with production of so many tests or different versions of it, was it really helping people or was it being utilized to understand what they were really interested in.

One must ask whether one was really interested in doing a research to create a knowledge grid, to Meta analyze the data base and try and understand what got derived out of it. If not, then one needed to understand from there how one should go beyond what is available at the basic level, i.e. the directed basic research. If it was still not, then one needed to try and understand the proof

of the concept, which was actually the applied R&D research and called as application based research. QOL had been a basic research all through as it was being used for a limited population. This statement was based on his experience during the Mumbai 26/11 incident. He was asked by the Government to find out the level of public panic. Whether it was the 186 who were killed or was it the entire nation which was agonized with the event that everyone at the periphery of their health or otherwise had their QOL lowered. He found it very difficult to assess it. He said he found that there were quite a few people who were working on QOL research and mental health areas, but no one responded. This led him to questioning himself whether the researches done were simply contributing on an individual level or was it that people were still interested in using tools, procedures, methods for mass level integration within the set population. He stated that when research is taken out of the laboratory onto the field to make it deliverable, its utility and feasibility augments several times.

He requested all who were keen on conducting QOL research to try and go from individual level to mass level.

Secondly he said there are many who are keen on such research which will again make India high in fragmented capabilities. He was keen to know if this could be made into a conjoint effort as was the new 2017 concept called, Psychological Studies Accelerator, with 176 universities of the world joining hands to understand how one perceived or judged a person. Similarly he was keen to see if scientists and researcher from India could get together collectively and create a work share to understand the phenomenon of QOL as a whole as probably the effort that would be made would be better than the one made in a fragmented manner.

Thirdly, psychometric test based method was an excellent way of doing research but as said by Dr. Sovani, God had only given one speech to hide thought, so whatever one judges and responds to, the question is whether one really wants to speak about it or wants to hide it or camouflage it. Based on this he said, the problem of social desirability had become a big problem in the psychometric test in India more so because Indians are groomed to lie.

Now, one needed to think whether they can go beyond psychometric evaluations and move towards behavior-metric studies as it was easier to get behavior sample in the form of proximal study, facial expression study, paralinguistic study, kinesics study and so on. He said that it had been proven that verbalization tells nothing and that vocalization tells everything. Verbalization is what one says and vocalization is how one says it. So according to him, instead of a psychometric test, a behavior metric test would get a much better sample of a person's intent. So the idea was that, if one really wanted to make science a little more objective, one needed to go beyond individual tools and move towards mass tools. One could also conduct QOL study based on social placebos which enhanced QOL. Adding further he said that a nonconventional and a nontraditional method of research and studies would add to the existing knowledge and take researches to a much better level. So whenever one undertakes a research one must check at what level one is.

The other thing that is important is the surprise element. This comes in when the approach is multidisciplinary and when multidisciplinary approaches, complementarity and compatibility come together, deliverability is achieved.

Dr. Mandal then proceeded to ask if the contemporary issues of relevance like social paranoia be addressed as it was seen rising and one needed to know how it affected ones wellbeing. One can progress better if one go beyond what was available in the psychological models. One must conduct research that addresses to complex social problems like optimism bias, which makes people believe that nothing can happen to them and it is only the others that can get cancer or a heart attack and die even though they have all the ill habits. Optimism bias kills a lot of people and needs to be researched under QOL.

Ending his speech he urged JPIP to take up a long term research initiative which would be studied for years to come and help answer all questions relating to the methodological approach, the measurement and the challenges in a bigger and better way.



## SYMPOSIUM 2

### CHANGING CONCEPTS OF QUALITY OF LIFE ACROSS GENERATIONS

#### *August Dais*

- *Mr. Shravan Hardikar- Commissioner of PCMC*  
*Topic - Changing QOL of community and role of government in it*
- *Smt. Vidya Bal- Social Worker who played a vital role in India's feminist movement*  
*Topic - Changing face of women and their QOL*
- *Dr. Rohini Patwardhan- Founder of Sunworld- Old Age Home*  
*Topic - Population ageing challenges and opportunities*
- *Professor Neela Dabir – Chairperson, Member of Scientific Advisory Committee - JPSS*

#### **Speaker 1:**

##### **Introduction of Mr. Shravan Hardikar**

Currently heading the PCMC, Mr. Shravan Hardikar is primarily an engineer by qualification and an alumnus of Jnana Prabodhini. Post working with Wipro, in 2005 he cleared his IAS examination and stood 5<sup>th</sup> in the state and 7<sup>th</sup> on the national list. He started his government assignment from Panhala in Kolhapur followed by postings at Ratnagiri, Nanded, Yavatmal and other districts. His focus areas have always been on aspects of improving QOL of the rural population. His unique approach involving the people to help themselves makes every individual feel important and the desired outcome is achieved faster.

##### **Speech: Changing QOL of community and role of government in it**

QOL as a term seemed simple but was one of the most complex concepts. In the government, QOL was measured as per the standards established by stalwarts and institutes as were present in the audience. He said that generic definition and the accepted standard of measurement of QOL was health, happiness and comfort for individuals as well as communities. The government had been grappling with issues on QOL. To give the audience a sense of the same, he spoke on the history of the government.

Governance came into being in the 17<sup>th</sup> and 18<sup>th</sup> century primarily to foster QOL. By this, it meant providing the people of the land health and nourishment with the belief that human potential would be explored by people themselves to make a fortune. Later, security was added to the governance as every individual has an aggressive element which needed to be suppressed. For any governance this meant curbing of crime rate in that jurisdiction.

But as the society started progressing, if one plotted 200 countries in terms of the per capita income on y axis and life expectancy at birth on x axis, it was seen that the lower quadrant reflected the poor countries with low life expectancies, the mid quadrant showed the developing countries and the top quadrant represented rich nations with high life expectancies.

Now with this plotting when the history on progression was seen in the world for 200 years, it was seen that the early 17<sup>th</sup> and 18<sup>th</sup> century, before the industrial revolution, almost all countries were in the lower quadrant. Post industrial revolution as the economy started growing most countries like US and Europe moved into the topmost quadrant. Today India and a few other developing nations have reached the mid quadrants, which showed that the government had played an important role in getting individuals to realize their own potential and grow.

The government was also undertaking initiatives to educate and provide employment opportunities which in turn were helping raise the bar of QOL. He said that currently, the government used the Human Development Index and Gini Coefficients Tools to study various aspects required for the enhancement of QOL.

Elaborating further he said that basis the Gini Coefficient the QOL was a huge divergent. It could be roughly said that only 10% population was happy with their QOL, about 30% were just satisfied, but largely 60% overall were unhappy with their QOL. All this though was generic data without considering the specific vulnerabilities and requirements.

Talking further he said that QOL had 3 basics that needed to be considered when speaking about the population at large, more so in the rural and marginalized communities. They were- right to education, good quality shelter and expectancy of life at birth i.e. basic healthcare.

In terms of education, Maharashtra being a progressive state it had a high HDI compared to most other states of India, however female literacy in 7 districts of Maharashtra was lower than the average of that of India.

The instruments the government used to improve QOL were policies, programs, restrictions & regulations through rules and laws. It worked towards providing the above 3 necessities in the rural areas and looked at solutions like smart city initiatives for the existing cities. Also he said that a region was not just about infrastructure and development and that the government also boosted the regions livability in terms of the social, art, cultural and lifestyle aspects one looked for in life.

Finally he said what needed to be done was to see how this was dealt with. One cited examples of Ralegan Siddhi however it was not being replicated elsewhere as the real crux for replicating model villages and cities was the will and resolve of the people who lived there. Governments played an important role, but it was restricted to providing water, homes, sanitation, roads and so on. It was the people who needed to come together and decide on improving their own QOL and work towards it hand in hand with the government for it to be a sustainable working model.

QOL was a choice of a community and government was only going to be responsive, not responsible. It would only respond to what people want, but that needs to be decided and put forth by the people themselves. In a nut shell he said that enhancing QOL was up to the people, it was a community initiative backed by the government resolve and intervention.

## **Speaker 2:**

### **Introduction of Smt. Vidya Bal**

Smt. Vidya Bal is an eminent Marathi writer and an editor. She is a social reformer and a feminist who works in the field of equalization of the social status of women in comparison with men in India.

In 1964 she was joined Stree, a monthly editorial for a short stint. She rejoined Stree as a fulltime editor from 1983 to 1986. Post her tenure with Stree, Vidya Bal founded Miloon Saryajani in 1989. Her other work include Sanwad, Katha Gaurichi, Tumachya Majhyasathi, Aparajitanche Nihshwas, Shodh Swatahacha and Kamalaki (Biography).

Smt. Vidya Bal was involved in a legal battle in the High Court of Maharashtra for women's right to enter various places of worship. The High Court ruled in her favor.

### **Unveiling of 'Stree-Vidha':**

Smt. Vidya Bal unveiled 'Stree-Vidha', a compilation of 47 research articles written by Jnana Prabodhini volunteers and psychologists. This contribution from rural as well as urban workers helps one look at lives on women with various perspectives.

### **Speech: Changing face of women and their QOL**

Expressing her gratitude for being invited as a speaker, Smt. Vidya Bal introduced herself as a social activist who came of age twice in her life. Once biologically and the second time intellectually. It was this second coming of age that made her aware of what the world around was like and she began introspecting and questioning others. This was the beginning to her thought about QOL.

Drawing from all the deliberations she agreed that as of now, it was only humans that could think and change. Being born as human being, it was important one behaved like one. It was a responsibility one should undertake. It was important to be rational and sensitive. Referring to Mr. Hardikars speech, Smt. Bal stated that it was nice to see that for any regions development was measured on the basis of Human Development Index as against the past when only per capita income and gross GDP were considered.

Talking about the changing face of women, in the last 2 centuries, she said that undoubtedly one must admit that there had been a good change, with women education and employment opportunities. They were seen everywhere right from teaching to industries to aviation to researcher and politics, however this was still a small percentage of women when compared to the total number of women in India. So we could say that there had been a small change in the face of women though not very significant on the bigger scale.

Smt. Bal asked the audience a basic question. Were women recognized as human beings at all? And if they were not, then the question of their QOL did not arise. Everywhere women were being looked upon as secondary citizens' right from homes to Loksabha. Women were not considered as good or as bad as men and were still looked upon as very inferior species.

For centuries together, across the globe women have been looked at through the patriarchal eye which dehumanizes women. Everywhere she went, Smt. Bal was questioned as to what more was she looking for now that women were seen everywhere, but what men did not realize was that a woman was as much a human as he. Most cases the brains of women were never given the required status and remained unused.

Referring to Mr. Hardikar's speech she said that Maharashtra was proudly called 'Purogami Maharashtra', meaning progressive and forward looking with a rich progressive heritage that of Mahatma Phule, Agarkar, Ambedkar and the work they did with their foresight. Sadly all that had been left far behind, making her skeptical while addressing today's Maharashtra as 'purogami'.

Even the language reflected that of a male attitude and hence when she came up with her editorial she decided of naming it 'Miloon saryajani' and include men in it. Some said that she was being too finicky with small things like the language; however Smt. Bal believes that even these small changes lead to larger radical changes.

Citing two examples of how men have total disregard for women, she narrated an incident. When a government official was talking about liquor, said that if one wants to increase their liquor sale, name them with women's names. Shockingly no one in the audience had the audacity to ask that person's wife or daughters name and tell him that the sales would further go up if the liquor was named after them.

She further spoke on how with globalization and liberalization, women were being commoditized and surprisingly women were okay with that. Women are not just about beauty and looks but more of a human being as much as men.

Coming back to QOL, she said QOL could not be given to anyone externally. It needed to come from within. She recommended the audience to read two books to understand women and their plights and restrictions put forth by society even today.

She concluded by saying that dignity of death should be as much a thought as one thought about quality of life, because it actually did not mean thinking of death, but thinking of the quality of life to achieve the dignity at death. She said, women needed to start thinking about their own QOL and only then would they be able to achieve it.

### **Speaker 3:**

#### **Introduction of Dr. Rohini Patwardhan**

Dr. Rohini Patwardhan comes with a doctorate in Gerontology and Research in Management with special emphasis on old age home. By profession she is teacher and is currently the Principal at MIT Junior College.

She has participated in many national and international conferences and was awarded for her valuable contribution in care of the elderly by the Times of India.

She has also written a book - Aplya sathi apanach along with a number of editorial write ups in various magazines. She has played a major role in creating awareness in our society about senior citizens and their problems.

#### **Speech – Population ageing challenges and opportunities**

Dr. Rohini Patwardhan began her speech informing the audience that the initial topic informed to her was that of elderly and how times have changed, whereas the one on the invitation stated Population ageing challenges and opportunities. She looked at this as a rare opportunity to address both the topics within her given time frame.

Beginning with Population ageing, Dr. Patwardhan defined it as a population in a society with a large number of seniors and not an ageing population. In India, this concept had seen prominence post-independence and the reason for this was the increase in average life spans from 35years to 73 years. In most western world countries, population aging was a phenomenon seen in developed nations, where as in India this phenomenon was seen even though the country was yet to develop, leading to its own issues and problems. As a percentage the number seemed as small as 5%-6% of the population, but in absolute numbers this reflected in crores of people who were above 60 years of age.

She further stated that being a new phenomenon without any previous experience, it was challenging to figure out a way to deal with the added years to one's life and to maintain or enhance their QOL. This was especially true for people who had crossed the age of 65 as there

was confusion and uncertainty on simple or complex issues like whether they should work, or retire, stay in the city or old age home, stay with the family or how to spend their time, how to deal with their health problems, how to deal with their social life and so on.

She elaborated 6 aspects of populations aging relating to the overall QOL:

#### 1. Challenges:

- Number of seniors: the sheer number of seniors living at any place at any given point in time
- Confused state of mind: unsure of how to spend their life, where to live, what to do, how they could be useful and so on
- Migration: people moving from small towns to cities to metros, everywhere one went there were seniors who no one was sure of what to do with
- Health : one's own perception of health with added problems of negative health attitude
- Shelter: in rural areas, space was not a constraint, but there was no family to take care as most had migrated away to the bigger cities, while in cities, space was the major concern and affected the lives of everyone staying together.
- Social disconnect : since they were busy working, it was now difficult to socialize and had become a concern
- Generation gap: not able to communicate with their own children and grandchildren
- Considered as burden: they were considered as a burden on the society, family and government as well

#### 2. Opportunity:

- Increase in businesses like travel and tourism
- Food: since it was difficult to cook, there were many options being made available with home delivery options
- Surgical: huge development in bio-engineering with newer assistive devices like wheelchairs, sticks etc.
- Estate manager: they take care of the property for seniors as it gets difficult for the seniors to go and pay taxes and maintain their properties and so on
- Lawyers: to help tackle all legal issues arising for senior citizens

- Old age home : since a number of seniors were not welcome or could not be accommodated in the lives of their young ones or there was space constraint as is the case in the cities
- Doctors: with the growing age there were growing numbers of health issues and hence more and more doctors were required to address these issues.

Dr. Patwardhan further added that these challenges could be addressed if a senior citizen becomes a contributor to the society. To do this they needed to look at themselves as an asset, otherwise the problem was likely to get even more complex than it was today. The solution was to make the seniors productive.

3. The third aspect was that of a dedicated study focusing on the seniors of our society. Gerontology was the science which encompasses all sciences like psychology, sociology, economics, health religion etc. it was the most recent science yet it was the most developed one as it has benefitted from all the older and proven sciences.

4. Geriatric: it's a branch of medicine which focuses on elderly patient care. It needs to be specialized as is the case of a pediatrician.

5. Maslow's theory of hierarchy of needs: states that there were human needs that needed to be fulfilled and these have 4 dimensions, which were physical, environmental, socio cultural and emotional. Accordingly to his theory once a person's biological needs were taken care of, QOL came into the picture

6. Ericson's theory of lifelong development: When it was observed that in spite of all biological needs been satisfied as stated by Maslow's theory, people were still unhappy and unsatisfied with life, Ericson's theory was explored which talks about psychosocial development.

To conclude she said that, if one combines Maslow's theory of hierarchy of needs and Ericson's theory of lifelong development, then one can find out some solution to the irrational behaviors of seniors and deal with it successfully.

The session was then thrown open for Q&A session.



## **PANEL DISCUSSION 2**

### **ENHANCEMENT OF QUALITY OF LIFE**

- *Dr. Kalpana Srivastav - Panelist, Head, Psychology Department at A.F.M.C.  
Topic - Modern era menace and dynamics of QOL interfaced with psychiatric aspects*
- *Dr. Meena Hariharn - Panelist, Founder & Head, Centre for Health Psychology,  
University of Hyderabad  
Topic - Balancing Psyche & Physique to enhance QOL*
- *Mr. Pramod Phalnikar - Panelist, (IPS) IG , National Security Guards,  
Topic - Measurement and enhancement of QOL in CAPF (Central Armed Police Force)*
- *Mr. V.S./Subhash Deshpande - Chairperson, Secretary, Jnana Prabodhini*

#### **Panelist 1: Dr. Kalpana Srivastava**

##### **Introduction:**

Dr. Kalpana Shirvastav is the head of the department of Psychology at A.F.M.C. She has done her Doctorate in Psychology from Ranchi University. She works as a research scientist 'G' for the defense and has many papers to her credit.

##### **Speech: Modern era menace and dynamics of QOL interfaced with psychiatric aspects**

Starting her speech she informed that she found her topic very difficult as first it spoke about the menace of modern society, then it talked about the dynamics, and to add to this, the psychiatric aspects had to be added. She said she had a tough time amalgamating these three concepts. She decided to show glimpses of each concept separately and try and do justice to the topic within the timeframe allocated to her.

Talking about her views of QOL as a clinical psychologist, she said that QOL had to do with one's individual perceptions within the value system and the culture i.e. the context and relation to the goals and expectation, in terms of standards and concerns.

When WHO defined QOL, their definition was based on the lack of disease model. Drawing from Dr. Mandal's speech, she said that QOL was more of an efficiency model than a deficiency one considering the various aspects it covered like physical health, psychological health, spiritual health and independence.

As a clinical psychologist she had a lot of words to play around and give 10 definitions to the concepts. Not willing to do that she said she would be confining to the wellbeing model, the positive thinking model and the independence model. By independence, she referred to one feeling independent to grow.

Talking about the humanistic model, she said that is described QOL as the degree to which a person enjoyed the possibility of his or her life. If one enjoyed whatever they were doing then the QOL at that point was high. If one could adjust to the various daily tasks and enjoy them, then QOL was good. So basically QOL boiled down to adaptation, amalgamation and synergy. True to the happiness as described in psychology, it was subjective to one's own perception of self. If one was happy, it naturally made the other people happy about that person.

She further spoke about the concept of 'giving'. She said 'giving' was what got one satisfaction in self-actualization, which most of the times came with age. In Hindu philosophy as well, the importance of happiness in 'giving' was very well highlighted. So in the humanistic model, if this concept of 'giving' and mutual co-existence was considered, then what one was referring to was an aspect of QOL.

Speaking about the facets, she spoke about Being, Belonging and Becoming as was explained in Dr. Lavalekar's introductory speech. Speaking about the dimension of QOL she touched upon both medical and non-medical dimensions, psychological and social functioning. The indicators for QOL were security, good governance, less crime, opportunities for growth, satisfaction and wellbeing. So when one said menace with reference to the modern era, the first 4 points came into picture. Nowadays, one easily said things like, gone are the days of security and low crime rates, gone are the days when accidents were less and so on. So one can say that the QOL has been compromised as the environmental situation had changed for the worse and the

environmental context had multiplied into so many resources that individuals were trying to struggle with them.

Speaking further about QOL, she spoke on

1. Subjective satisfaction model
2. Role functioning model
3. Dynamic process model

Another thing which was important was when children came for help as they tried to cope up with the struggles of life. In most cases the expectation of the parents and teachers were pressurizing and children were struggling to prove their worth. Why did this happen? This happened because there was a gap between the expectations and the achievements and this affected QOL. To address this, one must do a realistic assessment of the individual's capabilities. Switching back to adult issues, she said that the aspects that were doing the rounds currently were the concept of stress, positive psychology and advancement of technology and its implications on one's health. These three things she said were a growing concern.

So when one looked at stress, couple of studies had been done and it was found that there was a problem with the psychological precipitation and the manifestation of the disorder could happen in the background of stress. It was also proved that stress induced psychiatric disorders. So where did the stress come from? It came as a result of both individual perception and environmental changes. So how could one reduce stress? Could one change the environment? No. So what one could do was to change ones perception and modify individual factors like feeling, thinking and attitude. There is a concept of givens. Things that one cannot change like changing environment, parents, teachers, colleagues, friends, spouses, work place, education curriculums etc. and frustration sets in when one tries to change these givens and fail. There is happiness when one accepts the givens and tries to alter things which one can.

There are various factors in terms of psychiatric disorders. One had to really feel the palpable aspects of QOL compromised with disorders like substance abuse, psychotic disorders, OCD, schizophrenia or milder disorders like anxiety and depression. One needed to listen to these

people and understand what QOL and psychiatric disorders meant. It was not something one found in books, it came through listening and experiencing. Post this experience one could socket all the physical, spiritual wellbeing into the right pockets. So the point she was trying to make was that in psychiatric disorders and QOL there was distortion, a lot of perceptual distortion which was a part of symptomatology and phenomenology and there was a whole range of interventions that worked on correcting these distortions, be it with drugs or psychological therapy.

The positive psychology movement was all about optimism, hope in medical cases as well and gave a lot of positive outcome research. Talking about fallacies, she said in psychiatry there were two fallacies, cognitive fallacy and reality distortion fallacy. Cognitive fallacy was one where a person thought everything wrong was happening to him. In cognitive fallacy, one had a disturbance in thinking and concentration and reality distortion fallacy was when one thought that everyone was conspiring against that person. So when such cases are addressed or cases with psychosis and schizophrenia were considered, stigma was the biggest issue. Stigma leads to isolation which leads to unemployment which further leads to withdrawal. It becomes a vicious cycle which leads to lack of QOL. So in psychotic disorders, the main issues of QOL of patients were stigma and isolation.

Another factor in such patients was social relations getting impaired leading to low self-esteem because of which they lose out of productive years of life. In cases like depression, a person experienced low moods, did not feel like doing anything, found it difficult to even perform daily tasks. However there were models that worked to help them get into daily routines and address mood elevations.

Substance abuse, was the most complicated when it came to recovery as their longevity in terms of relapses and difficulty to move away from the substances made it very difficult to manage affecting the QOL to a large extent.

Generalizing the symptoms, she said that unemployment, depression, anxiety, inability to perform, no family life along with a totally shattered self-esteem were the traits of patients with

psychiatric disorders. Also in psychosis the person feels the illness is not because of his karma, where as in substance abuse the person is made to realize by society that he was the reason for his state, which proved that QOL for psychiatric illnesses was a multidimensional construct. So the question was - what should be done?

Speaking further, Dr. Shirvastav said that to look into answering this, one must consider that there were policy matters and there were doable matters. Policy matters were the givens which actually one could work around. What one could do is lower the expectation in comparison to the achievements, so that adaptations are better. Provide ease of access to healthcare, education and rejuvenating facilities. Provide guidance to balanced diet and nutrition and access to well informed technologies.

She concluded by saying that there was a lack of universal definition and depending on the case there were plenty of models to choose from. The instruments used for evaluation were possibly not valid and that the approaches to assessments varied between subjective versus objective assessments. There was also a huge impact of culture on the QOL and wellbeing in India.

Ending the speech Dr. Srivastava said, “If standard of life is ones major objective, then QOL never improves, but if QOL is the main objective, then standard of living almost always improves.”

## **Panelist 2: Dr. Meena Hariharan**

### **Introduction:**

Dr. Meena Hariharan is the Founder Head of Centre for Health Psychology, University of Hyderabad since 2007. She is working in the field of behavioral cardiology and has published more than 26 research papers in international and national publications and has also written many books.

### **Speech: Balancing Psyche & Physique to enhance QOL**

Dr. Meena Hariharan began with a claimer stating that whatever she would be talking, would be relating to the work done by her and her team at the Center for Health Psychology in enhancing

cardiac health of people. More often than not, the term heart, in language literature, was very closely associated with emotions. One said things like my heart bleeds, my heart pounds, and for the youngsters my heart throbs and one associates one's feelings to the heart, whereas as a student of psychology it is a known fact that the actual feelings are not in the heart, but in the mind. Yet one has accepted the fact of associating emotions with one's heart.

She mentioned that she was going to talk about the work they were doing at the Centre for Psychological Health in enhancing cardiac health for patients with preliminary hyper tension to patients who had severe blocks and had to undergo a bypass surgery. When one talked about quality of cardiac health, the cardiac surgeon, either before or after the surgery accesses the heart as an organ with biomedical parameters. However it was observed that in a number of cases even if the surgeon had given a clean chit to resume their work and routine, majority of the people could not do so as they themselves still felt unfit. So then came into picture the question of one's QOL. The question was whether efforts were being made to bring back the QOL as was previously the case, if not at least was it being optimized.

Talking further she said that QOL of cardiac patient did not improve with medicines and surgeries alone, but had a lot to do with psychosocial aspects especially because the Indian culture was an affiliation oriented culture. Unlike in the west which was more individualistic, Indians were more collective. All decisions taken were done so assessing their impact on others, and what one with an illness or a surgery particularly needed was emotional care and if the medical care is devoid of that, then it was incomplete.

The relation between cardiac health and emotional QOL was mutual. When she referred to cardiac health, cardiovascular disease (CVD) was used as an umbrella term which included a number of aspects like hypertension, coronary heart disease, angina pain, stroke, and so on.

She elaborated on a few cardiac facts for India.

1. Globally there were about 17 million deaths due to CVD, out of which 75% were from developing countries.

2. India had 30 million heart patients, with 16 million in rural areas and 14 million in urban areas.
3. 33% of rural and 25% of urban population suffered from preliminary hypertension
4. 75% rural and 58% urban population was not aware of hypertension as a CVD. This was worrisome as hypertension was a silent killer.
5. Hypertension was the reason for 57% of stroke deaths and 27% of coronary heart diseases in India
6. India on an average performed 2 lakh cardiac surgeries in a year
7. In India the doctor patient ratio was 1:800 as against the accepted standard of 1:1000
8. In India the mean consultation time with the cardiologist was 7min when the range was 2-22mins
9. A cardiologist talked to the patients with terms like palpitations, hypertension, angina pain and so on and less than 5% of even the educated people understood these jargons and tried to figure things out on their own. It was the disease rather than the patient which was the focus of the treatment.
10. Gone were the days when a family doctor looked at the patient and diagnosed the element. Today most doctors were technology dependent.

Speaking about a research that the institute conducted amongst cardiac patients in the hospital and the community, it was seen that about 133/1000 patients suffered from severe depression and 321/1000 suffered from anxiety. This was worrisome.

The co-morbid conditions of depression were associated with inertia. What this meant was that the patient was not motivated to follow doctor's instructions, especially when it came to exercise and diet, self-monitoring or even visiting the doctor for timely consultations.

There was a connection between affect, cognition and motivations and the underlying factor was communication. So one can imagine the type of communication from the doctor, the nurses or any paramedical staff with a ratio of 1:1800? This was where the role of a health psychologist came into the picture.

The findings were surprising for hypertension and post bypass recovering patients. The study was done to measure the quality of one on one communication between the doctor and the patient. A very simple method invented by applying the formula of similarity index was used wherein the intended communication and received communication were mapped. The quality of communication was quantified for 300 patients and 30 doctors and followed up for a period of 8 weeks.

The patients were divided into groups depending on the communication they had with their doctors as low quality, medium quality and high quality. As a prognosis it was found that for patients with hypertension, systolic and diastolic pressures were taken separately, and the graph of pre and post communication was flat, showing low management of hypertension. Whereas in high quality communication it was seen that the pre and post communication measurement graphs showed a slope depicting better management of hypertension enhancing QOL.

In another study, the patients who had opted for a Bypass surgery were considered. A sample size of 300 patients was taken, who were divided into 3 groups of 100 each.

The first group got an intervention module called PACE (Program for Affective and Cognitive Education). This intervention was done a day prior to the surgery. The second part of the intervention was given the day the patient was discharged from the hospital.

The second group got the guided imagery as a relaxation technique. This too was administered a day prior to the surgery and on the day the patient got discharged.

The third group was a controlled group, which only received standard medical care with no psychosocial intervention.

This was followed up for 8 weeks. Post this, the findings were very clear. The group which received PACE intervention had significantly lowered distress levels, which contributed to their better prognosis and a better appearance, which was not the case with the controlled group.



However, guided imagery also had an impact, but it was only restricted to lowering the distress but not directly connected with lowering down the prognosis. So it was clear that the PACE intervention, helped the cardiac patients recover faster and they were ready to resume their regular life earlier than the doctors certificate to do so. They could assess their own psychological, social and physical state.

In a third study, they studied patients who were in the intensive care units post their Bypass surgeries. This was the most traumatic time for any patient and the psychosocial support given by the nursing staff was most crucial. The hospitals were divided on the bases of the availability of psychosocial care in the ICU's. It was seen that the ICU trauma was less in patients in hospitals which emphasized on psychosocial care as against the ones that did not.

The forth study they did was the comparison of the direct addressing of the doctor to a group of patients, as against the group of patients receiving the same information digitally in the form of an audio/visual. It was seen that the management of hypertension was much better in cases which had the direct doctor's intervention.

So to conclude she said, it was evident that psychology played an important role in the QOL of cardiac patients and it was time to move from biomedical treatment models to bio-psychosocial models especially in Indian culture. The aping of the western models of restricting visiting hours and impersonal treatment did not work well with Indians. Indians patients needed visitors; they needed the personal human touch, kind words and sometimes soothing music. This along with the medical treatment helped patients get back to their health faster.

She ended her speech with a video that depicted the miracles of human touch and emotions which could get a critical baby out of danger just with her little brothers singing.

### **Panelist 3: Mr. Pramod Phalnikar**

#### **Introduction:**

Mr. Pramod Phalnikar is an IPS officer of 1989 batch of Madhya Pradesh Cadre. He has worked on many assignments in various districts of MP. Some important assignments he was overseeing

were the Kumbh Mela at Omkareshwar and the Bhoj Shala agitation in MP. After his assignments in MP, he went on deputation to work for the Central Government and has served in the Central Para Military Forces, initially in ITBP as DIG in Dehradun sector, thereafter he was in headquarters and in CISF and currently he is the IG at NSG headquarters, the elite commando force for internal security.

In defense there is a special word called scholar warrior and this suited Mr. Phalnikar well. He has also done research on QOL of Para military forces along with JPIP.

**Speech: Measurement and enhancement of QOL in CAPF (Central Armed Police Force)**

Mr. Phalnikar began his speech thanking the dignitaries with a special mention to Ms. Vidya Bal as he said he and his wife were in awe of her theories. He also specially thanked Dr. Anagha Lavalekar and her team and associates for their support in helping him come out with an insightful research.

Currently serving at the IG at the NSG headquarters, he said, NSG was basically a deputation based organization wherein the deputies came in from the army and CAPF as well.

The reason for his research was his experience while working in the state where he got to work in various districts under police responsibilities. When he joined ITBP, he saw a totally different scenario from the perspective of welfare schemes and there were a lot of talks about stress in CAPF, wherein some violent acts of behavior were also being recorded. As an immediate measure, counselling practices were started, however it was seen that the IG's and the company commanders who were actually suppose to intervene and counsel, were not aware of the counselling techniques themselves.

This led to Mr. Phalnikar to think about the need for a research. In the beginning he too was in the status-quo zone, which meant that people tended to look at the fact of one mental health with the lack of need to medical support, meaning, as long as a person had no medical requirement, he or she was considered fit. That is QOL was good if there was a lack of disease.

Later on he discussed the issues with a number of subject matter experts and the officers and what he realized was that instead of looking at the absence of disease as the approach, one needed to think of enhancing the QOL or enhancing the subjective wellbeing. This then became the focus of his research.

There had been incidences of patricides and suicides in CAPF on minuscule issues. This primarily was seen as a result of stress and hence it was required to look into it not just treat the stress, but enhance the QOL.

Speaking on the concept of welfare, he said, QOL and wellbeing were two sides of the same coin. The welfare schemes had generally been the focus of all police organizations. So what were welfare schemes? There had been a lot of difference of opinions about welfare schemes. The national police commission, which was headed by K F Rustumji had identified two categories. One was parts of the conditions of service like pension and the second was the financial support which probably was not a part of the conditions of service, like education, medical facilities for the families and so on.

Components like water and sanitation were basic needs and had to be given under Welfare schemes. People had also mentioned road construction and creation of sanitation facilities within welfare; however that did not come under basic necessities and hence only once one went beyond these did the actual welfare come into the picture.

So welfare was something that one did when there was welfare of people at heart and not just on paper alone. It had to reflect in reality. A few researches had been undertaken in the past on mental health however they only spoke about maintaining the status quo. During his research Mr. Phalnikar found that a direct approach to the study of welfare schemes or subjectivity could be misleading and not give the exact picture of which part of the service conditions or welfare schemes were important for a person. Whether welfare schemes themselves had contributed to subjective wellbeing or was there something else in the entire service that was contributing to subjective wellbeing.

The main stress area while thinking about the research as a police officer in service was to come out with something which was not known, bring in an element of surprise in the research outcome.

The study was being conducted in three different classes of CAPF formerly known as Paramilitary force. So basically what CAPF does, is the job of what otherwise army does. For e.g. guarding the borders during peace times, as the army cannot be continuously deployed. Along with this, CAPF also does a lot of internal security work which involves a lot of traveling and moving with very little advance intimations. This also leads to stress within the CAPF soldiers. Also the CIPF duties at the airports are very stressful. Senior level officers are assigned duties of frisking and scanning as it is a matter of national security. Even a single mistake and the officers are taken to task adding to it being a high level stress job.

Another such stressful part of CAPF is the Himalayan stay where the officers needed to trek in difficult conditions and stay there. It was a very difficult task and tortuous at times.

These CAPF's and local police have totally diametrical divergent conditions of services and so trying to find out what was lacking, or what constitutes their QOL or their subjective wellbeing, they had to be very careful.

So talking about the research he said, the idea was primarily to find out what they themselves thought about QOL. So generally it was presumed that welfare schemes concentrated on the material aspects. Now in the research what was found was that materialist aspects were not very important to people when it came to QOL. It was productivity, health, emotional wellbeing, intimacy, fairness and impartial behavior, place in community and then came material wellbeing. And it was surprising that welfare programs offered something that was of least importance to people when it came to QOL.

Starting with productivity, it basically meant whether a person got the opportunity to do something creative, whether his job enriched him over time, whether he found meaning in his work and whether he was advancing in his career. All these factors were very important and

organizations must look into them. Most of the organizations work on the format where work was assigned and deadlines were set. It was taken for granted that situations were to be the way they were and that people had to accept this and work.

The next one on priority was emotional wellbeing. The quality time one gets to give to one's family was very low. In ITBP, families were not allowed to stay with the offices and soldiers, but the result showed them as happier men than the ones whose families were allowed. This was more because for the force whose family resided with them, they got hardly any time quality with them lowering their QOL. For the IDBP people, the family and the people themselves had accepted the situation and worked around itself. They got good quality family time whenever they got a chance to go home or their family visited them.

Fair and impartial behavior was also considered to enhance QOL. The communication in Police and army was not open. It is one way wherein the directions had to be followed without being questioned. It was seen that in places where the communication was open and they were allowed discussion the QOL was better and so was the performance.

For CAPF and Police, the sense of their place in the community was very low. They work with a lot of civil organizations and PSU's but they were never taken into any mainstream jobs at these PSU's giving them a feeling of being out of place. For ITBP, the locations where the soldiers were posted were mostly difficult conditions, but they constancy received a lot of praise for the kind of work they did, which is not the case with a CAPF person posted may be at a port, though his job is equally important. This praise also improved their QOL and they did not have a lot of issue about finding their place in the community.

Regarding the factor of age, one important thing that came out was that at the time of joining, their intimacy levels for their jobs were high and the forces should absorb them and recognize them as different personalities rather than treating them as a run of the mill. This will give them the required boost to contribute to the organization with added dedication.

So overall if one sees, there were so many aspects to one's QOL which got priority over materialistic aspects, which was ironically the only factor considered in welfare schemes.

The other important issue was that of safety. It was not the insecurity of being physically attacked, but the restlessness which was also present within the police personnel and the police person was embedded in this. Also in terms of creativity or job enrichment Mr. Phalnikar said that every officer should give inputs in such a way that there is enrichment possible at most stages.

He spoke about the concept of the experiment done in Maharashtra by Suresh Bhopade wherein he set up a 'sanvad samiti' which came out of the fact that he realized that police stations did not have any space and time for inter personal communication of people who work there. They who worked at the station never came together to talk. There was no give and take and this resulted in lowering not just QOL but also quality of work.

Another finding was that Police were lowest in intimacy towards their work.

The conclusions of the research stated that happiness could not be a given in any context and one would have to deliberately work towards making the system happy. The welfare schemes could not be restricted to monetary aspects and should enhance to include other areas as well. Some factors that would help people in the services were making them aware of what welfare was and all possible programs they could draw benefit from. They should also be educated on financial planning and saving early on in the career. Open communication and discussions should be promoted even in terms of work strategies. The forces should encourage daily physical activities to bring about mental strengthening and relaxation. The issues of counselling needed to be addressed in welfare schemes. He said that the welfare schemes should look into the subjective wellbeing and QOL aspects apart from materialist provisions.

## EXPERIENTIAL ACTIVITIES

- *Shri. Jagdish Bhat - Head, Siddha Samadhi Yoga, Pune region*  
*Topic - Meditation: An Introspective Approach*
- *Dr. Anand Godse – Director, Taal Inc Rhythmic Solutions Pvt. Ltd*  
*Topic - Art as a sublime expression of QOL*

### **Session 1:**

#### **Introduction:**

Shri. Jagdish Bhat is a multifaceted personality with a multidimensional education varying from economics, physics, banking, finance, and so on. He served in a bank for 24 years but most importantly, he has been a guru for yoga and meditation for the past 24 years. He heads the Siddha Samadhi Yoga SSY Pune region.

#### **Meditation: An Introspective Approach**

Thanking the organizers, Shri. Jagdish Bhat said that he was there for an experiential session and hence was not going to take up too much time talking. He invited all to leave their chairs and settle in the front, consider it as a play ground and play something. The game to be played was the childhood fun game of poison (*Vish*) and elixir (*Amrut*). He requested full participation to experience the fun and play the game like children do, without any inhibitions and learn something new during the silence zone that would be conducted post the play.

Post an enthusiastic game, Shri. Bhat introduced to everyone some simple stretching exercises one could do even at home. This was a combination of yoga-asana and aura healing, a Chinese technique which was helpful to energize oneself and maintain physical fitness. Post these stretching exercises, the audience were guided into the traditional method of meditation.

Expressing their feedback on what they went through during meditation, people said they felt relaxed and calm, some felt contented, some felt the session should not end, while some others felt weightless or lighter. These signs, he said showed that one was on the right path. He also told the people to never compare meditation. It could be called as mediation, practice of silence, sitting quietly, Dhyana or upasana, but whatever the name, the experience is unique to all.

He said, It lead to losing body awareness for some time and helps one understands that one is no more limited by the body. Secondly, one feels limited by people's knowledge, or resources in the pocket. In short people experience limitations in some form or the other at all times. What he tried to achieve was to try and drop some of these boundaries be it through the child like play or meditation exposing one's true nature, i.e. being oneself. 'Being' he said, was an easy word, difficult to explain, but simple to understand and experience. So with practice of such techniques, one can feel infinitely unbounded of self.

He further said that the listed advantages of meditation were in hundreds, but what he felt as the most significant one was the happiness it gave to people who follow it and the fact that one gets an appointment with one's self. He ended his session stating that meditation definitely guides one towards positive health-physical, mental, social, emotional and spiritual.

### **Experiential Activities: Session 2:**

#### **Introduction:**

Dr. Anand Godse is a Director at Taal Inc Rhythmic Solutions Pvt. Ltd and also the Director of Social Science Research Organization. He is also working at a health consultant and a counselor. His doctoral study was in health psychology before becoming a senior drum facilitator. He was a professor in Fergusson College and a few other colleges for 8 years. His research papers related to group drumming and effects of Suryanamaskar on stress are published in journals like International Journal of Yoga and Oxford Text book of Art and Wellbeing.

#### **Art as a sublime expression of QOL**

Dr. Anand Godse began the session explaining to the audience about the drums and the other percussion instruments he had got along. He showed how to play the drum and invited everyone to participate. He said he would take names of certain artists and certain stories or images were bound to come to one's mind. This is said was one was how one associated art with.

He put forth a question- what is an Art? Answering it he said that Art was an expression, it was something that helps one understand meanings of what one experiences. There were lots of things that came along with the word Art. Drumming was one such art. It had two forms. One was the art of facilitation and the other was the art of playing. Both these would be experienced by the audience to understand what was being aimed at being discussed- the art as a sublime expression of QOL.



It was an open session with no one as the leader or the conductor. After a basic round of rumble, the next round was that of Dr. Godse calling on his drum and the participants were asked to respond, because Dr. Godse and his colleagues believe that all the percussion instruments talk and communicate. Post a rhythmic session by all in sync, Dr. Godse congratulated everyone for becoming artists in such a short time span. He stated that in the Indian context it was believed that there were 64 types of Art forms which essentially made each one an artist in some form.

Talking further he said that Art forms were nothing but the expression of an artist and his relation with the art form and with the person from whom he had learnt it. It was a process, where there was a source to the different art forms one comes across and better the group, the flow of the art form was always better. Getting the audience to join him again, Dr. Godse asked them to go beyond the simple mundane rhythm similar to going beyond their routines, their set structures and try out new things. With the new rhythms tried, Dr. Godse went on to tell the audience how it was important to smile while one plays an instrument and also develop the art of listening to others if one wants to play well.

Also they promote playing in a circle, rather than a stage with a leader and followers or listeners because the basic fundamental was that when one plays in a circle, everyone looks at each other and listens to each other and smiles, and when this happens, it was difficult for things to go wrong. The reason why they call it a drum circle, is for this reason. Everyone faces one another; there is no leader and no audience. Everyone has an eye contact, which is one of the basic human needs. Looking, talking, listening, playing and loosening up ones inhibitions.

The beauty of any art form was that it came from within ones culture. It was deep rooted in ones culture and religion. No religions or cultures promote fighting and in fact it was the art forms that brought people together. It was the integration of humans, where one looked at each other, did not take each other too seriously, brought in humor and light heartedness and experienced truly what life was all about. So if one does not take anyone too seriously including one's own self, one connects better with everyone as it helps let go of a lot of things, things which one holds on to, sometimes for no reason.

Post another round of drumming, Dr. Godse invited everyone to add vocals to the same. He told them that the words sounded nonsense but represented joy and happiness in a language called Malinki. So what Art also did was to connect people with different languages. For instant the Malinki song Kilele was easy to sing even though people did not understand the meaning of the words literally. So art did not need a language to connect, it accepted, understood and brought people together.

Then they continued to another round of drumming complemented with singing and when Dr. Godse stopped the drumming, the group automatically stopped drumming and singing. This showed that drumming also increases attention and was a very primal motor sensory activity which increased one's focus and awareness, which in the psychological terms was known as being in a Meta analytic state. It meant one was aware and felt the sentiment, be it a cognitive or an emotional process, awareness was a Meta analytical process.

Coming back to the art of felicitation, what it got Dr. Godse was the art of self discovery. Connecting with so many people was scary as he needed to work on so many things simultaneously. The facilitator needed to focus on himself first to let things flow, allow him to be with everyone and let everyone be with him. It was an exploration and was like understanding, getting energized to give the energy back. It was a kind of a transaction which helped one understand self better which was the key of any art form.

Speaking about the teacher disciple tradition, he said, when one went to a guru, the guru asked the new disciple to sit and listen, listen for hours. The disciple would start getting jittery as at that time, he was not aware that listening was understanding and key to learning anything. The whole process that begins at this stage also initiates the process of exploration for the disciple. One starts delving deep within him, ask question as to who he was? Why was he doing this? What was this art form? How was he related to this art form? What was his relationship with his audience in context with his art form? Who would listen to him? Does he listen to himself and many more such question start making ways into his mind. And this paves a path of self exploration and this is what Dr. Godse thought of as Atma Shatakam.

After all these thoughts what one came to was love and compassion. That was the only thing that stayed. So the core to doing anything even in an art form was finding meaningfulness in the act, post which one thinks of the happiness that one gets from that act, and this again was the key question because, realization always exists with a person, it just needs that one thing that makes the person realize. That moment is the ultimate happiness.

Post another round, Dr. Godse asked everyone to keep away the instruments, close their eyes and focus on the breath. After the 2 minutes of silence, Dr. Godse ended his session urging everyone to take up one art form to express and experience QOL.

## INVITED SPEECH & FELICITATION

### *Felicitation*

- *Shri. Sayyad Bhai,*
- *Ms. Sheetal Teli-Ugale,*
- *Ms. Deepa Patil*
- *Mr. Narsinh Zare*

### *Invited Speech*

- *Dr. Girish Bapat, Director, Jnana Prabodhini*  
*Topic - Concept of Life Workers and their QOL*

Ms. Uma Bapat, the comparer of the sessions welcomed all the esteemed guests along with Dr. Girish Bapat to grace the stage.

While most people were busy thinking about personal QOL and its enhancement, there were a few people within the same crowd who had a driving force to devote their whole and soul for the betterment of others. The founder director of Jnana Prabodhini Late Dr. V.V. Pendse had envisioned the institutes' mission to transform the nation. Under his guidance Dr. Usha Khire built the foundation of JPIP. Research was linked with society and JPIP was not just the host of the conference but was proud to felicitate 4 such personalities, who in their diverse fields have created a positive and a long lasting impact on the society.

### **Awardee 1: Shri. Sayyad Bhai**

**The senior most guest for the function Shri. Sayyad Bhai was felicitated and awarded a Letter of Honor at the hands of Dr. Girish Bapat**

Shri. Sayyad Bhai was recognized for his exemplary and dedicated work of 45 years in the fight against the male dominated, biased and one-sided 'Tallakh' practice prevalent in the Muslim Community.

Bowing down to his zest, his zeal, his commitment and his perseverance, Jnana Prabodhini felicitated Sayyad Bhai and wished him a long and healthy life ahead.

**Awardee 2: Ms. Sheetal Teli-Ugale**

**Ms. Sheetal Teli-Ugale was felicitated and presented with a Letter of Honour at the hands of Dr. Girish Bapat.**

Ms. Sheetal Teli-Ugale was recognized for her contribution to administrative services in various parts of Maharashtra with emphasis on development, rightful usage of the given authority & power, faster turnaround time on projects undertaken along with creditable work done as a social responsibility.

Jnana Prabodhini felicitated her and wished her continued luck and growth as an able professional.

**Awardee 3: Ms. Deepa Patil**

**Ms. Deepa Patil was felicitated and presented with a Letter of Honour at the hands of Dr. Girish Bapat.**

Ms. Deepa Patil was recognized for her work as a compassionate principal of 'Sanvedana' a development centre for children with cerebral palsy, in Latur for over a decade. Her dedicated efforts and motherly attitude towards the multiple disability children in this institute has won the centre a national award. Her efforts were not restricted to just the care and education of these children, but in creating awareness about the disability, clearing superstitions and trying to get appropriate government policies and benefits being made available for these children.

Jnana Prabodhini lauded her for this and wished her luck for her and the institute's future.

#### **Awardee 4: Mr. Narsinh Zare**

**Mr. Narsinh Zare was felicitated and presented with a Letter of Honour at the hands of Dr. Girish Bapat.**

Mr. Narsinh Zare was recognized for his stupendous work in the upliftment of the Gopal community in Ansarwada in Nilangana District of-Latur. Narsinh's journey began early at the age of 15 as a result of financial crunch; however it led to him being drawn towards the children of the Gopal Community. Far from any civil life, this community was backwards and Narsinh not only looked into educating them by learning their local language, but also looked into their overall development even fighting life threatening events at times. He taught them the importance of sanitation and health and brought the community into mainstream and worked effortlessly to give them their deserved recognition and registered them as a community making ration cards and Aadhar cards and given them the government benefits they deserved.

Jnana Prabodhini saluted Narsinh for his tireless efforts for the Gopal community and wished him luck in his continued future endeavors.

#### **Invited guest speaker Dr. Girish Bapat**

##### **Introduction:**

Dr. Girish Bapat is the Director of Jnana Prabodhini since 1989 and is a student of Jnana Prabodhini Prashala. As a youth representative, he shouldered many responsibilities like the Andhra Pradesh Relief Work and Punjab Sadbhavana Yatra. He completed his Doctorate Degree in Organic Chemistry from the University of Victoria-Canada. He returned to Jnana Prabodhini to continue the legacy of founder director late Dr. V.V Pendse. He committed to devote his entire life to the cause of Jnana Prabodhini with a pledge of Sanyas Ashram, a voluntary simple way of life.

Dr. Bapat holds a masters degree in Education and a post graduate degree in Business Management. He was the principal of Jnana Prabodhini Prashala and also the chairman of MENSA India.

He has authored award winning books on attitude formation and man making education. He has studied and written about philosophy of education by Ramadas Swami. He has presented Jnana Prabodhini's contribution to education in foreign countries as an invited speaker for national and international conferences.

Today, various centers of Jnana Prabodhini are spread over varied locations all over Maharashtra. Dr. Bapat travels to almost all of these every week as he firmly believes that mentoring in person changes the quality of work and positively influences the growth of a karyakarta.

Even though he is head deep into work, Dr. Bapat always ensures his presence at all family functions including those of the extended JP family. He devotes time for such value additions in relations and his presence simply adds quality to the occasion for the host family.

Similarly he always invests time in mentoring young school student in Prabodhini. Many fresh graduates are comfortable sharing with him their dilemmas and life goals. Through all this mentoring he has enriched the QOL of 3 generations at Prabodhini. Listening to Dr. Bapat, most often is an experience of introspection. He always begins in talk with very simple illustrations, and takes the listeners uphill with him to climb the summit.

### **Speech: Concept of Life Workers and their QOL**

He began saying how Dr. Anagha Lavalekar was very keen on his participation in this seminar; however he said his academic qualifications and experience were not suited for him to be a part of any panel discussion or symposium. He was called many a times to write papers, which he modestly accepted of not replying to, as he said he was not willing to even make a poster, so there was no question of a paper. So to include an odd man like him, he was called to speak at the invited speakers' slot.

With 4 exemplary examples of life workers awarded before his speech, he said his task to speak about life workers was made simple. He said life workers were people who found work their life's mission. They had it decided early on that they would dedicate their active lives for the work mission they had identified. There was another type of a life worker, for whom there was no difference between a private and a public life, as all their life they only worked for their mission.

Speaking ahead he said, he knew another life worker in Pune by the name of Vilas Chaphekar, who had recently written his autobiography. He was into organizing rag pickers and hawkers in Pune to improve their QOL and in his autobiography he had mentioned that there were two types of work which a life worker could do. One was the humanitarian work, like when someone was affected with some diseases or natural calamities or some ailment and those who worked to improve this lot, were doing humanitarian work. He said this was very much needed in the society. He had written though, that he preferred the other type of life work, which was the social work, when people were affected because of other people's decisions like that of social leaders, political leaders, businessmen, or all those people in the society who have some authority.

He chose the rag pickers and the hawkers in this category. Before the book was written, Dr. Bapat had a chance to meet Mr. Chaphekar and they got talking about the different types of work people do as life missions. Sometimes it begins as a job and eventually becomes one's life mission, like that of Mr. Kurien of Amul. He was employed there as an engineer, but he made that his life mission and brought about the White Revolution in the country. So it was not necessary for a life worker to renounce something to begin the life mission.

During the same conversation, Dr. Bapat told Mr. Chaphekar that apart from these two types of life workers, there could be another type as the first two types were like reclaiming of a sunken land. But once the land was reclaimed, one needs to build something on it. So the creative work, institution building work, nation building work was also a mission, some life workers took up. Speaking about the felicitation program he said that it has felicitated all 3 types of life workers. Sayyad Bhai and Narsinh Zare were doing social work; Ms. Deepa was doing humanitarian work

while Ms. Sheetal was doing institution building work, by trying to preserve the institution of public administration.

So how could one describe the QOL of these people when they were engaged in their work? Remembering a Vedic prayer he had been reciting from childhood, he said it talked about quality of work. *Jivem Sharad Shatam*- May one live for a 100 years. *Nandan Sharad Shatam*, may one enjoy life for 100 years. *Prabravam Sharad Shatam*, may one keep learning for 100 years. *Sanjeevasyam Sharad Shatam*, may one be free from the fear of death for 100 years , *Adinyahasyam Sharad Shatam*, may one be self reliant and self sufficient for 100 years and *Bhovashchya Sharad Shatam*, may all this be repeated after 100 years are over. Talking in today's context, *Jivem Sharad Shatam* talks about physical wellbeing, *Nandan Sharad Shatam* talks about all the material QOL, *Prabravam Sharad Shatam* talks about the intellectual QOL, *Sanjeevasyam Sharad Shatam* refers to the emotional QOL and *Adinyahasyam Sharad Shatam* speaks about the moral QOL.

Speaking further he said that for any life worker, be in humanitarian, social or nation building it was important they had experienced all the QOL aspects if they wanted to continue to do their work lifelong. The term life worker was a recent term. For 2500 years it was known that there were life workers, more so the monastic life workers who dedicated their life to work in monasteries and then missions, where they were working for this own spiritual upliftment. But during the last 2 centuries, another type of life workers had come up. They were not necessarily work for their spiritual upliftment, they are working to solve some problem in the society or to develop some aspects in social life.

Initially they were life members, a term first used in Maharashtra by the Deccan Education Society founded in 1885. Lokmanya Tilak was one of the founders and in the constitution of this society there was a provision that life members would work in the schools and colleges founded by this society, not work anywhere else and only draw remuneration enough to support their family. Off course these were also the policy makers of the society and they decided how the society would work for years to come.



This concept of life members was then introduced in many societies in Maharashtra and it helped them stabilize their work, be it social work or educational work and also helped the societies to expand.

After that another type of worker came up. This life worker was not interested in policy making, but only in the actual work. They were not even keen on joining any particular institution. If their motivation let them, they were also willing to work alone or in small groups. These were pre-independence era workers and wanted to show that whatever they were doing was a part of the independence movement and were not ready to take any government grants.

Of course the finances were meager and the life workers had to almost work with no remuneration and since there have been 2-3 generations of these life workers, there was an image build in the society that the life workers must live in poverty.

Dr. Bapat said that he was from the next generation of Life workers. He said, he did get a chance to meet a few life workers who had vowed to live in poverty, but he also met life workers from affluent families, and so what he decided was to not vow to live in poverty, but to live a life of voluntary simplicity.

Most life workers decide their standard of living so that they can continue to work year after year in the chosen life mission. Life workers live a life on their accepted standard of life as they also believe in sharing whatever resources they have with their extended families. Also as their concept of self expands and they include more and more people in their concept of self, they automatically decide that a simple life helps them work better in their life mission.

Another fact he had observed in life workers was their vow to remain bachelors or celibates. This was also one of the images in the society that a life worker should live a celibate's life. He met many life workers across India and he realized that after independence, it was not necessary for a life worker to remain unmarried or celibate. Formerly those had taken the vow of poverty, also took the vow of chastity. He thought the idea of chastity now needed to be redefined, to may be not having an extra marital affair. Also in married life workers when one of the partners works,

there needed to be a good amount of frankness and transparency between the spouses as now the fields of work have expanded and the culture of men and women working together has set in, so if the spouse did not understand the kind of lifework the partner was into, it could lead to a lot of problems.

Another misconception about life workers was that along with the vow of poverty and chastity, they needed to take a vow of obedience. This must have come down from the monastic days. Referring to Mr. Phalnikar's speech, he said that his list began with creativity. So his question was, how could one do any creative work if one has decided to only obey orders? Nowadays it was difficult for single life workers to work alone and needed to form organizations like NGO's where at some point there were hierarchies and someone has to decide and be the decision maker even if it was a flat organization otherwise. Now if the life worker is use to obeying orders then he will do so, but not in spirit and the public administrator will tell us that sometimes one needs to bend orders and work as per ones spirit which brings in creativity.

So if a life worker accepts voluntary simplicity, has faith in one's spouse, works with one's creativity while yet following orders, one will get satisfaction in his mission. And only once a person is satisfied does one get fulfillment and if that fulfillment brings in a better QOL, then that's a different aspect altogether.

Someone in the conference mentioned the Happiness Index. Dr. Bapat had a chance to release a book about the concept of Happiness Index in Bhutan and Cuba. He read through the book and at the time of release asked the author if he could share a different perspective on the same. The author agreed. He based his talk on his talk with Anna Hazare and Ralegan Siddhi and how certain villages changed and even though there were role models available, how certain villages did not. They had tried to list the reasons for this.

The first one was the 'we' feeling in the community. That is they need to be united to execute any work. Next there had to be a leadership to take the project forward. There had to be creativity in the decision and planning. They should be using the latest and relevant science and technology required and there should be work ethics in the community as well. The work needed to be done by the villagers first and only making appeals to the government did not work.

Fifty years back the life workers that he mentioned worked for the society were working without government support, remuneration and so on and they did not feel the need to think about creativity, using science and technology and so on. Today's life worker needs to be *samaj prasthan* and not *vann prasthan*, meaning they needed to move towards the society and not the forest. And this was possible even when one was a *gruhasth*, which means the difference between a worker and a life worker was that a life worker was a *samjprasthi* and needed to act like a trustee. The idea of trustee was brought forth in India by Mahatma Gandhi and he wanted all business men and industrialists to be trustees. They tried to do so, but they eventually become wealth generating activities as there was a profit making motive. Only once the profit was made and there was surplus, then that surplus was utilized for society and this was how businesses or industries remained sustainable. At Jnana Prabodhini, after a bitter experience, they realized that to be sustainable only 2%-3% of the surplus could be utilized for community services. For a business man to be a life worker, he needed to be a trustee, that is use his wealth, knowledge, intelligence for the betterment of society and not his own progress.

So talking about the QOL of a Life worker he began with saying that the reason he was not keen on participation in this seminar was because he believed that his idea of QOL would not match with the seminar and a person like him should not advice a gathering of stalwarts. But Dr. Lavalekar had insisted on him sharing his views.

Dr. Bapat thought of QOL in terms of the three Gunas, which were used in the Indian thought process- Satva Guna, Raja Guna and Tama Guna. Satva Guna was dynamic equilibrium, Raja Guna was frenzy activities and Tama Guna was inertia. When one slept he was in the Tama Guna, when one wakes up the tama gun subsides and the Raja Guna takes over and when one starts doing purposeful activities, then the Raj Guna subsides and the Satva Guna tooks

prominence. When a life worker had chosen his life mission all his activities were aligned towards the mission and he was in Satva Guna most of the times. So for any person if the Satva Guna was stabilized as the prominent Guna, he or she would experience higher QOL. If one lived a life where the Raj Guna was more in proportion than the Tama Guna and the Satva Guna, then the person would experience a life full of stress, all sorts of stress. If the Tama Guna was more in proportion to Raj Guna and Satva Guna, then one lives a life as a part of the crowd with nothing to contribute. They become one of the faceless people in the crowd.

So one must try and increase Satva Guna in ones personality to get the sense of a good QOL. Referring to The Bhagwat Gita, he said that in Bhagwat Gita, it was very well outlined as to what happened to a person, if he was not careful about which Guna was predominant in life. He narrated a two shloka which described this.

*dhyayato visayan pumsah*

*sangas tesupajayate*

*sangat sanjayate kamah*

*kamat krodho 'bhijayate*

*Krodhat bhavati sammohah sammohat smriti vibhramah I*

*Smriti bhramshat buddhi nashah buddhinasat pranashyati II*

For a spiritually oriented person, both these shlokas were necessary, for a life worker, who had decided to work to improve the secular aspects of society life like education, health, community development, equality, just the first part of the first shloka was enough. For a person who was always thinking about sensual pleasures, he could never become a life worker. He needed to think about his life mission, his goals and means to achieve this, and to do this he had to counter the senses that pushed him towards sensory pleasures.

The 17<sup>th</sup> chapter of Bhagwat Gita talked about just this. How to counter these and the ways mentioned were the traditional ones like consuming Satvik Aahar and performing Satvik yagna daan and tapa.

Giving the gist he said, yagna meant performing activities to maintain the continuity of all the natural cycles, Daan was to perform activities to maintain the flow of goods and services in the society, and tapa meant to improve one's quality. All these should be satvik to be able to benefit not just oneself but the society at large. Tamasa tapa was what Ravana did to gain ultimate strength for himself, but when the strength is meant for doing good to the society, it should be satvik tapa.

He also stated that one's activities needed to be scientific, i.e. one should use the right technique and protocols and the follow right precautions, which is described as shashtra shudda, meaning one could not work in any haphazard manner and should work like it is their duty.

While working the mental conditions must be balanced, one must have faith in one's own ability, and one must have faith in one's own judgment. The work chosen and the activity done should be without expecting any recognition or gratitude from the ones who you were working for. And when one was trying to work to help people, one must use their judgments and evaluate as to who actually needed the help and not help just about anyone. One's resources were precious and should be put to proper use only.

So all these should be followed when working for the society to improve the QOL of the life worker and the society for whom he is working. This is what is meant by Satvik Yagna Daan and Tapa.

Speaking about the chap 18 of Bhagawat Gita, Dr. Bapat said that it talked about the other things one must do, to transcend Satva Guna and get spiritual. However being a psychology conference, he decided to not delve much into spirituality and talk about other aspects required to improve the society.

Talking about the title of the conference, he said that in concept, there was a need to include both culture and civilization. One needed to measure how civilized the world had become in terms of materialistic civilization. However talking about culture he said there was no measure to check the level of culture, but the enhancement could definitely be experienced and this experience depended on how much a person was Satvik in his life. So according to him, QOL was divided into two- culture and civilization. While progress of QOL as a civilization could be measured, one needed to be content with only the enhancement aspects for culture and enjoy the subjective experience.

He ended by saying that all workers, be it life workers or otherwise can enjoy the Satvik growth within themselves and enjoy the enhanced QOL.

## VALEDICTORY

### *Dignitaries on the Dais*

- *Mr. Vivek Sawant - Chief Guest, MD & CEO - Maharashtra Knowledge Corporation Limited*  
*Topic - QOL & Role of technology in changing era*
- *Dr. Girish Bapat, Director, Jnana Prabodhini*
- *Dr. Sujala Watve - Chairperson, Secretary, Jnana Prabodhini Samshodhan Sanstha*
- *Dr. Anagha Lavalekar - Seminar Convener, Director, Jnana Prabodhini's Institute of Psychology*

### **Introduction:**

Dr. Sujala Watve is the secretary of Jnana Prabodhini Samshodhan Sanstha. Prior to this she was the head of JPIP. She is the National Supervisory Scientist for MENSA India-Pune. She is the member of institutional ethics committee of Deenanath Mangeshkar Hospital, Sassoon Hospital and KEM. She is on the research advisory board of Vishwakarma Institute of Management, Pune.

Dr. Watve has been a researcher in the field of Giftedness and the coordinator for the PG Diploma in Education for the gifted, under the UGC innovation program. She has authored a book 'Why Gifted Education' and has numerous articles to her credit.

### **Seminar Summary- Presented by Dr. Sucharita Gadre, Co-convener of the seminar**

### **Introduction:**

Dr. Sucharita Gadre is a Ph.D. in Psychology has been associated with JPIP for 24 years. She is currently the head of the Psychometric Section at JPIP. She has ten years of teaching experience at the post graduate level. She has developed psychological and education tests for children at school level and adults as well. Her main area of research is assessment of school climate. She has worked as a resource person for workshops on psychological testing by many other institutes all over Maharashtra and outside as well. She has published 5 research papers in various journals.

**Seminar summary at a glance:**

At the outset Dr. Lavalekar introduced the topic of seminar. She highlighted the importance of every step in the ladder when evaluating QOL. In his inaugural address Dr. Mohan Agashe said that nowadays people thought of QOL more than it was done earlier as people were looking for instant gratifications and wanted to achieve everything early on in life. Also longevity was a reality and was taking a toll on the overall QOL. In his key note address, Dr. Kukade explained that the concept of QOL was very complex covering physical health, mental status, social recognition, natural environment and spiritual aspect as well. Moreover QOL changed from person to person and also for a single person at different stages of life. Adding further he had said that Scope of QOL ranged from individual, family, community, nation and the world. While concluding the session, Dr. Sahastrabuddhe mentioned that experiential angle put forth by Dr. Agashe and the importance of Sanskaras from Indian traditions, mentioned by Dr. Kukade were the focal points of QOL.

In the first day symposium, Dr. Gadgil made everyone aware of how the evolutionary process had nurtured the tendencies of attributing high QOL to egalitarian, non hierarchical, non authoritarian and less competitive societies which facilitated free pursuit of knowledge and high bio diversity. He also gave examples of Bhutan, Norway and Sweden as the happiest cities of the world.

While discussing the concepts of QOL, Prof. Lilavati Krishnan said that it reflected an intrinsic attitude rather than an externally determined state. She further specified that this intrapersonal component when blended with external physical parameters provided an integrated view of QOL.

Dr. Manas Mandal talked about happiness as a major part of QOL and put forth a series of questions relating to happiness that needed answers. Some of them were- was one predisposed to being happy or unhappy? Was career one life or was life ones career and so on.



The panel discussion of measurement began with Dr. Anagha Lavalekar who explained that the comprehensive and subjective nature of concept of QOL was the main challenge while developing tools to measure QOL.

Dr. Anuradha Sovani took us on the field, with her excellent narrative videos of who, what and how of QOL assessment.

Dr. Manas Mandal when discussing methodological challenges in research of QOL threw light about how most researches were either exploratory or exploitative which led to the understanding of common behavioral expressions or unique individual behaviors respectively. Explorative sides of QOL included ART and introspection activities like meditation. Day 1 ended with a skit depicting the QOL of an artist and demonstrations of drum and meditation.

Day 2 began with Symposium 2. All the three speakers of the session, touched upon how the parameters of QOL changed from the possession of material wealth to satisfaction of individual as thinking and an emotional being.

Dr. Shravan Hardikar elaborated on how the role of governance had changed from providing security to life and property of citizens to creating an environment for growth and realization of potential for citizens. He also explained how GDP had been replaced by HDI as an index of QOL. He also explained with examples how citizens resolve when well responded by government can enhance QOL.

Ms. Vidya Bal said that though there was a change in the QOL of women, the majority of them in India still lived the life of second grade citizen. She said that language reflected the culture, and with examples she showed how all our languages were designed with a patriarchal view. She said the matter of concern was that women were still portrayed as market commodities and sadly some women are okay with that.

Dr. Rohini Patwardhan started her speech stating that the most striking aspect of elderly people currently is their constant state of confusion and that loneliness, social disconnection, poor

physical and mental health status contributed to poor QOL of the elderly. She further elaborated on the availability of opportunities for bettering the QOL of these elderly. She also said that for assessing QOL of elderly, the study of geriatrics and gerontology was very important. She concluded that both Maslow's theory of hierarchy of needs and Ericson's theory of lifelong development were needed to understand human behavior during old age.

While concluding the session Dr. Neela Dabir presented her observation of what the three speakers said. It was the internal motivation of people that helps in the enhancement of QOL, be it the citizens, women or elderly.

During the 2<sup>nd</sup> panel discussion, the three speakers had chosen different groups while discussing their QOL. All the three stressed on the inclusion of psychosocial factors while enhancing the QOL.

Dr. Kalpana Srivastava discussed that the prognosis of psychiatric patients depended on the contextual factors like financial independence, social support and living conditions.

Prof. Meena Hariharan said that bio-psychosocial approach of treatment for the patients of cardiac ailments was essential as the heart and mind were interconnected. Only when medical and paramedical staff gets trained and provides psychosocial elements to the treatment of patients, QOL could be optimized.

Mr. Phalnikar, while discussing the results of his study said that, in order to improve the QOL of CAPF and Police force domains such as productivity, emotional wellbeing, intimacy and place in community needed to be introduced to the present welfare schemes. Also he said that the current focus of these schemes of materialistic support was last on the priority list of the people in these forces.

This was followed by the oral presentations and poster presentations. Overall 70+ delegates participated in this session. There were 21 oral and 16 poster presentations. All these

presentations were classified into three themes. 1. Concept and applications of QOL  
2.Measurement of QOL across groups. 3. Enhancement of QOL.

This was followed by the felicitation of life workers where one was introduced to the exemplary life of social reformer- Sayyad Bhai, Sheetal Teli-Ugale, Deepa Patil and Narsinh Zare, who were awarded a Letter oh Honour each by Jnana Prabodhini.

Next was the enlightening session by Dr. Bapat on the life of ‘Jeevan Vrati’s’ or life workers, who make work their life mission with reference to the Tri-Guna concept of tradition. He talked about how all life workers displayed high levels of morality and a person with a prominence of the Satva Guna (morality) can become a life worker working towards a social cause.

**Mr. Vivek Sawant: MD & CEO- Maharashtra Knowledge Corporation Limited**

**Valedictory Speech: QOL & Role of technology in changing era**

Mr. Sawant started his speech with an anecdote of how he had come across a similar situation, wherein a technologist was invited for a valedictory function for a psychology confluence. Similar to his situation, the crowd was majority women who were pressed for time. Once the technologist started speaking, the auditorium soon got empty barring the exception of one man, who stood holding a revolver. The technologist held up his hands and said he had nothing to offer, to which the man said it was not he, but the person who invited him to talk that he was looking for to gun down. The audience broke into laughter.

Taking reference from what Dr. Bapat said, Mr. Sawant said he was impressed with the concept of Life workers. From life workers he also thought of the word “Jeevan Gaurav” which meant lifetime felicitation, a word coined by the great Marathi writer and humorist Pu. La. Deshpande. Referring to the Bhagwat Gita chap 16, he said that it had 26 human qualities listed out, where the first one was ‘nirbhayata’ and the last one was ‘namrata’. He said if one follows the first and the last qualities, all the other 24 in between emerge automatically. Adding further he said, Sayyad Bhai was the perfect example of nirbhayata and namrata personified.

Coming back to his assigned topic, Mr. Sawant said that QOL could be understood at an individual level, professional level, social level and the global level. Role of technology in the changing era was the topic for deliberation assigned to him. He said, what one must try and remember was that a decade ago, people mentioned the use of technology for bettering their QOL. People contemplated whether it was impairing to the humans or was it more of an advantage.

A decade later, which is the current times, a deeper understanding needed to be reached at. One is no more using technology in their lives, but is living a life within the technology ecology. This is a paradigm shift that has happened. Today everyone is so called mobilized not in the literal sense but with mobile phones. No one uses mobile phones on a need basis, but it is one's life which is encircled with it and the environment it creates.

In the coming future, humans will be living in a newer form of ecology- the ecology of smart sensors, the ecology of artificial intelligence, ecology of nano-sensors, and so on. So first of all, one needs to understand the role of technology in enhancing the QOL at that level. In human history whenever a complex problem was made the problem of science and technology, the problem was resolved, like polio and so many other infectious diseases which came out of blind faith and were tackled once they were addressed with science and technology.

Talking at the global level, the role of technology was now absolutely critical, because all the discussions of QOL would be relevant only if there remained life at all on the planet. One would be surprised to know that 6 technologies were coming together and would be giving rise to absolutely new products and services and deeper understanding of our planet bringing in the ability to overcome the crisis of global warming and climate change and so on. There were nano-technology, robotics, artificial intelligent, genetics, big data analytics and biotechnology. These 6 coming together would give rise to a new era called the 4<sup>th</sup> industrial revolution.

With the confluence of these technologies one will be able to model every cubic meter of the ocean, every cubic meter of the atmosphere, will know the genome of every species on the planet and one shall be able to repair the damaged planet as that is the hugeness of the capacity that will come with this confluence.

Talking about people's attitude Mr. Sawant said that people overall had a defeatist mentality of the society, which only lamented saying nothing could be done about the changing global situations. If this seminar was held in Delhi, one would first get worried more about one's own life. However, if one looks at the history of human evolution, it will be evident that the rationale always overcomes the crisis.

Now the hope was that with these absolutely new technologies, one could perhaps stitch the ozone layer, clean the rivers and restore the marine life. There were many new unheard possibilities coming up and the simulations and the modeling that were going on were phenomenal. This according to Mr. Sawant brought with it the hope of improved QOL. E.g. a single universal vaccine could come in which could cater to all the diseases that the children may get. With the advancement of these 6 technologies, the new regenerative neurology was coming up. J K Rowling, the author of Harry Potter had donated all her wealth in her mother's name Ann Rowling to set up an institute of regenerative neurology for this reason. There was hope for neural cells being regenerated and address diseases like Alzheimer's. So there was tremendous capacity in advanced technologies with enormous amounts of computing powers, extreme bandwidth networks, cloud computing and many other technologies like the machine interpretation of human languages, machine translations of human languages and so on. An absolutely new civilization was coming up.

Talking further he said that the real challenge before us as a world and as a human race was how to come together and make planet first, human first as the agenda of these technologies and not profit first as the motive. This was the crucial issue. This was where people's organizations were required, people's large movements were required and for this people had to be thoroughly and completely educated as to how these technologies could impact the quality of their lives at the global level, social level, professional level and personal level.

Maslows needs were discussed and he saluted Maslow for coming up with a theory for normal human beings and that too in a subject like psychology. In context to this theory, Mr. Sawant narrated an incident with security as the identified need.

He said that once he had to travel for a conference from Nanded to Thane. Since it was a morning conference, he decided to avoid any risk and fly from Aurangabad to Mumbai to be able to reach well before time. To his dismay, the plane kept hovering for a couple of hours as it was not getting landing clearance in Mumbai. Now his wife was worried as to why he had not landed for more than 2 hours after the scheduled time of arrival. On calling the airline, she kept getting the stereotypical response of the scheduled arrival time but no concrete answer on the status. So she started finding out her own ways of tracking the flight and found an app that helped her locate the exact status of the flight. She then called the airline and informed them about it and even shared the app details with them. So what can be seen is that if technology is used for the right reasons, definitely improves ones QOL.

If correct technological challenges were posed to the sensitive technology development teams, good technology would emerge. It could completely change the QOL on our planet.

When speaking about robotics, he said the problem with the design table of robotics was that many engineering students were busy designing combat robots as they had a prize for them in China, whereas what sensitive technologists in US laboratories were trying to build were agri-robots for Indian farmers which would cost lesser than a mobile handset, so that the farmer and his family could be taken off the actual farms and become good farm managers. The robots can look into the production, and the farmers can concentrate on the produce. So one should imagine the QOL that will come in with IOT, Robotics, AI and with the economization of the solar energy for that farmer, so the robot did not have to be charged on any electricity.

Currently the situation was such that farmers stayed up the nights guarding crops, so one could not even begin to think what their QOL would be like. So technology would be the only way they could be rescued. For any technology, the right agenda needed to be fixed. The right intellectual challenges had to be posed in front of the technologies.

The most fundamental issue was to talk about ones QOL. As a professional, nowadays the world of freelancers had evolved, because of technology innovations. Educated women in villages, who could not leave their homes to fulfill other responsibilities, could today work and add value to the global economics by working from home.

Mr. Sawant said that he was not trying to glorify technology, but was trying to put forth an alternative view point of looking at technology, because people have been brainwashed to think technology means social media and social media was spoiling the future generations and the view stopped at that. Unfortunately, this was a very limited viewpoint of technology.

Another professional aspect needed to be discussed in the context of QOL. Whenever one thought of advanced technology and automation, the standard thought was that it led to unemployment. Unfortunately even media thinks like that and there was a lot of discussion on youth unemployment in India. The need was to understand critically that whenever there is automation, (and there will be automation as one must accept the fact that a human being is a tool making animal), it takes away the rule based jobs of the human beings which are not creative anyways. They did not belong to the realm of subjective judgments, they were taken away. Like even Chess, Grandmaster Gary Kasparov was constantly defeated by IBM Deep Blue because it was a rule based games without much creativity. It could decode rules better than Gary Kasparov as it had a huge computing power and could simulate moves ahead of Kasparov. So automation takes away such jobs, which were inherently not meant for human beings. They were given them during the industrial revolution and in fact they were more de-humanizing.

Also over a period of time, one must also think of an alternative economy. When automation sets in, it would take away the jobs, but the boundary where the automation stopped, would give rise to a huge service sector, where humans will need humans itself.

He asked everyone to take the case of banking automation. Initially everyone was against using computers in Banking, however today the scene was that banking sector witnessed a dearth in skilled bankers and there was a demand for over 2 million young bankers who would work to accommodate the large number of bank accounts that were opened due to computerization. So many new lines had opened up within banking itself like conceiving new banking products, counsel people, advise them, consult them, buying and selling of products, maintenance of networks, and so on. So it was evident that even though there was automation, a large numbers of new jobs had come up.

Another interesting aspect was that 65% of the careers that today's children would take up when they grow up, were not even in existence. So what was important was that one needed to take the correct view on technology at the personal level. There were many varied views of man as was mentioned by Maslow, but there was also one genetic view. It was proved that genetically 60% of the genes of the Human Being are exactly identical to an amoeba, while 38.4 % match up with that of a monkey and only 1.6% were inherent human genes. So 60% of genes dealt with pleasure and pain at physical and physiological levels. Also it had been proved that more pleasure led to pain. The next level was the 38.4% monkey genes which dealt with the concept of a family, couple, shelter, food, a few friends to form a closed secured life. This was also the psychological zone in terms of QOL as it was aptly described by happiness and sufferings. Speaking about the 1.6%, it stood for joy and sorrow, but this joy came out of 4 important things and that is what the QOL depended on. It boiled down to how one looked at life- Drushti-Shrusti Vaad. The 4 gifts showered on humans were Curiosity, Communication, Creativity and Culture. Economic and social disparities had to be removed, but with education, one could improve the QOL at the third level, which were human needs and intrinsically a human zone.

Children have maximum curiosity and how much of this was allowed reflected on their QOL. Humans who communicated had a better QOL. Improving communication drastically improved one's QOL. Neanderthals and Homosapiens existed at the same time on earth, but the Homosapiens prevailed because they could synthesize language to communicate.

Human beings can never say that they lacked creativity, because they have creativity of some sort which came to them as a genetic disposition of being human beings. Biologists said that if one is not learning something new, exploring and experimenting something new or executing something new, then one misses out of the joy that one gets out of performing that 'karma'. Joy is only experienced while the 'karma' or work is being done. One must look at creating joy as joy adds to bringing in more joy as against excessive pleasure leading to pain. This is because one is in the human state and not in the monkey or amoeba state.

When one misses being curious, misses that communication, misses being culturally rich and creative, then what one experiences is sorrow. So if one wants to enhance QOL, then one must use all sorts of technology, as technology is a solver and if deployed with people first agenda,



700 billion people on the planet will get curious, will communicate, will explore their creative and become culturally rich, which is the agenda of technology for QOL.

Finally he asked whether all this was possible. He answered affirmatively as he said the current generation suffered mostly due to lack of communication caused due to the difficulty in understanding so many varied human languages, which in the future will be taken care of by AI and high level computing. Technology was set to develop very fast and one will be able to see a lot of innovations and inventions, not limiting to driverless cars or the agri-robots in the farms of India, but also so much of computing powers in ones mobile handsets, that a person could speak in their mother tongue and the other person would hear it in his own mother tongue, reducing the language barrier and boosting global communication. And this was the current situation being worked on, not any science fiction.

With advancement in technology, the co-creativity could be unleashed and how this would affect the economics was very interesting. Most products would be in the form of knowledge. For e.g if one wanted to buy a microphone, then the person would not need to go out to purchase the microphone, all he would need to do was download its design and 3D print it at home at ones leisure. When designing, someone had paid for the first copy cost, but in economy of service or economy of permanence, (is emerging in a very embryonic form of it), the first copy cost is paid by somebody and all the other downloads thereafter are free. Zero marginal cost economy. So how technology would affect QOL is that one will have access to large number of services and products in the digital form and one could convert it in the physical form at their homes or in their socio cultural environment.

So these were the possibilities for QOL and this is a subversion waiting to happen. Another interesting point was that when people across the globe start talking and communicating with each other, wars could be avoided as today people were waging wars due to lack of people to people communication and it was only government to government communication that was happening which was a limited expression. So with all this there was a possibility of realizing the dream of 'vasudevam kutumbakam' provided one took the people first and the planet first approach towards technology development so that one could migrate from the current situation of 'vasudevam marketum' to vasudevam kutumbakam'.

### **Dr. Sujala Watve: Session chairperson's speech**

She began her speech thanking everyone on the dais, other dignitaries and specifically Mr. Vivek Sawant. She appreciated his view point and stated that technology was a tool, how one uses it depends on them. If it was overused and it consumed one's life then it was not the technology invention which was wrong, it was the human approach and attitude that needed correction. She said he had elaborated it very well and that she was not going to brief it, but what she picked from the speech were the four words which represented human characteristics. She said that these characters would help us control technology and not let technology control us.

Another enlightening fact which he spelled out was how technology was all about knowledge, so as long as one has knowledge, one will be powerful. Human beings love power, but it should be utilized for a good cause. As was said, people to people communication will avert wars. Dalai Lama had also spoken about some human characteristics like concern for others, connectivity, communication and these aspects also worked towards enhancing ones QOL.

She said she did not want to delve into the nitty-gritty of QOL, its enhancement or its measurements as that was well deliberated in the conference. What one needed to do was go back and think about one's QOL, the meaning of their life, treat it is more like a journey of life in search of the meaning. Everyone heard how Jeevan vratti's had worked towards creating better QOL for communities. Our scriptures talked about what ones QOL was all about and what it should be. The Bhagwat Gita was the supreme guide to all psychologists, psychiatrist, philosophers and who not. Even our saints have taught us about the varied aspects of life and its quality. Most have at some point in life read or listened to their preaching.

She also said that in a short time everyone would be able to listen to Pasayadan, which is the essence of QOL. The last question which needed consideration was what could be the idea of life for youngsters? What did they expect out of life? To sort of answer these questions, Dr. Watve recited a poem written by a std. 7 student of Jnana Prabodhini on his thought of what life meant to him.

The Seminar concluded with a melodious rendition of Sant Dnyaneshwar's 'Pasaydaan'.