

Psychology of Everyday
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Lecture – 10
Issues Confronting the Young Adults – III & IV

So, Shivani the question that you asked in fact, this has been what I know from informal sources this is also been a point of discussion in the courtrooms.

Student: (Refer Time: 00:25).

And two things which comes very interestingly out of those informal discussions is that judges look forward to psychologist.

I am not further classifying them into marriage counselor or different, different kinds of counselors of therapies.

They look for know somebody outside the legal framework especially the psychologist who would become a good advices to them. And what the senior group in the judicial segment they suggest is that many a times, the family counsellors who work in the court, many of them they start looking at the problem from the legal perspective, because in the legal perspective as you are also mentioning you know say we give options like divorce is one option, getting compensation from the spouse is the other option.

Or getting maintenance money is the another option. Now, judges say that these are the legal options, these options are known to them. So, you as a psychologist should provide an option which goes beyond this ok. And in most of the cases whether you are from the legal fraternity or from the fraternity of the psychologist, we work in the same social mind set, where the attempt is to save the marriage. Hence we do not want the couple to get separated, either you begin with this or you begin with the view that these are the options which options do you take and then you are separate ok.

So, I just wanted to share this with you. So, as of now I do not think we have a very robust system or I should rather say that there is perhaps an absence of the system, where the legal need of the parties are taken into account.

Where the psychological need is also cater to, and where things are resolved not in the courtrooms, not in the courtroom, not in the room of the clinician, cases are actually resolved in the real set of socio setup where that individual belongs to. Then perhaps you would be able to deliver.

Perhaps the best kind of a solution which is.

Right, right, right.

Possible which would also be customized to the kind of need and therefore would be much more stable.

Student: What is the community that (Refer Time: 03:07)

Exactly.

But you let us take this issue and then look into the various dimensions of, then we can talk of normalcy, abnormalcy and whatever else. We have talked about let us go back from the court. What does the court do, when somebody goes for a say forget the domestic violence for divorce right.

Do you think divorce cases are brought to a psychiatrist?

Student: Unnecessary divorce because of (Refer Time: 03:41).

They are brought.

Student: Even if the (Refer Time: 03:45).

They are brought.

Student: (Refer Time: 03:47).

If couple is living say in Bangalore or Delhi or Mumbai and parents are in mid size town like Kanpur and Lucknow and Bhopal and all, first thing they will do is they will call, they will call the parents of both the parties, and first thing they will do is go to a psychiatrist. So, they are brought to me. What do I do, forget what do I do. Look at what the court does. If you go to for a mutual divorce, first thing court will do, send you to.

Student: 6 months.

Marriage counselor first. And 6 months you live separately, and then you come back and ok. It is already gone into the purview of mental health, counselors belong to the purview of mental health.

Student: (Refer Time: 04:49).

So, already something which is a social relational issue is already cross the boundary, the moment you enter into legal system being deflected to a mental and health system. So, what do counselors do? When I say marital counselors, I am also taking marital therapists in account for that matter they are entirely different things are and they? As a psychologist you would know therapies into deeper processes, counseling is the very very problem-focused right.

So, what do they do? What is their mandate actually? What should they do? Because you are talking about an alternative system community-based.

So, if you do not look at this process, then you will not know what the community should be doing actually. So, what do they do as of give me an instinctual response, what should they do?

Student: (Refer Time: 05:48) patterns.

And.

Student: And priority that makes the issues that are coming up to get communication patterns.

And that is the process, the goal.

Student: Reconsideration.

Good that is what you were saying.

Student: Because husband and wife personal issues like

What are the goal?

Student: Goal to just resolve the.

Resolve with what?

Student: Resolving (Refer Time: 06:11).

You also.

I thought you are a rebel

You resolve.

Student: No, the issues should get over whatever getting over the means, for both of us.

So, but fine. Now, what would be the ideal thing to do? What they intend to do is may not be the ideal thing. So, what is the ideal thing? So, what I do as a marital therapy, or what anybody in the logical pattern should do? Because then I will come to the next level of it, why did they go to the court in first place?

Student: Sir, I would say like looking at the (Refer Time: 06:56) of the situation where in terms of domestic violence how severe, how serious (Refer Time: 07:02).

Let us not complicate, let us keep it simple first thing because audience will also be listening and they should get simple messages. If two people are able to there is a shimmer of hope, there is some thread uniting them, there is some hope where things can be improved right, try and resolve. But if they cannot, the goal is very simple separate without damage. Law interns this. Law wants an answer from the counselor that they cannot live together or they can live together, very clear, but law cannot go to get into emotion and all that, they have to decide about alimony is that. So, this is step over.

Now, image in this whole situation not happening in the court of law and the marriage counselor is not in the directed by the court, it is happening outside they come to a psychiatrist right. And now I bring in what you are saying, domestic violence, and where does the woman go, she cannot live, she does not live. So, the whole thing is complicated now. Because if somebody walks into my chamber, parents, and they say if they do not want to live together they just been married for 6 months, so I have seen divorces from 6th hour of marriage to 60 years of marriage, do not be surprised.

It can just happen anytime. We will not discuss the.

Yes, yes.

Deeper implications of it, why marriage is like that, but nevertheless, but marriage is a boon resource of miseries. So, unhappy marriages can create havoc and happy marriages can take you to sky.

Student: And also marriage in mental illness, there is also a common somewhere in the societal government societal notion that if a person is mentally ill, people think that the solution would be marriage because [FL] (Refer Time: 09:05).

So, ye I will bring this. So, I want you to go through the process of how it is. So, let us keep it out of the legal thing now.

Student: Ok.

It comes to you as a maybe people know you are a psychologist, you are doing a PhD, you go back to your home town. And aunty comes and says [FL] is not giving please you advise or (Refer Time: 09:23) frustrated and your mother will say you are a psychiatrist at least keep this much (Refer Time: 09:26) do something.

So, you do not know a bit of binaural therapy, but you still sit one fine evening and listen to all the (Refer Time: 09:34) of marriage. And after 45 minutes you will realize that is not working. First 45 minutes, 100 percent of therapist they only see one thing that these two people cannot live together, because they will be telling two different versions of the same story, and there is no way of deciding what is true and all. It may have domestic violence.

Student: Ok.

It may have one simple innocuous push to save your own body.

Which can be perceived as domestic violence later on.

Two knives and bombs and granites to whatever, whatever you get hold off.

Now, you realized that what I am listening to two different version of story I do not know, what you do?

Entirely for mental health profession, do not bother about why I am trying to say this, you see the type of a stuff which is coming to mental health facilities and we are so eager to diagnose.

Undiagnosables.

Student: Sir, it is like (Refer Time: 10:45) two things, one is trying to set some common goals for the women, and the second one is sometimes you also called in a third party person to sort of.

Student: Situation further external point of view.

Anything else you want to look in the first go?

Student: We can like most of the time, (Refer Time: 11:08) saying two cases like mostly like (Refer Time: 11:12) thing.

Student: So, we act they do not say things in (Refer Time: 11:16). So, we can see the patterns and let them speak more of what they think individually and.

I would look at something else try to look at whether both of them or both of them and either way are having any mental illness or not.

Student: (Refer Time: 11:34).

We have to rule that out first thing, because in one of them having a schizophrenia or delusional disorder and suspecting that my spouse is having an affair with somebody that is I want to take divorce, may be having may be not you have to look into that delusional quality of it.

Student: Ok.

That as a psychologist in 45 minutes you will be able to assess, sometimes maybe not. Then you will have to look at the pattern of violence, do not get into process, look at the pattern.

And if it is a repeated pattern from one side, there is a possibility of mental illness, is not it?

So, you will rarely find that both of them are happy, intelligent people who walked into chamber say whether absolutely clear, we are out of tuning, we want to separate. You will tell them, have a coffee, go back, apply courts are very happy to have such people. They are the easiest, they come, they sign, they go. But they are very few that brings in your issue of domestic violence what you said. If there is a domestic violence forget about the divorce in living together. What you have to ensure is not the separation and all what your to separate the safety of the other person.

Student: Yes.

So, how do you do that? In that case what are you going to tell the woman? See all boundaries are blurred now. What is the mental illness, what is the legal issue, what is a person living with a mentally ill person, impulse this control, repeated violence. So, and all these questions immediately will rise, and the women say [FL] I do not have money, my father will not he is a poor man. So, what are you going to do, I mean throw any answers, there is no right answer.

Student: Ok, (Refer Time: 13:33).

Student: Any answer?

No. What I am saying what is the first priority, your priority has changed immediately.

Student: If people of the.

If the woman says that I have been hit badly multiple times, your whole mind will drift from divorce to.

Student: Safety of her.

Her safety. And she may actually not be aware of her safety that is how the women folk live in this country, really, believe me.

Women.

Student: (Refer Time: 14:05).

5,000 years they have gotten into this habit of. So, there is a very interesting.

UN report which says if I remember correctly around 34 percent of the Indian women accepting that being beaten by husband is legitimate.

And what is far more interesting is to see that (Refer Time: 12:37) women.

For substantial percentage of them they also say.

That if husbands physically beat their wife's, they must be having reasons for that.

So, acceptance of domestic violence that you are talking is very hard.

They around 34 percent.

I had one person who she was getting beaten up, husband had some illness. I treated, settled down. 6 months later, she comes out of the (Refer Time: 15:02).

You your previously at least he used to beat me up that was only point of contact with the husband. This is this country, you know I am talking of a city, you know I am not talking of a village. So, what I am saying that women may not know so our duty the focus our duty immediately shifts. You are no more bother about getting a divorce, and this and that.

What you have to tell that women they what do you want, are you going to live in a state of perpetual fear, risk through your life and then when you say this the second thing which will come if the woman is not working, even working women on average would not immediate take a decision. If they are very few minutes take you [FL] one slap, and I am out is a very few. People who fight like dogs and cats also come together, because this is very very cultural.

Student: Ok, (Refer Time: 15:56) majority of the times the fear that we are talking about here.

Student: (Refer Time: 16:05) all the other aspects because even a people try and contact these help lines.

Yes.

Student: They try because they want to get out of it, but then something (Refer Time: 16:16).

Because you mentioned you mentioned Nari Niketan or something. So, what I am trying to tell you that it is entirely before you look at society to help this people, what is important is to help the person, you have to help the person in taking a decision of how she or he wants to live.

Student: Right.

And then all those issues come in, dignity, self-respect, physical safety there is that so on so forth immediately it becomes a mental health issue. See, how the whole thing I have brought it from the court to your clinic.

Now, if this woman comes back and says forget divorce and husband, I want to I have lived in a state of social anxiety, I have never been able to express myself, I am not able to live up my full life and now I want to change before I take the decision, this is not a lawyers job, it is your job. So, mental health starts now. So, a sociological problem which is the out of the purview of diagnostic classificatory system presented in a social legal perspective has taken a turn which lands up in a mental health clinic and again it has to be brought back.

Student: Diagnosis.

To forget the diagnosis, diagnosis what most people would diagnose you know what most people do, they will called it a depression and give medicines, it may be required.

Because this person may be having depression. But if this complicates it further, see how the whole brain is like this. So, if this person is depressed and it has to be treated, what makes the other person not as a person who yet requires treatment.

So, you treat both that person for impose this control in this person for depression. So, what do you do it by time you treat them. And then review the whole thing asking them to get back to what was the basic process of communication there is that and so on and so forth, got it.

Then the.

Let us the now connect this story to the initial loop that we created know.

That then those who go to the court or those who come to the clinic, those who get benefited out of the court settlement or the clinical intervention, do we still considered all this spread as a normal spread.

Yes.

Behavior or do the consider.

Now, this is.

That socially they are no like exceptional couples who have done something which is not acceptable hence they are again being on the periphery this is what we initiated.

So, the threshold see it is a shifting baseline again. We cannot keep a fixed frame for diagnosis, we cannot say your although marital relationship d s m five has a legal for almost everything.

Now, once you treat the person to a level with the think, she can think. Again the sociological questions will come, what will I do, whether there is that whatever, all those things you cannot resolve all those things. But when you use the word call, what did you say hopeless.

Student: Helplessness.

It is a helplessness

Student: (Refer Time: 19:55).

That I would not deny that helplessness, but feel that. Because the moment you feel helpless, then you will look for solutions. Those solutions do not be very smart that I know the theory I told them. When you feel helpless and you really want to help at that time you will start looking for solutions right.

And those solutions are there already in the society, and this happen, this is how we work then more we have centers anywhere. There are no social support systems. So, what do you do, we tell people to empower. And how do empower somebody women? Women who studied say in class twelfth right, (Refer Time: 20:47) ask her to study go do

develop some skill there are so many work outside. She has never worked for her own sake.

But you have to give a mind open that what I am trying to say what sir was saying with we in this country at least that specialization thing that I will talk only this does not work. We have to good work, otherwise you can be happy writing (Refer Time: 21:14). You have to even a schizophrenia person who improved this schizophrenia now what is the most important thing, he gets back to the normal society.

So, where is the vocational rehabilitation centre?

No. So, what do you do?

Student: Community support.

Community support. What is the community? Family is a community a girl should be able to walk back home and the father should say you come back I will do something for you that is the community. So, that means, you call the father, now talk to the father right. Or a patient with schizophrenia where is the vocational rehabilitation centre. So, tell him to go back to the village, find out some carpenter shop, find out this, find out somebody's factory, where the person can go work get 20 rupees and she will happy.

So, in India you have to be very, very creative to use all this there are no support systems, less support systems.

But at least with the help of this discussion, we are able to highlight that there is a need for ye absolutely much better and robust system.

Till that time.

Then we would need time to revolve, but at least it can start.

Then you do not fix yourself with being the frame work of (Refer Time: 22:33).

Right, right.

Student: We talk lot about (Refer Time: 22:36) very important concept.

Student: (Refer Time: 22:40) stigma, because it also (Refer Time: 22:43) social rules involves.

We have already answered.

Student: Answered that.

And (Refer Time: 22:47) was not good n that was also breaking, that was stigma break it. 10 people will do stigma will break; 10 girls will walk out of marriage, they broken the stigma of diverse. Or for that matter the woman who was whose son is an autistic kid does not feel ashamed about it or mentally retarded.

Kids mother says that whatever it is, see if one thing you should understand as a psychologist, you cannot take away the validity of any live person.

If the person is live on the face of earth, he or she is as valid as you and me are. And I am not saying this; Mahatma Gandhi said this. He early had a good vision in you how to involve people into all this and how people use to help each other, creating resources on the community and that is where.

Student: Community (Refer Time: 23:42).

Community survival first. So, he used to say you know it something why cannot people have a skill set which they take it back from their home. And whatever else you do you maybe PhD physics who is stopping you from making good coffee, at least you can sell a coffee know, you can open a stationary shop. Number of women who have done ignore BEs because of this process which we work on is huge.

Now, in fact, open school have succeeded in this (Refer Time: 24:14).

And I tell you something more than a lot of people who come and say that we want to talk to you. So, I said talk. You come here, you cannot come from village I said you know WhatsApp, you know Facebook, [FL] and go use it. Buy a smartphone. You do not fight for a saree, fight for a smartphone. Get a smartphone, learn WhatsApp, learn Facebook, you learn to say email, and then you can talk. And I make sure that these people who have never step out of the house these women whether type an wrong English, you are the whatever they do.

At least her able to convey their feelings.

You know what is the most important thing in this country, women have to learn to say it out. Though women do not say, children do not say, children were the most exploited breathe how what is justice for children? It is this is what I am saying it is very well this normalcy abnormalcy in this country is absolutely blur at least for people who are seeking help. Educated people they go to gurus, and do all sorts of stuff, and they debate on it as if.

But gurus are the most visited people.

No.

In our culture.

And it has been they nothing do with education and profession.

They superseded gods also.

Student: (Refer Time: 25:44).

Student: (Refer Time: 25:48)

So, who people want to go to Shankar, Shiva with five guru is standing in between what.

But, imagine one thing.

Say if I have 10 gurus in my locality who are the preferred ones.

They must have delivered something that we have not been able to delivery

I think.

Something which is convincing to the mass, if the mass was not convinced they would have not gone back and they would not have develop that blind support for this gurus.

I think there is a reason in we being partially scientific.

And we ask these people to when they are participating in treatment, we will tell them certain set of responsibilities that you have to do this, take medicines and do this, this and bring back and all.

So, do this we also ask for surrender. If I say take anti depressants, wow, I have faith n in that chemical, I am transferring that faith.

Student: I think it is a believe you.

It is a believe system.

Student: Believe and changes to (Refer Time: 26:50).

I want to, no, what I am saying, I have believe may be I have a data.

Student: That is why you have believed.

So, maybe that medicine has a side effect which will kill, I do not know that suppose that or if I know.

In the end I would just like you to highlight a Newman's tried this model, when they were trying to make the society educated.

When to come to psychiatrist and when to go to a faith law.

This was.

Way back 80s.

80s.

So, if you can just talk.

Right.

About that model and then we will conclude this session.

Now, it all started with community psychiatry, a lot of my Professor Mohan Isaac, Doctor Murty, they went, they created huge amount of material like fluid books those were it was a non-digital world. So, went to villages, trained the doctors with pictures

and the (Refer Time: 27:39) patterns and all that, graphics even before this graphic, (Refer Time: 27:44) graphic. So, people used to identify the abnormal behavior just by imagery, there is a certain set of behavior which a person who is violent and all, but (Refer Time: 27:55) continued even then.

Before going to doctor, people would normally try even today.

They would normally try somebody in the family.

Some temple, some.

But at that time I think what they try to convince was that if you see these kinds of.

You bring it to the hospital.

Then you bring to the hospital.

But we have to take lot of pain actually, we had this huge satellite clinics going to up to the village areas and every fortnight they are with. So, people slowly started bringing in.

And once they got improvement with medication.

That build up the faith warriors, but it took two three decades. Now, that is also happening here also it is the remotest of areas people are able to identify mental illness.

That is because the work at what happened in Newman's, because that is not the whole thing. People have a parallel believe system which is going on into all this. I think what I was saying is about we are we also ask for surrender through our believing fluoxetine and prozac and all that. We say surrender take this for 4 week, but in 3 days later, he will say I have not improved. I said just shut up take it for 4 weeks. Guru, he is saying something else he said you do not worry about anything.

You surrender totally. Give me your money, give me your spouse how the problem is gone, so that they were asking for in one word I will tell you total irrational surrender, where we ask for a rational surrender that it works or not, I do not know, but that I think is one way with the trajectory was different.

Student: (Refer Time: 29:43).

So, that at the this note we will end this.

Student: My question was that we have lot of literature regarding this in psychiatry about like with a black therapist would take a white client or not or client lot of literature is there in psychiatry. But when we talk about Indian, psychiatry there is no I have till now I have not got it this regarding. The role of a casteism, there is no that is of this thing in Indian psychiatry like because I have seen cases, I have heard cases from my colleague at if counselor who is from a upper caste

Right.

Student: Who is handling client from a low cast.

Right.

Student: what would be the dynamic because if we do not have an understanding over castesim. If we do not consider it the whole process of counseling we get (Refer Time: 30:29) in that sense.

Actually, what is happening in I do not think it happens in US, Australia, anymore, but it was happing at a certain point, because this is the thing of past actually. So, what was casteism in India was racism there. So, we have to understand the cognitive framework of human mind actually the cognitive phenomenal is deeply castist or race system whatever it is not because one that you add social value system to it.

Second if a mind has this tendency of trying to gain control, it has to categorize thing. You can categorize a single flow of time to me, you, everything which can create a gap of separation. So, it was probably outcome of that. India, it was never known, it is still, it still does not happen. Sometimes, in a very deep routed mind set, this issues of communal and all things may come, but nobody, people may have a choice of preference first of all psychotherapy in the modern sense is not very widely practiced in India, most people practice as psychiatrist practices doctors.

Student: Right.

Right psychology this is a rare breed. So, and if you try to look at psychotherapist, they are even less. We will find in metros and all. Metros, those of you understand it is

already beyond all those nobody gives the real concern to all this. Secondly, in lot of this work after all what rules everything else is economy. So, lot of this money based practices the money based. And doctor would not why should he bothered not to touch and all. I do not know what used to happen 100 years back.

Student: No, my question is not a found the core (Refer Time: 32:32). The thing is like a therapist or psychological or a psychiatrist

Yes.

Student: coming from the particular background or a particular type of psyche which I have see from a cultural psychiatrist perspective.

Student: That a community they their own psyche like working with an adivas people, I have seen that their conception of reality is very different compare to the other people.

Yes, you are talking in the sense of the way the culture things in the way therapist works.

Student: How this should be handled in the academic and even in the psychologist psychiatry, and how they deal with this and how should conceptualize.

See, when it comes to frameworks of clinical work or the frameworks of understanding human psychology and all, it is the larger assumption, larger understanding you are more or less the same.

Now, given on the stay skill of development and material development specifically, the societies may vary. So, obviously, a good psychiatrist or a psychotherapist or a psychologist would be able to understand any culture only when that person is acquainted with it.

Student: Ok.

So, the where the lot of people who are living in US, they go to a they referred to the psychotherapist. And they call back and say can you suggest me in Indian psychiatrist, I also tell them that you find out, because even he may be hailing from south or the person is from north is still there is a continuity in the way we live and all.

So, I think at that very minute level, it really does not know the unless you are going to really work with tribals.

Student: Sir, (Refer Time: 34:11) on the same note, it is like it is also in terms of keeping our (Refer Time: 34:14) because like for example, like we get jail cases, court cases that come for a rally issues.

Yes.

Student: If somebody is (Refer Time: 34:23), you might think of you know as you can (Refer Time: 34:25), but you would keep that the bias inside and (Refer Time: 34:28).

So, objective understanding of human psyche is something like for some time I was working in Australia, there were people who used to they are trying to enter Australia, they coming from boats from Indonesia. And all they would be caught and put it in a jail and some of them would fall ill, so obviously, that is not my experience.

So, experientially it may not be the thing. But what that person will be undergoing is not very difficult to understand you know see there is a very very important word called phenomenology. When you are talking of clinical stuff, psychiatrist still based on phenomenology.

Student: Ok.

Phenomenology is your experience and mental state and how you tell me, or I as a patient tell to the therapist. Phenomena is not to be confused with the causation of it. So, first and foremost what you have to look at is the phenomena. If somebody made tell me that I have shifted from Ethiopia, obviously, I have not been to been Ethiopia, but I am sitting in Perth and seeing this person was just migrated. And the person comes and tell me totally home sake and culture sake and I mean totally devastated which is not very unusual all right.

So, what I would do is, first and foremost I would look at this phenomena of feeling sad that, this, that, whatever, may be give a diagnosis and all. Second, second what would I look at?

Student: Social culture (Refer Time: 36:13) function in terms of (Refer Time: 36:14).

No, I have taken all that in consideration for diagnosis and then I say let us have few sessions of cognitive-behavioral, therapy for example, then what would I look at I would probably look at the whole process of separation.

And the reaction to separation from your own culture, but that is a universal.

(Refer Time: 36:43), I have one here context to this large number of Punjabis from India who are migrated to US and Canada, there was and still there is a phenomena. In fact, government of India very recently brought up something about that. The phenomena which was observed was large number of these youth would get married in India they would stay here for a week or so India then fly back to US. And we never return back and he would not even take the spouse back to US.

After some time and this were marriages perhaps were huge amount of dowry was also involved. So, this was the money making exercise for them grooms. And then after sometime, the villages here whose daughters have been married, they would receive a legal notice from some court in the US. And of course, this people would not even be able to figure out where that places on the map, how to respond to those legal notices. And because this party was not represented in the court, therefore, gradually know one side of hearing used to take place and ill laterly a disease used to be delivered which no sometime back the government took very seriously and said we are going to plug this hole in the system.

There was also a time when for specially marriage counselling in the west specially in US, Canada that in the religion, there was a time when there was always a preference that if there is especially that in the cases that we were discussing in the last time, separation, divorces, abusive relationships, they would always try to connect to some therapist or counselor who is from your cultural background.

Yes.

So, what (Refer Time: 38:45) are asking know that sometimes it is very difficult for us to identify the actual thing that the person is narrative. One thing that sir said know that you know there are certain things, the clinical picture is band as the same, but there will be some social reality which are part of the lived experience. Or if I have not undergone that

kind of an experience, I might have difficulty realizing it to the level that this person tries, he is failed to narrate.

But human beings as you see human beings are the same honestly. Your basic processes of thinking, the way you think, the way you emote, the way you conceptualize, the way you are abstract the way you get develop inside they are same. Maybe it was different for (Refer Time: 39:38), maybe they would different for 40,000 years that, but there was still the same.

So, at this in the time capsule in which we are living or maybe it is a 100 years later, you do something else. Your basic processes are not very difficult to catch. If one is sensitive enough, what differs is the way things are done, the way things are done.

But that it will not remain a difference in coming years because of this whole knowledge explosion, the pace at which information is transferred and everybody is the same, everybody knows everything. So, let me give one example high court gave an on a divorce petition, high court allowed the divorce on what, imagine this in India nobody would have thought of it, this it there was just out of sync this is the thing which terminology which you was expect from US courts that you just cannot fed into each other, so but it happens.

So, now having said this also everybody has access to information through the digital world. So, everybody is cognitive processes are also changing.

So, now you do not expect going to some remote village in UP and finding much difference use a largely they may not believing like us, now there would have some access somebody in the village would know all this stuff, so that is very fast changing, so and with suppose AI and everything will come in. So, next 20 years that is one big reason when we were talking of culture. So, cultural psychiatry will vanish, it will only remain in Africa and maybe some villages in India. So, those syndromes which we were a studying in 1990 we do not see them anymore.

So, as a big question we also wonder what has happened to cultural psychiatry. Cultural psychiatry is changed, cultural psychiatry is now working on this issues of caste in all, the mental health of caste and that all those sociological issues. Again as we are talking this is the whole thing is become again at a interface of normal, abnormal, clinical versus

non-clinical, when you talk of caste based mental health problems, so you are pulling up sociological issues to the clinical purview. So, again it will be the after keep bouncing back.

Student: Sir, like one thing like very interestingly, because I was thinking like when we talk about humanity, now basically in you, like idea of happiness is very it is very organic you know a spin.

Yes.

Student: Impose.

Imposing point, right.

Student: Like a how much is important do they happy, like every way.

Yes.

Student: Every bit of whole notion.

Yes.

Student: Of deviation being compared with happiness.

Student: So, what is the then what is important of not being happy.

Ok.

Student: Because I think the whole process of creativity starts when you are not happy.

Absolutely.

Student: When you are sad, when you are.

Absolutely.

Student: (Refer Time: 42:53).

Absolutely.

All lives of progress have happened when people have been in discomfort, when you are fearful otherwise you would not do it; no see that is what I was saying is we when we are talking initially of how when you said this is a whole exploitative gap, you are right. This indexes of happiness, the concept of happiness in modern terminology I think is a it is not artificial I would not call it artificial totally, because if you look at ancient Indian theories, especially something like (Refer Time: 43:27) they are taking about Rasa.

[FL] Rasas were what, they were emotion. So, they were there is a emotion of anger, there is emotion of loss, there is a emotion of a (Refer Time: 43:39), there is a emotion ultimately all go to what we call Anand the bliss. So, human mind is always seeking that point where the mind can just feel blissful, complete, even if it is a transitory movement all over acts actually.

Let me.

Border to that.

Then what we are discussing here is happiness in this, it is different compared to traditionally.

Yes, absolutely.

(Refer Time: 44:04) what we look at bliss.

So, we are talking of a int.

So, (Refer Time: 44:07) have two different things.

Internal state of mind where you feel how many peace in you a see all mind live in contradictions is not it, there is nothing one ask anybody's, there will be contradictions. The whole Rasa theory was that one has to resolve this conflicting thought processes and restore point of how many even if it is temporary. So, there is no primary motion called happiness.

Student: Its equilibrium balances the ordinary.

Student: Even like lot of people end up inside an end up the psychiatric, because they think there.

Student: Not happy at all.

Absolutely. So, happiness is the again external frame which has been said the this is happiness this is a bench mark, everybody has to achieve. In the process of achieving happiness we create more misery, because there is absolutely what is happiness, you can be happy without things you can be happy.

So, if you put the whole hook on to external parameters, then it becomes a very very difficult diagnosis. You are happy unhappy or happy and you are right absolutely, sadness is a state of mind, it is not going to remain forever; happiness is a state of mind, it is not going to remain forever. Last never going to reach never going to this is the whole question is our channelizing it or creating it. Rayleigh was not so happy for what pottery he created.

No, but if you would have been happy, he would not have happy.

That is what I am saying. So, I do not know whether somebody should do this research.

Student: (Refer Time: 45:38) who did I know (Refer Time: 45:40) Rayleigh diagnosed.

Rayleigh was being diagnosed, there are very very enthusiastic psychiatrist; they have diagnosed Ramkrishna Paramhans, they have diagnosed Gandhiji, they have diagnosed Valib, they have diagnosed Arjun. So, you know what you know something called a feminist lens. So, if you take a feminist lens, then put into the past, how the people will become problematic then. Why does this happen this happened, because you take a certain top-down thinking out of context without looking at how people were living that is the cultural thing actually.

But this is what we have been contesting right from the beginning ok, right from.

Yes.

Right from (Refer Time: 46:20).

Yes.

Round of.

Yes, yes, yes.

We have been contesting this that this top-down approach is something which invites problem and we need to look at things differently, and this has been the discourse to me.

Now, is good that you people have asked this basic question, because otherwise in normal discussions we never come to the point of the non-clinical and non-psychological factors which contribute also.

Student: Just like it would like IIT, where which has very (Refer Time: 46:55) numbers of suicide rate, I think somehow like overall in a society people with PhD, student and all, we have a notion of happiness in so.

Yes.

Student: Within us where we look our self into that when we look our self still use, when we do not find our self, they, they, they case balances lot of things in life.

I would like to conclude it, the suicide rate in IIT is not very wide, we say just the perception which I think created for the notes. If you look at the actual data, the suicide rate of say non- IIT people of the same area.

Same percentage.

In the culture ok, what says the number of.

Student: (Refer Time: 47:36).

Suicide (Refer Time: 47:37) here.

But still what is he saying was a.

Student: Any institution wise I think IIT.

That is was also not true.

No, but.

Let me know that is the perception it has been great.

What you are saying is I the meaning is right.

May be the percentage was the.

Number wise there is a difference, but yes what was.

The chasing happiness, the chasing happiness is also like chasing slimness.

But let me.

Chasing.

Let me interfere, say.

Not even know.

What you do it like sir is mentioned in the beginning know that say when you I am chasing a 0 figure, considering this is the indicator of duty. Similarly, if I am chasing an academy target that suddenly is not a denominator of happiness it is for sure. If I am looking for the degree, if I am looking for a grade, if I am looking for a CPI, if I am looking to be a graduate of a next institute or even if I am trying to become a ex-professional.

None of these are indicators of happiness, these are some academic goals that I have set and these would lead only to the sense of achievement of the particular target that I accept for myself. None of them have to do anything with happiness.

See I can, add to it what. So, see everything has I am taking it to one deeper level that would probably answer you, everything has a inherent truth, I am not saying truth in the sense of right, wrong; good or bad or inherent quality or a value or whatever everything else in this world right that value or the truth may not be the value as it is seen in the operational world, like diamond what value does it have. So, the value of diamond is which is being seen is a value ascribed by the societal thing.

Agreed. People say in school you should study, you should study, so what will get by studies, he should become a good person; the goodness with the degree, then what is academic of a year, then why do career gets spoiled in universities you all know it, so you try to understand. So, the value ascribed by society vis-a-vis see the value of honesty of speaking truth, of sacrificing, of empathizing, of let him go, they are the inherit truth

of things by which you get everybody who practices this, forgiveness will get peace there is no doubt about it, because the brain has evolved such a in a such a way.

So, altruism forgiveness it is already there in the like a rage in violence the contradiction of it is all this, which gives you more peace sometimes violence can give you a peace, but that will lead to lot of repentance and this.

Perhaps, when one model an alternate model that comes to my mind is say these are the thing the qualities that you are referring too, these are the qualities largely which we get through our family and through our.

Culture.

Culture.

Yes.

I think the society provide these things for us. Now, if the academic curriculum also has elements of these things, then perhaps it will go very well. Otherwise, there is a right now what we find is the.

Student: (Refer Time: 51:25).

Say like the stories that we read in a literature English, Hindi right from the pre-primary days still the final of the school days, those story is mostly many of them do not have a connect and the qualities that we are right now talking about and finally, looking for something which is far beyond happiness called bliss. And similarly say if different kind of courses if we also have an interlink.

So, that I know it even though I am studying psychology or if I am studying psychiatry, I need to understand the politics, I need to understand the sociology, I need to understand the law, I need to understand the economics of it and then trying to view it together to create a complete story perhaps would also give a more stable solution.

That was the kind of issues that we have been talking about.

So, the so that is what you are saying is that, but what we look onto is the external value system.

Student: But that becomes norm right.

Because, because societal norm that was I mean that was he is saying. So, if you do that, then obviously, you were chasing one layer above the truth.

But there was norms keep change is not it. You may be a PhD and a professor.

But you change the situation you become a wife or husband.

Does this quality in this value system transfer that.

Very rarely

Very rarely. So, that means, there is a different set of things which will require in a different situation. So, there is nothing which is continuous and universal in those situations, but those are human qualities which anybody can have. So, for happiness, people often say a Bhutan is a very happy place I do not know.

Student: (Refer Time: 53:26)

I also.

I do not know I also. So, for me who is happy (Refer Time: 53:33) this is a myth.

So, but that is also.

Happiness of myth.

(Refer Time: 53:36) way happiness has been.

For the purpose of survey.

British generally a psychiatrist brought out in article 20 years back where this happiness is a mental illness. If you ask me I read it in around 90s and now after so many years, I have realized that it was it asks a right question exactly, happiness, what does it mean, you are happy (Refer Time: 54:03) happy.

Student: (Refer Time: 54:06).

IIT is very happy within Uttar Pradesh. So, what happening in Uttar Pradesh or one person being happy at the timer of holocaust what, what did mean? If one person sitting happily in Kanpur while partition was going on, what does it mean. I may live in a penthouse and right below there are slums and people who are not being able to (Refer Time: 54:34) what does happiness mean?

I think it is a myth and that is where this external value system people try unconsciously, because 90 percentage of brain processes are unconscious. If conscious mind knows only what the unconscious mind is telling you. So, what is happening, what is people try to avoid those deeper troubles just by hooking of the attention to an external thing which give you a sense of completion at the same time.

So, you want to talk take a gold medal, fine you get a gold medal today. What next morning, what he do, he really get on to life. So, all these things actually the problem is that because we are talking that is why we are able to go deeper into this layers, but in a ordinary life of nobody sits and think they will.

You know also you need to have that reflective tendency we give you.

Many of us will never go in to the reflecting mode.

I think it is also not whether it is the big bigger questions whether it is required at all.

No, I am [laughing] I have simply because 90 percentage of people they are caught in the grind of life.

All psychology of everyday life boils down to one thing, 99 percentage people are caught in the grind of life with him no time to really sit back and get into deeper issues. So, for them happiness have to have this value system in there in all this religion, temple, they are very useful thing. People go to the extreme and becoming phonetic that is it they, but somebody feels happy, after the day work they feel happy going to a temple or to a mosque or to a church or wherever, and doing little bit of prayer for that time we feel the god is with me and fine.

We had talked about it know.

Yes.

It has to do with the locus of control.

(Refer Time: 56:31) he live the problems and say which all like let it be happy.

So, this was you know a good interactive session at least where we could take up quite number of issues.

Anything which you want to add, anything last comments? There will be many more I mean this thing can go on forever.

Student: Sir it in terms of the reflexivity as but also reflective on things.

Student: Like for many people, they like consciously also (Refer Time: 57:01), then people go into deeper reflection then they with existence.

Student: right. So, then that.

Everybody reflects, everybody, every human being unless they have some moderate to severe mental retardation or at the other end dementia or they are in organic delirium. Everybody reflects in whatever state of living they are. Even then seriously because the there is no way you can prevent it that is how your brain functions. Brain will take in all things, it will process, it will mix up with memories, it will take evaluate in the hierarchy of survival and fear and all that, and create a frame of reality in 500 milliseconds, frame of realities. See conscious brain has to weave a story out of that that differentiates us from apes meaning.

Student: (Refer Time: 58:03).

Everybody has to have a story that is reflection all right.

So, thank you very much and you keep reflecting and keep asking questions. We will get more questions from the audience maybe.

(Refer Time: 58:19) in the coming sessions.

In the coming sessions

We will take up those question.

You also can post few questions if you send it to us, maybe we will we still have three-four hours of sessions left n is not it.

Thank you very much.