IMPACT ASSESSMENT OF
SANJEEVANI...LIFE
BEYOND CANCER’S
WELLNESS PROGRAM
A QUALITATIVE AND QUANTITATIVE EVALUATION

Monk Prayogshala
Published by Sanjeevani...Life Beyond Cancer and Monk Prayogshala in December 2018.

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EXECUTIVE SUMMARY

In times of rapid societal change over the last hundred years, we have witnessed accelerated changes in lifestyle that is perhaps more burdensome to our mind and body than ever before. One of the major offshoots of these monumental shifts is the rise of chronic illnesses, such as cancer. It is estimated that India will have 1.86 million cases of cancer by 2026. However, much of the care available for cancer patients and survivors focuses largely on medication, and not much emphasis is laid on managing the physical and mental repercussions of cancer. Survivors of cancer have long been recognised to have unique needs and care requirements while undergoing or recovering from such a life-altering illness. The diagnosis of cancer in particular changes people’s perceptions of their lives and is known to be a highly stressful experience associated with physical distress and emotional difficulties. A sole focus on biomedical treatments creates a vacuum for patients and a need for complimentary therapeutic interventions that are holistic and scientifically driven. Sanjeevani...Life Beyond Cancer is one such organization operating to fill such a vacuum and provides a Wellness Program that focuses on helping cancer patients and survivors cope with their condition through promotion of overall mental and physical well-being.

The Sanjeevani Wellness Program, with over 500 beneficiaries and counting, is built on the belief that immunity has a huge role to play in the fight against cancer. Strengthening the immunity of people affected by cancer through diet, breathing exercises, and addressing their primary mental concerns is the backbone of this program. The well-structured 36-session-long program employs a multimodal approach, teaching cancer patients and survivors various processes to understand the role of food, breath, and psychological states in maintaining their immunity. This is achieved through a combination of

- **Psychotherapy** to understand their psychological background, provide psychoeducation, and assist in
understanding processes to build positive mental constructs.

- **Emotional Freedom Techniques** to address their pent up emotional issues and learn how to release them.

- **Art and Dance Movement Therapy** for emotional release and expression.

- **Yoga and Pranayam** to understand the mind-body connection and practice breathing with awareness.

- **Nutrition** to understand the role of food in our well-being and our digestive cycle so as to promote a healthy lifestyle.

- **Reflexology** to understand the importance of pressure points that regulate the well-being of our body and practice the same in their daily lives.

Taking together all of the modules and teachings, the *Sanjeevani* Wellness Program aims to propagate not only survivorship by working on reducing the chances of recurrence and minimizing medicinal side-effects, but also to promote a more holistic sense of well-being.

This report seeks to assess and address the efficacy of *Sanjeevani’s* Wellness Program. With its wide-outreach and beneficiaries in the hundreds, this evaluation aims to provide a scientific measure of the program’s effectiveness. Such an evaluation will enable *Sanjeevani* to objectively deduce experiences of its beneficiaries and systematically tailor the program, based on the qualitative and quantitative data, to better cater to the needs of cancer survivors and patients. The primary research questions the evaluation assessed were:
The evaluation employed a purposive sampling approach, interviewing beneficiaries who attended Sanjeevani’s Wellness Program in Mumbai, India. The participants were interviewed and assessed using standardised quantitative and semi-structured qualitative questionnaires, on various parameters at the baseline and at the end of 36 sessions. These participants were beneficiaries of four concurrent batches, running from April to August 2018. The evaluation also interviewed participants of previous batches, going back a year, on similar parameters using qualitative semi-structured interview questionnaires. This type of mixed-methods approach helped examine whether the program regulated its participants’ physical and affective states in the long- and short-term. Additionally, the qualitative responses allowed for an in-depth understanding of the experiences and opinions of the beneficiaries of Sanjeevani’s Wellness Program.

Beneficiaries from four concurrent batches \((n = 34)\) and from previous batches \((n = 70)\) consented to participate in the study. They were interviewed and assessed on parameters related to life satisfaction, affective states, behavioural changes, nutrition, quality of life, and quality of care.

The findings of the report suggest that the Wellness Program assisted in mitigating the participants’ negative affective states, such as being upset, scared, irritable, or guilty as there was a significant decrease from the pre-test scores to the post-test scores. Additionally, on

**Key Questions**

- Did the participants experience any changes in their attitudes, behaviors, affective states, and overall life satisfaction as a result of participating in the program?
- Were these changes evident in the long-term?
- What were the participants’ attitudes towards the content, design, implementation, and overall quality of care experienced during the program?
comparing the responses of participants from Previous Batches to those of the Concurrent Batches, no significant differences were found in the levels of positive affect states such as being interested, excited, or feeling strong, indicating a prolonged effect of the Wellness Program on its beneficiaries.

**Key Findings**

As a result of the Wellness Program, participants reported:

- Lower **negative affect**
- Improved **physical, cognitive, and social functioning**
- Lower **physical pain** and discomfort
- Lower stress concerning **finances**
- Improvement in **overall physical and mental health**
- High **satisfaction with program teachings** and overall **quality of care**

Participants were also reported to have had improvements in their cognitive, emotional, and social functioning after completion of the program. This indicates that the program enabled participants to understand and accept their feelings, thought processes, and themselves. Changes in perceptions of their lives made participants report that they felt more positive and less afraid. Similarly, results found that the Wellness Program was able to regulate the participants’ physical state as there was a significant reduction in symptoms of pain and other discomfort such as dyspnea, constipation, and diarrhoea. An overall significant improvement in the quality of life and health status was noted in participants of the Concurrent and Previous Batches.

After completion of the program, many participants reported feeling more in control of their emotions, which led to lower anger and hostility, better understanding of people around them and higher inner strength. Additionally, most participants reported reduction in worry over financial
difficulties at the end of the program, indicating that the program was able to equip the participants with the skills needed to cope with their stress.

Participants reported some difficulty in accessing the program centre and dissatisfaction with the bathroom amenities in terms of feedback on the program. However, this seemed to be rectified with the centre’s recent move to a new, more central location as those participants at the new centre did not mention any such difficulties. Overall, participants reported high satisfaction with the program, including its teachings as well as the personnel. Interviews with participants of Previous Batches revealed that the program learnings were practiced even months after they had completed their attendance such as yoga practice and nutritional changes in their daily diets.

Advancements in medical knowledge and practice mean that more and more individuals have a chance to survive cancer. However, this also means that those individuals have unique requirements for reintegration back into society and to manage their lives. Evaluation of the responses of beneficiaries of the Sanjeevani...Life Beyond Cancer’s Wellness program highlights the pervasive need for a holistic program catering to the emotional and physical needs of cancer survivors. Additionally, reduction in the Negative Affect, physical symptomology, and overall poor health seen across the batches exhibits the importance of Sanjeevani in regulating the affective and physical lives of cancer survivors. Besides the knowledge imparted to beneficiaries on living a holistic life post-cancer, Sanjeevani also provides a sense of community for those who participate, making them feel less alone in their struggles. In all, Sanjeevani...Life Beyond Cancer provides a wellness program that is holistic in nature, based on scientific modules, and which meets the diverse requirements of cancer patients and survivors. Implications and future recommendations are discussed further in the report.
INTRODUCTION

We live in a time of unprecedented development and change in science and society. While medicine has radically changed our ideas of illness and health, the rapid societal change we witnessed over the last hundred years has forced people to constantly adapt. This has translated into a lifestyle that is perhaps more burdensome to our mind and body than ever before. Therefore, the gains made in health and longevity by medicine have not translated easily into gains in quality of life. One of the major offshoots of these monumental shifts is the rise of chronic illnesses, one among them being cancer. D’Souza, Murthy and Aras (2013) have estimated that India will have 1.86 million cases of cancer by 2026. While a century ago, people were a lot more likely to face sudden and abrupt death following a bout of severe illness, today we tend to go through protracted periods of less severe but equally challenging illnesses. Additionally, the medical treatment possibilities for the chronic conditions are immense but exact a precise toll on the physical and mental integrity of the patient (Sav, King, and Whitty et al., 2015). This scenario is exemplified in the case of cancer which is one of the biggest killers across both the developed and developing nations. This fact also warrants the need to devote sizeable attention to research in cancer—its course, outcomes, and potential interventions. At Sanjeevani...Life Beyond Cancer, a Mumbai-based NGO, working across India through its various centres attempts have been made to design and run interventions for individuals dealing with cancer through a multimodal approach; the current study was undertaken to establish the feasibility of a multimodal wellness intervention for this population.

Cancer, an umbrella term for a class of conditions characterized by uncontrolled and disorganized cell reproduction, which may occur in any site of the body has been around for centuries. The earliest recorded description of cancer dates to the Edwin Smith Papyrus which discusses surgical methods to remove tumours. The scenario with cancer has changed most drastically in the 20th century. Up until then, a patient with cancer was typically not informed of the diagnosis or the prognosis, treatment techniques were rudimentary, and death was certain. With the development of anaesthesia, surgical excision of tumours became a
possibility, followed by the development of radiotherapy and chemotherapy in the first half of the 1900s.

However, cancer treatment is often as devastating as the illness itself and makes active treatment and survivorship periods challenging (Fairley et al., 2009). Not only does the disease itself give rise to a gamut of physical, psychosocial, spiritual, and life course challenges, the treatment modalities exacerbate and prolong these effects before major improvements can be observed. For example, radiotherapy often leaves behind scarring, tissue damage, or weakened bones even though it may successfully shrink a tumour. Chemotherapy adversely affects appetite, sleep, and physical vitality because of the toxicity involved in this treatment modality. Even in the case of remission and recovery, lingering issues often persist for years. These unique challenges posed by cancer necessitate a more holistic care model with a broader scope than a purely medical management model.

The prevalence rates for cancer are rising steeply across the globe and so are the number of individuals living with cancer (Ferley et al., 2013). Additionally, due to the discrepancies in socio-economic markers between the developed and developing nations, the burden of mortality is equal and even greater in developing nations, although incidence rates are equal or lesser (Razi, Ghoncheh, Mohammadian-Hafshejani, Aziznejhad, Mohammadian, & Salehiniya, 2016). This has significant implications for those working with cancer in developing nations. It emphasizes the critical requirement of trying to use interventions that leverage existing protective factors of the socio-cultural context (like social support, religion, and culture) and result in simple and transferable skills that can be easily absorbed by patients and families with cancer. This idea and need serves as the crux of the Sanjeevani Wellness Program. The current study examines the feasibility of some traditional and alternative approaches in the Sanjeevani Wellness Program to help improve patient outcomes. It aims to shift the perspective from treating a patient with cancer like a passive recipient of certain helpful measures to making them the masters of their own wellness through an eclectic mix of interventions.

Apart from the above, the Sanjeevani wellness program has been designed, keeping in mind, that it is the immunity which does play a
huge role in dealing with the aggressive cancer cells in the body. Thus, if immunity can be strengthened in patients, not only the prognosis of the patient taking the treatment would improve but also in future the survivor may be able to reduce the probabilities of recurrence.

**Effects of cancer and cancer treatment on the patient**

Interventions designed to improve the well-being of individuals with cancer must be grounded in thorough knowledge of the wide range of reactions and consequences they face from the time of diagnosis. These effects are often overlapping in presentation and cause.

**Physical effects**

The physical effects of cancer and cancer treatment often encompass pain, fatigue, nausea, lack of appetite and sleep, weight loss, hair loss, disruptions in sexual functioning, among others.

Different forms of cancer are associated with different degrees of pain, with sarcomas (cancers of the bone) being associated with very high levels of pain. Additionally, at different points of the illness trajectory, cancer-related pain may intensify. Most terminal cancer patients report severe pain, enough to warrant morphine prescriptions. Lingering or fluctuating courses of pain often become an inherent part of a survivor’s life. Pain from surgical scars or radiation burns are also a common occurrence in cancer recovery. Pain experienced by cancer patients is often not of a purely organic nature and may be psychogenic—at least in part—due to the highly distressing nature of the illness. It is important to address the neuropathic and psychogenic origins of pain in cancer through a combination of somatic and psychosocial therapies (Breitbart & Holland, 1989). The *Sanjeevani* Wellness Program uses yoga and reflexology to handle the issue of pain. Additionally, the use of Emotional Freedom Technique or tapping in the program is useful in getting in touch with and working through psychogenic causes of bodily pain or chronic pain, The EFT practitioner in the *Sanjeevani* Wellness Program reported having in-depth conversations with clients who report such
kinds of pain to identify and work through the original issue that became associated with pain.

Fatigue is an oft-reported sign of cancer before diagnosis itself with patients reporting that they always feel tired and a good night’s sleep does not help restore their vitality. Cancer-related fatigue also intensifies as the tumour grows; post-treatment and during recovery, patients may often feel overwhelmed at the slightest activity and require rest (Luciani, Jacobsen, Externmann et al., 2008). The Sanjeevani Wellness Program places a lot of emphasis on helping clients regain and build their physical vitality. Strategies to promote physical activity are the exclusive focus of some of the intervention modalities like yoga and dance movement therapy; the focus on physical activity is also woven into how the other interventions, like nutritional guidance, are executed. Regulation of physical activity also helps clients deal with the problems of disturbed sleep.

Sleep is a vital domain of quality of life and one that is frequently affected by cancer (Taphoorn, Stupp, Coens et al., 2005). Sleep disruptions are caused by multiple reasons: physical symptoms, side-effects, as well as psychological distress over their state, and uncertainty and worry about the future. Poor sleep also predicts poorer and longer recovery and is closely linked to fatigue (Roscoe, Kaufman, Matternson-Ruby et al., 2007).

Cancer leads to a substantial dysregulation in appetite. Cancer-related weight loss or cancer cachexia is reported by as high as 80 percent of patients (Muscurtoli, Bossola, Aversa, Bellatone, & Fanelli, 2006). The effects of cancer and its treatment may often manifest in a lack of or altered perception of taste and smell along with nausea and bowel irregularities which affect the will to eat (Fleishman & Chadha, 2010). The emphasis on the need to consume a wholesome diet, loaded with proteins is ever-present in cancer as it makes the patient strong enough to withstand the gruelling treatment regimens charted out for them; perhaps that emphasis juxtaposed with the altered taste perception and lack of interest in food makes lack of appetite a real concern.

Nausea and vomiting are a part of the warning signs of cancer and they persist throughout the course of the illness. Numerous bodily changes brought about by anti-cancer medications, especially core
chemotherapy drugs, are linked to the side-effect of nausea and vomiting. This feature is so prevalent in cancer care settings that researchers have described two conditions related to nausea and cancer: chemotherapy-induced nausea and vomiting (CINV) anticipatory nausea and vomiting (ANV) in individuals with cancer. ANV may be seen when chemotherapy causes nausea and vomiting before any actual drug administration. This is due to the association created between cancer medication and nausea that is reinforced with each successive chemotherapy cycle (Kamen et al., 2014).

Nutritional guidance goes a long way in helping clients deal with food-related concerns. The nutritional guidance program regulates the food type and promotes a sense of structure around eating and digestion that the beneficiaries of the Sanjeevani Wellness Program find useful. The use of lime shots through the day, as recommended by the program, is an antidote to any feelings of nausea that clients may have. Hot and cold infusions given by the EFT practitioner promote calmness and restoration. Coordinating the intake of right type of food along with our natural cycle of digestion leads to significant relief.

The effects of cancer transcend into the areas of body-image and self-perception as well. Weight loss, hair loss, loss of a vital organ combined with darkening or changes of skin tone and texture can be very distressing for patients who feel like they will never truly be able to return to their former selves. Mastectomy (removal of a breast) or amputation of an affected organ combined with hair fall is highly distressing as it diminishes the body image of the person and serves as a constant reminder of the illness and its enduring effects. Wigs, hats, and scarfs are viable options to manage hair loss, but many patients feel extremely disheartened and refuse social participation to prevent people from seeing them in this state. Weight loss is a cumulative effect of an aggressive tumour and treatment effects. Some patients lose substantial portions of their body weight and are reduced to skin and bones. These effects are intense for patients whose bodies have permanently changed following cancer, like a case of mastectomy. Drastic procedures which involve the removal of external parts of the body, like breasts, voice box, parts of the jaw, are dramatic in their consequences on self-perception of the person. They may mourn for the lost body part, experience feelings of disbelief that their own body
betrayed them in such a way and find it extremely difficult to reconcile to their post-surgery body image. The psychotherapy and EFT modules art therapy of the Sanjeevani Wellness Program are geared towards looking at the unpleasant affective and cognitive states that give rise to feelings of stigma, low self-esteem, or body image difficulties.

**Psychological effects**

Rarely are the effects of a traumatic stressor contained within the physical domain. The diagnosis of cancer and allied coping process are a source of psychological strain. The most common psychological concern is this population is distress of varying levels. This could be of a sub-clinical level or enough to manifest in various psychological conditions. A high risk of suicidal ideation, attempt, or the act itself presents another major concern. Distress in cancer care settings is so prevalent that it was recommended that assessment and management of distress should be one of the components of medical training for clinicians dealing with cancer by the International Psycho-oncology Society (2009) which termed distress as the sixth vital sign in cancer care standards.

Cancer typically presents itself as an abrupt and traumatic stressor, the course of which is often uncertain, and without any indications of how one should ideally cope with the diagnosis and treatment. This may lead to psychological distress due to low life satisfaction, reactance, and desire for a quicker death. Adjustment issues may mistakenly be treated as normal reactions to a stressor and be precluded from intervention.

A more complicated form of distress in cancer is seen in Post-Traumatic Stress Disorder (PTSD). Originally conceptualized as a late but severe reaction to a uniquely distressing stressor, this concept has been used to capture the traumatic “cancer experience” that both patients and families report. The term “cancer experience” was coined to denote the varying, dynamic, and multifactorial nature of cancer as a stressor, as opposed to the more singular connotations of stress linked to the more common causes like PTSD (floods or car accident, for example). PTSD in relation to the cancer experience unfolds through the same symptoms, avoidance, hypervigilance, flashbacks, emotional numbing,
and intrusive thoughts and these are reported by adult and paediatric cancer patients, survivors, and their caregivers alike.

Depression in cancer care is highly prevalent at the time of diagnosis, or treatment and even post-treatment. Prevalence rates in the range of 25 to 38% have been reported for major depressive disorder, while the same for depression spectrum symptoms has been reported to the extent of 58 percent (Massie, 2004). The intensity of signs and symptoms of depression may change with the course of the illness trajectory but its impact on cancer treatment, by clear consensus, is highly detrimental. It is linked to slow recovery, low medical adherence, sense of helplessness, and elevated risk of suicide.

Suicide merits a special mention as a grave psychological after-effect of cancer. Rockett, Wang, Lian, and Stack (2007) identified cancer as being the only physical illness being significantly linked to suicidal deaths in America and Australia. Patients in intense phases of treatment, in times of recurrence, and facing advanced or terminal cancer are very likely to be considering suicide with more than casual thought. Depression is implicated in a vast number of these cases (Chochinow et al., 1995). The core symptoms of cancer (pain, cognitive dysfunction) and their psychosocial outcomes, like (limited functionality, dependence on others) also have an important role to play in suicide in this population. A diagnosis of cancer often places significant spiritual questions in front of the person, such as “why me?” and the subsequent cognitive and emotional content and pattern are conducive to the development or more depressive and suicidal tendencies.

A related condition is that of anxiety. Anxiety disorders are a diverse class with generalized anxiety on one end of the continuum and phobias on the other. With specific reference to cancer, the maladaptive cancer cognitions (fear or dying) and specific manifestations (anticipatory anxiety and nausea), specific phobia (fear of MRI or the blood-injection-injury subtype) may occur. Other unique manifestations of anxiety in cancer care could include fear of recurrence (FOR) reported to equally prevalent in patients and families, social anxiety from their altered appearance and perceived stigma, free-floating anxiety about the future and leading a life with cancer.
The Sanjeevani Wellness Program looks at various emotional, cognitive, and physical manifestations of distress and tackles it from various modalities geared towards alleviating the emotional burden of cancer. It looks at distress as an overarching problem, presented as a continuum, rather than in artificial and discrete categories of illness. The potent combination of psychotherapy, emotional freedom technique (EFT), and yoga and movement and art therapy in the Sanjeevani Wellness Program goes a long way in helping beneficiaries overcome the feelings of pain, anxiety, anger, and resentment that they may experience in response to the trauma that cancer is. Psychotherapy is likely to help get in touch with the roots of distress, while EFT is extremely powerful in replacing distressing and helpless cognitions with more adaptive ones. For these reasons, the Sanjeevani Wellness Program closely looks at emotional and physical health outcomes. Beyond the obvious value of psychotherapy and EFT in managing depression, the program’s emphasis on physical activity and yoga is analogous to behavioural activation in traditional therapy. Restoring physical activity to an optimum level is a vital goal for any program for individuals living with cancer. The Sanjeevani Wellness Program uses an eclectic mix of diet and exercise, movement therapy, yoga, along with smaller elements like laughter exercises to restore the physical vitality of the enrolled clients.

Psychosocial effects

A host of factors are affected and affect the physical and mental health of an individual living with cancer. The Sanjeevani Wellness Program potentially alleviates the effect of cancer in these domains through helping their clients reach better levels of adaptive functioning. Although not directly, the following far-reaching outcomes of cancer are also undoubtedly addressed by the Sanjeevani Wellness Program.

It would be short-sighted to conceptualize a diagnosis of cancer as an illness alone. The various physical and psychological effects of cancer outlined so far constitute just once facet of the effects. Typically, in a stress-and-coping model, these primary reactions often initiate a course of secondary or “spill over” effects in different domains of life, such as, family and marital, occupational, social, and recreational functioning.
These effects of cancer figure prominently when we speak of quality of life disruptions in patients and families with cancer.

**Familial effects.**

The psychosocial burden of cancer has at its epicentre the individual with cancer whose perception of self, family, life, and the future are altered tremendously by the experience. Families affected by cancer often experience an inability to communicate or function in their pre-morbid ways because of various reasons. Lewis (2010) speaks of certain “cross-cutting” difficulties in communication and adaptive functioning that is seen in families dealing with cancer. The person diagnosed with the illness may become depressed or withdrawn and their interest in other members of their family and routine family activities may diminish, leading to a drop in their levels of relational satisfaction.

**Disrupted occupational functioning.**

An individual with cancer is quite likely to also encounter difficulties in occupational functioning to varying degrees, like needing too many days off, losing pay, having to quit the job, or having difficulties reaching a complete level of productivity after active treatment. This is important work and work-related satisfaction are vital for a holistic quality of life and to also cope with the financial burden linked to cancer care, especially if the individual with cancer also happens to me the sole breadwinner or one of the important contributing members of the family.

**Perceived stigma and recreational handicap.**

A person with cancer is likely to experience changes in social functioning due to their sense of stigma, altered body image, depressed or low mood, and social discomfort. Though a certain period of social withdrawal may be normative considering the illness is a stressor, prolonged period of social withdrawal may also cut these individuals from a vital avenue of coping – social support. Recreational handicap is another concern because having cancer often implies restriction of activity and mobility and prolonged periods of lack of activity and mental and physical stimulation can feed the cycle of distress and depression.
A recreational activity provides an alternate source of engagement and may often lead to an easier transition back to life following a period of active treatment.

**Spiritual anguish.**

Coming into the awareness that one has a life-threatening illness like cancer can be spiritually distressing. The person in question may be prompted to engage in a cycle of “why me?” questions and existential distress. Processing of the intense awareness of what it means to be alive and well at one moment, and drastically ill on another can be intensely challenging.

**Illness trajectory.**

Time is a crucial component of the process or living with cancer. The temporal aspect of the experience of cancer is not linear and time can take on a new meaning based on where the person is on illness trajectory. Pre-diagnosis, for instance, is a time of extreme anticipatory anxiety. Pre-diagnosis is followed by diagnosis and active treatment and this phase may extend from months to years. After active treatment there ideally would be a period of watchful waiting and recovering, followed by remission and survivorship. Fear of recurrence, recurrence, successive rounds of treatment, palliative care in a terminal stage, and death represent another illness trajectory that some individuals face. It is important to pay close attention to where a specific individual with cancer finds himself in the illness trajectory. This is because the unmet needs, conflicts, sources of anxiety, and modes to alleviate distress are very closely determined by the stages of this illness trajectory.

**Life as a survivor.**

Survivorship, at its simplest, refers to the experience of an individual having lived with, after, and beyond cancer. It looks at various unique issues and adjustments that individuals living with cancer make while at the post-treatment stage, but also following a remission. The challenges of living with cancer or adjusting to a normal life with the long-term effects of cancer came to fore when the projected years of life following cancer began to improve. As cancers became more treatable, so did the
need to recognize the difficulties one faced immediately or long after active cancer treatment.

At this point, it is crucial to underscore the fact that not at all individuals go through all the effects mentioned here. The discussion of these effects of a diagnosis of cancer is not exhaustive; it is only indicative and designed to show the far-reaching effects of cancer on the individual and his life. It is important, however, to note that many individuals with cancer can work through these stages to arrive at a renewed understanding of what life means to them. Their sense of priorities and goals in life may become more clarified and actualized following the illness.

**Interventions**

Knowledge of these challenges in living with cancer makes it imperative that we look at suitable ways to help these populations. However, there is a danger to running interventions prematurely without adequate background knowledge of the unmet needs, how specific interventional strategies address specific problems, and how well are improvements made and maintained. In this section, we review the feasibility of the various interventions combined in the *Sanjeevani* Wellness Program and provide a rationale for the current study.

**Psychotherapy**

Traditional psychotherapy is an insight-oriented therapeutic paradigm that looks at a close examination of an individual’s conflicts or thoughts, explores the origins to help the client perceive the connection between distress and its roots, and promotes a renewed sense of adjustment based on the insights or heightened awareness. Such an approach, spread over numerous sessions to understand the problem and foster insight, is often not feasible as is in a cancer care setting. However, brief psychodynamic psychotherapy, cognitively-oriented therapies, and supportive psychotherapy are valuable options. These forms are adapted to more accelerated, intense, and directive ways to provide psychotherapy in cancer care. However, the core principles of psychotherapy, vis-à-vis the importance of the client’s understanding of the problem, fostering insight, and replacing automatic thoughts with
more adaptive cognitions are integral to psychotherapy in psycho-oncology settings. The sanctity of the client-counsellor relationship, ventilation or catharsis (uncurbed expression of emotional distress), and formulation of a sound interpretative framework are all upheld.

Psychotherapy has two key requirements in cancer care. The first is that of flexibility; this could refer to flexibility in the setting, schedule, or course of psychotherapy. This requirement stems from the unpredictable nature of the illness. The second requirement is of a therapist well-versed in the basics of onco-medicine. A functional knowledge of cancer, its types, stages, treatment, related psychosocial outcomes is a must for a psychotherapist working in an oncology setting.

Psychotherapy in cancer care can be visualized as a continuum. Psycho-education or problem-solving training also come within the broader realm of psychotherapy itself and are highly active, tangible, and easily transferable approaches. There are often designed for patients and families and help meet some of the most common unmet needs reported in these populations, that is, information and support. Another useful and overlapping approach is counselling which is distinct from psychotherapy only in the sense that it may be more short-term, less formal, and more focused on resolving simpler adjustment issues. Psychotherapy can also be used in a group format which is promising because working in groups of people with similar illnesses reinforces the notion of an individual not being alone in the process and curative factors of the group add a sense of synergy.

**Arts-Based Therapy (Art, music, and group dance)**

Arts-based therapy refers to the usage of all the art forms – visual art, music, theatre, movement, story, metaphors – within a therapeutic relationship in a session for healing purpose. Arts-based Therapy is a creative process that allows awareness and expression of an individual's deepest emotions. It is a vehicle for expression, aided by the actual physical movement of artistic materials. The emotions experienced by every individual are stored and collected within the body itself. The use of the art therapy helps to connect with this directly and give nonverbal expression to what is driving or crippling us. The expression helps circumvent the blocks between conscious and
unconscious in the rational mind. Thus, it not only helps express one’s emotions; rather, it has the potential to empower clients and help them grow comfortable with their true selves.

Any art-based therapy exercise offers three dimensions of assessment: expressive, symbolic, and interactive and can be conducted in individual and group settings. The art that an individual with cancer creates can be explored to understand their feelings of loss, despair, anguish, hope and other spiritual or existential themes. It is a viable option for adults and children alike, can be used in different ways at different stages of the illness, and promotes tension release and problem-solving. Research proving its feasibility in these populations is still ongoing and mostly promising. Art therapy helps manage psychological and spiritual distress linked to cancer and recalibrate their sense of self after the illness (Wood, Molassiotis, & Payne, 2011).

**Emotional Freedom Technique**

Emotional Freedom Technique, or tapping as it is commonly called, comes within the broader domain of energy psychology and draws heavily from Robert Callghan’s Thought Field Therapy. It involves the client tapping on various meridian points across the skin which are replete with receptors for mechanical stimulation and low on electrical resistance. Alongside the tapping, clients speak loud affirmations out to give expression to pent-up emotions and thereby, regulate their consequent emotion arousal. Clinical EFT is classified by the APA as an intervention which is efficacious, however not yet completely on par with other more established interventions. Nevertheless, research on the efficacy of EFT finds that it is beneficial for various physical and psychological conditions (Church, 2013), managing effects of chronic stress (Church, Yount, & Brooks, 2012), and specifically, cancer (Hakam, Yetti, & Hariyati, 2009). In the *Sanjeevani* Wellness Program, clients are taught the concepts behind tapping both in the actual format and an abbreviated method that they can use when they sense themselves getting angry or anxious. With the EFT practitioner’s help, they also examine the roots of their emotional troubles and resolve them. The practitioner also uses warm and cold infusions and breathing exercises to help them understand how closely the clients can regulate their body’s response to difficult emotions.
Nutritional guidance and reflexology

Another leg of the Sanjeevani program is nutritional guidance. Clients are encouraged to regulate their food intake in terms of what they eat and when, along with overall guidance in understanding the relationship between the process of food intake with the rest of the body’s processes. As a part of this program, clients are encouraged to follow the practice of consuming four meals a day, avoiding all processed food in favour of healthier alternatives (whole grains and plant-based diet), and understanding what food types and food-related behaviours lead to an acidic state in the body. For instance, processed and non-vegetarian foods contribute to such an acidic state and their inflammatory nature is linked to cancer onset and relapse – a finding supported in research (Davies, Batehup, & Thomas, 2011). Another important element of this program is a combination of reflexology and physical activity. Rajarajeswaran and Vishnupriya (2009) conducted a detailed review of the relationship between physical activity and cancer to show its beneficial effects throughout the illness trajectory and recommended tailored exercise-based interventions for survivors. Taken together, nutritional guidance and physical activity are thrust areas of patient and survivorship wellbeing as well as relapse prevention according to the American Cancer Society (ACS). The ACS provides and updates guidelines for these two aspects of cancer care from the prevention and management perspectives (Toles & Demark-Wahnefried, 2008).

Yoga and pranayama

Yoga, a classical Indian philosophical tradition, is widely used to improve physical and mental health across all sections of the population. It involves individuals performing various structured asanas (postures and positions) while concentrating on the effects of those bodily movements and regulating their breath. Its use for therapeutic purposes is also widely acclaimed. Yoga has often been used in an adjunctive manner with mainstream cancer care to boost the health, immunity, and vitality of patients and survivors. The current program utilized yoga along with pranayama, which is one of the eight sutras (components) of yoga and involves careful breath control. Bower, Woolery, Sternlieb, and Garet (2005) reviewed nine studies and found the practice of yoga to be linked
to various positive outcomes like better sleep quality, reduced cancer-related distress and symptoms, and improved physical functioning, to name a few. A pilot study of yoga for breast cancer survivors found significant increase in the intervention group at post-test in measures of psychosocial functioning such as quality of life, emotional function, gastrointestinal symptoms, cognitive disorganization, mood disturbance, tension, depression, and confusion as well as physical fitness variables (Nicole Culos-Reed, Carlson, Daroux, & Hatley-Aldous, 2005).

The Sanjeevani Wellness Program combines all the discussed treatment modalities into a 36-session long program, with three modules a day on alternate days of the week. Those enrolled in the program go through these sessions in a group format. The primary goal is a holistic improvement in their health; this is brought about by making positive changes and aiming towards a better lifestyle. About 400 patients have benefitted from this program till date.

Rationale for the current study

The current study was designed to rigorously examine the effect of this program on certain key outcomes like emotional states, cognitive, emotional, and physical functioning, and quality of life, to name a few. Abundant research exists to highlight the various difficulties that exist in these domains for individuals living with cancer. The literature review also supports the feasibility of the individual components of the Sanjeevani Wellness Program, but little is known about the combined effect of these components. Thus, a feasibility testing of the Sanjeevani Wellness Program was required to examine the overall gains made in the selected markers of the intervention, along with generating evidence-based estimates of its efficacy.

Such data would go a long way in ensuring that this program gains more recognition and grounding in mainstream practice. It would also promote greater awareness of the various ways in which the philosophy
underlying this program can be used to help people effectively at various stages of dealing with cancer: prevention, treatment, or management. The fact that the *Sanjeevani* Wellness Program utilizes some interventions that are inherent to our culture and in a manner that is easily transferable to the clients, implies that it is quite likely to work well at the grassroots level and is therefore scalable. The results of the current study give this promising intervention package the required support in terms of efficacy and robustness that it needs to scale up and improve the lives of many more individuals dealing with cancer.
EVALUATION METHODOLOGY

EVALUATION QUESTIONS

The purpose of the current evaluation was to assess the efficacy of Sanjeevani...Life Beyond Cancer’s Wellness Program. In order to obtain a robust understanding of the impact of the program, a mixed-measures methodology was adopted, using standard quantitative surveys and qualitative semi-structured questions. The primary goal of the evaluation was to examine whether the intervention helped regulate the physical and affective states of the participants in the short and long term.

The evaluation sought to answer three questions:

1. Did the participants experience any changes in their attitudes, behaviours, affective states, and overall life satisfaction as a result of participating in the program?

2. Were there long-term effects of the changes?

3. What were the participants’ attitudes towards the content, design, implementation, and overall quality of care experienced during the program?

EVALUATION DESIGN

The evaluation design employed a mixed-methods, purposive sampling approach. The study evaluated participants of the program through survey questions and interviews. The tools used are described in the following section and the full questionnaires can be found in the appendix. Participants of four concurrent batches – programs that ran one after the other - were interviewed at the beginning of the course and at the end. These were beneficiaries of the program in the months of April, June, July, and August 2018. Along with surveys and interviews with participants of the concurrent batches, interviews with participants
of the previous batches were also conducted. These were past beneficiaries of the program who had attended and completed the course in the months ranging from March 2016 to October 2018. A sample from both concurrent and previous batches’ participants was chosen in order to understand the short- and long-term impacts of the program. There was a wealth of information to be gleaned from the numerous beneficiaries who had previously completed the program, allowing for a more comprehensive and in-depth understanding of the program impacts. Figures 1a and 1b provides a breakdown of the demographic details of the participants of the study. Before commencement of data collection, the proposal of the evaluation plan was presented to and approved by the Institutional Review Board at Monk Prayogshala. This ensured that the research took place in the most ethical way and no harm was caused to the participants. All participants provided verbal/written informed consent prior to participation (Appendix A).

The beneficiaries of the Wellness Program were women who were in remission, currently undergoing, or who had completed treatment for cancer. Pre-tests, where quantitative data was collected before the start of the Wellness program, were conducted for participants of the concurrent batches in the second or third session of the program. As the first session was a program orientation session, this approach ensured that only those participants who were certain to continue on in the program were included in the study, and their responses were not influenced by exposure to many program modules. Post-tests were conducted during the last two sessions of the program, asking the same questions as in the pre-tests, along with additional questions to assess their opinions about the program, to evaluate any changes over time that can be attributed to the Wellness Program.
Figure 1a. Demographic details of participants of the four Concurrent Batches.
Figure 1b. Demographic details of participants of the Previous Batches.
Only those participants who had attended 80% of the total sessions (28-29 sessions) were included in the evaluation. Most studies assessing palliative care programs report large attrition rates among the participants, either due to ill-health or poor survival rates (for a review see Kaasa and Loge, 2002). Attrition refers to the decreasing sample size at subsequent assessment points due to drop-out or withdrawals. Attrition rates in longitudinal oncology studies range from 22 to 60% (Jordhoy et al., 1999; Gilbar & Neuman, 2002; Servaes et al., 2002). The cut-off criterion was adopted to ensure adequate compliance to the program, allowing for valid analysis and interpretation of the program effects. Participants who could not attend multiple program sessions might not have gained the knowledge and insight that is to be gained from consistent participation. Thus, they would have different outcomes as compared to those participants who attended most of the sessions. Additionally, participants who decide to drop-out of programs arguably differ from those who remain in the program on important characteristics such as severity of illness or demographic background.
details not pertaining to the program, but which might have hampered their participation. Allowing the responses from these participants would bias the results and affect the generalizability of the study findings. Thus, a total of thirty-four participants were found to be eligible and were interviewed from the concurrent batches for the evaluation. Semi-structured interviews were conducted with 70 participants of previous batches alongside the interviews with the concurrent batches. Table 1 details the time frame in which all the interviews took place.
Table 1. Timeline of data collection for evaluation of the *Sanjeevani*’s Wellness Program.

<table>
<thead>
<tr>
<th>Task</th>
<th>March 2018</th>
<th>April 2018</th>
<th>May 2018</th>
<th>June 2018</th>
<th>July 2018</th>
<th>August 2018</th>
<th>Sept 2018</th>
<th>Oct 2018</th>
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<td></td>
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<tr>
<td>Finalizing Measures and Assessments</td>
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<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Pre- and Post-Tests of Group 1</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre- and Post-Tests of Group 2</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre- and Post-Tests of Group 3</td>
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<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre- and Post-Tests of Group 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Interviews with Participants of Previous Batches</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td></td>
<td>X</td>
</tr>
</tbody>
</table>
DATA COLLECTION AND INSTRUMENT CREATION

Both quantitative and qualitative data were collected during interviews with participants of the concurrent and previous batches. Quantitative data included information about quality of life, the participants’ affective states, overall life satisfaction, and perceived quality of care. Qualitative data included questions about the participants’ dietary habits, impact of the overall program and impact of each of its components on participants’ lives, and suggestions for improvement in the program.

Given the large remit undertaken in this evaluation, selecting and creating appropriate measurement instruments was of paramount importance. To address the research questions of outcomes/impacts of the program on the participants, four reliable and valid scales were used:

The Overall Life Satisfaction Question. This scale assesses subjective well-being through a single item, scored from 1 to 10 (Appendix B). This question was adopted from the World Values Survey (Bjørnskov, 2010) and was employed for its ease of comprehension and validity.

Cantril’s Ladder of Life Scale. This scale measures satisfaction with the participants’ current life, scored from 0 to 10. While similar to the earlier subjective well-being scale, the two scales measure conceptual different items (Bjørnskov, 2010). This item was adopted from the Gallup World Poll World Values Survey (Appendix B).

Positive and Negative Affective Scale (PANAS). This 20 item questionnaire measures positive (i.e. interested; excited; etc.) and negative (i.e. upset; scared; etc.) affects. Each item is rated on a 5-point scale of 1 (not at all) to 5 (very much). Studies have found PANAS to be a reliable and valid instrument in the assessment of affective states (Appendix C; Positive Affect Scale $\alpha = 0.79$; Negative Affect Scale $\alpha = 0.81$).

Quality of Life Questionnaire (QLQ). The European Organisation for Research and Treatment of Cancer (EORTC) is a leader in development of cross-culturally valid and reliable scales assessing various aspects of
cancer research. The QOL C30 (Version 3) is one such instrument. A 30-item quantitative questionnaire is one of the most widely used questionnaires for cancer patients in Europe and around the world. The questionnaire employs functional, symptom, global health, and quality of life scales. The questionnaire is available in nine Indian regional languages including Hindi and Marathi. In the current study, the questionnaire was administered either in English, Hindi, Marathi, or a mix of these languages, based on the preference of the participant (Appendix D; \( \alpha = 0.71 \)).

To address the research question assessing participants’ perceptions of the program and overall care, a new research instrument had to be devised. Existing measures assessing quality of care cater primarily to onco-medical programs or those in hospital/clinic set-ups. Given the uniqueness of the Sanjeevani model, with its emphasis on informal settings to promote a more holistic healing, a new measure was warranted to ensure appropriate evaluation context. The new instrument created to assess quality of care was based on the EORTC IN-PATSAT32. The original form of 32 items assessed patient satisfaction with the quality of care received in oncology hospitals across the world. In the revised version used for this evaluation, 13 items were retained (Appendix E; \( \alpha = 0.90 \)). These items pertained to the qualities of the program personnel such as knowledge (i.e., \( \text{during the term of the program, how would you rate the personnel in terms of their knowledge and experience of your illness} \)), their human qualities (i.e., \( \text{during the term of the program, how would you rate the personnel in terms of their human qualities – politeness, respect, sensitivity, kindness, patience...} \)), and their attention and care towards the participants (i.e., \( \text{during the term of the program, how would you rate the personnel in terms of the interest they showed in you personally} \)). The items also assessed the environment where the program was taking place such as cleanliness of the building and ease of access. Similar to the original scale, participants were asked to rate each item on a scale of 1 (Poor) to 5 (Excellent).

Given the emphasis of experiential learning at Sanjeevani, restricting the evaluation to quantitative measures cover only one dimension of the potential program impacts. Qualitative material was gathered through a semi-structured interview, where more open-ended questions allowed
for deeper discussions with the participants. Interview questions assessed dietary habits (Appendix F), satisfaction with the program, overall impact of the program on the participants, as well as impact of each of the modules of the program. Such semi-structured questions were asked to the participants of current batches as well as participants of previous batches (Appendix G).

Figure 4 illustrates the flow of the questionnaire for the three types of interviews conducted. While every attempt was made to meet with the participants in person, interviews had to be conducted according to the availability of and convenience to the participants. Thus, 27 of the interviews with participants of the previous batches and 5 of the interviews with participants of the concurrent batches were conducted telephonically. Additionally, adhering to the ethical standards laid out earlier, participants of the previous batches were asked for their consent before recording the interview. In total, 54 out of 71 participants consented to the voice recording (Appendix I). The remaining participants who did not consent had their responses and ratings manually recorded. These have not been included in the transcriptions in Appendix I.

All of the quantitative and qualitative measures were translated into local languages. The interviews were conducted by enumerators from Monk Prayogshala, a not-for-profit academic research organization. The enumerators were trained in conducting face-to-face interviews, were well-versed in the instruments used, and were fluent in English, Hindi and Marathi. Furthermore, the interviews were conducted in accordance with a strict code of ethics, ensuring that no harm or discomfort came to the participants and that their decision to take part in the interviews was entirely voluntary. The purpose of the interview, any potential advantages/disadvantages to the participants were explained and permission was sought through the Informed Consent read out to the participants. Confidentiality was maintained throughout the research project, with participants assured that data would be stored securely and that no data would be traced back to them directly.
Figure 4. Scales used in each type of interview conducted.
ANALYSIS PLAN

All quantitative data were analysed by use of the Statistical Package for Social Sciences (SPSS) V22.0.0.0. Descriptive analyses were conducted to understand and summarize the basic features of the sample. To assess any significant changes that may have occurred as a consequence of the program, data pertaining to satisfaction, affect, and quality of life, collected at the beginning and at the end of the four concurrent batches, were analysed using Student’s Paired Samples $t$-test. The $t$-test is an inferential statistic which is used to determine whether there is a significant difference between the means of two groups. The alpha level was determined to be 0.05, a universally accepted benchmark across research fields. This level of significance indicates only a 5% risk of committing a Type I error, i.e. concluding that a difference exists when there is none. The quantitative responses of affect and quality of care gleamed from participants of the previous batches were also assessed with similar measures from the post-test of participants of the concurrent batches. Assessing these responses using an Independent Samples $t$-test enabled in the assessment and interpretation of the long-term consequences of the Sanjeevani program.

Content analysis was undertaken to determine trends in the qualitative data. Content analysis is a method of analysing written, verbal or visual communication messages (Cole 1988), with an aim to condense large data into concepts or categories broadly describing the phenomenon. Content analysis of the interviews revealed similar responses that were classified into broad categories, uncovering trends in the thoughts and opinions of the participants, allowing for a deeper understanding of their experiences. Findings from the quantitative and qualitative analyses are reported and discussed in the following sections.
KEY FINDINGS

PSYCHOLOGICAL ASPECTS

Interviews with participants from four concurrent batches \((N = 34)\) revealed several benefits of the Wellness Program. Given the devastating nature of the illness, affective states of individuals suffering from cancer are severely impacted. This may be in the form of acute distress, anxiety, depression, emotional numbness, and an inability to cope with or disinterest in daily life situations. One of the primary aims of the program is to equip the participants to allay their emotional distress, and increase their experience of positive affective conditions such as general interest and excitement in undertaking varied activities, mental strength, alertness of mind, and overall activity levels. Participants’ positive and negative affect before starting and after completion of the program was measured via the Positive and Negative Affect Scale (PANAS). T-tests indicated that there was a significant decrease in participants’ negative affective conditions (see Table 2) such as being upset, scared, irritable, nervous, or feeling guilty, after completion of the program. Although there was no significant difference in positive affect before and after the program, the mean positive affect scores were slightly higher after the participants had completed the program, indicating a positive trend for that component of the program.

Table 2: Comparisons of positive and negative affect before and post completion of the Wellness Program.

<table>
<thead>
<tr>
<th>Affect</th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(M)</td>
<td>(SD)</td>
</tr>
<tr>
<td>Positive</td>
<td>33.06</td>
<td>7.34</td>
</tr>
<tr>
<td>Negative</td>
<td>20.29</td>
<td>6.22</td>
</tr>
</tbody>
</table>

*Note: \(M\) = Mean; \(SD\) = Standard Deviation.*
When compared with participants who had completed the program in the past \((N = 70)\), it was found that there was no difference in the positive affect levels of the current batches, which indicated that the effect of the program is prolonged. While the overall negative affect of participants from previous batches was higher as compared to the concurrent batches, this result must be interpreted with caution. This is because many patients reported multiple medical relapses, family problems, and other chronic health issues to be the reasons for general anger and irritability. Overall high positive affect indicates that even though the ex-participants exhibited some strong negative emotions, they were also able to manage them effectively.

Table 3: Comparisons of positive and negative affect between participants who completed the Wellness Program before May 2018 versus those who completed it between May-September 2018.

<table>
<thead>
<tr>
<th>Affect</th>
<th>Previous Batches</th>
<th>Concurrent Batches</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(M)</td>
<td>(SD)</td>
</tr>
<tr>
<td>Positive</td>
<td>32.41</td>
<td>7.41</td>
</tr>
<tr>
<td>Negative</td>
<td>22.97</td>
<td>7.72</td>
</tr>
</tbody>
</table>

Note: \(M\) = Mean; \(SD\) = Standard Deviation.
In addition to positive and negative affect, the program also focused on the participants’ overall emotional and cognitive functioning, which included factors such as ease in performing daily life tasks which require concentration, ease in noticing and remembering things, their own mental condition, and their own perceptions of how much their family, social, and financial aspects of life have been impacted by their illness. This aspect was evaluated via the Quality of Life Questionnaire (QLQ-30), formulated by the European Organisation for Research and Treatment of Cancer (EORTC). Participants reported improved cognitive, emotional, and social functioning (see Table 4). Better functioning in these aspects indicated an improved ability to perform routine tasks, and a more positive frame of mind (Figure 6). The Wellness Program, therefore, equipped the participants to accept their condition better, through a greater understanding of their own thought processes and encouragement to freely express their feelings about their illness. Moreover, the program promoted higher self-acceptance, through a combination of self-affirmations and calming exercises. This is evident through some participant responses such as

“Feels well now, and determined that everything is going to turn out well. Perspective changed after coming to Sanjeevani”, “irritable/"why me"/ suicidal ideation when the diagnosis was given. Since coming [I am] feeling better, feel like living, enjoy interacting with the people here” and “has reduced anger and hostility increased positive attitude has started waking up earlier (6 am), used to wake up at 10–11am reduced appetite more active (does yoga, goes on morning walk).”

This aspect may have led the participants to change their perceptions about their daily experiences and focus on attaining a proactive and healthier lifestyle.
Table 4: Comparison of overall emotional, cognitive, social, and total distress before and post completion of the Wellness Program.

<table>
<thead>
<tr>
<th>Functioning</th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Emotional</td>
<td>1.93</td>
<td>0.59</td>
</tr>
<tr>
<td>Cognitive</td>
<td>1.61</td>
<td>0.73</td>
</tr>
<tr>
<td>Social</td>
<td>1.46</td>
<td>0.79</td>
</tr>
<tr>
<td>Total</td>
<td>1.65</td>
<td>0.37</td>
</tr>
</tbody>
</table>

Note: M = Mean; SD = Standard Deviation. Lower scores correspond to lower distress and better functioning.

Figure 6: Pre- and post-test comparisons of emotional, cognitive, social, and total functioning for Concurrent Batches (N = 34).

When probed with the question ‘Could you tell us what changes you have noticed in yourself, before the onset of your illness and since then?’, several participants indicated that they experienced a range of negative emotions, such as fear about the illness, irritability, shame and social withdrawal, as well as stress and anxiety. However, these concerns had reduced after attending the program. After completion of the Wellness Program, many participants reported feeling more in control of their emotions, which led to lower anger and hostility, better understanding of feelings of people around them, and higher inner
strength. One participant mentioned that she experienced mental distress from having to deal with hospital protocol. She started feeling more self-sufficient after joining the Wellness Program, and also started feeling more hopeful. Another participant asserted that she had better knowledge of her illness after joining the program, and garnered better strength to fight it. While she was sad for a few months after undergoing surgery, she had stopped actively worrying about her illness after completion of the program. Similarly, another participant mentioned feeling upset and irritable about her illness, but those feelings subsided after joining the Wellness Program. Yet another participant offered a different perspective, when she said that she found a routine and a purpose by joining the program. She also started feeling more confident and rediscovered her identity because of that. Participants of the Previous Batches noted that they continued feeling more positive in their lives after completion of the Wellness Program and did not feel scared as they used to before, when asked ‘Did you notice any changes in yourself after participating in this program?’ One participant said she “felt more confidence.” Two of the past participants felt changes across a variety of factors; while one said that

“lot of self-doubt and anxiety was eased after attending this program, pay more attention to self, thinks positively, daily exercise, follows strict timing for lunch/dinner/etc. as much as possible. To look after self-first before anything else.”

Another said she

“changed food habits, stopped eating some types of food. Meditation helped with side effects of chemo, health complications reduced, other lifestyle changes, relaxed feeling overall.”

Some of the participants of the Previous Batches mentioned feeling emotionally stronger, and more comfortable going out and being in social situations.

“There has been a lot of change in me. Earlier I had no will to live. You perhaps have seen my videos, I mean the videos of
my interview, it was like earlier I did not want to live. Just as my radiation finished, and Sanjeevani began, Archana madam forced me to come...After coming to Sanjeevani everything has changed. Everything like, eating, sleeping, sitting, living, the way I see things, the way I speak...A lot of positive change has come. And so has a lot of confidence.”

PHYSICAL ASPECTS

The physical toll that cancer takes is associated with physiological symptoms of the illness itself, as well as the side effects of its treatment modalities. For instance, the surgical scars, and exposure to radiation in chemotherapy can cause intense pain and burns. Moreover, chemotherapy can also result into nausea, vomiting, and associated physiological symptoms. The Wellness Program employed modules such as yoga, reflexology, and nutrition management, in order to help the participants improve their immunity and endurance to pain. The physical aspects of their quality of life were also measured via the QLQ-30. After completion of the program, the participants reported lower overall pain and other symptoms of physical discomfort. Specifically, there was a significant reduction in symptoms of dyspnea, constipation, and diarrhoea, among the participants (Table 5). While the changes in symptoms of nausea and vomiting, insomnia, fatigue, and appetite loss were not statistically significant, the post-test means for these variables indicated a reduction in these symptoms (Figure 7). There was an improvement in overall quality of life due to the combined effect of physical activity induced by modules such as yoga, with the focus on eating right and healthy, which is addressed later in the chapter.
Table 5: Comparison of physical symptoms before and post completion of the Wellness Program.

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Pre-test</th>
<th>Post-test</th>
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<th>p</th>
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</thead>
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<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Pain</td>
<td>1.82</td>
<td>0.61</td>
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<td>0.53</td>
</tr>
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<td>Dyspnea</td>
<td>1.62</td>
<td>0.89</td>
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<td>0.54</td>
</tr>
<tr>
<td>Constipation</td>
<td>1.29</td>
<td>0.52</td>
<td>1.12</td>
<td>0.33</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>1.29</td>
<td>0.68</td>
<td>1.03</td>
<td>0.17</td>
</tr>
<tr>
<td>Total Symptoms</td>
<td>1.60</td>
<td>0.35</td>
<td>1.46</td>
<td>0.36</td>
</tr>
</tbody>
</table>

Note: M = Mean; SD = Standard Deviation.

OTHER ASPECTS

Financial

Cancer treatment is expensive and can result in financial burdens for the patients. Even if there is no direct cost for the treatment, there can be an indirect depletion of financial resources when cancer patients are unable to regularly attend work because of their ailment or have to quit their jobs altogether. The mere perception of these financial difficulties may result into mental stress and aggravate the illness-related issues. Upon completion of the Wellness Program, participants’ perception of their own financial difficulties reduced considerably ($M_{pre} = 2.03$, $SD_{pre} = 1.09$; $M_{post} = 1.50$, $SD_{post} = 0.79$; $t = 3.02$; $p = 0.005$). The changes in their experience of positive affective conditions may have contributed in enabling the participants to view their financial difficulties in a different light and handle financial stressors effectively (Figure 8). One participant, when asked about the changes she saw in herself since the beginning of her illness till the date of the interview, stated that money was a major fear and problem. However, she wasn't scared, she remained strong. This indicated that she saw her finances as a major hurdle and was stressed about it, but after completion of the Wellness Program, she remained strong and was not scared any more.
Another participant mentioned being worried about her financial condition but stressed that this was before beginning the program.

Figure 7: Pre- and post-test comparison of physical symptoms.

Figure 8: Pre- and post-test comparison of participants’ perception of their own financial difficulties.
Nutritional

Qualitative analyses of participants’ responses indicated that they had tailored their food habits based on the information provided in the Wellness Program. Generally, participants reported changes in their food intake frequency as well as the type of food they consumed. For instance, most participants included fruits and dry fruits in their diet and converted to black or sugarless (or both) tea and coffee rather than regular ones. The nutritional advice stressed upon consumption of more fibrous and milder, and less spicy and oily foods. All participants incorporated this advice into their daily diet plans by consciously avoiding oily and spicy foods, lowering intake of non-vegetarian food items, and eating more pulses. These changes may have particularly aided those participants who were still undergoing chemotherapy while in the program, as some of them reported higher endurance against the radiations, resulting in lower or no side-effects of the therapy. A participant of the previous batch similarly summed up these findings by stating

Quality of Care

Overall merit of the Wellness Program was also assessed based on how the participants of Concurrent and Previous Batches perceived the quality of care they received throughout the duration of the program. This was evaluated in context of the quality of information they were provided about the program before deciding to join it, the personal qualities of the personnel teaching various modules, as well as the content of these modules, and the accessibility and general maintenance of the Wellness Centre. Majority of the participants found the program to be extremely beneficial and rated the quality of care they received highly. Of the 34 participants interviewed, 30 cumulatively rated the quality of care to be 45 and above out of a possible 65, while the scores of four participants ranged between 39-44. Upon being probed further regarding the lower ratings, none of the participants mentioned any specific issues that may have impacted the score. It is therefore possible that these participants had a general tendency toward average scoring. Barring four, all participants from the previous batches also rated the overall quality of care to be 45 and above. Some of these participants
mentioned that it was taxing for them to travel to the center as many lived at the other end of the town. This issue was soon addressed by the center by moving to a more central location in the city, which was easier to access for the following batches. There were no differences in perception of the overall quality of care received in the program for current participants as well as past beneficiaries \((M_{\text{Previous Batches}} = 54.63, SD_{\text{Previous Batches}} = 6.83; M_{\text{Current Batches}} = 55.79, SD_{\text{Current Batches}} = 7.87; t = 0.78; p = 0.44; \text{Figure 9})\), which indicated that the high-standards of information dissemination were maintained throughout various batches. The Wellness Program was therefore consistently being administered through its modules across batches.

Similar findings were echoed in the qualitative interviews with participants of the previous batches. One participant stated:

"...they motivate us a lot. They show everyone love, and treat everyone with respect. They don’t think that ‘we are patients’ and hence treat us differently; they interact with us very well. Actually, I too want to join Sanjeevani and help people the way they have helped me...”

![Figure 9: Perception of quality of care received in the Wellness Program for Previous and Concurrent batches.](image)

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43
OVERALL HEALTH

As a result of the positive difference in their affective conditions as well as alleviation of distressing physiological symptoms, the participants’ evaluation of the overall quality of their lives was higher after the completion of the Wellness Program. This was reflected in the Global Health Status aspect of the QLQ-30, which assess how individuals perceive their mental and physical health in totality. The participants perceived themselves to be in better overall health after completion of the program as compared to that during enrolment in the program (M_{Pre} = 5.21, SD_{Pre} = 1.23; M_{Post} = 5.66, SD_{Post} = 1.13; t = -1.91; p = 0.06; Figure 10).

![Global Health Status](image)

Figure 10: Pre- and post-test comparison of the Global Health Status of participants from Concurrent Batches.

Interviewees who had previously completed the program gave a mean rating of 8.69 out of 10, on their overall satisfaction with the program, and with the exception of 2 participants, all beneficiaries mentioned that they still practiced some or all of what was taught to them in the program, as it reaped several health benefits. Yoga and nutrition were the most commonly practiced aspects of the program, followed by dance therapy and emotional freedom techniques.
**SUGGESTIONS FOR CHANGES**

The most common feedback given by participants from Concurrent and Previous Batches were for infrastructure-related changes. Participants consistently mentioned difficulties with travel and transport to the centre and suggested a need for better accessibility. Another common concern was regarding having better sanitation facilities inside the centre as opposed to a common washroom outside. However, both these concerns were effectively handled by *Sanjeevani* during the course of the study itself, by moving the centre to a different, more central location. Participants of the last Concurrent Batch and a few participants from the Previous Batches, who visited the new centre, expressed satisfaction with the new location and amenities.

Some participants felt that there should have been a social aspect to the program such as a group outing or activity. Given the emphasis that *Sanjeevani* Wellness Program puts on community healing, group activities such as educational outings, outdoor physical activity, or a change in the settings of modules could potentially aide in their overall wellbeing. Research finds that cancer survivors who get physical activity score better on quality of life measures (Fong et al., 2010; Speck et al., 2016; Schmitz et al., 2005). Cancer patients and survivors are at risk of struggling with stress, depression, and anxiety, but time spent outdoors can provide a significant mood boost. Engaging in social activities is generally associated with positive outcomes, but for cancer patients who maybe struggling with isolation or depression, getting active outdoors with other people can have particularly substantial benefits. Social activities promote stronger relationships and new friendships, and reduce isolation and mortality (Kroenke et al., 2005).

A strong social network is important for both physical and mental health, boosting mood, improving cognition, and even increasing survival rates in people with cancer.
CONCLUSIONS AND IMPLICATIONS

The evaluation of Sanjeevani...Life Beyond Cancer’s Wellness Program unearthed the importance of a rounded intervention emphasising on both physical and mental health aspects of the fight against cancer. Overall, the participants’ physical, cognitive and social functioning improved, and they reported positive mental health at the end of their sessions. Additionally, the program was found to have assisted in regulation and reduction of negative affect and feelings, reduction in stress concerning finances, and reduction in physical symptomology such as pain and discomfort. The program learnings were found to be retained in the long-term, with most participants of Previous Batches reporting that they continue to integrate their learnings in daily life.

Figure 11. Illustrations of key findings of impact evaluation.

- Negative Affect
- Physical Pain
- Physical Discomfort
- Financial Stress

- Physical Functioning
- Cognitive Functioning
- Social Functioning
- Overall Physical Health
- Overall Mental Health
Using measures which were scientifically sound and reliable, along with the combination of semi-structured interviews, this report was able to evaluate the efficacy of the Sanjeevani Wellness Program as well as systematically document the opinions and feedback from its beneficiaries.

The integrative model of the Wellness Program works successfully alongside mainstream onco-medical procedures, allowing beneficiaries to manage any side-effects of such interventions. Additionally, the complimentary therapies employed by Sanjeevani have been proven in scientific studies to be low-risk and decidedly useful in managing the physical and psychological health of patients. The multidisciplinary modules employed by the Wellness Program unequivocally impact the lives of the beneficiaries for the better, helping them manage the emotional burden of their treatment, its side-effects, and improve the overall quality of life.

Integrative and complimentary treatments such as those employed by Sanjeevani’s Wellness Program are not easily accessible to all, especially those from lower socioeconomic backgrounds. A growing body of literature has confirmed that disparities exist with regards to treatment services for patients of cancer, based on socioeconomic factors such as poor educational status, low income, unemployment, and lack of health insurance. Sanjeevani...Life Beyond Cancer provides a service that is unique in its outreach to women from poorer backgrounds, who often hold the most disadvantaged positions due to their gender and economic circumstances. These women often do not have the support and understanding from their surroundings to help them navigate through their illness. Additionally, their existing burdens and those of their families are exacerbated by their illness and its treatment procedures. The Sanjeevani program centre creates a space of understanding, acceptance, and community for its beneficiaries which goes a long way in reducing distress and coping with the diagnosis of cancer and its side-effects.
Overall, the Wellness Program proved beneficial to the participants immediately after its completion as well as in the long run. Benefits included better physical and mental endurance to the challenges posed by cancer, and a better response to its treatment. Moreover, the program also encouraged participants to adopt a healthier lifestyle via exercise and better food habits. The knowledge gleaned from the program was retained by the beneficiaries in the long run, and practiced in daily life over time.

Through its unique model and ethos, the Sanjeevani...Life Beyond Cancer’s Wellness Program provides a holistic method of healing for cancer patients and survivors. The glowing commendations from its beneficiaries shows that the program significantly impacts their lives and if the feedback from participants is incorporated efficiently, there is a potential for Sanjeevani to expand its operations and touch the lives of more individuals in need.
REFERENCES


APPENDICES

APPENDIX A: INFORMED CONSENT

Informed Consent Form for Impact Assessment of Sanjeevani...Life Beyond Cancer Wellness Program

We are from Monk Prayogshala, an NPO that conducts research. We are assessing the impact of the Sanjeevani Wellness Program on your health and wellbeing. From your feedback we hope to understand what you think about the program and whether or not you have benefited from it. Your feedback will help in improving the program and will also help in assessing the effectiveness of the different therapies you have received. If you wish to participate, we will ask you a few questions now and then meet with you again at the end of the program to ask you some more questions. These interviews will take up to 20-40 minutes.

Your participation in this research is entirely voluntary. It is your choice whether to participate or not. If you choose not to participate all the services you receive at this Centre will continue and nothing will change. If at anytime you want to stop the interview and not participate, it will not affect the services you receive here. If after completing the interviews you do not wish to have your responses used, you can inform us and we will not use your responses.
इस साक्षात्कार में आपकी भागीदारी पूरी तरह से आप कि इत्तफ पर निर्भर है। यदी आप इस interview में भाग नहीं लेना चाहते, तो सभी सेवाओं जो Sanjeevani प्रोग्राम से मिल रही हैं वह जारी रहेंगी और कुछ नहीं बदलेगा। अगर आप interview बीच में रोकना चाहते हैं तो यह भी समझिए। यदी interview खत्म होने के बाद आप हमे आपके जवाबो का उपयोग करने की अनुमति नहीं देते, तो हम आप्के जवाबो का उपयोग नहीं करेंगे।

Whatever feedback and answers you give us will remain confidential and it will not affect the quality of services you receive here.

जो भी जवाब आप हमे देंगे, वो गुप्त रहेंगे और इससे आपको यहाँ प्राप्त सेवाएं कि गुनवत्त प्रभावित नहीं होगी।

There are no risks involved in taking part in the study. There will be no direct benefit to you, but your participation is likely to help us improve this program.

यह साक्षात्कार में भाग लेने में कोई जोखिम नहीं है। आपके लिए कोई लाभ नहीं होगा, लेकिन आपके जवाबो से हमें इस प्रोग्राम में सुधार करने मे मदद मिलेगी।

If you have any questions, you can ask me now or later at +919167226464

यदी आपके कोई प्रश्न है, तो आप मुझसे वह अभी पूछ सकते है या बाद में इस फोन नंबर पर बुला सकते है।

I have been invited to participate in the research study. I have read the information, or it has been read to me. I have had the opportunity to ask questions about it and any questions I have been asked have been answered to my satisfaction. I consent voluntarily to be a participant in this study.

मुझे यह साक्षात्कार मे भाग लेने के लिए आमन्त्रित किया गया है। मैंने सूचना पढ़ी है, या यह मुझे पढ़ा गया है। मुझे इसके बारे मे प्रश्न पूछने का अवसर मिला है और मेरे सभी सवालों का जवाब संतोषजनक ढंग से दिया गया है। मे इस अध्ययन मे स्वच्छ से भागीदार होने कि सहमती देता / देती हू।
Print Name of Participant/ नाम
________________________________________________________

Signature/Thumb impression/ हस्ताक्षर
__________________________________________

Date/ तारीख ____________________________________________________________________________
- Participant ID __________________________

I have spoken with __________________________________________ about the current research study, its potential risks and benefits, and have answered his/her queries to the best of my abilities.

Signature _______________ Recruiter Name: __________________________
(Authorized Experimenter)

Date _______________
APPENDIX B: OVERALL LIFE SATISFACTION SCALE
AND CANTRIL’S LADDER OF LIFE SCALE

Overall Life Satisfaction Scale

All things considered, how satisfied are you with your life as a whole these days? If 1 means you are “completely dissatisfied” and 10 means you are “completely satisfied” where would you put your satisfaction with life as a whole?

Jab sabhi cheezon ko maana jaata hai, tab aajakal aap apane jeevan ke saath kitne santusht hain? Yadi 1 ka matlab hai ki aap "poori tarah se asantusht" hain aur 10 ka matlab hai ki aap "poori tarah santusht" hain, toh aap poori tarah se jeevan ke saath apani santushti kahaan rakhenge?

1 2 3 4 5 6 7 8 9 10

Cantril’s Ladder of Life Scale

Please imagine a ladder with steps numbered from 0 at the bottom to 10 at the top. Suppose we say that the top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you. If the top step is 10 and the bottom step is 0, on which step of the ladder do you feel you personally stand at the present time?

Maanlijiye ek seedhi hai, jo aapke jeevan ki tarah hai. Seedhi ka sabse neechha kadam aapka sabse kharaab sambhav jeevan hai aur sabse ooncha kadam aapake liye sabse achchha sambhav jeevan darshaata hai. Sabse neecha kadam 0 hai aur sabse ooncha kadam 10 hai. Aap apne vartaman jeevan ko 0-10 ke beech mein kahaan khade dekhte ho?

0 1 2 3 4 5 6 7 8 9 10
# APPENDIX C: POSITIVE AND NEGATIVE AFFECT SCALE

Indicate the extent you have felt this way over the past week:

<table>
<thead>
<tr>
<th>Interest</th>
<th>1 Very slightly or not at all</th>
<th>2 A little</th>
<th>3 Moderately</th>
<th>4 Quite a bit</th>
<th>5 Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>इच्छुक</td>
<td>बहुत कम या बिलकुल नहीं</td>
<td>थोड़ा सा</td>
<td>मध्यम</td>
<td>बहुत</td>
<td>अत्यंत</td>
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<td>Distressed</td>
<td>व्यिथत / bohot pareshan</td>
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<td></td>
<td></td>
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<tr>
<td>उत्साहित</td>
<td>भयभीत</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>उत्साहयुक्त</td>
<td>शत्रुतापूणर् / विस्द्ध</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strong</td>
<td>बलवान / sahansheel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guilty</td>
<td>दोषी</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scared</td>
<td>भयभीत</td>
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<td></td>
</tr>
<tr>
<td>Hostile</td>
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<tr>
<td>Proud</td>
<td>गर्व</td>
<td></td>
<td></td>
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<tr>
<td>Irritable</td>
<td>चिड़चिढ़ा</td>
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</tr>
<tr>
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<td>सतर्क</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Ashamed</td>
<td>शर्मिंदा</td>
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<tr>
<td>Inspired</td>
<td>प्रेरित</td>
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<td></td>
</tr>
<tr>
<td>Nervous</td>
<td>बे चै न</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Determined</td>
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<tr>
<td>Attentive</td>
<td>सचेत</td>
<td></td>
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</tr>
<tr>
<td>Jittery</td>
<td>कमजोर नसों का hona</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active</td>
<td>सक्रिय</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Afraid</td>
<td>हरा हुआ</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
APPENDIX D: EORTC QUALITY OF LIFE QUESTIONNAIRE C-30

EORTC QLQ-C30 (version 3) (कर्त्तव्य 3.0)

हम आपके और आपके स्वास्थ्य के बारे में कुछ बातें जानना चाहते हैं। क्या आप सब पर गोली बनाकर दें जो आपको सबसे सही लगता है। कोई भी उत्तर सही या गलत नहीं है। आपके द्वारा यह गयी जानकारी गुज़र जाएगी.

कंप्यूटर फाइल क्रमांक:  
अनुक्रमांक:  

आपके नाम के अध्यक्ष:  
आपकी जन्मतिथि (दिन, मास, वर्ष):  
आज की लिंगि (दिन, मास, वर्ष):  

<table>
<thead>
<tr>
<th>क्रमांक</th>
<th>विलकुल नहीं</th>
<th>धोड़ा सा</th>
<th>धोड़ा अधिक</th>
<th>बहुत अधिक</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>क्या आपको मेहनत के काम करने में कठिनाई होती है? जैसे कि बाजार भरी बैंकों या गुटकें हटाना?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2.</td>
<td>क्या आपको दूर तक टहलने में कोई कठोर होता है?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3.</td>
<td>क्या आपको घर के आसपास धोड़ा टहलने में कोई तकलीफ होती है?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4.</td>
<td>क्या आपकी दिन में कुछ में बेहतर की या विस्तर पर लेटे रहने की जस्ती महसूस होती है?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5.</td>
<td>क्या आपका खाना, कपड़े पहनने, नहाने या शीताल जाने में मदद की जस्ती पड़ती है?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

पिछले एक सप्ताह के दौरान

<table>
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<tr>
<th>क्रमांक</th>
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<th>धोड़ा सा</th>
<th>धोड़ा अधिक</th>
<th>बहुत अधिक</th>
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</thead>
<tbody>
<tr>
<td>6.</td>
<td>क्या आपको अपना काम करने में या दूसरे देनक कार्य में स्कूल अधिक महसूस हुई?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7.</td>
<td>क्या आपको अपने शीत झटके पूरे करने में या दूसरे फुटेल के कार्य में स्कूल महसूस हुई?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8.</td>
<td>क्या आपकी सोच लेने में तकलीफ हुई?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9.</td>
<td>क्या आपको दर्द था?</td>
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<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10.</td>
<td>क्या आपको आराम की जस्ती थी?</td>
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<td>3</td>
</tr>
<tr>
<td>11.</td>
<td>क्या आपकी सोच में कठिनाई हुई?</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>12.</td>
<td>क्या आपकी नापांगी महसूस हुई?</td>
<td>1</td>
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<tr>
<td>13.</td>
<td>क्या आपकी मूड कम हो गयी थी?</td>
<td>1</td>
<td>2</td>
<td>3</td>
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</tbody>
</table>

अगले पन्ने पर
<table>
<thead>
<tr>
<th>पिछले एक सप्ताह के दौरान</th>
<th>विलकुल नहीं</th>
<th>ठोंड़ा सा</th>
<th>ठोंड़ा अधिक</th>
<th>बहुत अधिक</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. क्या आपको मचली महसूस होती थी?</td>
<td>1</td>
<td>2</td>
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<td>4</td>
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<tr>
<td>15. क्या आपको उलटी हुई?</td>
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<td>16. क्या आपको कठिनता रही थी?</td>
<td>1</td>
<td>2</td>
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<td>4</td>
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<tr>
<td>17. क्या आपको नुमी होते थे?</td>
<td>1</td>
<td>2</td>
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<td>4</td>
</tr>
<tr>
<td>18. क्या आपको थककान महसूस होती थी?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>19. क्या दर्द के कारण आपके दैनिक कार्यों में स्क्वाट आयी?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td>20. क्या आपको ध्यान लगाकर कोई काम करने में परेशानी हुई थी, जैसे की आवश्यक पड़ना या टीयो देखना?</td>
<td>1</td>
<td>2</td>
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<tr>
<td>21. क्या आप तनाव महसूस करते थे?</td>
<td>1</td>
<td>2</td>
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<td>4</td>
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<tr>
<td>22. क्या आपको चिंता रहती थी?</td>
<td>1</td>
<td>2</td>
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<tr>
<td>23. क्या आपको चिड़चिड़ापन महसूस होता था?</td>
<td>1</td>
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<tr>
<td>24. क्या आप उदास रहे?</td>
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<td>25. क्या आपको चीज़े याद रखने में कठिनाई हुई?</td>
<td>1</td>
<td>2</td>
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<td>26. क्या आपको आशीर्वाद अवस्था या दवा इलाज के कारण आपके पारिवारिक जीवन में बाधा आई है?</td>
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<td>27. क्या आपकी आशीर्वाद अवस्था या दवा इलाज के कारण आपके सामाजिक क्रियाकलाप में बाधा आई है?</td>
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<td>28. क्या आपकी आशीर्वाद अवस्था या दवा इलाज के कारण आपको आधिक परेशानी हुई है?</td>
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इन प्रश्नों का उत्तर 1 से 7 तक के अंकों में से उस पर गोला बनाकर दें, जो आप पर सबसे ज्यादा लागू होता हो।

29. पिछले सप्ताह के अपने पूर्ण स्वास्थ्य का मूल्यांकन आप कैसे करते?

   1  2  3  4  5  6  7  

   बहुत खराब          बहुत अच्छा

30. पिछले सप्ताह के अपने कुल जीवन रूप का मूल्यांकन आप कैसे करते?

   1  2  3  4  5  6  7  

   बहुत खराब          बहुत अच्छा
APPENDIX E: QUALITY OF CARE ASSESSMENT

We are interested in some things about you and your experience of the care received during your hospital the program. There are no 'right' or 'wrong' answers. The information that you provide will remain strictly confidential.

_Hum aapake aur kaaryakram ke dauraan praapt dekhabhaal ke aapake anubhav ke baare mein kuchh cheejan jaanana chaahate hain. Koi bhi savaal sahee ya galat nahin hai. Aapake uttar sakhtee se gopaneey rahenge_

<table>
<thead>
<tr>
<th>During the term of the program, how would you rate the personnel in terms of:</th>
<th>1</th>
<th>2</th>
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<tbody>
<tr>
<td>Kaaryakram kee avadhi ke dauraan, aap karmiyon/personnel ko kaise rate karenge:</td>
<td>Poor घटिया</td>
<td>Fair संतोषजनक</td>
<td>Good अच्छा</td>
<td>Very Good बहुत अच्छा</td>
<td>Excellent उत्तम</td>
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<td>Their knowledge and experience of your illness?</td>
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<td>Aapakee beemaaree ka unaka gyaan aur anubhav?</td>
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<tr>
<td>The treatment and follow-up they provided?</td>
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<td>Upachaar aur anuvartee ve pradaan kie gae?</td>
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<td>The attention they paid to your physical problems?</td>
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<td>Unhonne aapakee shaareerik samasyaon par dhyaan diya?</td>
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<td>Their willingness to listen to all of your concerns?</td>
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<td>Aapakee sabhee chintaon ko sunane kee unakee ichchha?</td>
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<td>The interest they showed in you personally?</td>
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<td>Question</td>
<td>Answer</td>
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<td>Kya unhone aap mein aur aap ki halat mein kuch byaaj deekhaee?</td>
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<td>The comfort and support they gave you?</td>
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<td>Unhone aapako aaraam aur samarthan diya?</td>
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<td>The information they gave you about your treatment?</td>
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<tr>
<td>Unhone aapake ilaaj ke baare mein jaanakaaree dee?</td>
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<td>Their human qualities (politeness, respect, sensitivity, kindness, patience,...)?</td>
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<td>Unake maanav gun (vinamrata, sammaan, sanvedanasheelata, dayaaluta, dhairy,...)?</td>
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<td>The exchange of information between caregivers?</td>
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<td>Dekhabhaal karane vaalon ke beech jaanakaaree ka aadaan-pradaan?</td>
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<tr>
<td>The information provided on your admission to the program?</td>
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<tr>
<td>Kaaryakram mein aapake pravesh par deee gaaee jaanakaaree?</td>
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<td>The ease of access (parking, means of transport,...)?</td>
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<tr>
<td>Pahunch kee aasaanee (paarking, parivahan ka saadhan, ...)?</td>
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<td>The environment of the building (cleanliness, spaciousness, calmness,...)?</td>
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<tr>
<td><strong>Imaarat ka paryaavaran (saphaee, vishaalata, shaanti)?</strong></td>
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<td>In general, how would you rate the care received during the length of the program?</td>
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<tr>
<td><strong>Sab dekha jaye toh kaaryakram kee lambaee ke dauraan praapt dekhabhaaal ko aap kaise rate kareenge?</strong></td>
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</table>
APPENDIX F: SEMI-STRUCTURED QUESTIONS ON NUTRITION

How many meals do you have per day? (Aap kitni baari ek din mein khaana khaate ho?)

0 1 2 3 >3

What do you normally have for a meal? (Khaane mein aap normally kya khaate ho?)

________________________________________________________

________________________________________________________

Have your food preferences changed lately? (Haal hi mein kya aapki khaane ki pasand badli hai?)

________________________________________________________

________________________________________________________

Could you tell us what changes you have noticed in yourself before the onset of your illness and since then? (kya aap hamein bata sakate hain ki aapakee beemaaree kee shuruaat se pahale aur tab se aapne kuch parivartan aapke jeevan ya swabhav mein dekha hai?)

________________________________________________________

________________________________________________________
APPENDIX G: SEMI-STRUCTURED QUESTIONS FOR PARTICIPANTS OF PREVIOUS BATCHES

The following questions will revolve around your overall experience in the program. There are no right or wrong answers. Please try to respond to the following questions in as much detail as possible.

Ab hum aapke iss program ke anubhav ke baare mein kuch sawaal karenge. In sawalon ke koi sahi yaa galat jawaab nahin hai. Kripaya jitna sambhav ho utne vistaar se nimnlikhit sawaalon ke uttar de.

1. Did you notice any changes in yourself after participating in this program?

Iss program mein sahabhaagi hone ke baad kya aapko apne aap mein kuch badlaav nazr aaye?

________________________________________________________

2. Do you think this program could be improved in any way?

Kya aapko lagta hai ki iss program ka koi hissa aur behtar ho sakta hai?

________________________________________________________

3. Which aspect of the program did you think helped you the most? (e.g. yoga, physiotherapy, nutrition, dance movement therapy, emotional freedom technique, reflexology)
4. On a scale of 1-10, how would you assess the overall quality of this program? (1 = not at all satisfactory; 10 = extremely satisfactory)

Iss program ki samasta gunvatta ka akalan kaise karenge? (1 = bilkul asantushta; 10 = bilkul santusht).

5. Do you still practice what you learned in this program?

Kya aap iss program mein sikhayi gayi cheezon ka abhi bhi abhyas karte hai?

Yes
No

Practice some things (please mention which):
APPENDIX H: COMPARATIVE FIGURES ASSESSING TRENDS IN QUANTITATIVE VARIABLES

Comparison of Pre- and Post-test Responses on the Overall Life Satisfaction Scale

Comparison of Pre- and Post-test Responses of the Cantril's Ladder of Life Scale
APPENDIX I: TRANSCRIPTS OF INTERVIEWS WITH PARTICIPANTS OF PREVIOUS BATCHES

Interview No.: 1

Date of Interview: 26/06/2018

Language of Interview: Hindi

**INTERVIEWER:** Aap aapka naam batayenge?

**PARTICIPANT:** Mera naam Noorjana Sheikh hain.

**INTERVIEWER:** Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein kuch badlav nazar aaye?

**PARTICIPANT:** Haan bohot mujhe badlav nazar aaya jabse main yahan aayi - zyaada kisi se baat nahi karti thi, aapne tabhiyati ke bare mein soochti thi. Yahan aane ke baad sabse milti hoon, khush ho jati hoon, sab yahan milte hain aapas mein, sab ek doosre se woh ho jaate hain- aapas mein jo hain, judh jaate hain- aisa mehsoos karti hoon.

**INTERVIEWER:** Aur aapke swabhav mein kuch badlav mehsoos aaye?

**PARTICIPANT:** Swabhav mein bohot badlav aaya hain mera

**INTERVIEWER:** Kya kya badlav?

**PARTICIPANT:** Badlav aaya hain ki mein kabhi kissi se chidchidapan nahi karti hoon aur yahan sikhaya gaya hain ki zyaada gussa mat dikhaun. Iske liye main abhi zyaada gussa nahi hoti hoon. Gussa hoti hoon toh yeh sochti hoon ki mujhe aapne aap pe takleef hogi isliye main abhi yeh sab chod dhi hoon.

**INTERVIEWER:** Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho sakta hain?

**PARTICIPANT:** Haan iss mein programme batatein hain- ki dosron ko bhi bataun , yeh programme isse aur bhi accha ho sakhta hain, aap log bhi ek-dosre ko leke ao. Toh hum jate hain survey ke liye aur 2-4 log ko leke bhi aaye the , jab waha ki sanjeevani thi. Haan toh yeh sab karte hain.

**INTERVIEWER:** Yeh yoga sikhaya aur doosre therapies bhi sikhaye. Toh programme ka kuch bhi bhaag aapko aisa lagta hain ki behtar ho sakta hain?

INTERVIEWER: Programme behtar ho sakta hain? Kuch badal sakta hain?

PARTICIPANT: Haan bohot kuch badal sakta hain.

INTERVIEWER: Kuch accha nahi laga?


INTERVIEWER: Iss programme ka kaunsa hissa aapke sabse upyukt sambit hain?

PARTICIPANT: Yoga aur tapping sikhate the. Aur ek ma'am aate the music pe woh karte the woh accha lagta tha.

INTERVIEWER: Iss programme ki samstha, gunvartha ka kya alaakan karenge? 1 se 10 ke beech mein? 1 matlab bilkul asantasht the aap programme se aur 10 matlab bilkul santusht

PARTICIPANT: Bikul santusht the.

INTERVIEWER: Aap kaunsa number deyenge? agar aap 1 denge toh aap poori tarah se asantasht ho, 5 matlab teek hain-

PARTICIPANT: -Nahi bohot zyaada hi santusht the.

INTERVIEWER: Toh 10?

PARTICIPANT: Haan 10.

INTERVIEWER: Kya aap iss programme mein sikhayi gayi cheeson ka abhi bhi abhyas karte hoon?


Interview No.: 2
Date of Interview: 11/06/2018
Language of Interview: Hindi
**INTERVIEWER:** Aapka naam bolengi?

**PARTICIPANT** Anita Wangle.

**INTERVIEWER:** Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein kuch badlav nazar aaye?

**PARTICIPANT:** Haan.

**INTERVIEWER:** Kya badlav?

Mein yahan pe aane ke bad har rooj yoga karti hoon, aur khane peene kya dhyaan rakti hoon, aur meri sharir pe bohot fayda hua hain. Tabhi se mujhe kuch thakan-vikan kuch aati nahi hain. Aur mein ghar mein bhi batati hoon, ki yeh karna hain,

**PARTICIPANT:** woh karna hain, bachein logo ko sikhaiye hoon

**INTERVIEWER:** Kya aapko lagata hain ki iss programme ka koi hissa behtar ho sakta hain?

**PARTICIPANT:** Haan.

**INTERVIEWER:** Kya? Kaunsa hissa behtar hona chahiye?

**PARTICIPANT:** Khaane peene kya dhyaan rakhna chahiye-

Nahi, yeh programme mein aap the- aapko kabhi laga ki yeh thoda aur karna

**INTERVIEWER:** chahiye, ya yeh achi tarah se nahi kiya?

**PARTICIPANT:** Yoga

**INTERVIEWER:** Yoga? Achi tarah se nahi kiya?

**PARTICIPANT:** Nahin, kiya magar mein time pe nahi aati thi

**INTERVIEWER:** Matlab time bohot jaldi tha aap ke liye?

Yahan pe 10, 10:30 ka time tha aur mein 12:30 aati thi. Tabhi toh yoga khatam ho

**PARTICIPANT:** jata tha. Thoda bohot sikha hain maine

**INTERVIEWER:** Toh timing ka aapko- Idhar bohot jaldi hota tha yoga ke time pe

Iske siwa aapko kuch laga ki yeh inti achi tarah se nahi kiya, shayad thodi

**INTERVIEWER:** behtar tarah se kar sakte the?

**PARTICIPANT:** Nahin aisa kuch nahi laga. Jo bhi tha accha hi tha.
INTERVIEWER: Iss programme ka kaunsa hissa aap ke liye sabse upyukt hain? Matlab yoga tha, khaana ka tha-

PARTICIPANT: Khaane peena kya jo sikhate the woh mujhko sabse pasand aya. Yoga ka bhi pasand aya

INTERVIEWER: Aur kuch?

PARTICIPANT: Woh dance bhi sikhaya- jo ati thi na madam. Mereko sab session accha laga

INTERVIEWER: Par khaane ka aur yoga ka sabse upyukt tha?

PARTICIPANT: Haan.

Aap mujhe 1 se 10 ke beech mein aankh dejiye-iss programme se aap kitne santusht hain. 1 matlab bilkul asantusht aur 10 matlab bilkul santusht

PARTICIPANT: 10

Kya aap iss programme mein sikhayi gayi cheeson ka abhi bhi abhyas karte hain?

INTERVIEWER: hoon?

PARTICIPANT: Abhyas nahi karti hoon. Lekin mein khaane peene ka dhyaan rakti hoon aur yoga karti hoon

INTERVIEWER: Aap aapka naam batayenge?

PARTICIPANT: Sakuntala Dhule

INTERVIEWER: Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein kuch badlav nazar aaye?

PARTICIPANT: Haan aya.
INTERVIEWER: Kya badlav?


PARTICIPANT: Idhar ake bohut accha laga- woh kam ho gaya mera sab dard.

INTERVIEWER: Aur kuch?


Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho

INTERVIEWER: sakta hain?

PARTICIPANT: Ho sakta hain.

INTERVIEWER: Kya behtar ho sakta hain?

Aur ayega toh aur accha lagega aapne ko. Apne liye aana mangta hain

PARTICIPANT: idhar, toh accha lagega na idhar aane par.

Accha toh aapki yeh iccha hain ki yeh thoda aur lamba ho-sablog ko aana chahiye?

PARTICIPANT: Haan sablog ko aana chahiye.

Par iss programme mein, matlab ek mahine aap idhar aye, iske dauraan [kya] aapko laga - haan yeh inhone accha nahi kiya, arre yeh thoda behtar ho sakta tha?

Aisa kabhi nahi laga , bohot hi accha laga idhar aane ke bad, kuch aisa kabhi

PARTICIPANT: nahi laga.

INTERVIEWER: Iss programme ka kaunsa hissa aapke liye sabse upyukt raha?

Mera yoga se bohot aaram mila, idhar woh karte hai na, woh point waghera

PARTICIPANT: isse mero bohot faayda mila.

INTERVIEWER: Accha yoga aur point se?

PARTICIPANT: Haan.

Iss programme ki gunvartha aapna rate deyenge? Matlab 1 matlab bilkul asantusht , 10 matlab bilkul santusht - 1 se 10 ke beechme kya

INTERVIEWER: deyenge?
PARTICIPANT: Sab, sab shikayat nahi tha, sabhi sir aur madam log, sabhi accha laga.

INTERVIEWER: Aap bohot santusht the?

PARTICIPANT: Sab se santusht the.

INTERVIEWER: Matlab 9, 10?


INTERVIEWER: 8,9,10?

PARTICIPANT: Nahi pura 10.

Kya aap iss programme mein sikhayi gayi cheeson ka abhi bhi abhya

PARTICIPANT: Karti hoon.

INTERVIEWER: Kya cheeson?

Sabh sikhaya - yeh points sikhaya idhar ka, dance sikhaya- dance main kabhi karti nahi thi, abhi shaddi mein gayi thi, sab sikhaya udhar, toh abhi dance free

PARTICIPANT: mein karti thi, bohot accha laga.

---

Interview No.: 4

Date of Interview: 11/06/2018

Language of Interview: Hindi

INTERVIEWER: Aapka naam bolenge please?

PARTICIPANT: Sharmila Praveen Agarwal

Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein

INTERVIEWER: kuch badlav nazar aaya?

Main baat toh mera gussa kam ho gaya. Sabse milne jhulne lag gayi. Aur phir

PARTICIPANT: iss centre mein ake tohmere bohot sare frienPARTICIPANT ho gaye.
INTERVIEWER: Accha toh gussa kam. Aur kuch badlav aaya?

Humein jo hai, iss cheez ko bholne ki takat aa gayi. Jo pehle iske bare mein depressed rehte the, ab woh nahi hai. Use peecha chuda diya

PARTICIPANT: Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho

INTERVIEWER: sakta hain?

PARTICIPANT: Ho sakta hain.

INTERVIEWER: Kya ho sakta hain?

Yeh hum ek saath rehte hain, mix hote hain yaha. Sabh milte hain tabhi behtar

PARTICIPANT: ho jate hain.

Haan par yeh programme mein aapne bohot si aalag therapies experience ki- yoga tha, nutrition tha, dosre cheez ke teacher the, woh saab. Usme pure programme mein aapko aisa laga ki yeh thoda behtar

INTERVIEWER: karna chahiye tha, ispe thoda dhyaan dete toh accha hota?

Nahi aise toh kabhi socha nahi, bas enjoy karte rahe. Jo bhi mila usko accept

PARTICIPANT: karte the.

INTERVIEWER: Iss programme ka kaunsa hissa aapke liye sabse upyukt raha?

Yeh tapping, Daisy ma'am ka. Woh dard ko mita deta hain. Woh bohot accha

PARTICIPANT: laga.

Toh 1 se 10 ke beechme iss programme ki samastha, gunvartha ka kya alakan karenge? 1 matlab bilkul asantasht, 10 matlab bilkul santusht.

INTERVIEWER: Aap kya rate karenge?

PARTICIPANT: Kiss cheez ka?

INTERVIEWER: Pura programme ka

PARTICIPANT: 7

Kya aap iss programme mein sikhayi gayi cheeson ka abhi bhi abhyas

INTERVIEWER: karte hoon?

PARTICIPANT: Karte hain.

INTERVIEWER: Kaunsi-kaunsi cheezon?
PARTICIPANT: Yoga karte hain. Tapping jabhi kuch pain hota hain toh tapping karti hoon, woh tapping joh dard ke liye bola hai woh karti hoon.

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Interview No.: 5

Date of Interview: 29/06/2018

Language of Interview: Hindi

**INTERVIEWER:** Madam aapka naam battayengi please?

**PARTICIPANT:** Mera naam Shruti Sherlekar

**INTERVIEWER:** Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein kuch badlav nazr aaya hai?

**PARTICIPANT:** Haan bohot badalv aaya hai

**INTERVIEWER:** Kya badlav ?

**PARTICIPANT:** Matlab pehle main bohot simple si, baat zyaada nahi karti thi. Saanjeevani class mein me jabse aayi hoon, tabse mujhe matlab thoda confidence aaya hain- bohot confidence aaya hain, aur bohot kuch karne ki umeed bhi jagi hain.

**INTERVIEWER:** Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho sakta hain?

**PARTICIPANT:** Haan , bohot behtar ho sakta hain.

**INTERVIEWER:** Kya matlab, iss programme mein aap kuch badlav lana chahte hain? jo isko aur behtar kar sakta hain?

**PARTICIPANT:** Haan matlab yaha pe jo naya sikh rahe hain, woh sabh dekh ke mujhe lagta hain ki apna life mein log hum kuch zyaada kar sakte hain. Jo nahi kiya hai woh kar sakte hain. Aisa lag raha hain.

**INTERVIEWER:** Aur aapko aisa lagta hain, ki iss programme aap 1 mahina gaye the, usme se kuch -yeh kuch bhaag accha nahi tha, usko aur behtar bana sakte hain, aisa kuch laga?
PARTICIPANT: Nahi

INTERVIEWER: Matlab yeh accha nahi hai

PARTICIPANT: Nahi sab accha tha.

INTERVIEWER: Iss programme ka kaunsa hissa aapke liye sabse upyukt raha?


INTERVIEWER: Toh woh counselling aapke liye. Aur kuch?


INTERVIEWER: Iss programme ki samstha, gunvartha aap 1 se 10 ke beech mein ka number deyenge? 1 matlab aap yeh programme se bilkul asantusht ho-

PARTICIPANT: Nahi main 10 se 10.

INTERVIEWER: Kya aap iss programme mein sikhayi gayi cheeson ka abhi bhi abhyas karte hain?

PARTICIPANT: Exercise karti hoon main, aur khane mein bhi change laya, matlab jo diet mein madam ne sikhayi hain woh bhi main follow karti hoon.

Interview No.: 6

Date of Interview: 11/06/2018

Language of Interview: Hindi

INTERVIEWER: Aapka naam battayungi?
PARTICIPANT: Surekha Sudhakar Naik

**INTERVIEWER:** kuch badlav nazar aaya hai?

Haan, pehle cancer tha toh mujhe jine ki ummeed hi nahi thi. Main boli cancer hua toh abhi main jaangi. Aisa sochte the na sabh log cancer hua toh jaayegi- lekin mujhe confidence nahi tha, aur koyi aaya na deekhe ko toh rothi thi, rothi thi. Aur itni bhi umar hai meri, abhi toh shaam ho gayi, zindagi ki. Lekin idhar aayi na toh mujhe jine ki ummeed ho gayi, idhar aane se. Confidence baad gaya mera, athmavishvas baad gaya mera, aur kya khaane ka, kaise rehne ka,

**PARTICIPANT:** exercise kaise karne ka, yeh sabh idhar sikhaya, toh mujhe bohot accha laga.

**INTERVIEWER:** koi hissa aur behtar ho sakta hain?

**PARTICIPANT:** Yeh hissa na?

**INTERVIEWER:** Koi hissa? iss programme ka koi bhi hissa behtar ho sakta hain?

**PARTICIPANT:** Woh joh exercise sikhaye na, woh saas kaisa lena, itne saal abhi mere 62, 63 ho gaya, lekin saas ke upar dhyaan hi nahi diya maine. Aur mere sharir pe bhi dhyaan nahi diya. Sab ghar ka kaam karne ke baad, dhyaan nahi diya mere upar. Idhar aaya, saas kaise lena ka, saas par dhyaan kaise dene ka, aur Ruby ma'am ne wahi sikhaya- cancer. Main boli, main toh kuch, mujhe toh waisa nahi hai, bahar ka khati nahi, toh mujhe kyun hua cancer? Lekin

**PARTICIPANT:** Ruby ma'am ne sikhaya tha, bataya, cancer kaise hota hai

**INTERVIEWER:** Par yeh aap 1 mahine idhar aaye the correct? Iss programme mein kuch behtar aapko lagta hai yeh kar sakte hain?

**PARTICIPANT:** Hum?

**INTERVIEWER:** Nahi, programme wale, Sanjeevani kuch aur behtar kar sakhte hain?

**PARTICIPANT:** Yeh toh sabh karte hain idhar.

**INTERVIEWER:** Sabh karte hain idhar, kuch aur behtar aapko nahi chahiye?

Haan karte hain idhar. Abhi toh idhar exercise hota hain, kaana kaisa leke, yeh

**PARTICIPANT:** khel [inaudible]

**INTERVIEWER:** chahiye tha, yeh behtar karna chahiye tha
Mujhe aisa lagte hain ki roz ek ghanta toh idhar aana chahiye, toh accha lagta hain. Roz! Idhar 1 mahina hua ghar mein, aisa mujhe lagta hain roz ek ghanta aayega idhar toh maan prafoolit hota hain.

**INTERVIEWER:** Iss programme ka kauns ka hissa aapke liye sabse upyukt raha?

Yeh exercise. Exercise se mujhe bohot accha laga. Aur yeh Priyal madam dete hai na- dance therapy- woh bhi accha laga.

**INTERVIEWER:** Iss programme ki samstha, gunvartha ka alakaan kaise karega? 1 matlab bilkul asantusht, 10 matlab bilkul santusht.

**PARTICIPANT:** Bilkul santusht.

**INTERVIEWER:** Aap number dejiye, 1 se 10 ke beech mein. 1 matlab bilkul asantusht, 10 matlab bilkul santusht.

**PARTICIPANT:** Santusht hain.

**INTERVIEWER:** Toh aap number dejiye.

**PARTICIPANT:** 9

**INTERVIEWER:** Kya aap iss programme mein sikhaye gayi cheeson ka abhi bhi abhyas karte hain?

Haan, karti hoon. Main abhi ghar pe, khaane peene ka, madam ne sikhaya na, chai nahi peene ka, aisa khane ka, woh karti hoon. Aur exercise karti hoon, joh Vipul sir ne bataya woh karti hoon. Aur doosra toh dance therapy, ghar aayega.

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Interview No.: 7

Date of Interview: 25/10/2018

Language of Interview: Hindi

**INTERVIEWER:** Kya programme join karne ke baad, Sanjeevani, aapko apne aap me koi badlaav nazr aaye?
PARTICIPANT: Bohot, bohot.

INTERVIEWER: Jaise?


INTERVIEWER: Kya aapko lagta hai ki iss programme ka koi bhi hissa aur behtar ho sakta hai?

PARTICIPANT: Yes. Aisa lagta hai ki aur kuch na naya hona chahiye, behtar. Sabka mann behla rahe. Sabko khushi milni chahiye.

INTERVIEWER: Aur yeh kaise kar sakte hai?

PARTICIPANT: Ek dusre ka dukh dekh ke, ek dusre ki help karke, madad karke. Jo bhi uska problem hai toh usko milke solve karne ka.

INTERVIEWER: Iss programme ka kaunsa hissa aapke liye personally sabse jyaada upyukt saabit hua? Jaise ki yoga ya physiotherapy, nutrition, dance.


INTERVIEWER: Achha, theek hai. Toh agar aapko iss programme ko overall rate karna ho, ek se dus ke beech me; ek matlab aap bilkul hi asantashta the programme se aur 10 matlab bilkul hi santushta .Toh aap kitna rate karoge?

PARTICIPANT: 10

INTERVIEWER: Kya aap abhi bhi programme me koi bhi sikhayi hui cheezo ka abhyaas karte ho?

PARTICIPANT: Haan karti hu. Woh jo bolte hai na khaane me. Jo kuch kuch, dance. 2 mahine se jo bhaavna thi jo hum nahi kar paaye, ab man me jo bhaavna hai woh mai karungi. Baaki bhi karungi, par jo apne man me iccha hai woh bhi karungi.
Kya iss programme me sabhaagi hone k baad aapko apne aap me koi badlaav nazarr aaye?


Achha, aur kuch?

Yoga, nutrition ka. Aur mentally bhi bohot strong ho gayi hu.

Kya aapko lagta hai ki iss programme ka koi bhi hissa aur bhi behtar ho sakta hai?

Theek hai, waise toh hi theek hai.

Achhha, toh aapke dhyaan me kuch nahi aa raha jo aur bhi behtar ho sakta hai?

Haan.

Toh programme ka kaunsa hissa aapke liye jyaada upyukt saabit hua?

Woh dieting ka jo madam seekhati thi. Usse meri body me junk food kam hua. WOh mere liye jyaada achha tha. Aur mentally.

Agar aapko iss programme ka overall quality ke baare me aise bolna ho, toh ap kaise bologe? Matlab ek se dus ke beech me. Ek agar aap bilkul asantushta the aur 10 matlab bilkul santushta the.

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INTERVIEWER Kya aap iss programme me seekhaye gayi cheezo ka abhi bhi abhyaas karte ho?


INTERVIEWER Roz karte ho?

PARTICIPANT Haan.

INTERVIEWER Aur kuch seekhaya gaya ho jo aap abhyaas karte ho?

PARTICIPANT Haan, laughing exercise, aur yoga. Aur jo dieting, agar pain start hua toh. Roz karte hai. Continue karte hai shavasan, bohot relief milta hai usse.

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Interview No.: 9

Date of Interview: 26/10/2018

Language of Interview: Hindi

INTERVIEWER Sanjeevani me participate karne ke baad, aap me kuch badlaav nazar aaye?

Toh, Sanjeevani me jaake toh mujhe bohot, mai toh roz yaad karte hoon Sanjeevani ko.

**INTERVIEWER**

Kya aapko lagta hai ko Sanjeevani ka koi bhi hissa aur behtar ho sakta hai?

**PARTICIPANT**


**INTERVIEWER**

Iss programme ka koi sa hissa jo aapke liye sabse zyada upyukt saabit hua?

**PARTICIPANT**

Woh jo class ka jo hai?

**INTERVIEWER**

Haan ji.

**PARTICIPANT**


**INTERVIEWER**

Theek hai. Agar programme ko ek se 10 beeche me aapko rate karna hoga toh aap kitne karoge? Poora programme Sanjeevani ka?

**PARTICIPANT**

10

**INTERVIEWER**

Aur kya aap iss programme me seekhayi gayi cheezo me se kisi cheez ka abhi bhi abhyaas karte ho? Diet ko chhodke.

**PARTICIPANT**

Paani me thoda pudhina daalke, kabhi methi uss tarah se, sauf, woh karti hu. Aur bus, itna. Time kidhar rehta hai. Bohot saar akaam bhi rehta hai na ghar pe.

**INTERVIEWER**

Nahi ho paata. Subah yoga rehta hai, aur meditation, woh paani peeti hu. Dhup me rakhke, paani ko addha ghanta ke liye fir waise peeti hu. Aur normal paani me daalke, kabhi dhanya patti, tulsi ka patta, aur kaise karke peeti hu.

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Interview No.: 10

Date of Interview: 29/06/2018
INTERVIEWER: Aapka naam battayengi please?

PARTICIPANT: Mera naam Parveen Ansari hai

Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein kuch badlav nazr aaya hai?

PARTICIPANT: Haan mereko accha laga.

INTERVIEWER: Accha kya badlav tha?

Main waise bhi chahti hoon ki naye naye logo se miloon thoda mereko bhi accha lage, mera mind change ho aise laga.

INTERVIEWER: Kaise change hua?

Abhi jaisa friend hain mere, family circle ke jaisa hain. Toh aise lagta hain ki mere ghar wale mereko mil gaye hain. Archana madam hain, Ruby madam hain, yeh Sanjeevani mein ake ham log toh sabh bhool jate hain. Apna sabh tension yaha pe aisa lagta hain mera pura parivaar mil gaya hain appne ko bichda hua. Toh aise bohot accha lagta hain, humlog yaha aate hain, khaana khate hain ek saath mein, jo humko karna hai hum woh bacche ban jate hain, jo karna hain woh karte hain. Kya cancer patient thi toh kya khaane ka hain, kya, matlab kaisa rehne ka style batate hain, khush raho, bacchoon ke saath mein, aapne family

INTERVIEWER: Aur aapke swabhav mein kuch badlav aaya?

Bohot badlav aaya. Pehle main bohot gussa karti thi, chid-chid karti thi, bohot matlab har log, admi se aisa lagta hain ki main naraz hoon. Lekin yahan aane ke baad mein mereko yahan pe bataya ki aisa matlab tension mat lo, gussa mat karo, khaane peene ka sabh bataya. Abh jab aake usko follow karte hain, toh uss hisab se hamara dimag bhi mera shanth rehta hain, aur bolne se pehle main sochta hoon ki main kya bolna chahti hoon. Aur agar mujhe jawab dena hota hain toh main deti hoon, nahi dena hota hain toh main haaske chup baith jati hoon. Kyunki usme mereko badlav aaya ye ki aapne energy khatam matt karo-faltu kissi ko bolke, ya gussa karke. Samne wala tumko jawab nahi de raha, hum bol reh hain toh apni energy khatam ho rahi hain. Kyun humlog apni energy khatam [inaudible]. Yeh humko Sanjeevani mein sikhaya- khaana khaane ka, kya cancer patient thi toh kya khaane ka hain, kya, matlab kaisa rehne ka style batate hain, khush raho, bacchoon ke saath mein, aapne family
ke saath mein - bohot jiye logoon ke liye abh apne liye jio. Abh hum apne liye jithe hain. Yahan pe aate hain toh aisa lagta hain humko ek bachpan mein class milti hain, jabh bachpan mein maa-baap se class milthi hain toh teacher logoon se milthi hain- abhi meri age jo hain na, 58 hain, toh mereko aisa lag raha hain ki mereko iss umar mein ake class mile toh main jaoon class mein. Khushi khushi aati hoon, shauk se aati hoon, subhe aapna oothi hoon issiliye kyunki mujhe class jaana hain. Kya abh yeh umar mein class mil rahe hain, hum enjoy karne aate hain , aur kuch nahi hain, yahan pe koyi aisa kaam nahi hain. Enjoy karte hain, khaaate, peete hain, khelte hain aur apne ghar pe jaate hain. Toh wohi sabh hum log aapna jo humko knowledge milti hain, hum bahar batate hain ki humko aisa mila. Patient log mile ya nahi patient log mile, unko khaane peene ke bare mein batatein hain, ki yeh yeh cheez khao, toh tumko age bimare se bachaaav hoega.

Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho

INTERVIEWER: sakta hain?

PARTICIPANT: Yeh toh abhi apne uske upar baat hain. Ho sakta hain, karna chahe toh.

INTERVIEWER: Kya ho sakta hain?

Nahi abhi jaisa madam ne yaha pe thoda changing kiya hain, pehle kaisa na - humlog abhi yaha pe aaj class diye, khaana banana kisak, without oil, matlab usme simple khaana aur calcium ka, takat ka , woh abhi yahan pe mereko

PARTICIPANT: change lag raha hain. Toh yeh bohot accha kiya mere hisaab se.

INTERVIEWER: Accha toh yeh change accha hain?

PARTICIPANT: Haan.

Paar ap 1 mahine mein yeh sabh therapy woh sabh kiya, yeh Fort pe gaye the, usme kuch badlav aane ka, aapko lagta hain? Ho sakta hain aur

INTERVIEWER: behtar?

Nahi waise toh matlab main joh sikhi hoon na yahan pe, mujhe toh wahi better laga hain, pehle wale se. Lekin woh agar, jaisa ki, mera toh wahi mind hain, agar doosra kissi ka kuch change karne ka mind hain toh usme main nahi bol sakti.

INTERVIEWER: Nahi aap ke liye hi batta rahe hoon.

PARTICIPANT: Mere liye toh wohi teekh tha, kyunki mere age ke hisaab se mereko bataya unhone. Aisa nahi ki Sanjeevani mein ki age ke hisaab se woh help karthe hain. Jaisa ki koyi young hain, toh uss hisaab se un log ko woh karte hain, jaisa old
hain, toh unko baithne ki suvidha hain, "baithke karo aap, khade rehke karo", jaise aapko aacha lage, waisa karo.

Iss programme ka kaunsa hissa aapke liye sabse upyukt raha hain?
Matalb yoga, physiotherapy, nutrition, aap ke liye kaunsa sabse upyukt

INTERVIEWER: sambit hain?

PARTICIPANT: Mereko toh pure acche rahe.

INTERVIEWER: Accha sab?

Sabh mereko toh usse labh ho raha hain. Mereko diabetes thi, yahan pe aake mereko maloom pada khaane peene- gud ki chai piyo, toh main gud ki chai lehti hoon, aur pani lehti hoon, garam pani, toh sabh cheez se mereko fayda hua hain. Mereko kissi cheez se maine ekek cheez ka labh li hoon yahan se. Matlab koi cheez aise choodi nahi hoon agar mereko Sanjeevani mein se joh

PARTICIPANT: matlab jitni bhi hui, maine koi cheez chodi nahi, sabh ka labh li.

ISS programme ki samstha, gunvartha aap 1 se 10 ke beech mein kaha

INTERVIEWER: deyenge?

PARTICIPANT: Main toh 10 ki 10 hi doongi.

Kya aap iss programme mein sikhaye gayi cheezon ka abhi bhi abhyas

INTERVIEWER: karte hain?

PARTICIPANT: Haan karti hoon

INTERVIEWER: Kaunsi cheezon ka?

Yoga ka karti hoon, khaane peene ka karti hoon, aur dancing sikhaya tha humko madam ne jaise ki tumhare har shaarir ka jo kissa hain, movement karta rehna chahiye. Toh woh bhi karti hoon, aur laughter karti hoon jaisa.

PARTICIPANT: Bahane bahane se zyaada tar toh main laughter karti hoon, kiss ko bhi.

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Interview No.: 11

Date of Interview: 11/06/2018

Language of Interview: Hindi
INTERVIEWER kuch badlav nazr aaya hai?

Haan mereko toh, jab mein aaya tha tab mereko utna nahi, par abhi exercise karti hoon toh mereko accha lagta hain. Toh usme mereko thoda thakani bhi mehsos ho jata hain, aur mood bhi halka ho jata hain toh usme happy bhi ho

PARTICIPANT: jati hoon.

Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho

INTERVIEWER sakta hain?

PARTICIPANT: Ho sakta hain.

Kya cheez behtar ho sakti hain? Kuch bhi aapko aise laga ki teekh nahi

INTERVIEWER tha, ya yeh better ho sakta hain?

Better ho sakta hain, kyunki nahi ho sakta hain. Insaan hi toh sablog kar rahe hai


Kya kuch aise cheez hain jo aapko accha nahi laga, ya yeh improve ho

INTERVIEWER sakta hain iss programme mein?

Yeh programme mein matlab jo yaha pe sikati hain woh mereko accha lagta hain

PARTICIPANT: aisa kuch nahi hain.

Iss programme ka kaunsa hissa aapke sabse upyukt sambit hua? Aapne bohot cheez ki iss programme mein jaise ki yoga, physiotherapy, dance

INTERVIEWER therapy, toh unme se-

PARTICIPANT: -Unme se sabse accha yoga hi laga.

INTERVIEWER Aapne idhar kaunse sessions mein bhaag liye?

PARTICIPANT: Matlab zyaada time mein yoga mein hi aati thi.

Kya aap iss programme mein sikhaye gaye cheezon ka abhi bhi abhyas karte hain?

PARTICIPANT: Haan karti hoon. Jabh time milta hain karti hoon.

INTERVIEWER Aap bata sakte hoon kaunse cheesain?

PARTICIPANT: Main daily yoga karti hoon.
INTERVIEWER Aur kuch, yoga ke alava?

PARTICIPANT: Nahi mereko utna time nahi milta hain.

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Interview No.: 12

Date of Interview: 11/06/2018

Language of Interview: Hindi

Iss programme mein sahabhagi hone ke bad kya aapko aapne aap mein

INTERVIEWER kuch badlav nazar aaye?

PARTICIPANT Matlab Sanjeevani join kiya uske baad?

Haan, jo bhi sambhav mein changes aap deekh rahe ho Sanjeevani join

INTERVIEWER karne ke baad


PARTICIPANT itna confidence ho gaya hain.
Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho

**INTERVIEWER** sakta hain?


**PARTICIPANT** kuch nahi kar sakte.

Iss programme ka kaunsa hissa aapke sabse upyukt sambit hua? Toh aap bol rahe the na, yoga hain, tapping hain, unme se sabse upkyut, sabse

**INTERVIEWER** help aapko kiss therapy ne kiya?

Sabse accha hain joh Priyal madam woh Maan Ki Baat, woh session accha laga.

**PARTICIPANT**

Kya aap iss programme mein sikhaye gayi cheezon ka abhi bhi abhyas karte hain?

Matlab jo hum log ko paani ka bataya madam ne, joh juice banena ka matlab diet ke bare mein hum karte hain. Jo tapping madam- Daisy madam aur Ruby madam bohot batate the diet ka- hum sab follow karte hain ghar mein bhi.

**PARTICIPANT** Matlab chai peene ka hain toh doodh nahi dalne ka usme.

**INTERVIEWER** Aur kuch aise cheezain hain joh aap abhi bhi kar rahe ho?

**PARTICIPANT** Yoga ke baare mein karte hain, zyaada yaad nahi rehta par kar lete hain.

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Interview No.: 13

Date of Interview: 29/06/2018

Language of Interview: Hindi
INTERVIEWER kuch badlav nazr aaye?

Sanjeevani mein aane se mujhe apne aap mein bohot badi himaat mili. Pehle mere mein itni himaat nahi thi, par bohot himaat idhar aane se mili. Aur jo bimaari se main lad rahi thi toh woh bimari se ladna sikhaya Sanjeevani walo ne. Usse main aur ladhne sikhi. Aur abhi main zyaada hi mataalb ekdum himaat se ladthi hoon, har cheez se. Sanjeevani ne hunein jeena sikhaya, khukle hasna bhi sikhaya aur jeena sikhaya aur haar jaga bole ki aap himaat se kaam karo , bhale aapko koi bhi bimari rahe hum haske nikal jaate hain bimari se. Aur Sanjeevani ne humein yoga bhi sikhaya. Hum humesha tension mein rehte the par sanjeevani jabse mili hamein bohot khushi mili. Aise laga hamein kuch,

PARTICIPANT: hamari kuch himaat mili, humari undhara ki iccha unse baat karne lage.

Kya aapko lagta hain ki iss programme ka koi bhi hissa aur behtar ho?

INTERVIEWER sakta hain?

Ho sakta hain. Iss Sanjeevani ka behtar hissa hin. Inhone jeena sikhaya ladies

PARTICIPANT: logon ko. Itni patient hain, bohot acche se sikhaya.

Prashn hain ki kya programme behtar baan sakta hain? Kya koi

INTERVIEWER improvement ho sakta hain?

Main Sanjeevani se jud ke aur patient ko waha se, matlab Tata mein jake unko batana chahti hoon ki aap bhi Sanjeevani join karo, jahan itni khushi milti hain, aap gum mein matt raho. Waha haske raho, bohot kuch sikhaya jata hain

PARTICIPANT: Sanjeevani mein.

Aur aise programme ke bare mein aapko kuch laga ki yeh behtar ko sakta

INTERVIEWER hain?


PARTICIPANT: Sanjeevani ne humein bohot kuch diya hain.

INTERVIEWER Accha. Iss programme ka kaunsah hissa aapke sabse upyukt sambit hua?

Zyaada karke humein khul ke baat karne mein zyaada help kiya. Kyunki kabhi hum muh nahi kholte the ghar mein Yeh Sanjeevani ne humein sikhaya. Yeh

PARTICIPANT: hissa humein bohot pasand aaya.

INTERVIEWER Accha iss hissa ka naam aapko batta hain?
Matlab aapni teacher se himaat se baat karo, daro maat humse. Jo tumhare dil

**PARTICIPANT:** mein woh humein bata do aap.

**Accha aur aisa kuch programme tha- jaise aapne yoga ki, dance therapy**

**INTERVIEWER** woh sab-

**PARTICIPANT:** Haan woh dance, woh m'am ka naam nahi aata mujhe.

**INTERVIEWER** Woh teekh hain.

**PARTICIPANT:** Dance walli teacher. Bohot accha. Unki jab class chalta tha, itna dance accha lagta tha, usme hum ekdum khush ho jati thi. Aur yeh jo abhi ma'am aayi thi na,

**INTERVIEWER** unka ek.

**PARTICIPANT:** takleef ah rahi hain, sahi mein gayab ho jata hain.

**Iss programme ki samstha, gunvartha ka alakaan kaise karenge? 1 matlab**

**INTERVIEWER** bilkul asantusht , 10 matlab bilkul santusht-

**PARTICIPANT:** -Pura 9.

**Kya aap iss programme mein sikhaye gayi cheezon ka abhi bhi abhyas**

**INTERVIEWER** karte hain?

**PARTICIPANT:** Karte hain.

**INTERVIEWER** Toh woh kaunse cheezain hain.

**PARTICIPANT:** hoon. Mainly dance ka aur yoga hi karti hoon.

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Interview No.: 14

Date of Interview: 11/06/2018
INTERVIEWER: Tar, ya programme madhe bhaag gehtlya pasun tumhala swatahat kahi badal distat ka?

Haan, ya programme madhe bhaag ghetylly pasun mala.....(audio is cut in between)...nantar mag maazi chemo hote. Chemo kelya nantar...mi gelyach mahinyat 2 session purna kele, nantar ek sessin maaza baaki aahe karaychach aata. Mala to purna karaychay. Ankhi nantar nantar jo course aahe 4 mahine to mala shikaychay tithe. Mala te shikayla avadnaar aahe tithe.

PARTICIPANT: Haan, ya programme madhe bhaag ghetlya pasun mala.....(audio is cut in between)...nantar mag maazi chemo hote. Chemo kelya nantar...mi gelyach mahinyat 2 session purna kele, nantar ek sessin maaza baaki aahe karaychach aata. Mala to purna karaychay. Ankhi nantar nantar jo course aahe 4 mahine to mala shikaychay tithe. Mala te shikayla avadnaar aahe tithe.

INTERVIEWER: Aani aata jo wellness programme zhala pathlya eka athawdyat....je kaay zaala ikde - yoga, therapy vagere - ajun kahi tumhala yatla kahi better karta yeil ka?

PARTICIPANT: Haan, yatla ajun mhaje shikayla avdel kahi kela tar.

INTERVIEWER: Aani aata he je kaay zaale yoga, physiotherapy, nutrition, DMT, emotional freedom technique, reflexology, ya saglyamadhla tumhala kaay vatata, tumahala kasli madat zaali ya saglyamadhun.


INTERVIEWER: Tumhi aata jar....ya programme la tumhala jar 1-10 paiki gun dyayche astil, jikde 1 cha....overall ha programme tumhala kasa vatla tyabaddal, tar 1 cha artha hoto ki tumhala ajibaat santushtata nahi milali ya programme madhna, aani 10 mhanje purna santushta, tar...

PARTICIPANT: 10
INTERVIEWER 10. Tar tumhi aata sangat hota ki ya programme madhe tumhi je kahi shiklaat te kaay tumhi ajun hi practice karta ka programme nantar.

PARTICIPANT Ho practice chaaluch aahe maazi.

INTERVIEWER Achcha. Kuthlya kuthlya goshti practice karta tumhi?


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Interview No.: 15

Date of Interview: 11/06/2018

Language of Interview: Hindi-English

INTERVIEWER Did you notice any changes in yourself after participating in this programme?

PARTICIPANT Sanjeevani programme?

INTERVIEWER Yes

PARTICIPANT Haan, mere life mein bahut changes aaye. Ek toh mera diet jo chart tha usmein changes aaye. Kyunki idhar ka jo diet chart hota hai woh, raat ka jo dinner tha woh, poori family ka hi change ho gaya. Food habit change hua hai. Phir, food habit mein mera changes hua....idhar ka diet chart, kya khana kya nahin khana...mera (inaudible) nikal gaya hai, phir maida, maida ke related jo bhi khana hai, woh cheez. Idhar humlog jabhi bhi aate the, tabhi Saneep sir aate the jo humlog ko meditation karate the; uska bahut faayda hua mereko. Meditation mein bahut, mera chemo ka...uss time bhi mera chemo continue tha. Chemo ka toh side effect tha na, usmein mujhe kuch problem nahi aaya. Kuch side effect aaya hi nahi uske baad se. Main Sanjeevani join karne ke baad chemo ka mujhe side effect aaya hi nahi. Meditaiton mein jo message karte hai usmein. Phir Bipin sir ka jo yoga karate hai, 4-8 sessionm, usmein bahut.... Kyunki mein asthma ka patient hoon, toh mera ye sab nikal gaya. Phir mujhe pehle pehle inhaler tha woh sab band ho gaya. Life mein changes bahut kuch hua, ek toh food habits
change hua, lifestyle bhi...khaana peena ka jo bhi habits hai woh bahut sara changes hua hai.

INTERVIEWER  Anything else? Any personal or mental changes or something?

PARTICIPANT  Haan mental changes bolenge toh, idhar aane ke baad bahut relax lagta hai. Sanjeevani ke entry liya na, bahut relax ho jaata hai...body relax karti hai.

INTERVIEWER  Anything else you want to add?

PARTICIPANT  That's it

INTERVIEWER  Okay. So do you think this program could be improved in any way?

PARTICIPANT  Improvement?

INTERVIEWER  It is okay as it is?

PARTICIPANT  Okay

INTERVIEWER  Do you think they could add something more? Maybe some components were not helpful for you or something?

PARTICIPANT  Beech mein main ek baar aayi thi toh bola Sandeep sir ne meditation chalu karna hai phir se. Toh bahut faayda hua.

Okay. So which aspect of the program do you think helped you the most? There was yoga, physiotherapy, DMT, EFT, reflexology, any particular modules that helped you the most?

PARTICIPANT  Diet chart jo likh ke dete hai woh bahut help karta hai. Kyunki humlog ko proper tareeke se pata hi nahi hai kya khaana hai kya nahi khaana, food habits kaisa hai.

INTERVIEWER  Anything else?


INTERVIEWER  Any other additions?
INTERVIEWER  So the diet chart and yoga are components you found most helpful for you?

PARTICIPANT  Most helpful

INTERVIEWER  On a scale of 1-10, how would you assess the overall quality of the program with 1 being not satisfactory at all and 10 is extremely satisfactory.

PARTICIPANT  Satisfactory. Extremely satisfactory

INTERVIEWER  So 10?

PARTICIPANT  Yes

INTERVIEWER  And do you still practice what you have learned in this program?

PARTICIPANT  Sorry?

INTERVIEWER  Do you still practice what you have learned in this program? Any particular aspects?

PARTICIPANT  Haan, program jo....practice toh mein karti hoon.

INTERVIEWER  What do you practice?

PARTICIPANT  Ek toh main yoga karti hoon, diet chart follow karti hoon, toh phir woh dance therapy kuch tips diya tha ma’am ne jo humlog follow karte hain. Dance therapy mein humlog kuch...khud ka ek identity, my self-consciousness, main kaun hoon, jo bhi inner hum feel karte the woh bol sakte hai, toh woh helpful laga.

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Interview No.: 16

Date of Interview: 11/06/2018

Language of Interview: Marathi-English

INTERVIEWER  Did you notice any changes in yourself after participating in the programme?
PARTICIPANT: Ithe participate kelya nantarche?

INTERVIEWER: Nantar che changes

PARTICIPANT: Thoda confidence aalay swataha madhe. Aajarpanatun baher padlyasarkha vatla mala.

INTERVIEWER: Anything else? Any physical changes? Or changes in your food preferences? Or psychological changes?

INTERVIEWER: Anything else?

INTERVIEWER: Do you think that this programme could be improved in any way? Anything particular that you did not like? Or you think that they can add something to the programme?

INTERVIEWER: Nothing particular? Okay.

INTERVIEWER: Which aspect of the programme do you think helped you the most? In this there is yoga, nutrition, DMT, EFT, and reflexology.

PARTICIPANT: Yoga

INTERVIEWER: Yoga helped you the most? Any other aspect?

PARTICIPANT: Physiotherapy

INTERVIEWER: On a scale of 1-10 how would you assess the overall quality of this programme? With 1 being not satisfactory at all and 10 being extremely satisfactory. So you can even say a number between 1 and 10.

PARTICIPANT: 1-10 madhe anka vaprun sangaycha?

INTERVIEWER: 1-10 madhe tumcha satisfaction kiti aahe? 1 is not at all satisfied and 10 s extremely satisfied. Aani tumhala 1-10 chya madhe kutat asel ki that is my level of satisfaction tumhi te pan sangu shakta.

PARTICIPANT: Erm....5

INTERVIEWER: Do you still practice what you have learnt in this programme?

PARTICIPANT: Aata kahich practice karat nahi.
Yachaat pahila prashna asa aahe ki ya program madhe sahabhaagi zalyanantar tumhala swataha madhe kaahi badal janavle ka?

Ho, badal janavle na - suruvaat tyani jevanacha vagere te teacher yaychya na, te sangitla na kaay kaay karaycha kaay nahi, aani te mi aata nehmich karte swataha.

Mhanje sakali uthun nibacha vagere paani karun te pite sakali uthlya uthlya pahila. Tyachanantar 15 mintani te garam panyamadhe halad takun te pite. Tyachamule mala aciditycha kiva dusra kuthlach asa, mhanje he vagere...cough vagere vhaycha na, asa traas ajibaat hot nahi. Purna mhanje mi normal aahe.

Ajun kahi?

Ankhi maaza te, sakali he karte na mi uthlyavar...nehmi uthlyavar pahila vyayam karte. Mhanje pahila te nimbu avgere te ghetete aani tyachanantar mi vyayam karte.

Mag tyachamule tumhala physically kiva mentally kahi vegale badal janavlet ka tumchymadhe?

Vyayam kelyamule mala jara bara vatata. Mhanje ha vagere, ekhada bhaag vagere aapla kasa ghatta hoto na aapla, aani vyayam kela ki ekdum....te ekdum normal zalyasarkha vataata, ekdum fresh vataata. Aani mi compulsory vyayam kartech. Aani mala toh karaylach pahije nahitar mala to ekdum asa ghatta zalyasarkha hota.

Ajun kahi yachamadhe add karal?

Ankhin dusra kaay...mhanje tumhi sangitlat tar mi sangen na.

Nahi, tumhala kahi je tumhala badal vatale, ki ha program samplyanantar tumhi je pan kela ya program madhe shikavlela, kiva ha program chalu astana.

Yachamadhe tyani aata jevanacha vagere program kela tyavela tynani sangitla doodh pyaycha nahi, he karaycha nahi, te karaycha nahi, te mi chaha puma 6 mahine zaale, treatment ghetyapasun mi chaha banda kela. Kadhich chaha ghet

**INTERVIEWER**
Theek ahe. Aata yachat pudhcha prashna asa aahe ki tumhala vatata ka ki ya program madhe ajun he loka kahi badal karu shaktat ajun ha program changla banvalyla, kiva ekhadi goshta hoti ki ji tumhala avadli nahi? Change karu shaktat?

**PARTICIPANT**
Asa kahi nahi...je techer loka...shikshak yayche roj, je yoga vagere ghyayche....aani mi roj meditation karte. Roj compulsory.

**INTERVIEWER**
Tumhala jar samja asa vicharla ki tumhala kahi suggestion aahe ka, ya program madhe aapan add karu shakto, tar tumhi kahi sangal?

**PARTICIPANT**

**INTERVIEWER**
Nahi, ajun kahi add karava tyani asa tumhala nahi vatat?

**PARTICIPANT**
Jari maza paay kadhi kadhi dukhayla lagla, tar ithe kelela na yoga, tar bara vatala.

**INTERVIEWER**
Mag next prashna vichaarte mi - ya program cha kuthala bhaag tumhala saglyat jasta avadla? Mhanje yoga, physiotherapy, kiva nutrition baddal tyani ji mahiti sangitli, dance aani music movement therapy hoti...

**PARTICIPANT**

**INTERVIEWER**
Aani 1-10 ya scale madhe tumhi ya program la overall kiti marks dyal?

**PARTICIPANT**
Tyachamadle 1 mhanje tumhala ajibaat avadla naahi aani 10 mhanje tumhala khup avadla. Tar overall tumhi kiti sangal? 1-10 chya madhla pan tumhi kuthala hi number sangu shakta.

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PARTICIPANT Yachamadhe...jo program zaala tyachamadhe kaay avadla?

INTERVIEWER Kiti avadla tumhala? Jar tumhi 1 mhanalat tar mhanje ajibaat nahi...

   Nahin, khup avadla. Tar ithe kaay mahitay, pahile maaze Mr. yayeche mala gheun

PARTICIPANT ikde. Aani yoga Mr. pan maaze kartat ghari, baghun. Mhanje avadla na amhala to.
   Te swataha kartat te sagla. Teacher vagere santat te sagala kartat te.

INTERVIEWER Mhanje tumhi atishay santusht ahaat?

PARTICIPANT Ho ho.

INTERVIEWER Mhanje tumhi 10 sangal?

PARTICIPANT Sangin. Ekdum changla aahe. Mhanje te shikshak vagere yetat te...tyani aankhin
   tyachat kahi add kela na, tar aankhin lokana tyachi he hol...

INTERVIEWER Aani, ya program madhe je je kaahi tumhala shikavla tyatla tumhi ajun kahi
   karta follow?

   Yoga karte, aani meditation kaayam karte. Jevanacha vagere sangitla te mi
   swatahach karte. Aani khanyamadhe mi he karat nahi...hanamadhe sangitla na tyani
   mala ki ek time machchi khaaychi aani ek time khaychi nahi...mag mi sakali ek time
   machchi khaate aani sandhyakali machchi cha fakta ras ghte, aani tyacha
   barobarach jevate. Parat machchi sandhyakali ghet nahi...ek timeach. Parat bhaaji,
   paale bhaaji vagere he sagla ghte. Tyachani pan bara vatata te....ek time machchi
   khaate na....bara vatata te sandhyakali ras aani palyachi bhaaji khaate. Masta
   vatata te.

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Interview No.: 18

Date of Interview: 11/06/2018

Language of Interview: Marathi-Hindi

INTERVIEWER So yachat pahila prashana aahe - iss program mein sahabhaagi hone ke
   baad aapko apne aap mein kuch badlaav nazar aaya?

PARTICIPANT Mereko achcha laga.
INTERVIEWER  Ajun tumhi detail madhe jevdha jamel tevdha sanga kaay changes tumhala janavle te.

PARTICIPANT  Sanjeevani changlach aahe, aani ithe aalyanantar khup changla vatata.

INTERVIEWER  Health-wise changla vatala? Mentally changla vatala?

PARTICIPANT  Mentally changala vatala...

INTERVIEWER  Kiva tumchi mental state jasta changli hoti program zalyanantar?

PARTICIPANT  Haan. Mentally changla vatala.

INTERVIEWER  Ajun kahi specific tumhala swataha madhe farak janavle asa vatala ka?

PARTICIPANT  Ekdum fresh vatayla lagla ithe aalyanatar....purna divas kasa jaycha te kalaychach nahi. Fresh vataycha. Mhanje asa ghari asiyavar tech tech tech tech dokyat asta na, ithe aalyanatar asa sagla visrayla vhaycha, aani kahich dokyat rahaycha nahi.

INTERVIEWER  Mhanje tumhala thoda mentally divert zalyasarkha vatla?

PARTICIPANT  Haan.

INTERVIEWER  Kya aapko lagta hai ki iss program ka koi hissa aur behtar ho sakta hai?

PARTICIPANT  Sab kuch hai...sagla chaan aahe.

INTERVIEWER  Ekhadi goshta ji tumhala nahi avadli, kiva ekhadi goshta ji tumhala vataka ki add karu shaktat program madhe?

PARTICIPANT  Nahi, sagla program khup chhan hota.

INTERVIEWER  Yacha nantar - iss program ka kaunsa hissa aapko sabse upayukt saabit hua?

PARTICIPANT  Tapping ani therapy....dance therapy bhi achcha laga.

INTERVIEWER  He tumhala ka avadla sangu shakta?

PARTICIPANT  Tapping mule mazya payala jara relaxed vatata...bara vatata.

INTERVIEWER  Mag he don aspects tumhala saglyat jasta avadle? Tapping aani dance...
PARTICIPANT: Aani dancing madhe kasa, aapan veglyach duniya madhe aahe...aapan ghari gelyavar he karat nahi, tyamule veglach vatata. Chaan vataycha mhanje asa.

INTERVIEWER: Okay. Iss program ki samasta gunvatta ka aakalan aap kaise karenge? 1 mhanje bilkul asantasht aani 10 mhanje bilkul santusht. Tumhi overall kasa aakalan karal yaacha?

PARTICIPANT: Santushtach aahe.

INTERVIEWER: Mag 10? Tumhi 1-10 madhla pan kuthla hi number sangu shakta tumhala tya level la vatala asel satisfaction tar.

PARTICIPANT: 10. Mhanje chaanach aahe sagala.

INTERVIEWER: Aur, kya aap iss program mein sikhayi gayi cheezon ka abhi bhi abhyas karte hai?

PARTICIPANT: Tapping karti hoon. Yoga poora nahi hota hai, lekin main thoda main karti hoon.

INTERVIEWER: Ajun kahi?

PARTICIPANT: Abhi yeh mahine mein mehamaa aaye toh itna nahi hua....

INTERVIEWER: Pan generally tumhi tapping, yoga, aani he karta?

PARTICIPANT: Diet cha he.

INTERVIEWER: Nutrition madhe tumhala je sangitlay te follow karta?

PARTICIPANT: Haan.
So the first question is - did you notice any changes in yourself after participating in the program?

Mhanje participate kelyanantarche?

Nantar che changes.

Thoda confidence aala swatahamadhe. Aajarpanatun baheer padlyasarkha vatala.

Okay. Anything else? Physical changes? Or changes in your food preferences? Or psychological changes?

Khanyapinyamadhe thodya changes aalya mazya. Mhanje kasa khaaycha, kaay khaaycha, kasa rahaycha, te sagla changes zaale.

Anything else?

Just this...

Do yoy think that this program could be improved in any way? Anything particular that you did not like, or you think maybe they could add?

Nothing.

Nothing?

Then, which aspect of the program did you think helped you the most? So in this there is physiotherapy, yoga, nutrition, DMT, EFT, and reflexology.

Yoga.

Yoga helped you the most? Any other aspect?
INTERVIEWER On a scale of 1-10 how would you assess the overall quality of this program, with 1 being not satisfactory at all and 10 is extremely satisfactory. So you can even say a number between 1 and 10.

PARTICIPANT 1 te 10 madhe anka sangaycha?

INTERVIEWER 1-10 madhe tumcha overall satisfaction kiti hota? 1 mhanje not at all satisfied aani 10 is extremely satisfied. Aani tumhala 1-10 chya madhe kutat asel ki that is my level of satisfaction tar tumhi te pan sangu shakta.

PARTICIPANT 5

INTERVIEWER 5?

INTERVIEWER Do you still practice what you have learnt in this program?

PARTICIPANT Kahich practice karat nahi.

INTERVIEWER Haan ji. Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Ho sakta hai.

INTERVIEWER Kya?


INTERVIEWER Toh bus jaisa hai waisa ..

PARTICIPANT Waisa hi theek hai.

INTERVIEWER Aur kuch daalna wagera, nikaalna?

PARTICIPANT Nikaalna toh bilkul nahi, daalna toh aur daalo, kuch bhi hai toh. Aur kuch nikaalo mat.

INTERVIEWER Aur iss programme ka kaunsa hissa aapko sabse upyukt saabit hua?

PARTICIPANT Exercise.

INTERVIEWER Exercise. Aur matlab yoga?
PARTICIPANT  Yoga.

INTERVIEWER  Aur baaki sab?

PARTICIPANT  Baaki sab bhi achha laga. Aisa kuch nahi hai.

INTERVIEWER  Aur iss programme ki samstha, gunvartha ka kya alaakan karenge? 1 se 10 par ...

PARTICIPANT  1 se 10 par? 10

INTERVIEWER  Aur kya aap iss programme me seekhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT  Haan, thoda bohot. Zyaada nahi par thoda bohot karti hu.

INTERVIEWER  Achha, kaunsi cheez?

PARTICIPANT  Yoga, diet ka karti hu. Subah jaldi uthne ka, woh karti hu. Dance therapy thoda sa, thoda sa, zyaada nahi toh time milta hai toh karti hu.

INTERVIEWER  Achha ok, thank you.

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Interview No.: 21

Date of Interview: 11/06/2018

Language of Interview: Hindi

INTERVIEWER  Aapka naam kya hai?

PARTICIPANT  Mera naam PARTICIPANT hai.

Toh iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaya hai?
Badlaav toh aaya hai Sanjeevani me aake. Kyuki diet ke baare me, apne khud ke baare me. Subah mai roz uthke yoga karti hu, walking pe jaati hu aur mujhe fresh lagta hai. Sanjeevani me toh ek prakaar ka naya Sanjeevani hi diya hai hum logo ko. Jaise Hanumaan ne Lakshman ke liye aisi Sanjeevani laayi thi na, waise hi hamare jeevan me Sanjeevani hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Hoyega toh achha hai, idhar kuch bhi hoyega na toh achha hai aur hum logo ko hamesha bulayenge toh hum log aayenge bhi. Picnic pe lekar jayenge toh aur

PARTICIPANT achha hai.

Aur toh kya matlab, bahar jaana ya aisa kuch programme me kuch aur daalna hai? Aisa kuch hai.

Sanjeevani ne 6 mahine me ek baar toh picnic nikaalna hi chahiye. Sab saath me rehta hai toh achha rehta hai. Apna tension poora nikal jaat ahai aur free mind rehte hai. Dil khul ke sab ho jaata hai idhar.

Toh iss programme ka kaunsa hissa aapko sabse upyukt saabit hua? Matlab yoga physiotherapy, nutrition, dance ya aisa kuch.

PARTICIPANT Woh hai, khaane peene ka hai, woh aur yoga ka.

INTERVIEWER Yeh dono sabse zyaada?

PARTICIPANT Zyaada, haan

Aur matlab 1 se 10, jahan 1 bilkul asantashta aur 10, bilkul santusht hona ka mahsoos, matlab anubhav.

Santasht toh hum sab me hue. Aisa nahi ki idhar aake ek me bhi hum asantesht hai. Aisa nahi hai.

INTERVIEWER Toh aap iss programme ko aap kya rating doge.

10 me se 8 toh e hi dungi mai. Ekdum achha laga. Aur khud me bohot farak raha.
INTERVIEWER  Aur kya aap iss programme me seekhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT  Karte hai, haan aur paalan bhi karte hai hum log. Yoga ka karte hai, waking par jaane ka aur khaane ka bhi karte hai.

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Interview No.: 22

Date of Interview: 11/06/2018

Language of Interview: Hindi

INTERVIEWER  Aapka naam kya hai?

PARTICIPANT  Mera naam PARTICIPANT.

INTERVIEWER  Iss programme me sabhaagi hone ke baad kya aapko apne aap me kuch badlaav nazarr aaye hai?

PARTICIPANT  Mujhe iss programme me bhaag lene ke baad, mujhe yahan se maine bohot kuch seekha hai. Matlab dieting ke baare me seekha hai, woh itna follow nahi karte magar usse mujhe thoda farak, relax hota hai. Aur yahan pe toh aisa bohot sikhaya, bohot sikhaya. Ruby Ma'am ne toh itna seekha diya ki pankh laga ke udd jaate. 1-2 session attend karo, aapko khudi samjah me aayega. Mere bole ki zuroorat hi nahi, mai toh aise hi.

INTERVIEWER  Toh aapko lagta hai ki progamme me, matlab behtar banaane ke liye kuch hai ki aisa hi theek hai?

PARTICIPANT  Nahin, nahi. Behtar toh hai, karaane ke liye hai, jaisa abhi samjho 1 se 10 aur aa jayenge toh aap kehtae ho jaayega na, aur toh, matlab patient log aur bhi achhe ho jayenge, toh isse behtar kya ho sakta hai.

INTERVIEWER  Toh matlab programme jaisa hai waisa hi achha hai?
Achha hai, bohot achha hai. Achha nahi, bohot achha hai. Mujhe toh bohot achha lagta hai, aur yahan Sanjeevani me jab bhi bulaate hai, hum log ko call aata hai toh hum baaki sab chhodke aate hai.

Um toh, iss programme ka kaunsa hissa aapke sabse upyukt saabit hua? Matlab yoga, physiotherapy, nutrition, dance, emotional freedom technique ya reflexology jo hai toh inme se kaunsa aapko sabse zyada ..

Mereko sabse diet aur yoga se. Bohot achha lagta hai. Aur usse mujhe bohot madad mila ki aur dance ka bhi aur thoda physiotherapy ka bhi. Sabse zyada mereko yoga, Sir ne bohot achha sikhaye, usse mujhe farak bhi padha hai.

Aur abhi iss programme ki savasta gunvatta ka kalan kaise karenge? Matlab ki uski overall matlab quality jo thi, programme ki, kaisa tha, woh aap kaise batayenge. 1 se 10 me se 10 out of 10 denge ya fir like 8 out of 10 denge.

10 out of 10 dungi mai toh.

Interview No.: 23
Date of Interview: 11/06/2018
Language of Interview: Hindi

INTERVIEWER Aapka naam kya hai?
PARTICIPANT PARTICIPANT.

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaya hai?

PARTICIPANT Bohot badlaav aya. Bohot.

INTERVIEWER Jaise ki?
PARTICIPANT Jaise yahan aake, yahan ke sabhi ladkiya, yahan hamare sab behen log hai, ke saath rehke mujhe itna badlaav aaya ki mai darr gayi thi ki problem ayegi. Jabhi

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?


INTERVIEWER Toh aapko lagta hai ki baat karne se .. aur baat karna chahiye aise

PARTICIPANT Aur baat karna chahiye

INTERVIEWER Aur iss programme ka kauns hissa aapko sabse upyukt saabit hua? Matlab yoga physiotherapy, nutrition ..

PARTICIPANT Yoga. Total hi, yoga, nutrition, dance therapy. Yeh poora hi, bohot-hi.

INTERVIEWER Toh aapko kya lagta hai, aapke liye sabse behtar kya hua hai?

PARTICIPANT Yoga humko bohot hi achha laga. Yoga aur dance therapy na woh. Usse woh jo unhone bataya tha woh aur sab baaki ka middle cheez sikhaya tha.

INTERVIEWER Aur matlab 1-10 lekar, aap iss poore programme ko kauns number doge?

PARTICIPANT Yoga.

INTERVIEWER Nahi matlab, iss programme ki gunwata kaise karengi. Matlab kya number dengi poore programme. 10 me se 10, ya 10 me se 9 ya kya dengi aap?
PARTICIPANT Nahi, 8 toh dungi hi.

INTERVIEWER Matlab aap bilkul santusht ke paas hai.

PARTICIPANT Bohot santusht.

INTERVIEWER Toh kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Karti hu.

INTERVIEWER Theek hai. Kaunse? Agar aap practise karte ho, toh kya kya?


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Interview No.: 24
Date of Interview: 11/06/2018
Language of Interview: Hindi

INTERVIEWER Aapka naam bataiye?

PARTICIPANT PARTICIPANT.

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaya hai?
PARTICIPANT

INTERVIEWER
Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT

INTERVIEWER

PARTICIPANT

INTERVIEWER
Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

PARTICIPANT
Nutrition ka.

INTERVIEWER
Toh kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT
Mai yoga karti hu ghar me. Khaane ka, woh nutrition ka wo sab bhi karti hu. 12 baje khaane ka, 8 baje ye raat ka khaana. Dopahar ka 12 baje. Aisa sab karti hu mai.
Interview No.: 25
Date of Interview: 11/06/2018
Language of Interview: Hindi

INTERVIEWER Did you notice any changes in yourself after participating in this programme?

Yes, I have started going out more often. I learnt about proper diet and nutrition, and how to live a better lifestyle. My interaction with everyone at Sanjeevani also taught me a lot.

PARTICIPANT

INTERVIEWER Do you think this programme could be improved in any way?

Yes. It is so far away. I have trouble traveling on the days when I am feeling weak.

PARTICIPANT

Which aspect of the programme did you think helped you the most (e.g. yoga, physiotherapy, nutrition, dance, emotional freedom technique, reflexology)?

There was a Bengai madam in Churchgate who would sing and entertain us. We would play games. It was very stress relieving. I also loved Prujal Madam's 'Man Ki Baat' activity. All the negativity would be released.

PARTICIPANT

On a scale of 1-10, how would you assess the overall quality of this programme?

10

PARTICIPANT

INTERVIEWER Do you still practice what you learnt during the programme?

Yes. Diet. I also practice yoga as much as my body allows.

PARTICIPANT

* Audio didn't record till the end, transcript based on the notes in questionnaire
Interview No.: 26
Date of Interview: 05/10/2018
Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.


PARTICIPANT Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Nahin. Kuch samajh nahi aa raha.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt sabse upyukt saabit hua?


INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Haan, abhyaas karte hai. Wohi hisaab se mai khaati hai, zyada yeh nahi karti.

INTERVIEWER Aur kuch abhyaas karte ho aap?

PARTICIPANT Woh jo bhagwan ka bataya, woh karti hai. Yoga karti hai, yoga ka jitna jamta hai woh kar leti hai.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

Matlab 1 se 10, 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?
PARTICIPANT  Meri awaaz se? Mere paas se na?

INTERVIEWER Haan, haan.

Mai 4-5 tak kar sakti hu. 10 nahi, kyuki itna toh mai attend bhi nahi karte programme. Lekin fir bhi, jitna kiya hai utna mujhe bohot mila. Aisa mujhe lagta hai.

INTERVIEWER 1 se 10 me aap kitna bol rahe hai?

Mai 5. 10 tak nahi jaa sakti kyuki itna toh maine attend nahi kiya hai Sanjeevani ka. Jo bhi kiya, woh mujhe yaad hai.

PARTICIPANT haan.

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Interview No.: 27
Date of Interview: 06/10/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazr aaye.

Haan, bohot badal gayi. Jab Sanjeevani me aaye the toh bohot negative rehti thi, yahan aakar toh aatma sammaan badha. Sab saath me rehte the aur baat karke bohot achha laga. Abhi khatam ho gaya hai toh thoda khaali lagta hai. Lekin Sanjeevani ke baad maine apni tabiyat ka pareshaan hona chhod diya. Buss ghar me thodi pareshaani ho jaati hai. Toh uska bura lagta hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behatar ho sakta hai?

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?


PARTICIPANT Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?


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Interview No.: 28

Date of Interview: 06/10/2018

Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.

den hai. Unhone hausla diya, samjhaya, bolo. Woh cheez toh mai bhul nahi sakti.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?


INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?


INTERVIEWER Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT Mai toh poore 10 dungi. Bohot achha laga. Sab bohot achhe hai,aur dhyaan rakhte hai.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?


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Interview No.: 29

Date of Interview: 06/10/2018

Language of Interview: Hindi
INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav namaz aaye.


INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?


INTERVIEWER Iss programme ka kauns hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Khaane ka bhi batate hai na. Kya khaana hai, nahi khaana hai. Matlab pehle hum log confused the ki jab beemari ho jaye aur chemo, radiation se matlab thakaan si mahsoos hoti hai. Tabhi pata nahi chalta ki apna treatment complete hone ke baad kya khaana chahiye, kya nahi khaana chahiye. Yeh class me aakar jo bhi bataya woh uska knowledge mila. Bahar se koi itna achhe se nahi batata. Yahan par mai gayi toh mera mind fresh ho gaya. Mujhe maloom ho gaya ki aise diet karne se apna sehat bhi achha rehta hai.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Mujhe jo yogasana sikhaya hai Sir me, woh mai thoda bhool jaati thi lekin jab bhi mai firse dekhi toh ab tak woh mai dhyaan me rakhti hu. Apna matlab dhyaan kaisa karna chahiye. Aur diet kaisa karna chahiye.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

INTERVIEWER Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT Sabse zyada. Sabse zyada dungi.
Interview No.: 30  
Date of Interview: 06/10/2018  
Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.

PARTICIPANT Haan, hua badlaav.

INTERVIEWER Kaise badlaav?


INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Ho sakta hai?

INTERVIEWER Kaunsa hissa?

PARTICIPANT Filhaal mere jodo me bohot weakness aa gayi hai. Toh abhi wahan jaati hu toh darr lagta hai ki kahi kami ki wajah se gir-wir toh nahi jaungi. Kamzori ki wajah se.

INTERVIEWER Theek hai, toh matlab wahan pohochne tak ka problem hai?

PARTICIPANT Haan.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Woh apna candle jala ke, aagree ko sakshi maan ke woh kiye the, shapat leh thi, woh achha laga. Aur yoga, exercise, woh bhi achha laga. Aur sab achha hai,
Sanjeevani me aake, sab fresh ho jaati thi. Jabse aai hu na, ghar par rehti hu toh aisa hota hai ki jaana chahiye wapas se.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?


INTERVIEWER Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT Mai 4.

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Interview No.: 31
Date of Interview: 09/11/2018
Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazr aayee.

PARTICIPANT Bohot aaya, fresh lagne lagi hu mai. Aur chehre par khushiya bhi aayi.Aur khush rehna chahti hu mai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Haan, sab me bohot achha laga. Aur logo ko bolenge, patient ko ki aise programme me sab ekatrit hote hai toh achha lagta hai.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Diet. Bohot upyukt hua.
INTERVIEWER 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10 dungi mai.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Haan, yoga bhi karti hu. Aur khaane waala bhi, health ke baare me bhi.

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Interview No.: 32
Date of Interview: 09/11/2018
Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazr aaye.


INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?


INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?
Diet aur yoga. Usse bohot farak padha hai. Aur Man Ki Baat, woh bhi achha tha.

Aur woh jo arts ka humko dikhaya uske through humne baat ki, woh bhi achha tha. Sab hi achha tha.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

Mai toh poora 10 dungi. Mujhe wahan se bohot achha hua. Mujhe wahan se bohot sakti mili. Jo negativity thi na, woh sab positivity me badal gayi.

Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?


Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

INTERVIEWER Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10. Mai poora santushta thi.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?


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Interview No.: 34

Date of Interview: 09/11/2018

Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazarr aaye.

PARTICIPANT Haan, confidence bohot aaya hai. Vichaar badle bohot saare, positive thinking ho gayi bohot. Matlab confidence badh gaya bohot. Matlab aisa hai ki hamare saath kisi ne bura kiya hai toh usse maaf karke, chalo theek hai, aisa, aisa kiya sab.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Haan. Time thoda kam hona chahiye. Time bohot zyada hai, 10 se lekar 4 baje tak hota hai na aapka session. Samjh lo kisi ke ghar me koi beemar hai ya kuch hai toh woh log attend nahi kar paate. Ya jiske ghar me chhota bache ho toh
woh itna time nahi de paate. Aur aisa toh kuch nahi, baaki sab bohot achha tha.
Bohot pyaar se samjhate the, doctor, teacher log. Matlab unse bohto seekha ja
sakta tha. Ki kaise rakhna chahiye aur dard ki baat koi nahi rakhni, chhod dene
ka. Woh sab seekhe hum log. Bohot achhe din dekhe humne. Ek hi baar humne
class attend kiya, humko lagta hai ki aur attend kare, aur seekhe kuch.

INTERVIEWER Iss programme ka kauns hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Meditation, yoga, aur jo doctor diet batate hai, woh sab.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise kareenge?
Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko
kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya
number denge?

PARTICIPANT 8

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Haan, woh jo yoga bataya hai aur jo doctor nediet bataya hai, woh sab karte hai.

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Interview No.: 35
Date of Interview: 10/11/2018
Language of Interview: Hindi

INTERVIEWER Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch
badlaav nazar aaye.

PARTICIPANT Haan, bohot badlaav nazar aaye. Matlab aisa lag raha hai ki haan, kabhi kabhi
mujhe bohot tension hota tha hai ki kya karna hai, jeena nahi hai, bus ho gaya, ki
ab jo mera hai yeh sab karke chale gaye toh, aisa karke mujhe kabhi kabhi feel
hota tha. Sanjeevani me jaane ke baad woh cheez nahi hai, aisa nahi hai, mujhe
jeena hai, mere akele ke liye jeena hai. Ab aisa lagta hai. Pehle jo bhi mera hai,
responsibility, woh karke bhi mujhe khud ke liye jeena hai. Abhi khul ke bolti hu
ki mujhe aisa karna hai ya mujhe waise karna hai. Aajtak itni badi ho gayi hu
lekin maine kabhi khud ke baare kabhi socha nahi. Abhi mai khul ke bolti hai ki
mujhe jeena hai, mujhe kuch karna hai, Mujhe akele bhi rehna hai, akele hai ghumna hai. Aisa Sanjeevani jaake aa gaya.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Sab hi achha tha, aisa boring toh kuch bhi nahi laga. Khaana peene ke baare me mujeh aise notice hua, jo doctor batate hai na, toh sab logo ko bohot confusion hota hai. Clear nahi hota hai, thoda usko clear batana chahiye. Jaise hum logo ko bolo ki naashta nahi karne ka, fruits lene ka, dryfruits khaane ka, ki dopahar ko lunch lene ka aur lunch me itna khaane ka; shaam ko kuch khaane ka, 6 baje kuch khaane ka. Lekin woh bohot saare log hai toh unko bohot confusion hai ki hume kya nahi khaana hai. Jyada tar log non vegetarian hai, mai bhi par mujhe itna pasand nahi toh chal jaata hai. Lekin bohot saare log non vegetarian hai, woh logo ko wohi confusion tha. Poochne ko teacher se ya doctor se hichkicha rahe the, toh uske baare me bhi thoda bohot clear karna chahiye, aisa lagta hai. Khaane peene ke baare me un log ko clarity batana chahiye, batate hai, lekin bohot saare log hai toh confusion bohot ho jaata hai. Aur clear hona chahiye.

PARTICIPANT

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Yoga, tapping aur khaane peene ka jio bole doctor. Unka bohot achha laga. Tapping se mujhe bohot faayda hua, jo bhi pain hota hai na woh tapping ke class se mujhe bohot baar, jaisa unhone bataya waisa kiya toh faayda hua. Aur yoga toh achha hi lagta hai. Aur yeh bhi batana chahiye, yoga ki class me agar teacher baar baar change hote hai toh usse bhi bohot confusion hota hai. Usme bhi likh ke dena chahiye ki aisa karna hai iske baad waisa karna hai.

PARTICIPANT

INTERVIEWER Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10 bolungi mai.

INTERVIEWER Kya aap iss programme me sikhayi gaye cheezo ka abhi bhi abhyaas karte hai?

Haan, roz yaad karti hu. Mujhe toh wapas, abhi kal se tap start hoga par mai ja nahi sakti kyuki radiation chalu hoga. Radiation complete hone ke baad wapas se join karna chahti hu.
Interview No.: 36
Date of Interview: 12/11/2018
Language of Interview: Hindi

INTERVIEWER: Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.


INTERVIEWER: Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT: Jaisa hai waisa hi theek hai, aur naahi chahiye. Jaisa hai waisa hi bohot achha hai, hum logo ko samjhte hai, samjhate hai aur hum logo ko pyaar dete hai enjoy karte. Sab batate hai, kaise rehna hai aur kaise khaana hai, sab bolte hai. Kabhi kabar lagtha hai ki hum log chhote bache baat baat kar rahe hai aur side me hamari maa hai.

INTERVIEWER: Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT: Bohot, mujhe sabse zyada faayda hua woh man ki baat se. Unhone bola tha ki jab bhi shareer me kahi bhi dard ho toh apne aap ko bolo ki mere shareer me itna dard hai fir bhi mai khush hu, fir bhi mai apne shareer se zyada pyaar karta hu, usse mujhe zyada free hua. Aisa karne se dard turant gayab ho jaata hai. Jo ma'am ne baate bolti thi, woh baate yaad aati hai.

INTERVIEWER: Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge?

PARTICIPANT: Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT: 10. Asantsuhta kabhi naahi tha. Wahan jaake naya jeevan mila, naya jeevan miita hai toh koi kya kabhi asantsuhta hota hai?
INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, haan. Yoga karti hu. Chemo khatam hua shanivaar ko, toh somvaar se kara nahi. 8 din ho gaye. Ma'am ne bola thha ki tabiyat theek nahi hogta toh nahi karne ka, baiith baiith ke karne ka. Isiliye mai kam karti hu, jaise ma'am ne bola waise karti hu.

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Interview No.: 37

Date of Interview: 10/11/2018

Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Abhi bohot positive ho gayi hu mai. Ab darr nahi lagta kisi se, apne liye jeena hai.

PARTICIPANT Bahar akele kar leti hu. Ab aage ka dekhsna hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Nahi, jo bhi madam log ne bataya, woh bohot achha laga. Aage aur kya ho sakta hai?

PARTICIPANT hai woh mujhe nahi pata. Sab kuch bohot achha hai.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Yoga, aur khaane peene ke baare me bohot kaam aaya. Sabse gayi na, radiation ho gaya thha toh haath kaam me nahi aa raha, yoga se mere liye bohot faayda hua.

PARTICIPANT hua. Bohot achha laga.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santisht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?
Haan, haan, mai sab chaalu rakhti hu. Woh subah uthke garam paani peene, subah shaam yoga aur raat me kya khaana. Kaise rehna, kya karna, follow karti hu. Sab follow karti hu.

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Interview No.: 38
Date of Interview: 26/11/2018
Language of Interview: Hindi

INTERVIEWER Did you notice any changes in yourself after participating in this programme?

PARTICIPANT Yes, now I am more careful about my diet, nutrition and well-being. I have even started going out more often.

INTERVIEWER Do you think this programme could be improved in any way?

PARTICIPANT No suggestions. Good as it is.

INTERVIEWER Which aspect of the programme did you think helped you the most (e.g. yoga, physiotherapy, nutrition, dance, emotional freedom technique ya reflexology)?

PARTICIPANT Diet was the best part for me. I was very ignorant before Sanjeevani

INTERVIEWER On a scale of 1-10, how would you assess the overall quality of this programme?

PARTICIPANT 8

INTREVIEWER Do you still practice what you learnt during the programme?

PARTICIPANT There is not a lot of time.

* Audio didn’t record till the end, transcript based on the notes in questionnaire
Interview No.: 39
Date of Interview: 26/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav
INTERVIEWER nazar aaye.

Haan badlaav nazar aaye. Rehan-sehan, khaana-peena. Firr, woh jo log batate hai, exercise aur kya bolte hai usko, nutrition wagera. Haan woh sab aur yoga-
PARTICIPANT yoga, nutrition. Aur fir woh jo dance, EFT wagera, sab kiya tha maine.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Haan, banaya jaa sakta hai. Jaise woh jo patient aate hai, unke relatives jo bhi baithte hai, unko bhi bolna chahiye. Woh (Sanjeevani) toh bolte hi hai par aur bhi
PARTICIPANT bolna chahiye, activities wagera me, usse woh bhi aur satark ho sakte hai.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Nutrition ka woh jo batate hai aur yoga.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number
INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 9

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Haan, karti hu. Yoga, nutrition, wagera sab.
Interview No.: 40
Date of Interview: 26/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazr aaye.

Haan, bohot badlaav nazr aaye. Mai khud ke ko zyada jaan-ne lagi hai. Bus ab kabh kabh tension ho jaata hai jaise aapko bola na ki peechle hafte thoda lekin mai apne aap ko zyada dhyaan dene lagi hai, mere upar. Pehle itna dhyaan nahi

PARTICIPANT deti thi.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Nahin abhi mai ja rahi waisa hi achha hai.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Wahi ki apne upar khud ko dhyaan dena chhiye, apne ko achhe se khaana peena sab, achha khaane me rehna. Yehaisa waisa wahan par bola toh woh woh sab hai,

PARTICIPANT karti mai.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number

INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, karti hai mai. Thoda sa yoga, pranayam karti thoda aur woh jo jo unhone bataya, apna haath-pao ka, sabka woh, yeh sab karti hai. Apna woh, .. , jaise

PARTICIPANT wahan par jo jo karti thi na waisa mai subah sab karti hu.
Interview No.: 41
Date of Interview: 26/11/2018
Language of Interview: Hindi

Interviewer: Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav


Interviewer: Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?
Participant: Abhi jo karte hai wohi bohot hai na. Hum log kya suggest karenge.

Interviewer: Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?
Participant: Sabhi toh hue hai. Baaki ek do ko chhodke sab hi se prerna mili hai. Mujhe toh

Interviewer: Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number
denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?
Participant: 10

Interviewer: Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?
Participant: Ji, pranayam wagera karti hu, tapping karti hu, dieting bhi karti hu.
Interview No.: 42
Date of Interview: 26/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Yes, I was calmer. I mean consciously calmer and .. Yeah, that is the only change,

PARTICIPANT consciously calmer and aware. Otherwise nahi, nothing.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

The location, washroom and all, that is bad. Otherwise it was fine. The teachers
were fab, there was lots of sympathy, positivity. Lots of encouragement. They
brought out some people's bad or whatever but they did not say ki "arey aisa

PARTICIPANT nahi waisa". Thye accepted everybody. It was beautifull conducted.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT I think EFT and dance-music.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab
1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number

INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 7

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Noo, no, no. I have been so busy, that is one thing I have to get back to.
Interview No.: 43
Date of Interview: 26/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Haan, bohot achha laga mujhe Sanjeevani aake. Koi bhi activity hoti hai, jaise
dance competition hota hai, usse hi apna jo bhi kuch dimaag me hai woh nikal

PARTICIPANT jaata hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Nahi.

INTERVIEWER Iss programme ka kauns hissa aapke liye sabse upyukta saabit hua?

PARTICIPANT Music ka achha tha.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab
1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number

INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 7

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Nahi.
Interview No.: 44
Date of Interview: 28/11/2018
Language of Interview: Hindi

**ISS programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.**

**INTERVIEWER** nazar aaye.

Bohot, bohot, bohot badlaav ho gaya hai mere me, sachi. Mujhe aise na pehle life se bohot shiqayat rehti thi, ki matlab meri life aisi kyu hai. Matlab mera beta padhta nahi tha toh mera hi bet kyu nahi padhta hai. Fir aisa bohot saari pareshaani thi jo mai aise blame karti thi. Aur fir shayad wohi stress aur uski wajah mujhe, matlab bohot stress leti thi mai. Abhi itna nahi, abhi matlab poora unhone jo kaha mujhe ki sochna nahi hai zyaada, man me vichaar nahi laana hai, achhi baate sochni hai, yeh sab mai bahar se bhi sunti thi magar inhone jo kaha matlab kaise yoga se achhi soch aur yeh sab leke aur unhone jo meditation karwaya, usse mera matab poora .. abhi mere me matlab mere me positive thinking zyaada aati hai, pehle mere me negative thinking hi zyaada rehti thi. Matlab mere man me negative hi zyaada tha. Abhi nahi, abhi sab positive hi thinking hoti hai. Bohot changes hai. Matlab Sanjeevani ke baad ek - dher mahine maine woh meditation ka bhi jo unka 4 din ka course tha wohi bhi kara, woh bhi mast tha, woh bhi bohot acchha tha. Mera life boho t change ho gaya.

**PARTICIPANT**

**INTERVIEWER** Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Behtar um mujhe shayad lag raha hai ki yoga aur jyaada thoda hona chahiye aur nahi par waise sab theek tha, balanced tha. Sab thoda thoda bhi kareenge toh bus hai, apna poora life me. Aisa mujhe lag raha hai. Aisa kuch nahi hai, sab jo hai woh balanced hai. Woh nutrition waali ma'am jo aati hai, woh barabar se seekhati hai, aur jo meditation hai aur fir woh tapping ka bhi hai, woh bhi mast seekhati hai. Mujhe toh sab balance lag raha hai, aisa kuch nahi hai. Bus mujhe woh thoda yoga ka lag raha tha, thoda zyada seekhana chahiye tha. Woh toh par
hum yahaan bhi kar sakte hai, aisa. Baaki jo important tha, woh unhone sab seekhaya.

**INTERVIEWER** Iss programme ka kauns aapke liye sabse upyukt saabit hua?

Haan mere breast ka, yeh breast cancer hai na mereko, toh matlab jo heart ka jo bhi seekhaya na, matlab yoga me jo bhi heart ka seekhaya, woh. Woh exercise bohot achhe hai. Usse mujhe faayda bhi milta hai. Fiir mera pet thoda aage hai, toh umhne pet ke thode exercise bataye, woh sab wohi mai karti hu. Matlab roz subah uthkar wohi karti hu, baaki mai kuch karti nahi hu, par mujhe ab waise aadat ho gayi hai mujhe ki owh nahi karega toh, matlab yoga nahi karungi toh mujhe fresh nahi lagta hai, waisa bhi ho gaya hai. Subah uthkar mai karti hu, baad me mera baaki ka routine chaalu ho jaata hai

**INTERVIEWER** Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

**PARTICIPANT** 10

**INTERVIEWER** Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, sab mai follow karti hu. Woh ma'am ne jo tapping seekhaya tha Daisy ma'am ne. WOh tapping karti hu mai beech beech me kabhi kabhi. Woh mera pain kabhi jyaada hota hai toh. Fir yoga mai roz follow karti hu. Aur fir Ma'am ne woh jo nutrition ka bola tha, jo diet diya tha, woh mai poora follow, waise hi follow karti hu mai. Haan bus yehi karti hu.

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**Interview No.: 45**

**Date of Interview: 28/11/2018**

**Language of Interview: Hindi**
Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav
INTERVIEWER nazr aaye.

Bohot confidence aa gaya tha. Kyuki waha yoga, sab seekhate the, dieting kaise
karni hai, yoga kaise karna hai, massage kaise karna hai, woh sab seekhate the
na, bohot confidence aa gaya hai. Tabhi toh humko lagta bhi nahi tha ki hum log
PARTICIPANT beemar hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Haan woh Sanjeevani jab bhi training deti hai na, toh, hum log na jyaada tar
Maharashtrian hai, koi Baiyaa hai, koi Bangali hai, toh English ke liye thoda sa
PARTICIPANT zyaada yeh karna chahiye.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Mujhe sabse jyada yoga. Yoga karne se fitness aata hai.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab
1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number
INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Karti hu, khud bhi karti hu. Mai abhi na kapaalbhaati karti hu aur Yamalom - vilom
PARTICIPANT karti hu mai.

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Interview No.: 46

Date of Interview: 28/11/2018

Language of Interview: Hindi
INTERVIEWER nazr aaye.

Haan. Badlaav toh aa gaya hai. Thoda active bhi ho gayi hu mai wahan jaake warna aise baiete-baiite aise hi dimaag me khayaal aata tha ki mai beemar ho

PARTICIPANT gayi.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behar ho sakta hai?

Haan, aur behar banaya ja sakta hai. Bhtar hi hai, aur banaya ja sakta hai. Woh kuch activities toh chaalu hai hi na, kuch aur agar activities mile toh zyada ho

PARTICIPANT sakta hai, behar.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Nutrition ka.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10 hi dungi mai.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, haan. Jo ma’am ne bataya tha na, palak ka juice, nimbu sharbat, nimbu ka

PARTICIPANT juice karke peena, woh sab.

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Interview No.: 47

Date of Interview: 28/11/2018

Language of Interview: Hindi

Iss programme me sabhari hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazr aaye.
Haan aye ma'am. Matlab sab ko khaane ppe jo bola ma'am waise hi kar rahi hai.

PARTICIPANT Aur jo pranayam kaise karte haim, woh bhi.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Haan, jaa sakta hai na. Aur patient aa sakte hai, aur acche se seekh sakte hai na.

PARTICIPANT Jo hai woh achhe se hi seekh hai, karate hai.

INTERVIEWER Iss programme ka kauns hissa aapke liye sabse upyukt saabit hua?

Mai udhar Sanjeevani me join kiya toh maine aisa socha hi nahi ki mujhe cancer hai. Udhar jaake sab bhul gaya. Mera tension bhi dur ho gaya. Tension. Aur mujhe

PARTICIPANT toh dance bohot achha lagta hai.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, ghar pe, khaana, nutrition ke baare me thoda karte hai, yoga karte hai aur

PARTICIPANT dance karte hai.

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Interview No.: 48
Date of Interview: 28/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Bohot zyaada. Pehle toh jeene ki umeed. Jaise aapne shayad agar mere videos dekhe hing, matlab interviews dekhe honge, jaise ki pehle bohot hi matlab jeena hi nahi tha. Aur jaise hi mera radiation khatam hua, aur Sanjeevani join kiya aur

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Behtar toh kar hi rahe hai madam, abhi yahan Lalbaug me hai na unka, pehle wahan VT me tha, tabhi bhi hum 4 mahine tak complete jaate the roz, har alternate day, toh unko saamne se humko bolna padha ki abhi aap log break lelo, naye logo ko aane do. Matlab itna utsah aur itna woh ek attachment ho gaya tha ki chhodna hi nahi chahte the, bohot. Jab maine kiya tha course, tab Shanu thi, bechari bolti thi ki please ma-beheno niklo abhi kyuki usko bhi band karke nikalna tha. Abhi bhi Sanjeevani se bohot attachment hai lekin abhi mai apne personal kaamo me bohot woh uljhi hui hu toh uske liye, nahi toh abhi Lalbaug me bhi Daksha ka bhi phone aaya tha, bataya unhone ki aana hai par maine bola ki

PARTICIPANT koshish karti hu par keh nahi sakti. Kyuki abhi mujhe job ki hi pareshaani hai.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Daisy madam aate hai na, jaise tapping seekhate hai, bohot kuch motivation hota hai unke paas. Woh bohot achha laga, usse mujhe bohot faayda hua. Daisy madam ko toh kabhi mai bhul hi nahi paungi. Unki waajah se mera pura mind clear ho gaya, poora dimaag se mere tension hi gaya.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise kareenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 9

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, tapping toh mai hamesha karti hu. Daisy madam ko toh mai nahi bhulungi mai. Unhone jo kuch seekhaya hai, woh karti hu. Fir jaise Reflexology ka hai, woh. Aur fir ek Haseena madam bhi thi woh jo khushi dete hai andar se aur jaise
creativity ya fir dukh dard jo andar se nikaalna hai, yeh jo activity hoti thi. Ashley madam, woh jab meditation jaise kuch hota hai toh jab woh sir par haath rakhti thi toh poori vibrate ho jaati thi. Apne aap aankh se paani nikalta tha. WOh bohot hi alag experience tha.

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Interview No.: 49
Date of Interview: 30/11/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.

INTERVIEWER nazar aaye.


INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT help karna chahti hu, mujhse kuch help ho jaaye.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT theek hone ke baad agar mai madad karna chahti hu, mai madad karna chahti hu aur fir mere taraf se jitna bhi ho sake, mai karna chahti hu. Theek hone ke baad agar mai help karna chahti hu, mujhse kuch help ho jaaye.

PARTICIPANT haan hua hai toh just theek ho jayega, kuch nahi hai.
class hoti thi, usme drawings hoti thi, apne mind se khud banana aur aise bohot kuch hota tha toh mujhe woh achha lagta tha. Aur ek Tapping ma'am aati thi, jab depress ho jaate the tab tapping se kaise theek ho jaye. Aur woh laughing class bhi. Bohot achha lagta tha.

**Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number deenge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number deenge?**

**INTERVIEWER** Mai toh apne taraf se toh 10 hi dungi.

**PARTICIPANT** Haan karti hu mai, follow karti hu, lekin matlab thoda dard ki wajah se bedrest ho gaya hai toh kar nahi paa rahi hu.

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Interview No.: 50

Date of Interview: 30/11/2018

Language of Interview: Hindi

**Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav nazar aaye.**

Bohot saara badlav aaya hai. Matlab bohot maine free mehsus kiya maine apne aap ko.

**INTERVIEWER** Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Haan, yoga aur behtar banaya ja sakta hai. Yoga me bohot badlaav hai. Kyuki hum jab aate hai toh bohot thoda milta hai. Yoga ke upar bohot dhyaan dena chahiye, ussi par zindagi bani hai. Baaki sab activities bhi hai, par yoga ko aur behtar karna chahiye.

**INTERVIEWER** Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?
PARTICIPANT  Wahi yoga ka aur yoga ka hi. Yoga ka hi bohot upyukt hua.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karengi? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

10 hi dungi. Maine matlab jo ghar pe nahi kiya na, woh saari activities udhar aati PARTICIAPNT thi, uske liye 10 hi number dungi.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?


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Interview No.: 51

Date of Interview: 12/12/2018

Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazr aaye.

Haan badlaav aya hai nazr, bohot aaya. Kyuki bohot saari cheeze hai na, idhar seekhne ko mili. Bohot cheeze hai na jo hum life seekhna chahte hai lekin nahi complete kiye aur time nahi mil paata hai karne ke liye, woh sab kiya. Aur zaroorat bhi rehti hai apni life me, Ikein karte nahi hai, woh sab udhar jaake PARTICIPANT samjh aaya.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Haan ho sakta hai, aur bhi behtar ho sakta hai. Woh jo log periods lete hai na, ek mahine ka, itna seekhane ka hai ek mahine ka, woh aur zyada time lenge na, ussi patient ko leke ya therapy jo 2-3 mahine ka time denge na toh waise hi continue chalta rahega na toh achha hai. Kyuki patient log bhi, koi log toh jaate bhi nahi hai

PARTICIPANT
aur kantaal karte hai, leking achha hai; patient logo ke health ke liye achha hai.
Itna zyada time woh sab seekhenge na, utna jyaada achha hai unke liye

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Sabse zyada upyukt mere liye yoga ka hissa saabit hua aur nutrition ka. Wahan par mujhe zyada, actually, khaana peene ki cheeze thi na woh bohot saari mujhe pata nahi thi ki kya khaana zarooori hai, zyada mujhe pata nahi tha, wahan jaake samjh aaya. Aur health ke liye bohot saara, matlab yoga, yahan se maine seekha

PARTICIPANT thoda bohot but wahan uske liye interest bada, yoga karne ke liye.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10 number.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan, nutrition ka jo bataya tha na, woh properly nahi kar paati, lekin jitna ho sakta hai utna karti hu. Yeh yoga ka thoda bohot mai karti hu. Abhi maine join bhi kiya yoga ka, dusri jagah par, woh karti hu. Itna nahi kar paati kyuki abhi dawaai

PARTICIPANT ka wajah se.

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Interview No.: 52
Date of Interview: 12/12/2018
Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Haan, thoda confidence bada hai. Mai sabko prerit karne ka woh swabhaav thoda

PARTICIPANT zyada aaya hai.
INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Jo thabth hum logo ne, maine toh ek saal ho gaya hai na, tab hi bol diya tha. Woh changes aa gaye, abhi toh badal bhi gaya hai, teachers bhi badal gaye hai,

PARTICIPANT sab ho gaya.

INTERVIEWER Iss programme ka kaunsahissa aapke liye sabse upyukt saabit hua?

Sab, sab, sab hisse achhe the, relaxation ka seekhate the aur yoga wagera, tapping ka seekhate the. Sab achha laga mujhe toh, koi bhi aisa nahi hai ki woh

PARTICIPANT kam aur yeh zyaada, aisa kuch bhi nahi tha.

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number

INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 9

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

Haan. Yoga wagera, thoda bohot meditation. Dance therapy. Kabhi kabhi dance

PARTICIPANT wagera ghar me aise hi, music ka.

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Interview No.: 53

Date of Interview: 12/12/2018

Language of Interview: Hindi

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Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Haan, ho gaya na, bohot asar padha mereko. Jaise yoga karne ke liye bol rahe the
na, yoga seekha, idhar jaati thi mai yoga karne ke liye bataya, churgate me, udhar mereko bheja tha Riya madam ne. Riya madam ki wajah se mereko yeh yoga

PARTICIPANT maalum padha. Mai baadme fir 1-2 mahina gayi mai, achha laga.
INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

PARTICIPANT Abhi kya banane ka.

INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

Yoga. Jaise bataya waisa hi karta hai. Fir baad me mai kya kiya, idhar mereko 
PARTICIPANT lamba padhta tha na jaane ko, churchgate me, toh mai Virar me hi jaati hu ab. 

Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 
1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number 
INTERVIEWER denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

3. 2 mahina udhar gayi thi, aur fir baad me kya, idhar ka yoga alag rehta hai. Yeh 
zyada karne ko nahi milta hai, idhar ka, idhar ka hi mereko dhyaan aata hai.

PARTICIPANT Shuruat toh mai idhar se hi kiya.

INTERVIEWER Kya aap iss programme me sikhai gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Karti hai, kabhi kabhi karti hai, dhyaan jaisa ayega. Yoga ka hi hai waise roz.

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Interview No.: 54

Date of Interview: 14/12/2018

Language of Interview: Hindi

Iss programme me sabhagi hone ke baad kya aapko apne aap me kuch badlaav

INTERVIEWER nazar aaye.

Yes, bohot kuch hai. Mujhse jeena seekhna hai aur sukh samjh aaya hai. Warna 
PARTICIPANT mai andar bohot hi kuch hua hai soch rahi thi ki kuch hua hai.

INTERVIEWER Aur kya aapko lagta hai ki iss programme ka koi hissa aur behtar ho sakta hai?

Nahi, bohot badhiya hai. Mai toh aap logo ka abhaari hu ki aap log bohot mehnat 
PARTICIPANT kar rahe hai.
INTERVIEWER Iss programme ka kaunsa hissa aapke liye sabse upyukt saabit hua?

PARTICIPANT Diet. Woh jo madam dance ka kara rhi thi, woh bhi bohot badhiya laga. Sabhi, achhi jagah hai, aisa kuch yeh nahi hai, exercise wagera hoti hai

INTERVIEWER Aur abhi iss programme ki samasta gunvatta ka aakalan kaise karenge? Matlab 1 se 10 ke scale par, 1 se 10 ke number par, aap iss programme ko kitne number denge. 10 me se 10 ki aap bilkul santusht hai ki 10 me se 8, kya number denge?

PARTICIPANT 10 hi denge.

INTERVIEWER Kya aap iss programme me sikhayi gayi cheezo ka abhi bhi abhyaas karte hai?

PARTICIPANT Yes, sugar maine kam ki hai. Gudd ka istemaal kiya hai, sugar matlab mai leti hi nahi hai. Khaana, fruits ka toh bohot hota nahi hai, maitain nahi hota. Fruits nahi kha sakte. Lekin jitna maintain hota hai, utna karti hu.