

*Some ideas for how social workers
can make use of Gandhi's heritage
(while ignoring his utopianism)*

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I think you citizens of India have a cultural advantage in that the Founding Father of your Republic was equipped with such a deep fund of insights. You benefit from having him so much in your hearts that when a big problem comes up, one of your reactions may be to ask what he might do about it if he were still here. In this talk I will suggest a few ways in which I think social workers in India can make good use of the advantage of Gandhi's cultural heritage that you have here in India.

I do take exception to some utopian tendencies in Gandhi's thinking. (For the college students attending this webinar, let me mention that the word "utopia" was invented some 400 years ago when an English statesman named Thomas More published a book in Latin with that word at the beginning of its title. The book was about the political system of an imaginary island state. The new Latin word incorporated a pun on two Greek words with the same main part but different prefixes: "*eu-topos*", which would mean 'good place' and "*ou-topos*", which would mean 'no place'. A utopia is thus an imaginary kind of (very) good place that has never existed and never will exist anywhere.)

Let me describe four examples of utopian thinking by Gandhi:

First, he aimed toward creating a “kingdom of God on Earth”. This seems to me even more unrealistic than the notion (which I think was probably imported into India from the West) that “falling-in-love” love-matches are bound to result in good marriages with everyone living happily ever after.

Another example is Gandhi’s insistence that if you take very good care of your body *and* of your thoughts, then it is certain that you will never have an illness requiring treatment by a doctor. When Gandhi said this (and he said it more than once) he neglected the role of sheer bad luck with certain diseases that do need to be treated medically. Only in a utopia would perfect behavior and constantly saintly thoughts guarantee that a bad disease can never strike you.

My third example of his utopian tendencies is that in his thinking in terms of a categorical distinction between cities (bad) and villages (good), he had an ideal of “village republics” which would be, he said, independently self-sufficient. He

knew that in some cases this ideal would be economically unrealistic, so he suggested that villages meet their need for goods from elsewhere by trading directly with each other, without letting any city folks get any money for arranging or facilitating the exchanges. I believe that direct trading between villages *could* become more feasible nowadays – with the Web and with universal secondary schooling – than it was in Gandhi’s day. I have, however, some thoughts to offer in a more radical vein of theorizing, drawing upon Fritz Schumacher’s precept (Schumacher was an economist who wrote a great book entitled *Small is Beautiful*) that food and fuel are the “primary factors” (that is, the most important of the basic factors) in a modern economy and so it would so be good to have fewer *long* hauls (using up lots of fuel) and more *short* hauls instead.

I would, for certain theoretical purposes in my economic thinking, define a “100% rural” settlement as one from which it is possible to walk to where all the food that it consumes is grown or brought in from the sea; I would derive from this notion a definition of a *completely* rural way of life (that is, one where all the food

comes from within walking distance and so none of it has to be transported on roads (or the like) and packaged and sold in shops); and I would then replace Gandhi's pastoral/urban *binary* distinction between village life and urban life with a theoretical *spectrum* ranging from '100% rural' (which I have already defined) to 'extremely urban', and with each settlement 'placed' on the spectrum according to the ratio between (1) the total cost of producing (wherever the production may be taking place) its food in fields or from water and (2) the total cost of transporting and packaging and distributing the food to the consumers in the settlement – and of disposing properly of the waste.

(Let me clarify with an imaginary example: A vegan in Antarctica surviving on tomatoes and beans flown in from Australia would be, according to this theoretical rule of thumb, living in a more urban way than are various folks of Italian descent whom I happen to know in New York and Boston and who eat, now and then, tomatoes and beans which have been grown in their own back yards.)

I have devised this bit of economic theorizing in the hope that it might be applied in the design of government programs – in the tradition of the Mahatma Gandhi Guaranteed Rural Employment Act – for alleviating the conditions of the vast 21st-century precariat which has swelled up so much in the last few decades (and I think it may swell up even more in the next few decades); I think such programs should be geared to suit settlements at *various* theoretical locations on my little spectrum – and should be designed in such a way as to incentivize village folks to **migrate** (if they feel that they have to migrate) **to nearby small towns rather than to distant mega-cities**, and to incentivize some of the people in the mega-cities to move to small towns. This would reduce the share of the nation's costs that are spent on travel and transportation rather than on inherently productive activities. I will suggest below a way in which social workers might sometimes (not all the time, just in certain cases) make use of this kind of thinking. I would like to get your feedback about that.

And now a fourth way in which I think Gandhi sometimes became utopian (apart from his ideals of a divine kingdom, of goodness guaranteeing good health, and of economically independent “village republics”) was in his praise of nonviolence. (It is why some people belittle him as a mere ‘pacifist’.) His political *satyagraha* was a way of protesting against governmental injustices. In preparing the *satyagrahis* for their courageous tasks, he would tell them that nonviolence “cannot fail”; and indeed, their courage under his leadership was vital in getting the Raj to let go of India. In a republic, however, there is a far more elaborate Gandhian challenge of building up and maintaining, insofar as possible, a “nonviolence of the strong”; and Gandhian nonviolence becomes thereby a beautiful ideal so loaded with complications that self-discipline (*swaraj*) and cooperation might, it seems to me, be more feasible notions for social workers to commend to their clients, than mere nonviolence. I think that people who are genuinely cooperating with each other, and who are seeking to practice self-discipline, are unlikely to treat each other violently.

Those are four ways in which I think Gandhi was sometimes utopian. But even so, I think that social workers can not only make very good uses of Gandhi's concept of *swaraj*, but also can fortify their work by recalling some of his healing applications of empathy (for which I'm told that an equivalent Hindi term is "*sahaanubhuti*"). Let me discuss some of these possibilities under four headings, corresponding in one way or another to the four ways in which I think we should set utopian tendencies aside and aim instead for realistic improvements.

(1) Let's start with empathy, since a reasonable definition of "God's Kingdom on Earth" might be (in my humble opinion) a society where everyone empathizes with everyone else.

I wouldn't presume to commend empathy to social workers; every one of you is probably better stocked with it than I am! But I might suggest that if in the course of advising your clients you mention, at particularly appropriate moments, that Gandhi was a man who could muster a great deal of empathy, for instance in his

famous tours of Champaran (in 1917) and of Noakhali (in 1946-47), then this historical fact about the Founder of the Republic might inspire some of your clients to cultivate empathy more than before, and the effort could be useful to them – not just by making them feel better about themselves, but also by helping them understand in which ways they can trust each other (and in which ways they can't) and thus rebuild a modicum of trust where its loss has been pivotal to their problems.

Here are a couple of additional historical facts to strengthen the point about Gandhi empathizing personally with other folks. I spent a few dozen good hours with Mahadev Desai's son, Narayan Desai, who was born in 1924 and had spent many hours in Gandhi's personal company (and published in 1992 a book entitled *Gandhi Through a Child's Eyes: An Intimate Memoir*). He used to say, when lecturing on how Gandhi had trained his *cadrés*, that an important part of it was that Gandhi would personally “share their joys and sorrows”. That bonding would remain effective even if they might then have some strong disagreements. You

may recall, for instance, that Gandhi personally nursed Subash Chandra Bose when Bose fell ill after Gandhi had sabotaged politically in 1939 Bose's tenure as head of the Congress – and then Bose in 1944 would, again and again, declare that Gandhi was the Father of the Nation. Bose clearly had a deep reservoir of trust in Gandhi notwithstanding their strong differences of opinion about what the Congress should do and how India should win her political independence.

Let me mention, however, a special point about the relationship between empathy (on the one hand) and change for the better (on the other hand). In an essay published five weeks ago in *The New York Times*, a Black American university professor is cited as saying that she “doesn't want to throw out what empathy is trying to do”, but that “empathy has to be considered in the context of institutions and [of] power”. I like her way of putting the point better than I do the Marxists' way with their characteristic slogan that “there has to be structural change”. The Marxist slogan implies that step-by-step improvements in people's conditions are useless, what we really need is a big Revolution liquidating all the

evil people, and then things will be OK. It seems to me that social work focuses on step-by-step improvements and reforms rather than on a great big revolution, and that empathy can play an important role in some of those step-by-step improvements and reforms.

(2) Coming now to the issues of health-care and people behaving responsibly with regard to their own health, I think it would be *very* worthwhile for social workers to cite, now and then especially to their *middle-class* clients, Gandhi's precepts that "The human body is both a *kuru-kshetra* and a *dharma-kshetra*; insofar as it is a *dharma-kshetra*, it is one's duty to keep it in good shape", and that in order to perform this duty we should take seriously the fact (often mentioned by Gandhi) that the "natural function" of our arms and legs is to do physical work. It is clear to me as an economist that if more and more of the nation's health-care workers' time and the government's money has to be spent on dealing with life-style diseases among the well-off, then less and less will be available to provide adequate primary health care to the poor.

I also think that social workers, in addition to dispensing heartfelt public-health advice, should urge all their clients to try to distinguish carefully between quacks and good health-care workers, to follow very carefully the prescriptions and the other advice given to them by the good ones (and to ask questions if they have any doubts), and to understand that even if these wise things are done, luck can still play a role in the health outcomes. It seems to me that all this is like being a good uncle or auntie.

Notice, however, that I have said: “*try* to distinguish carefully between quacks and good health-care workers”. It’s not a simple matter of, for instance: “MD yes, Nature-Cure no” or the other way around. It’s complicated. Let me describe a current American example. A health-care worker named Sean Conley (his first name rhymes with “dawn”) was chosen two years ago by Donald Trump to be the White House Physician, and so he is now mainly in charge of treating Mr. Trump for Covid19. He is an osteopath. Now when I was 15 years old, I spent the month of July in a small town in Vermont and fell in love there a girl there (we went so far

as to hold hands while listening to an outdoor concert of marching-band music) whose father was an osteopath. He was a lovely person (like his daughter) and he would, when I was invited to take Sunday supper with the family, give me a soothing osteopathic massage of my backbone; and in fact an osteopath might be very good for treating you if you are suffering from sciatica (that is, pain caused by compression of a spinal nerve-root in the lower back), and might also be good for for treating you for repetitive-strain injuries, such as in the last month of a pregnancy, and so on. It is true that Mr. Trump is obese and may thus have physical-discomfort problems similar to those of the last month of a pregnancy, but I feel that I received, last year in a small town in Karnataka, distinctly higher-quality treatment from an MBBS (trained at Yenepoya Medical College in Mangalore) for an infection in my leg than I would have been likely to receive from the current White House Physician.

Dr. Conley was trained at the Philadelphia College of Osteopathic Medicine. Among students applying to study medicine professionally in the USA, those whose scores in the US Medical College Admission Test (a standardized, multiple-choice, computer-based test) are percentage-wise in the mid-to-upper 90s have a good chance of getting into a first-rate medical school like the one at Harvard, whereas those whose scores are percentage-wise in the mid-60s have a good chance of getting into the Philadelphia College of Osteopathic Medicine. Shown here is a photo of Dr. Conley lying about Mr. Trump's health; he is in military service and is thus subject to orders from the Commander in Chief, i.e. the President.



(Eight medical substances are known to have been administered in the hospital to Mr. Trump (an MD remarked, “They’re throwing the kitchen sink at him”):

- an antiviral drug called Remdesivir which was developed for treatment of Ebola;
- melatonin (a sleep drug);
- famotidine (against too much acid in the tummy);
- aspirin;
- zinc;
- Vitamin D;
- an experimental cocktail of monoclonal antibodies (i.e. each of them cloned from a single white blood cell of some unique kind) sold by the Regeneron corporation, whose CEO shares financial interests with Trump; this cocktail had not been tested on people in such vulnerable condition as to require hospitalization; the corporation claims, on the basis of evidence which has not been peer-reviewed, that it appears to be effective in halting progression of COVID-19 illness in patients who do not have strong antibody responses to COVID);
- a steroid called Dexamethasone, which is known to create a sense of well-being and euphoria in many people who take it – and bursts of energy.)

Gandhi's evolving views in regard to "Nature Cure", Ayurveda and Homeopathy are traced in my little book *Gandhi on Health*, the second edition of which was published last year by the Gandhi Research Foundation; and I have some views of my own which I would be glad to share with you in the question period if you like, about the health-care situation nowadays in the USA.

A special health-care topic in regard to which Gandhi can be cited is that of how we relatively well-off folks are to be treated on our death-beds if our deaths aren't sudden. Social workers should, in my humble opinion, urge us to demand *palliative care* instead of letting a clinic try to keep us alive for a few additional lucrative (to the clinic) but miserable (to the patient) hours or days.

When Kasturba was dying, Gandhi declined to have her injected every three hours with shots of penicillin which the British had sent (by air) from London to Pune for her. Gandhi had been looking after her himself, physically, and he therefore had

clear first-hand knowledge of how very weak she had become. She died with her head on his lap, as she had wished.

Supporting evidence for the strength of Gandhi's feelings about palliative care can be found in the fact that he advocated euthanasia in cases where "recovery is out of the question" and the patient is in "the throes of agony". Gandhi said that in such cases he "would not see any violence in [deliberately] putting an end, by death, to [the patient's] suffering".

Palliative care will become an increasingly important issue as modern health-care enables more and more people to live to a very ripe old age. There is already an *Indian Journal of Palliative Care* as well as a *Global Atlas of Palliative Care at the End of Life* which is published by the World Health Organization and which lists on page 90 two Indian "collaborating centers".

(3) Let me come now, for just a moment, to my pet topic of replacing the "bad-city/good-village" dichotomy with a theoretical spectrum of settlements rated as

more-or-less urban depending on the cost of supplying food to them (*vis à vis* the cost of growing and harvesting the food). I would like to ask you experts in social work whether you think it might be worthwhile – in certain cases where a client is living in a great big city (at one end of the spectrum) or in a crop-raising village (at the other end) – to suggest the possibility of relocating to a moderate-size town not far from agriculturally productive villages (and maybe all the more suitable if one of them is the one where the client was born). I am probing here for your thoughts about this, this evening and in the next few months. I do think it's not a very good idea for so many folks in India to be travelling long distances (sometimes desperately) across the subcontinent so often as is the case nowadays; I think it would be an improvement if a lot of them took shorter trips instead.

(4) We come now to the last in my list of four ways in which I think social workers can make good use of the cultural heritage bequeathed by Gandhiji. This has to do with crowd-psychology. It is a grim historical paradox that although Gandhi

was a brilliant pioneer in the modern study of crowd-psychology (Who else could possibly have predicted, for instance, how successful the Salt March would be?), an equally brilliant but dreadfully menacing set of crowd-psychology techniques was developed by the Nazis in the second quarter of the 20th century.

It seems to me that two essential aspects of Gandhi's contribution to this matter are that the crowd and its leaders have to cultivate (on the one hand) careful regard for truth and (on the other hand) a strong modicum of *self-discipline* so that no matter how powerful the feeling of unity may become in the crowd, it won't be transformed into a violence-prone mob.

In order to understand the essential features of fascist crowd-psychology, I find it helpful to draw upon the sociologists' concept of "imagined communities". This concept is derived from the supposition that in a *real* community (as distinct from a merely imagined one), everyone knows everyone else. You can't possibly know everyone else, however, in this or that great big imagined community that you

may happen to identify yourself with: your nation, your more or less grand religion, your ethnic group, your university, and so on.

Now it seems to me that whenever a crowd is transformed by fascist manipulation into a mob, the transformation is likely to involve scapegoating an imagined community (which the members of the mob *don't* belong to) for some problem(s) due only in small part, if at all, to that other imagined community. The fascist trick is to shout that the other imagined community is threatening one which the people in the crowd belong to. That's how I would characterize fascist crowd-psychology in a nutshell.

Let me supplement these thoughts with a translation of some remarks, published 99 years ago by Sigmund Freud, about how individuals can get swept up into an appallingly stupid kind of crowd-psychological enthusiasm. He said:

A crowd is extraordinarily open to influence
and [is] credulous;
it has no critical faculty;
the improbable does not exist for it.
It thinks in images
which call one another up by association
([just] like [how] in individuals they
arise
under conditions of free fantasizing),
and which never via the use of reason
are checked
for agreement with reality.
The feelings of a crowd are always
very simple and very exaggerated.

Die Masse ist außerordentlich beeinflussbar
und leichtgläubig,
sie ist kritiklos,
das Unwahrscheinliche existiert für sie nicht.
Sie denkt in Bildern,
die einander assoziativ hervorrufen,
wie sie sich beim Einzelnen
in Zuständen des freien Phantasierens
einstellen,
und die von keiner verständigen Instanz
an der Übereinstimmung mit der Wirklichkeit
gemessen werden.
Die Gefühle der Masse sind stets
sehr einfach und sehr überschwenglich.

A crowd thus knows
neither doubt nor uncertainty.
It goes immediately to extremes;
a suspicion, [once] mentioned,
is changed by it
instantly into incontrovertible certainty;
a trace of antipathy
becomes wild hatred.
Inclined [as it is] itself to all extremes,
a crowd can, also,
be excited only by excessive stimulus.
He who wishes to produce an effect upon it
needs no logical assessment
in his arguments; [instead,] he must
paint in the strongest images, exaggerate,
and repeat the same thing again and again.

Die Masse kennt also
weder Zweifel noch Ungewißheit.
Sie geht sofort zum Äußersten,
der ausgesprochene Verdacht
wandelt sich bei ihr
sogleich in unumstößliche Gewißheit,
ein Keim von Antipathie
wird zum wilden Haß.
Selbst zu allen Extremen geneigt,
wird die Masse auch
nur durch übermäßige Reize erregt.
Wer auf sie wirken will,
bedarf keiner logischen Abmessung
seiner Argumente, er muß
in den kräftigsten Bildern malen, übertreiben
und immer das Gleiche wiederholen.

Since the crowd is
in no doubt as to
what constitutes truth or falsehood,
and is thereby conscious of
its great strength,
it is just as intolerant as
[it is] credulous *vis à vis* authority.
It respects strength, and lets itself
be only somewhat influenced
by goodness, which, for it,
signifies only a kind of weakness.
What it demands of its heroes
is stark [strength], even violence.
It wants to be ruled and oppressed,
and to fear its masters.

Da die Masse
betreffe des Wahren oder Falschen
nicht im Zweifel ist
und dabei das Bewußtsein
ihrer großen Kraft hat,
ist sie ebenso intolerant wie
autoritätsgläubig.
Sie respektiert die Kraft und läßt sich
von der Güte, die für sie
nur eine Art von Schwäche bedeutet,
nur mäßig beeinflussen.
Was sie von ihren Helden verlangt,
ist Stärke, selbst Gewalttätigkeit.
Sie will beherrscht und unterdrückt werden
und ihren Herrn fürchten.

This is, of course, not true of Gandhian crowds. They are a much better kind.

The reason why I have said so much here about fascist crowd-psychology is that I imagine you might find it useful, in your social work, to share some of these insights in detail with some of your clients by way of urging them to avoid getting swept up in the toxic ecstasy of fascist scapegoating – or by way, alas, of helping them understand a little more deeply why they themselves have been scapegoated by a fascist mob. A hopeful fact is that a lot of people who do get swept up into fascist hating become capable, later on, of coming to their senses and behaving like decent human beings. I saw it happen in Germany in the second half of the 20th century, and I know it can happen in many places, and this is a matter in regard to which social work can, in India, make use of the spiritual heritage bequeathed by Gandhi. It does seem to me, however, that the healing has to involve certain people asking for forgiveness and certain other people giving it.

Here, by way of summary, are some of the suggestions I have offered in this talk (under four headings):

Under the 1st heading (humanism without aspiring to divine perfection), I said that social workers should cultivate in their clients (and of course in themselves) the Gandhian virtues of truthfulness, empathy, wise self-discipline, and a modicum of trust with friends and colleagues – but without imagining that all these virtues could ever be achieved 100%. We just have to do the best we can.

Under the 2nd heading – health-care – I said that we middle-class folks should take very seriously, and you should urge your middle-class clients to take seriously, Gandhi’s insights that the human body is both a *kuru-kshetra* and a *dharma-kshetra*, that insofar as it is a *dharma-kshetra*, it is one's duty to keep it in good shape, and that in order to perform that duty we should all take seriously the fact that the “natural function” of our arms and legs and hands is to do some genuine physical work.

(Let me add here, by the way, that as an ecological economist, I believe that we need to do much more physical work by way of sorting our waste immediately into different categories so that the stuff can be sent to various different places for different kinds of treatment. Machines can't do that sorting at an adequate level of accuracy; intelligent human perceptions – and therefore some human muscles – have to be applied if there's ever going to be enough recycling of our waste to render human life on this planet sustainable. Certain applications of our muscle-power and brain-power together could also help reduce the overall *amount* of waste that we produce. Such uses of our personal muscle-power would be far more valuable to Humankind in the 21st century than spinning.)

Still under the 2nd heading I commended the virtues of palliative care for when people are suffering too long on their death-beds, and I mentioned Gandhi's endorsement of euthanasia under suitable circumstances. I didn't mention how Vinoba Bhave chose to die (he felt that since he had become quite feeble, the time was ripe for suicide, and so he deliberately starved himself to death, in the

serene company of some beloved companions), because I wanted to emphasize the value of palliative care for us ordinary old geezers.

Under the 3rd heading – my proposed revision of Gandhi’s binary dichotomy between village life and city life – I suggested that it might be worthwhile, in certain cases where a client’s difficulties seem to be due particularly to the fact that he or she is living a great big city – or, at the other extreme, in an insufficiently successful village – for a social worker to suggest the possibility of relocating to a moderate-size town not far from agriculturally productive villages (and maybe all the better if one of those villages is the one where the client was born).

Under the 4th heading – nonviolence and self-discipline – I suggested that social workers should teach some of their clients some analytical points about differences between potentially volatile individuals and potentially even more volatile crowds, and should of course urge their clients not to let themselves get swept up into crazy hatreds, but to focus instead on seeing things realistically and dealing constructively with their social problems.