Spiritual Health - The 4th Dimension of Health

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Abstract: This article addresses the nature of spiritual health and its profound need in today’s world, tormented with meaninglessness, stress, jealousy, resentment, arrogance and other such unpleasant states of mind and behavior. There is a craving for peace, bliss and freedom from such agony of the life condition. It is a mega challenge. A formidable pressure is discerned to redefine the meaning and interventions of public health in India. Spiritual wellness is positively linked with clinical interventions in terms of response to the treatment and prognosis. Spiritual assessment and practices needs to be a preliminary step in the clinical practices. Spiritual health is not synonymous with religion. It includes mental health and emotional health but goes beyond towards inner fulfillment, self realization, self-actualization and transcendence through cognitive, affective and behavioural domains. This era belongs substantially to the spiritual thought, literature and practice. India needs to take a lead in adopting a proactive approach of initiating spiritual health in the public health system. At present, spiritual health is mainly the domain of religious leaders in India. It is the high time that it should be urgently looked into by health professionals. There is an urgency to generate research training and material for the purpose and evolve mechanisms to integrate spiritual health in public health system of India.

Keywords: Spirituality, Self-evolution, Cognitive, Affective, Behavioural, mental health, emotional health

1. Introduction

What is Spirituality?

Religion and spirituality are not synonymous at all. There is a difference between the two. Religion is a formal institution while as spirituality does not depend on institutional norms or dogmas. Spirituality does not call for any sort of accreditation or regulatory bodies. Religion indicates planned, organized and coordinated effort to relate to the Divine. It focuses on defined morality and exercising control. Spirituality operates in private. It is intrinsic and chosen. Certain practices in religion may do act as a driving force for spirituality like compassion and charity mentioned in the leading religions of the world. One does not necessarily need to read or understand religion to be spiritual. Religion is accessible at church / mosque/gurdwara or temple etc. Spirituality is a personal way of relating to the Divine, self, people, world and the universe. Religious institutions may be discerned with doubt and apprehensions but spirituality offers autonomy from institutions and provides an open ground to contemplate, discover and explore. In religion, people have difficulty in interactions - ‘my way is right’. The role of ego, power, control, prestige and arrogant authoritarianism may act as ulterior motives of religion. Spiritual people manifest a flow of thoughts, feelings and behavior based on deep contemplation, not governed by any religious institution. Their language and expressions might vary in terms of individual, time, place and culture, yet acceptance is same in terms of distinctiveness of the people. Spirituality lies in the kind of religion about which Swami Vivevakamanda says; “religion is not in doctrines, in dogmas, nor in intellectual argumentation; it is being and becoming”.

Spiritual Intelligence and Spiritual Quotient

IQ (Logical Intelligence) is about rational, logical, rule bound thinking. EQ (Emotional Intelligence) is about associative, habit bound, pattern recognizing, emotive thinking. Spiritual Intelligence (SI) / spiritual quotient (SQ) “is about creative, insightful, rule making, rule breaking, transformative thinking” (Zohar, et. al 2000). Zohar et. al (2000) mention nine (9) characteristics of SQ/SI: Self awareness, vision and values led, the capacity to face and use adversity, to be holistic, diversity, field Independence (Courage), the tendency to ask Why?, the ability to reframe and spontaneity.

Zohar and Marshall (2002) believe that Spiritual Intelligence (SI) is “the ultimate intelligence” which allows us to live with a wider perspective by adding value and meaning to it. Pondering, understanding and answering the fundamental and philosophical questions of life assumes significance. Robert Emmons conveniently places a spiritually intelligent person much above the common crowd possessing capacity for transcendence and higher level of consciousness. Such people are believed to have competence to tolerate suffering with pious feelings and manifest behaviours such as forgiveness, spontaneous adaptability, flexibility. high self-awareness, wisdom, gratitude, humility, a capacity to use adversity, to be holistic, diversity, field Independence (Courage), the tendency to ask Why?, the ability to reframe and spontaneity.

Empirical evidence tells us that there is a phenomenon like spiritual centre in the brain which has been called the “GOD SPOT”. This spiritual centre is reported to be placed within neural connections in the temporal lobes (P. Ramachandran 1997). During the “positron emission topography” scans, these neural points got luminated during experimental studies. The experimental group was subjected to interactions on spiritual and religious issues and it was interesting to note that neural spots lighted up during the

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discussions. In another such experimental study conducted by Singer (1990) it was revealed that a neural process operates in the brain exclusively for unifying, binding and attaching meaning to our experience. Singer’s research basically brought forth the concept of “unifying neural oscillations” which is called “unitive thinking” indulging into the issues about meaning of existence. This points towards the phenomenon of spiritual quotient. Earlier to these evidences it was well known that neural tracts are serially connected in case of IQ (intelligence quotient) which drives the brain to obey rules, move step by step in a logical and rational sequence. In case of EQ (emotional quotient), clusters of neurons are connected to one another in an unorganized fashion leading to an emotionally flavoured intelligence. Spiritual intelligence could be rooted in neural oscillations.

In USA spiritual intelligence is given individually through coaching. They focus on inducing inner life skills and develop self awareness. Attempts are made to help the helpees to change their life style so that material desires do not dominate their personality but rather an integration takes place between intellectual, emotional and spiritual growth. This is believed to replace the superficial happiness with the real happiness when one becomes independent of the circumstances.

Spiritual intelligence has evolved in psychology over years of long journey. The story originates from early 20th century. A mile stone in the history of psychology was achieved when psychologists succeeded in developing instruments to measure intelligence. Now it was so easy to label people with low and high IQ’s. High IQ people demonstrated the capacity for logical problem solving. IQ primarily measures the rational and intellectual potential of people. IQ score was viewed as a panacea for dealing with various aspects of life. Higher the score of IQ, better is the intelligence. New findings in psychology during mid 1990’s pointed towards importance of emotional intelligence measured in terms of Emotional Quotient (EQ). An emotionally intelligent person has a deep insight into his feelings and also the feelings of other person. Fundamentally Speaking, EQ operates behind IQ functioning. Any impairment in emotional intelligence will have an adverse impact on rational, problem solving and logical thinking. High EQ people manifest behaviors like empathy and responding sensibly to pain and pleasure and active listening skills.

Meaning of Spiritual Health
Body and mind are inseparable. Health of the two is interlocked. Balance of the two is not only a sufficient but also a necessary condition for healthy and meaningful life. WHO in 1958, defined health not merely as the absence of illness but as physical, mental and social well being. In 1980’s other components were included like intellectual, environmental and spiritual health. All these dimensions have to operate in harmony. In the present era, spiritual health assumes significant dimensions since anxiety and emotional discomfort are on rise. There is a craving for peace and freedom from agony of the life condition. In spite of the glaring progress on all fronts, be it medicine, surgery, science and technology, infrastructure, economic prosperity, access to tremendous material comforts, there exists a lag. Happiness, restlessness, purposelessness is widely discerned. Futility syndrome prevails heavily. What for? What after? Suicides are the regular feature of National Dailies. Whither public health? It is a major challenge. A formidable pressure is discerned to redefine the meaning and interventions of public health in India.

There is a great need to heal oneself of resentment, jealousy, anger, agony of existence and death anxiety; and seek higher dimension of work. While as science focuses on objectivity, spiritual life focuses on inner self, consciousness, intuition and subjective factors. All these have a direct impact on health. “Science gets us physical comforts, spirituality brings us mental calm” (Dalai Lama 2006). Positive values, attitudes, beliefs and strength that one acquires through spiritual practices contribute to the sense of well being, physical health and happiness. Empirical evidence is available to indicate a direct relation between religious involvement, spirituality and positive health outcomes. Spiritual practices have a positive correlation with survival, low blood pressure, less remission time from depression, less number of cigarettes smoked per day per week, less severe medical illness, better quality of life, cooperativeness, lower IL - 6 levels, etc. (Bansal et. al 2003). Researches suggest a positive relation between spiritual well being / practices and positive health outcomes, greater self confidence, assertiveness and fewer symptoms of anxiety and depression. Evidence shows spiritual well - being positively related with self ratings of physical health and vitality. Spiritual wellness is positively linked with adjustment to dialysis treatment, cancer induced pain, negatively to hypertension (Hoffman 2002). Studies in USA indicate that patients and physicians would like to consider spiritual factors in the medical care including its assessment. Studies in USA indicate a positive correlation between patients’ spiritual/religious commitments and health outcomes and would also like physicians to consider these factors in their medical case. Subsequently, they have suggested spiritual assessment as a first step in including patients’ spirituality in medical practice. A formal tool called HOPE has been designed for the purpose. Here H stands for sources of hope, comfort, strength, meaning, peace, love connection; O stands for role of organized religion for the patients; P stands for personal spirituality and practices; and E stands for effects on medical care (Anandarajah, G. et. al 2001).

Lately much thought and attention has been given in academic and intellectual circles towards introducing spiritual health in the community. Improving spiritual health may not cure a disease but it does help one feel better, assume the role of a preventive measure and act as coping mechanism to deal with varied problems and challenges of life.

Spirituality is relative and experiential. Nevertheless, Spiritual health does include mental health and emotional health but goes beyond towards inner fulfillment, self realization and self –actualization. Spiritual Health (SH) means Spiritual Intelligence or spiritual quotient (SI/SQ) put
into practice. IQ (Logical Intelligence) is about rational, logical, rule bound thinking. EQ (Emotional Intelligence) is about associative, habit bound, pattern recognizing, emotive thinking. Spiritual Intelligence (SI) / spiritual quotient (SQ) “is about creative, insightful, rule making, rule breaking, transformative thinking” (Zohar, et. al 2000). Zohar et. al (2000) mention nine (9) characteristics of SQ/SI: Self awareness, vision and values led, the capacity to face and use Adversity, to be holistic, diversity, field Independence (Courage), the tendency to ask Why?, the ability to reframe and spontaneity.

Spiritual Intelligence (SI) is “the ultimate intelligence”. Spiritual Intelligence could be said to operate at three levels for making it simpler to understand: cognitive, affective and behavioral.

1) Cognitive:
It involves search for fundamental questions of existence lurking in the layers of consciousness right from childhood: why existence? Why death? Who created? What after? It tries to seek answers for existential issues, meaning of purpose, truth, inner values, thoughts and beliefs and ultimately to know the creator, liberation from material cravings and issues related to reincarnations. It also includes envision of unrealized possibilities and transcend the givens of life a sense of being a player in a larger whole, heightened consciousness and faith, craves to know the divine.

<table>
<thead>
<tr>
<th>Mental Health (MH)</th>
<th>Emotional Health (EH)</th>
<th>Spiritual Health (SH)</th>
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<tbody>
<tr>
<td>MH concerns the sense of well being</td>
<td>EH is the language of the state of MH at affective domains</td>
<td>SH does include MH &amp;EH but goes further.</td>
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<tr>
<td>Freedom from depression &amp; mental illness</td>
<td>Involves EI by which one uses, expresses, understands the feelings of others &amp; self &amp; manages them constructively.</td>
<td>Also focuses on self - evolution, self - actualization &amp; transcendence (neera et. al, 2011, 2013, 2020, 2021) in terms of who you are in relation to others &amp; yourself, enlarging consciousness, unleash creativity. They are more than thoughts, memories, emotions &amp; other mental faculties. Spiritual people are at peace with themselves.</td>
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<td>Good mental health indicates a harmony between cognitive, affective &amp; behaviour domains - - - - - a balance between thinking, feeling &amp; action.</td>
<td>EI also helps in directing strong feelings like love/hate towards inner being.</td>
<td>Focus on divine issues than obsession for material possessions. Dedication, devotion, bhakti, faith in oneself</td>
</tr>
<tr>
<td>Containing destructive feelings &amp; using positive feelings like love, anger constructively.</td>
<td>Ability to laugh, relate &amp; enjoy</td>
<td>Dealing easily with issues of death &amp; death anxiety</td>
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<td></td>
<td>Using SI, considering oneself as expression of higher reality</td>
<td>Faith, compassion, purity, charity, forgiveness, sharing, not hurting or harming, sacrificing, helping the needy, joint prayer, reflection, prayer, meditation, yoga/meditation, laughter, music, lyrics are part of spiritual practices.</td>
</tr>
<tr>
<td></td>
<td>Creativity</td>
<td>Fearlessness, strength, setting new norms</td>
</tr>
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<td></td>
<td>Using suffering</td>
<td>Not all spiritual people are religious, not all religious people are spiritual</td>
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2) Affective:
It explores the issues related to living in HIM, bliss, peace, joy, cheerfulness, tranquility, compassion, empathy, strength, fearlessness, generosity, material detachment, religious commitments, music, lyrics and laughter, art, painting, sculpture and dance, nature, perform with the feelings of absolute surrender to HIM, engaging in emotionally gratifying practices like active listening, getting healed of jealousy, resentment and death anxiety.

3) Behavioural:
Includes practicing spiritual cognitions and affects. Seeks and does activities like prayer, bhakti, yoga meditation, sacrifice, forgiveness, truthfulness, reading biographers of great spiritual philosophers and taking lessons from them, listening to discourses, altruism using spiritual resources in practical problems, use suffering and liberation from material cravings and creativity.

Much advances have been made towards the physical health interventions both in terms of measurement and treatment as well. India is no exception in that. Efforts are also enormous in containing and treating mental illness and morbidity. But very little has been done on spiritual health of people which concerns one’s quality of life by health scientists and health professionals.

2. Recommendations

This era belongs substantially to the spiritual thought, literature and practice. India needs to take a lead in adopting a proactive approach of initiating spiritual health in the public health system. At present, spiritual health is mainly the domain of religious leaders in India. It is the high time that it should be urgently looked into by health professionals. There is an urgency to generate research training and material for the purpose which could be rooted in rich Indian and oriental philosophical thought; and evolve mechanisms to integrate spiritual health in public health.
system of India. “It is unfortunate that allopathy does not define spirituality while spiritual health should be a part and parcel of normal health.” “The time is ripe for us, the white apron community, to get exposed to the scientific aspects of Eastern Philosophy, shift our approach from body to body mind and soul and start using it in our daily practice” (Aggarwal, 2008). “One could be physically ill but still be mentally happy and content. In fact physical pain can be subdued by mental calm”. (Dalai Lama, 2006). Yoga which has its roots in India 5000 years back could be inbuilt in informal and formal health systems and practice in India. Physiological studies conducted show the prophylactic, promotive and curative potentials of yoga through experimental studies. Yoga strengthens the parasympathetic tone and stability of autonomic equilibrium and the stress responses are optimized in the process. Physical performance at sub - maximal level of work and cognitive function also improve through regular yoga practice. It has demonstrated therapeutic value in control and management of hypertension, coronary artery disease and diabetics. (Selvamurthy, 2007).

An effort towards definition, measurement and training in spiritual health has been made by Bansal et al. (2003) in their study. They have made an attempt to quantify spiritual health in terms of biochemical measurements, quality of life parameters and religious activity parameters. NCERT has introduced the concept of spiritual health in the curriculum for school going children. A Cross sectional study was carried out in Govt. Medical College and hospital, sector (32), General Hospital, sector (16), Chandigarh and Community Health Centre, Manimajra. (Goel et. al 2006). The results revealed that out of 150 health personnel, 72.4% believe strongly to very strongly that spiritual dimension exists.24% of doctors and 16% of paramedics believed that spiritual dimension is the first priority in maintenance of health.73.34% doctors and 50.7 paramedics expressed the view that spiritually healthy person can cope better with illness. Similar results were revealed in a North Uttar Pradesh Study were 90% of the doctors felt the same. This also matches with the findings of two USA studies where 70% physicians reported that spiritual dimension is important in healthy subjects, diseased or terminally ill patients. 96% of physicians expressed the view that spiritual well being is important for health. (Goel et. al 2006).

Since the onset of spiritual health in India by a few professionals has already made the humble beginnings, we may take this opportunity to delve into the matter more profusely. A profound focus needs to be given in the following directions:
1) Evolve definition and indicators of spiritual health (SH) / spiritual quotient (SQ) / spiritual intelligence. (SI) through empirical interventions.
2) Develop a Spiritual Health Assessment Scale (SHAS). Many such scales are available in USA and other countries. None is available in India.
3) Evolve strategies for introducing spiritual health in Indian public health system including MBBS and MD curriculum.
4) Evolve methods of integrating spiritual health with general medical practice in and out of hospital.
5) Suggesting mechanisms, methodology and curriculum and material for orienting professionals and key persons in spiritual health training.
6) Mechanisms to roll down spiritual health training for larger public.

References