A Comparative Study of Spiritual Health Across Different Professions

Dr. Dipak Shukla	S.D. Sharma
Director Operations , Pushpawati Singhania Research Institute (Hospital), New-Delhi, India,	Emeritus Professor in Psychiatry, National Academy of Medical Sciences (NAMS) & Institute of Human Behavior and Allied Sciences,

Pragyendu	Shailendra Kumar Sharma
Asst. Professor, Applied Psychology Department, Sri Aurobindo College (Eve.) , University of Delhi ,	Asst. Professor, Applied Psychology Department, Sri Aurobindo College (Eve.), University of Delhi ,

ABSTRACT *Spiritual health has now universally been accepted as the 4th dimension of health after earlier accepted physical, mental and social dimensions, as the basic dimensions of health. It is on account of increasing awareness about wellness, which is beyond physical fitness and good mental health of individuals. People around the world have increasingly realized the need of Spiritual health to attain best possible wellness status, irrespective of being theist or atheist and irrespective of their cast, creed, nationality, sex, age etc. Health professionals as well as common masses have increasingly felt the need of spiritual health, to attain overall wellness of people. The objective of the present research study was to measure and compare Spiritual Health scores of professionals practicing six different professions, viz, Management, Medicine, Teaching, Law, Engineering and Information Technology. To compare The Spiritual Health levels of all the participants of the current study Spiritual Health Scale (SHS- 2011) developed at National Institute of Health and Family Welfare contains 114 items, 6 constructs and 3 domains was used. From the descriptive and inferential analysis of the data collected it is clear that there exists no statistically significant difference in the Spiritual Health scores of individuals practicing Management, Medicine, Law, Engineering, Teaching and Information Technology, respectively. It was also noticed that the mean scores of Doctors (Medicine category) were slightly more when compared to the other professional groups, followed by Lawyers and Management Professionals, respectively.*

Introduction

The ancient Hindu scriptures propound that human beings are composed of Spirit and matter. Known as '*Atman*,' in Sanskrit language, this spirit/ spiritual component is referred to as the 'Real Self,' while, the material layers comprise the physical body, mind and intellect. It is the physical body which perceives and acts. Mind is that which feels emotions. While, the intellect thinks, reasons, judges. These material equipments have been said to be inert and insentient, per se. *Atman*, the supreme self, is believed to lend sentiency to the equipments of the material body. Therefore, the Vedic philosophers explained humans as a composite personality with the *Atman* at the core and the body, mind and intellect enveloping it. The spirit- also referred to as the 'soul'- is considered as the life-force in reference to all living beings. Its presence or absence indicates life and death, respectively. Being similar in its nature everywhere, the spirit or the soul is expressed through the same basic features of life in every living being, viz: well defined structure & function, respiration, growth, reproduction, ingestion, metabolism, excretion, death, etc. Internally, the soul is believed to express as the deepest sense of subjectivity (ego), and externally, it is expressed as a sense of connectedness with all the creation, outside. So, soul manifests as an Inward-Outward connection at the same time, and, as the most natural phenomenon of expression, at all times. This expression is referred to as 'Spirituality' or 'Soul Consciousness' in different schools of Philosophy. This expression- which being common and natural property of the soul- is believed to create a sense of connectedness for the individual soul with all other life forms, outside the physical body. Therefore, Spirituality/ Soul consciousness is considered as a bridge between self (Ego) and the whole outside creation/ nature.

Much research has been done on what motivates people to become doctors, how medical students evaluate what makes a "good doctor" and what inspires physicians in their daily work. Likewise extensive research has looked into the communication between doctors and patients, how patients often seek doctors for multiple reasons, often other than the somatic problem they first presented with and also how doctors evaluate and seek to alleviate the burdens of their patients. However, there is limited research on the spiritual/ religious attitudes of physicans and how this may influence the way they interact with their patients. Among a sample of 1,144 US physicians, 55% would agree that their religious beliefs may influence their practice of medicine. Most of the US physicians find it appropriate to discuss Spiritual/ Religious issues "if the patient brings them up" (91%), and a large fraction encourage "patients' own Religious/ Spiritual beliefs and practices" when these issues come up (73%). A study titled 'Aspects of Spirituality in Medical Doctors and their Relation to Specific Views of Illness and Dealing with Their Patients' Individual Situation' by Bussing et al (2013) was conducted to study (a) which aspects of Spirituality are of relevance for medical doctors in a mostly secular society and (b) whether and how their spiritual/religious attitudes are related to specific views of illness, their dealing with patients' situation and finally physician's life satisfaction. Data was collected from an anonymous survey enrolling 237 medical doctors from Germany (mean age 45.7 _+ 9.6, 58% male, 42% female). It was indicated that secular forms of Spirituality scored highest while specific religious orientation had lowest scores Physicians with a

specific specialization in complimentary/ alternative medicine (CAM) or anthroposophic medicine differed from their conventional counterparts with respect to specific aspects of Spirituality; however the specific views associated with these specializations were only weakly to moderately correlated with physicians view on the meaning of illness and how they assume that they would deal with their patients' individual situation. Specific aspects of Spirituality were negatively correlated with the view of "illness as a meaningless interruption" of life, indicating physicians with a Spiritual attitude would see illness also as a chance for an "individual development" and associated with a "biographical meaning" rather than just a "useless interruption" of life. In another study titled 'Physicians' Observations and Interpretations of the Influence of Religion and Spirituality on Health' by Curlin at el (2007) examined the association between physicinas' religious characteristics and their observations of the influence of Religion/ Spirituality on health. For this purpose a cross-sectional survey was mailed to a stratified sample of 2,000 practicing US Physicians from all specialties. They were asked to estimate how often patients mention Religion/ Spirituality issues, how much Religion/ Spirituality influences health and in what ways the influence is manifested. The response rate to the survey was found to be 63%. Among these respondents 56% believed Religion/ Spirituality had much influence on health, but few (6%) believed that Religion/ Spirituality often changed "hard medical outcomes." Most physicians believed that Religion/ Spirituality (1) helps patients cope (76%), (2) gives patients a positive state of mind (75%), and (3) provides emotional and practical support via the religious community (55%). Compared with those with low religiosity, physicians with high religiosity are substantially more likely to (1) report that patients often mention Religion/ Spirituality issues (36% v/s 11%) (P<.001); (2) believed that Religion/ Spirituality strongly influence health (82% v/s 16%)(P<.001); and (3) interpret the influence of Religion/ Spirituality in positive rather than negative ways. The findings of this study lend support to the Association of American Medical Colleges recommendation that "physicians recognition of their own spirituality might affect the ways they relate to, and provide care to, patients." In a similar study titled 'Religion, Spirituality and Medicine: Psychiatrists and Other Physicians' Differing Observations, Interpretations and Clinical Approaches' by Curlin et al (2007)comparison of ways in which Psychiatrists and Non-Psychiatrists interpret the relation between Religion/ Spirituality and Health and address Religion/ Spirituality issues in clinical encounter was done. For the purpose of this enquiry the researchers mailed a survey to a stratified sample of 2,000 practicing U.S. physicians, with an oversampling of Psychiatrists. The participants were asked about their beliefs and observation regarding the relationship between Religion/ Spirituality and patient health and about the ways in which they address Religion/ Spirituality in the clinical setting. A total of 1,144 physicians completed the survey. It was found out that the Psychiatrists generally endorse positive influences of Religion/ Spirituality on health, but they are more likely than other Physicians to note that Religion/ Spirituality sometimes causes negative emotions that lead to increased patient suffering (82% v/s 44%). Compared to other physicians, Psychiatrists are more likely to encounter Religion/ Spirituality issues in clinical settings (92% v/s 74%) and they are more open to addressing Religion/ Spirituality issues with their patients (93% Psychiatrists v/s 53% other Physicians say that it is usually or always appropriate to inquire about Religion/ Spirituality). This study suggested that a vast majority of Psychiatrists appreciate the importance of Religion/ Spiritu-

ality at least at a functional level. Compared to other Physicians, Psychiatrists also appear to be more comfortable and have more experience, addressing Religion/ Spirituality concerns in clinical setting, although they recognize in some cases Religion/ Spirituality can have a negative impact on the patient's health. Psychiatrist Ggeorge Engel's biopsychosocial model for medicine recommends Psychiatrists (and other doctors) gives attention to the social and cultural dimensions of their patient's illnesses.' These findings contrast with the claim that Psychiatrists ignore the Spiritual realm.

Pursuing a career in health services is a long and demanding process. Recent researches have begun to explore the frequency and severity of burnouts among medical students and residents. It is now known that burnout among medical students and practitioners is rampant (30- 78%) and can have serious consequences, however, not all medical students and practitioners suffer burnout. In a study titled 'The relationship between Spirituality and burnout among medical students' by Amy Wachholtz and MaiLan Rogoff (2013) the relation between Spirituality (previously identified as a protective factor in coping with stress) and burnout among Medical Students was examined. The potential relationship between spiritual well-being and daily spiritual experiences as uniquely and significantly impacting ratings of burnout among medical students was explored. An internet link to an anonymous survey was sent via e-mail to medical students at a public northeastern medical school; 259/469 (55.2%) completed it. The survey included measures of Spirituality, Burn-out, psychological distress, coping, and general happiness. A Pearson- r correlation showed significant inverse correlations between measures of spirituality and measures of psychological distress/ burnout (r's ranging from -.62 to -.14' p's<.01). In contrast, a positive correlation was found between life satisfaction and spirituality (r's .53 to .12; p<.05). Using hierarchical multiple regression with demographics (Step 1), mental health variables (Step 2), and satisfaction and Adaptive Coping (Step 3), burnout remained significantly related to lower scores on both spirituality measures (FAC-IT- SP p<.00 and DSE P<.05). Students having higher levels of spiritual well-being and daily spiritual experiences described themselves as more satisfied with their life in general, while students with low scores on spiritual well-being and daily spiritual experiences had higher levels of psychological distress and burnout. It was concluded. Spirituality may therefore be a protective factor against burnout in medical students and future studies should explore potential causal relationships.

In the current study the problem formulated is "can Spiritual Health scores of a group of professionals, practicing a certain profession, vary significantly from that of those practicing other professions?" "And if yes, then, can their profession have a bearing over the same." Therefore, the objective of this study was identified as measuring and comparing Spiritual Health Levels in Different Professions wherein efforts were made to measure and compare the Spiritual Health levels of professionals working in six different professions, viz, Management, Medicine, Engineering, Teaching, Law and Information Technology.

Methods
Research Design and Sample
The current study was a comparative study following exploratory study design. It was conducted using survey method for exploring and comparing the difference in Spiritual Health levels between different professional

groups. In the current study the sample comprised of total 460 respondents (n=460). Out of this total number there were 79 Management practitioners, 87 Doctors, 43 Engineers, 98 Teachers, 95 Information Technology Professionals and 58 Lawyers. Thus, the total sample comprised of 17.17% Management practitioners, 18.91% Doctors, 9.34% Engineers, 21% Teachers, 20.65% IT Professionals and 12.60% Lawyers.

Measurement

i. Measurement of Spiritual Health:
The Spiritual Health levels of all the participants of the current study were measured using the Spiritual Health Scale (SHS- 2011) developed at National Institute of Health and Family Welfare, developed in the year 2011. The scale contains 114 items, 6 constructs and 3 domains.

ii. Procedure:
The study was conducted in two phases. In the first phase the researcher was a part of the expert committee that consulted with the team that tested and developed the Spiritual Health Scale and shared his suggestions and thoughts with the investigation team. In the second phase (the current study) the problem "can Spiritual Health scores

of a group of professionals, practicing a certain profession, vary significantly from that of those practicing other professions?" "And if yes, then, can their profession have a bearing over the same" was identified. The objective of the study was identified as "measuring and comparing Spiritual Health Levels in Different Professions" and the data was collected for the same purpose using Spiritual Health Scale (SHS-2011). This 5-point rating scale was administered to 600 professionals working in 6 different professions, viz, Management, Medicine, Engineering, Teaching, Law and Information Technology. Out of these 460 completed questionnaires were analyses with the help of descriptive and inferential statistics and correlation.

Results and Discussion
The aim of the present study titled 'Spiritual Health Levels in Different Professions- A Comparative Study' was measuring and comparing Spiritual Health Levels in different professions, namely, Management, Medicine, Engineering, Teaching, Information Technology and Law. Data for this study was collected with the help of Spiritual Health Scale (SHS-2011) and the primary data was analyses with the help of descriptive and inferential statistics.

Table 1: *Descriptive and Inferential Analysis of Spiritual Health scores in three Domains of different Professions*

Spiritual Health Domain	Profession												F-Value
	Management		Medicine		Engineer		Teacher		IT Professional		Lawyer		
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	
Self Evolution	201.36	62.54	212.35	63.374	175.73	43.16	201.73	61.62	191.94	57.03	206.27	64.04	1.622
Self- Actualization	122.51	41.20	125.08	41.55	106.93	28.65	121.27	38.91	117.91	33.72	123.22	42.33	0.757
Transcendence	32.88	11.66	33.58	11.94	24.46	10.02	32.03	11.48	31.71	11.27	33.18	12.71	1.405

NOTE: P> 0.05 *, P> 0.01 **, P> 0.001***

Upon analyzing the above findings it is clear that the mean score of Management Professionals on the domain of Self-Evolution is 201.40 and Standard Deviation is 62.54, for Doctors the mean 212.35 and standard Deviation is 63.40, for Engineers it is 175.70 and standard deviation is 43.16, for Teachers the mean score is 201.73 and standard deviation is 61.60, for the IT Professionals the mean score is 191.94 and standard deviation is 57.00, lastly for the lawyers the mean score is 206.30 and the standard deviation is 64.00 on the domain of Self-Evolution. The f –value [f (5, 454)] = 0.75. This value is not significant.

Finally, it is clear that the mean score of Management Professionals on the domain of Transcendence is 32.88 and Standard Deviation is 11.66, for Doctors the mean 33.58 and standard Deviation is 11.90, for Engineers it is 24.46 and standard deviation is 10.00, for Teachers the mean score is 32.03 and standard deviation is 11.50, for the IT Professionals the mean score is 31.71 and standard deviation is 11.27, lastly for the lawyers the mean score is 33.20 and the standard deviation is 12.70 on the domain of Transcendence. The f –value [f (5, 454)] = 1.40. This value is not significant.

Table 2: *Descriptive and Inferential Analysis of Spiritual Health Scores on Constructs in different Professions*

Spiritual Health Construct	Profession												F-Value
	Management		Medicine		Engineer		Teacher		IT Professional		Lawyer		
	Mean	Std Dev	Mean	Std Dev	Mean	Std Dev	Mean	Std Dev	Mean	Std Dev	Mean	Std Dev	

Construct	Management Mean	SD	Doctors Mean	SD	Engineers Mean	SD	Teachers Mean	SD	IT Professionals Mean	SD	Lawyers Mean	SD	f-value
Wider Perspective	164.22	49.82	172.95	49.14	142.06	34.83	163.82	48.60	157.24	46.42	168.43	50.90	1.678
Nurturance Art	37.13	14.94	39.40	15.85	33.66	11.31	37.90	14.85	34.70	12.21	37.84	15.13	1.224
Engineering from within	68.31	24.64	70.64	25.60	59.53	17.64	68.05	24.21	67.23	20.40	69.63	25.63	0.651
Deeper Meaning-Purpose of Life	54.20	18.14	54.43	17.63	47.40	12.41	53.22	16.31	50.68	14.94	53.58	18.43	0.920
Universal Love- Sublimating Jealousy	17.62	7.55	18.25	7.36	12.86	6.72	17.26	7.35	16.93	6.80	17.44	7.62	1.485
Considering Oneself as a part of the Supreme	15.26	5.68	15.33	5.78	12.60	4.11	14.76	5.53	14.77	5.78	15.74	6.07	0.896

NOTE: P> 0.05 *, P> 0.01 **, P> 0.001***

Upon analyzing the above findings it is clear that the mean score of Management Professionals on the construct of Wider Perspective is 164.22 and Standard Deviation is 49,82, for Doctors the mean 172.95 and standard Deviation is 49.14, for Engineers it is 142.06 and standard deviation is 34.83, for Teachers the mean score is 163.82 and standard deviation is 48.60, for the IT Professionals the mean score is 157.24 and standard deviation is 46.42, lastly for the lawyers the mean score is 168.43 and the standard deviation is 50.90 on the construct of Wider-Perspective. The f –value [f (5, 454)] = 1.678. This value is not significant.

It is also seen that the mean score of Management Professionals on the construct of Nurturance Art is 37.13 and Standard Deviation is 14.94, for Doctors the mean 39.40 and standard Deviation is 15.85, for Engineers it is 33.66 and standard deviation is 11.31, for Teachers the mean score is 37.90 and standard deviation is 14.85, for the IT Professionals the mean score is 34.70 and standard deviation is 12.21, lastly for the lawyers the mean score is 37.84 and the standard deviation is 15.13 on the construct of Nurturance Art. The f –value [f (5, 454)] = 1.224. This value is not significant.

It is seen that the mean score of Management Professionals on the construct of Engineering from Within is 68.31 and Standard Deviation is 24.64, for Doctors the mean 70.64 and standard Deviation is 25.60, for Engineers it is 59.53 and standard deviation is 17.64, for Teachers the mean score is 68.05 and standard deviation is 24.21, for the IT Professionals the mean score is 67.23 and standard deviation is 20.40, lastly for the lawyers the mean score is 69.63 and the standard deviation is 25.63 on the construct of Engineering from Within. The f –value [f (5, 454)] = 0.651. This value is not significant.

It was also observed that the mean score of Management Professionals on the construct of Deeper Meaning- Purpose of Life is 54.20 and Standard Deviation is 18.14, for Doctors the mean 54.43 and standard Deviation is 17.63, for Engineers it is 47.40 and standard deviation is 12.41, for Teachers the mean score is 53.22 and standard deviation is 16.31 for the IT Professionals the mean score is 50.68 and standard deviation is 14.94, lastly for the lawyers the mean score is 53.58 and the standard deviation is 18.43 on the construct of Deeper Meaning- Purpose of Life. The f –value [f (5, 454)] = 0.920. This value is not significant.

It was noted that the mean score of Management Professionals on the construct of Universal Love- Sublimation of Jealousy is 17.62 and Standard Deviation is 7.55, for Doctors the mean 18.25 and standard Deviation is 7.36, for Engineers it is 12.86 and standard deviation is 6.72, for Teachers the mean score is 17.26 and standard deviation is 7.35, for the IT Professionals the mean score is 16.93 and standard deviation is 6.80, lastly for the lawyers the mean score is 17.44 and the standard deviation is 7.62 on the construct of Universal Love- Sublimation of Jealousy. The f –value [f (5, 454)] = 1.485. This value is not significant.

Finally, it is clear that the mean score of Management Professionals on the construct of Considering ourselves as a part of the Supreme is 15.26 and Standard Deviation is 5.68, for Doctors the mean 15.33 and standard Deviation is 5.78, for Engineers it is 12.60 and standard deviation is 4.10, for Teachers the mean score is 14.76 and standard deviation is 5.53, for the IT Professionals the mean score is 14.77 and standard deviation is 5.78, lastly for the lawyers the mean score is 15.74 and the standard deviation is 6.07 on the domain of Transcendence. The f –value [f (5, 454)] = 0.896. This value is not significant.

When the aspect of slightly higher reported Spiritual Health levels of Doctors, Lawyers and Management professionals when compared to other professions, viz, Teachers, Engineers and IT Professionals was analyzed in the light of existing literature it was realized that the recent surge in the area of Mind-Body Medicine and increasing awareness

of patients and doctors alike over the aspect of Spiritual-ity, Spiritual Well-being and Spiritual Health may be at-tributed to this minor differences. Recent researches indi-cate there is an intimate relationship between Physician's spiritual and religious characteristics and their diagnosis of their patient's problem, it's treatment outcome and the overall quality of the doctor-patient relationship (Curlin et al, 2005). In comparative studies done with the aim of contrasting the treatment outcomes and reported patient-satisfaction levels between physicians who are aware of their own spiritual & religious beliefs v/z those who did not talk to their patients about their spiritual belief in the context of their illness were considerable. A recent surge in the field of Law and Medicine, appealing its practition-ers to adopt spiritually inclusive methods in the practice of these aiding professions has also brought about a rise in the awareness of those practicing these professions about their own and their consumers' spiritual beliefs as well as spiritual well being.

These are some of the findings that throw light on why certain professionals scored slightly higher than others on Spiritual Health levels. There is a scope for further research studying and examining the causes of such differences.

Conclusion

The objective of the present research study was to meas-ure and compare Spiritual Health scores of profession-als practicing six different professions, viz, Management, Medicine, Teaching, Law, Engineering and Information Technology. To compare The Spiritual Health levels of all the participants of the current study Spiritual Health Scale (SHS- 2011) developed at National Institute of Health and Family Welfare contains 114 items, 6 constructs and 3 do-mains was used.

From the descriptive and inferential analysis of the data collected it is clear that there exists no statistically signifi-cant difference in the Spiritual Health scores of individu-als practicing Management, Medicine, Law, Engineering, Teaching and Information Technology, respectively.

It was also noticed that the mean scores of Doctors (Medi-cine category) were slightly more when compared to the other professional groups, followed by Lawyers and Man-agement Professionals, respectively.

Limitations of the study

While collecting the data from the field and while analyz-ing it following limitations became apparent-

a. Considerable variations in English-language skills of the respondents.
b. Lack of understanding of spirituality-related terms re-ferred to in the questionnaire.
c. Most respondents were keen about physical fitness & mental peace. Hence their readiness and interest in re-sponding to questions related with value system & in-ternal reengineering, etc. may not be automatic.
d. Work culture variations among institutions/ organiza-tions and the study design limitation in controlling the impact of organizational culture on perceived Spiritual Health status.

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