



# Spiritual health, the fourth dimension: a public health perspective

## INTRODUCTION

Today the public health professionals are in the midst of the epidemic of non-communicable diseases, which are known to have their risk factors in the way how people live their lives. The major risk factors of lifestyle diseases identified are diet, physical inactivity and use of tobacco, alcohol and stress, among others.

A session of the United Nations (UN) Assembly, held recently, also focused on dealing with non-communicable diseases by combating ‘the globalisation of unhealthy lifestyles’.<sup>[1]</sup> In fact, the behavioural aspects of an individual considerably influence one’s diet, interest in sedentary or active life and addictions to tobacco, alcohol and other substances. At the same time, an individual’s behaviour is influenced by the society’s value system and attitudes to which people subscribe to as acceptable. Spiritual principles of the world have always emphasized on certain cognitive and behavioural set for the individuals in pursuit of health and fulfilment in life.

Bringing changes in the cognitive, affective and behavioural domain is a long and a persistent process. Each individual responds to such change based on commitment and perception of the need for such change.

Lately, much thought and attention has been given in the academic and intellectual circles about the role of spirituality and health in the community. Formidable pressure is being felt to redefine the meaning and interventions in existing health systems in this regard. Health today cannot be conceived as balanced without including the dimension of spirituality in it. The spirituality and spiritual practices have been shown to have a positive impact on many of these lifestyle diseases. Until now, the scientific community of the world has successfully established the positive role of spiritual practices and spirituality concerning the treatment of cancer, hypertension, depression and smoking.

The relation between body, mind and social dimension is no longer a debatable issue. There is a need, therefore, to summon wisdom, to use the restructured cognitive-behavioural manifesto in health and disease before long. Certainly, a call has come to sweat our brows and marshal our

strength to go beyond the existing health triangle of physical, mental and social dimensions in dealing with the health of communities. There is an impending necessity to reframe the statement in the direction of exploring the fourth dimension of health – the Spiritual Well Being of individuals. In a study<sup>[2]</sup> on spiritual health – ‘defining and measuring the 4<sup>th</sup> dimension of health’, spiritual health has been defined as a state of being where an individual is able to deal with day-to-day life issues in a manner that leads to the realization of one’s full potential, meaning and purpose of life and fulfilment from within. Such a state of being is attainable through self-evolution, self-actualisation and transcendence. Existing literature reveals that spirituality broadly focuses on being deeply involved in day-to-day activities of the world, at the same time being detached, where there is a continuous effort for developing universality of love, compassion and equanimity to replace anger, jealousy, ego and hatred, resulting in utilization of one’s abilities to the fullest and even transcending beyond that. It unfolds the process of ‘Becoming’ to ‘Being’ and extending ‘Beyond’ to attain fullest positive health.

## DISCUSSION

Rahul *et al.*<sup>[3]</sup> in their cross-sectional study on ‘Spirituality and health: A knowledge, attitude and practice study among doctors of North India’, found that 65.65% had a strong or very strong belief in the spiritual dimension of health; 55.22% believed in the preventive role of spirituality; 80% believed in the curative role of spirituality and a similar proportion held the view that spirituality has an important role in day-to-day patient care and 92.5% wanted to know more about the scientific work being done in this field. Regarding the role of spiritual dimension of health in preventing and curing of diseases, 55.22% of the doctors opined that a spiritual person falls ill less frequently. A large majority (87.39%) also believed that a spiritual person copes better with illness, and 80% believed that they recover faster. The most significant finding was that 93.48% of the doctors believe that a spiritual person deals better with stress, and 81.74% felt that a spiritual person faces or deals better with death. Some of the physicians do consider these disease causing factors in their medical care practice. Subsequently, they have suggested spiritual health

assessment as a first step in including patients' spirituality in medical care practice. A formal tool called HOPE has been designed for the purpose. In this acronym H stands for sources of hope, comfort, strength, meaning, peace and love connections. The O stands for role of organized spiritual or religious practices for patients. The P stands for personal spirituality and practices and E stands for effects on medical care.<sup>[4]</sup> Spiritual health and its correlation with various lifestyle diseases strongly suggest designing interventions for corrective actions, which would likely go a long way in reducing the burden of lifestyle diseases.

Acceptable spiritual practices have a positive correlation with survival, reduction of high blood pressure, less remission time from depression, reduced number of cigarettes smoked per day per week and lowered severe medical illness. Instead, better quality of life, cooperativeness and lower inter-leukine-6 levels.<sup>[5]</sup> King *et al.*,<sup>[6]</sup> in a research study, revealed that people who possess good spiritual beliefs tend to cope with the death of a close relative or friend better and fully in comparison to non-believers. Spirituality dilutes the grieving process. Such beliefs, in spite of the fact whether one follows the religious practices or not, do help in recovering from tragedies. This is confirmed by the following quote 'We are merely saying that spiritual beliefs appear to play a role in how people grieve and therefore should be taken into account in their overall care'. Such empirical evidences propel one to integrate physical, mental, social and spiritual dimensions for better health outcome for the patients. For the success of this unification and endeavour, it seems necessary to take note of some universally proclaimed practices termed as spiritual to create an integral transformation and lasting heightened sense of wellbeing.

Spirituality needs to be demystified by cultivating those desired spiritual practices and temperaments, which drives individuals to ensure optimum health, fulfilment, productivity and creativity.

It is a myth when people tend to associate spirituality with gloom and 'kill-Joy' approach. Based on the Sharpio<sup>[7]</sup> study, spirituality is viewed as being cheerful, being authentically and meaningfully involved in day-to-day activities, appreciating mesmerizing poetry, music and art; natures' exhilarating charm, which are the qualities beyond mundane. It echoes its voice for being away from comparisons, jealousy, ego, anger deceit and greed. It refers to exploring self in relation to outer world and, contributing to the flowing stream of human culture in whatever small way. For healing the self it is essential that jealousy, envy and hatred in the inner self be done away with. Instead, people need to embrace spiritual values of involvement with detachment, truth, love, forgiving themselves and others. Often the disease causing factors start within the mind, and they quickly manifest in the

body, becoming a stiff shoulder, a sluggish liver, cancer or other illnesses. However, connection with one's deeper self enables individuals to experience meaningful spirituality that in essence contributes to healing in the physical, mental and social dimensions.

One may contest that spiritual health does not cure a disease, but it surely helps taking control of one's behaviours and lifestyle choices, which may act like an immunization in clinical science. It does help to make people feel better about them, assume the role of a preventive intervention. It acts as an invincible coping mechanism to deal with varied problems, challenges and lead a meaningful, creative and fulfilled life. According to Dossey,<sup>[8]</sup> if modern medicine is truly to be a healing art, it must embrace three ideas it has, too long, ignored. It must address not only people's bodies, but also their minds and spirits as well. It must deal not only with the mechanism of illness, but also with its meaning to people's daily lives. It must recognize that power to heal others and be healed need to extend beyond the physical dimension.<sup>[8]</sup> The health professionals, however, must carve out a path for empirical investigations on spiritual health, its measurement and subsequently to be applied in various health and other settings.

## CONCLUSIONS

Introspection and reflection are the invincible cognitive and behavioural tools. Today, public health professionals have hardly any choice but to use these, perhaps much more than ever before. The need of the hour is to think divergently, modify the self-talk, restructure the attitudes and be open. Time has come for a need to discern and manage health beyond the health triangle and be inclusive of the 4<sup>th</sup> dimension of health, that is, the spiritual dimension.

Unrelenting efforts are required to take a journey within and catch the rhythm, melody and sparks of one's inner self. Health professionals need to think out of the box and take a lead. An invincible pressure is there to adopt a proactive approach towards this 4<sup>th</sup> dimension of health. Time has come when the health professionals globally need to delve into the matter more profusely and give a profound focus in the direction of introducing spiritual health for overall care. When an individual is tormented with stress, lifestyle syndromes, disorders and diseases; there is a profound need to integrate wholesome preventive, diagnostic and rehabilitative health interventions inclusive of spiritual health. This can be practiced by clinics, hospitals, psychotherapeutic centres, embracing good spiritual practices for better health outcome, higher quality of life and reduction of economic burden on governments.

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## REFERENCES

1. Canavan Neil. UN General Assembly urges action on non-communicable diseases. September 21, 2011. The Heart Org. Available from: <http://www.theheart.org/article/1282505.do> [Last accessed on 2013 Apr 26].
2. Dhar N, Chaturvedi S, Nandan D. Spiritual health scale 2011: Defining and measuring 4<sup>th</sup> dimension of health. *Indian J Community Med* 2011;36:275-82.
3. Bansal R, Maroof AK, Parashar P, Pant B. Spirituality and health: A knowledge, attitude and practice study among doctors of North India. *Spirituality and Health International*, 2008;9:263-9.
4. Anandarajah G, Hight E. Spirituality and medical practice: Using HOPE questions as a practical tool for spiritual assessment. *Am Fam Physician* 2001;63:81-9.
5. Bansal AK, Sharma SD. Can spiritual health be quantified: A simple idea. Abstract, International Conference on Statistics, Combinatorics and related areas. University of Southern Maine. Portland, ME, USA, 2003 Oct; 3-5. Available from: <http://atlas-conferences.com/c/a/k/p/65.htm> [Last accessed on 2013 Apr 26].
6. Walsh K, King M, Jones L, Tookman A, Blizard R. Spiritual belief may affect outcome of bereavement: Prospective study. *BMJ* 2002;324:1551.
7. Sharpio D. *Your body speaks your mind*. Colorado: Sounds True; 2006.
8. Dossey L. *Healing beyond the body: Medicine and the infinite reach of the mind*. London: Shambhala; 2001.

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