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Review Article

Bhagavad Gita and Modern Psychiatry: A Framework for Psycho spiritual Healing

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Abstract

Background

This paper explores how the therapeutic principles of the Bhagavad Gita can be integrated with modern psychiatry to heal patients through psycho-spiritual approaches.


Methods

This is a comparative historical study design of qualitative nature. It analyzes the teachings such as dharma (righteous action), vairāgya (detachment), abhyāsa (practice), and ātma-jñāna (self-knowledge) and links them to clinical goals like emotional regulation, identity formation, and cognitive clarity. It compares ancient guidance to modern psychological constructs. The study uses Eknath Easwaran's translation to highlight verses that align with therapeutic principles. It focuses on the emotional journey of Arjuna, one of the key characters and the disciple of Krishna. It highlights Krishna and Arjuna doctor-patient relationship respectively. It describes Arjuna's breakdown and his path to recovery. The study also explores how Krishna like a doctor employs therapeutic techniques to address Arjuna's symptoms of anxiety, confusion, and identity loss. Krishna's techniques reflect the strategies tantamount to cognitive behavioral therapy, mindfulness, and existential approaches. The paper observes emotional transformation of Arjuna which parallels with therapeutic approaches like self-reflection, value alignment, and mental resilience. It also reviews recent medical literatures which support integrating Gita-based ideas in mental health care. It cites articles that compare Gita dialogue to cognitive behavioral therapy (CBT), interpersonal therapy, and mindfulness. It also shows how one can reduce stress, increase life satisfaction, and cope with anxiety. It also explores how Gita techniques such as controlled breathing and meditation can be harmonized with mindfulness training.

Conclusion

The paper argues that the Gita, as a psychological guide, offers a structured path to inner balance and self-understanding. It contends that lessons on detachment and duty help regulate emotions and clarify values. Gita's psychological approach bolsters ethical, spiritual, and cultural insight of modern psychiatry. It bridges Western clinical models with indigenous wisdom. The paper further unveils how Gita's psychological tools complement evidence-based methods and reinforce therapeutic outcomes and collaborate between psychiatry, psychology, and spiritual studies, offering clarity, purpose, and peace to those in distress. It positions the text as a universal resource that enriches holistic therapy.

Keywords: *Abhyāsa, Bhagawat Gita, Bhakti, Equanimity, Jnana, Karma, Psychiatry, Psychology*

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Introduction

Modern psychotherapy continues to face challenges as the clients' need and demand keep shifting towards holistic approaches for the treatment rather than symptom relief. Modern medicine alone has failed to address the need of the patients through its standard treatments. As a result, integrative methods, combining clinical tools with spiritual insights, are gaining ground. Clinicians and researchers are beginning to appreciate that blending secular therapeutic techniques with culturally meaningful spiritual frameworks can make interventions more responsive to patients' values and beliefs. Such approaches are particularly important in societies where traditional texts and practices still shape people's world view and coping strategies. The Bhagavad Gita offers such insights as its core teachings speak directly to emotional suffering and personal growth. The text provides practical advice on living ethically, managing desires, and understanding the nature of the self. These principles can be translated into therapeutic exercises that encourage clients to examine their thoughts and behaviours. In Eknath Easwaran's translation, the Gita opens with Arjuna's deep distress on the battlefield [1]. He faces common issues like confusion, fear, and despair seen in psychotherapy today. Arjuna's physical symptoms, including trembling and dry mouth, resemble a classic anxiety response. By recognizing these experiences in a sacred text, therapists can validate clients' struggles and use culturally familiar narratives to foster insight. Krishna acts as a psychosocial counselor by being accommodating, receptive and empathetic towards Arjuna. The process unfolds as a dialogue, with the teacher encouraging Arjuna to articulate his fears and examining the beliefs underlying his distress. He listens to the problems of Arjuna and helps him reframe his thoughts, align with purpose, and connect with a deeper self. Krishna also introduces cognitive reframing, urging Arjuna to consider a broader perspective on duty and mortality. Easwaran notes, "Krishna begins by accepting Arjuna's anguish, and then gradually leads him out of it by awakening him to a higher understanding" [1]. This mirrors the trajectory observed in therapy, where clients progress from an initial state of crisis toward deeper insight through the therapeutic alliance. The Gita's narrative therefore illustrates a healing trajectory that begins with empathic attunement, moves through cognitive restructuring, and culminates in acceptance and

purposeful action. Mishra V et al. [2] show that Gita's concepts like dharma, detachment and surrender align with cognitive behavioral therapy (CBT) and mindfulness. They argue that incorporating these values into therapeutic protocols can enhance the cultural relevance of mindfulness and CBT for clients from South Asian backgrounds. These similarities demonstrate that teachings from ancient texts can be useful in contemporary therapeutic practices. Bhatia and colleagues also observe that the conversation between Krishna and Arjuna contains elements of cognitive behavioral therapy [3]. The Gita thus connects spiritual approaches with psychological care by making them useful tools in psycho-spiritual healing. It bridges the gap between science and spirituality by translating ancient wisdom into psychological concepts and techniques. For example, the idea of acting without attachment to results resonates with mindfulness and acceptance strategies used in current therapies. The Gita provides a balanced path to the clients who can make better fusion of science and spirit. In this way, patients can draw on both rational analysis and spiritual insight, leading to a more holistic form of healing.

Methods

A comparative historical study design has been adopted with qualitative desk based method that begins with a targeted literature review. Peer reviewed articles have been identified that explicitly connect the Bhagavad Gita and psychological concepts. The selected studies were coded thematically to extract recurring psychological constructs, therapeutic parallels and cultural insights. Particular attention was paid to works comparing Krishna's guidance to cognitive behavioral therapy and to those describing how breathing exercises and meditation drawn from the Gita can relieve anxiety. Using this thematic synthesis, a concise conceptual framework outlining how key Gita principles is built like detachment from outcomes, equanimity and disciplined action align with evidence based psychiatric tools such as cognitive reframing, mindfulness and resilience building practices. The framework is presented as a series of guidelines for clinicians wishing to offer culturally sensitive psycho-spiritual support. Rather than testing the intervention empirically, this desk based study will map convergences and highlight areas where further clinical research is needed, providing a foundation for future pilot trials.



Discussion

The Bhagavad Gita has drawn attention from spiritual seekers and mental health professionals alike. Indian psychiatrists and psychologists have long debated the use of the Gita as a culturally appropriate model for counseling. Early 20th century Indian thinkers laid the foundation for its psychological relevance. T.M.P. Mahadevan et. al. view Krishna's guidance as a rational model for emotional healing [4]. Radha kamal Mukerjee [5] emphasizes the Gita's role in balancing thought, emotion, and action. Sreenivasulu B. et. al. [6] explores its use in motivation and behavioral change. Swami Sivananda [7] and Swami Ranganathananda [8] discuss the Gita's use in self-discipline and stress control. These ideas now match resilience and emotional regulation strategies in therapy. Eknath Easwaran [1] reinterprets the Gita as a counseling dialogue. He links Krishna's methods to techniques like cognitive reframing and mindfulness. Ariel Glucklich connects the Gita to Hindu healing through self-realization and catharsis [9].

M.S. Reddy proposes the Gita as a source for psychotherapeutic concepts and emphasized the "Guru–Chella" (mentor disciple) relationship as a therapeutic model [10]. These early critics argue that Western psychotherapy models require adaptation to Indian cultural and spiritual contexts, and they view Krishna's guidance to Arjuna as demonstrating how a trusted teacher can resolve inner conflict and restore motivation. In a paper titled Psychotherapy Insights from Bhagavad Gita, Reddy examines the Gita's therapeutic process as a case study. He describes how Arjuna's acute anxiety and guilt laden depression are resolved through dialogue and discussion with Krishna; the process is framed as a form of counseling that restores action. Reddy highlight that the dialogue covers conflict diagnosis, personality assessment, and therapeutic techniques, and he emphasizes that Indian psychiatrists must consider cultural and spiritual factors when applying Western psychotherapeutic models. He also warns that blind application of this single session "Guru– Sishya" model risks overgeneralization.

Authors argue that Arjuna's distress resembles cognitive distortions and that Krishna's responses align with cognitive behavioral therapy (CBT); Krishna first motivates Arjuna and then provides psych education about the transient nature of life to correct distorted thinking [3]. The authors noted that Karma Yoga acting without attachment to results functions like behavioral

activation; detachment from outcomes alleviates distress and guilt. They also draw parallels between the Gita's metaphors (e.g., remaining calm like an ocean or withdrawing senses like a tortoise) and mindfulness practices, and they suggest that such techniques could be integrated into Western therapies. Bhatia et al. conclude that while philosophical parallels abound, clinical trials are needed to develop structured protocols. In *Coping with Illness: Insight from the Bhagavad Gita*, Bharti Kalra and colleagues [11] apply Gita principles to chronic illness management. They emphasize that Krishna's first therapeutic step is "equanimity coupled with acceptance of reality", which helps patients manage conflicting emotions when faced with disease. The authors highlighted slokas that counsel anger management anger leads to confusion of memory and loss of reason and urged practitioners to foster emotional regulation. They further stress the importance of action; Krishna tells Arjuna not to be attached to inaction, encouraging patients to engage in treatment rather than ruminate. Finally, they underscore moderation in diet, sleep and exercise; Krishna notes that yoga is neither for those who eat or sleep too much nor for those who deprive themselves, suggesting that balance is essential for mental stability. These insights show the Gita's deep overlap with mental health concepts. Mishra V et. al. [2] offer a clinical review. They support using Gita principles like detachment, surrender, and role clarity in CBT and mindfulness based therapies. These methods help especially with clients rooted in Indian culture. Most research on the Gita is philosophical or descriptive. Few studies link its teachings to evidence based therapy. This paper proposes a structured model to address that gap. The model combines insights from the Gita and modern psychiatric techniques. It offers a culturally sensitive and spiritually grounded framework for psycho spiritual healing.

The Bhagavad Gita opens with psychological inner crisis of Arjuna, a warrior prince, on the battlefield of Kurukshetra. He experiences anxiety, moral confusion, and identity loss. This episode resembles a clinical case of acute emotional distress. Subhash Bhatia C. et. al. [3] writing in the *Indian Journal of Psychiatry*, even suggest that the opening of the Gita may be one of the earliest recorded sessions of cognitive behavioral therapy; they note that Arjuna's anticipation of killing his relatives triggers anxiety manifesting as dry mouth, tremors, dizziness and confusion, causing him to drop his bow, and they



see Krishna's discourse as a therapeutic method that identifies and corrects distorted thoughts. In Chapter 1, Verses 28–29, Arjuna says, “My limbs fail me and my mouth is parched. The bow slips from my hand” [1]. His symptoms match classic anxiety trembling, dry mouth and weakness. Arjuna shows signs of intrapersonal conflict as he gets divided between dharma (duty) and ahimsa (nonviolence). In Verse 31, he declares, “I see no good in killing my kinsmen. I desire neither victory, nor a kingdom” [1].

Krishna, responding as a therapist, listens and affirms Arjuna's distress, then guides him toward solace. In 2:11, Krishna says, “You grieve for those who should not be grieved for” [1]. He begins a process of cognitive restructuring and reframes Arjuna's fears using spiritual reasoning and moral clarity. Mahadevan [4] views this dialogue as early psychotherapy. M. S. Reddy [10], in the *Indian Journal of Psychological Medicine*, retrospectively diagnoses that Arjuna suffers from an acute situational adjustment disorder characterized by anxiety and guilt. He further highlights that Arjuna exudes physical symptoms like weak limbs, dry mouth, trembling, gooseflesh, dizziness and confusion. He interprets Krishna's rational counsel on the inevitability of death and the immortality of the soul play a key role as a cognitive–rational intervention. He asserts that Krishna's rational counseling helps to remove Arjuna's guilt and restores his motivation. Dinesh Kumar Gupta and Sandeep Panchal, writing in the essay *A Powerful Tool in Psychotherapy*, interpret Arjuna's symptoms to neurotic depression. He suppresses the knowledge that victory requires killing his kinsmen. His suppressed thoughts generate stress and depression that they call Vishad. Krishna's cognitive intervention breaks the loop [1]. Arjuna's clarity returns quickly as his clouds clear and doubts vanish. The Guru Shishya model here mirrors the counselor client dynamic. Healing comes through trust, insight, and guided reframing. Krishna's guidance in the *Bhagavad Gita* reflects key elements of therapy. He uses existential reflection, stoic calm and spiritual focus. His core message is nishkama karma-action without attachment to outcomes. In Chapter 2, Verse 47, Krishna says, “You have the right to work, but never to the fruit of work” [1]. This teaching shifts Arjuna's focus from results to duty. It helps him regain control without falling into despair [1]. Initially, Arjuna breaks down, trembles, loses strength, and drops his weapon. His crisis shows signs of acute stress. He is trapped

between duty and moral fear. Krishna acts as a therapist as he listens, validates, and then reframes Arjuna's thoughts. Krishna's method mirrors cognitive behavioral therapy. He challenges false beliefs and brings Arjuna back to present action. M. S. Reddy [12] terms this process as single session therapy, explaining that Krishna addresses Arjuna's crisis in one transformative exchange. Ajay Risal calls Krishna's method Upachar a healing response to Arjuna's Rog (illness), Krishna blends supportive counseling, grief work and motivational insight to reduce fear of death by reframing it as transition [12]. This approach supports trauma healing and emotional regulation. Krishna also builds a strong therapeutic alliance by questioning, consoling and guiding Arjuna. Megha Dhillon notes that the Krishna-Arjuna exchange models modern therapy, using metaphor, logic and calm presence. Krishna leads Arjuna from breakdown to clarity [13]. By the end, Arjuna says, “My delusion is destroyed. I am firm; my doubts are gone” [1]. Arjuna's dispel of confusion and doubts mark full therapeutic resolution. Krishna's approach substantiates the fact that deep healing involves insight, presence and trust. The *Bhagavad Gita* presents a timeless model for psychological healing. It focuses on transforming confusion into clarity and building inner strength. Krishna offers Arjuna tools like cognitive reframing and self-regulation during his emotional crisis [1].

In Chapter 2, Krishna teaches: “You have the right to work, but never to the fruit of work” [1]. This verse reframes action by shifting focus from results to effort. Easwaran notes that this reduces anxiety about failure and builds ethical strength [1]. Krishna urges Arjuna to act mindfully, not focusing on outcomes, “The mind is restless as difficult to control as the wind, but it can be tamed by constant practice and detachment” [1]. Easwaran compares this to athletic training discipline and repetition calm the mind. This reflects modern strategies for emotional regulation. We can find Krishna's method similar to cognitive behavioral therapy. David D *et. al.* assert that CBT also reinterprets negative thoughts to restore function [14]. Krishna helps Arjuna reinterpret fear through purpose and duty. The *American Journal of Behavioral Medicine* links *Gita* principles to resilience therapy, highlighting abhyāsa (repetition) and vairāgya (detachment) as essential tools for mental strength. Berg M *et. al.* [15] connect Krishna's advice on meditation to mindfulness based



stress reduction. Krishna instructs Arjuna to bring his mind back to the Self. This mirrors focused awareness in therapy. Easwaran writes, "Lead the mind within train it to rest in the Self. Abiding joy comes to those who still the mind" [1]. This captures the Gita's essence awareness, training and inner peace. Mishra V *et. al.* [2] emphasize that Arjuna's doubts lead him to withdraw from battle, however, Krishna consoles Arjuna stating that all actions follow a natural order and the soul is eternal. He encourages Arjuna to perform his duty without focusing on outcomes. Mehak Garg [16], writing in the Bhagavad Gita: A Powerful Tool in Psychotherapy, underscores that the Gita's teachings on equanimity, detachment and dharma provide practical guidance for emotional regulation. The teachings advise individuals to maintain a balanced mind amid life's fluctuations and to act without attachment to results. The text helps build resilience and offers an ethical framework useful in psychotherapy. The Gita, more than spiritual insight, provides tools for psychological balance. Its methods match both ancient wisdom and modern therapy.

Krishna outlines three yogic paths Jnana Yoga (self-knowledge), Karma Yoga (selfless action), and Bhakti Yoga (devotion to God). Each path offers a unique means of psychological transformation. The techniques employed in these paths help to lift Arjuna from his despondency. They also parallel modern psychotherapeutic approaches aimed at treating trauma, anxiety, and depression. Jnana Yoga, the path of insight and self-inquiry, shows the way to the practitioner to distinguish between ego and self. He asserts that the ego is ephemeral and the Self is immortal. He preaches that if the practitioner fails to recognize reality, self, he will surrender to the attachments. He tells Arjuna: "Those who are deluded by the operation of the gunas become attached to the results of their actions; the wise do not disturb the foolish who are ignorant of this truth" [1]. Krishna's guidance supports cognitive detachment from outcomes. This notion is central to Mindfulness-Based Cognitive Therapy (MBCT). Easwaran observes, "When we renounce our attachment to results, the mind becomes tranquil, allowing action without fear or hesitation" [1]. Gkintoni E *et. al.* [17] explains that MBCT integrates meditation and cognitive restructuring to reduce emotional reactivity and strengthen inner clarity. Meditation and detachment form the fruits of action are fundamental techniques enunciated by Krishna to free from anxiety and depression. Krishna's concept of

self-awareness plays a vital role even in day to life Krishna's notion of self-awareness is evident from the empirical evidence that affirms the therapeutic value of self-awareness practices. Gherardi-Donato *et. al.* [18], find that participants in an eight-week mindfulness program showed significantly lowered hair cortisol levels and reported reduced stress and anxiety. Krishna's description of the unruly mind "The mind is restless, turbulent, strong, and unyielding but it can be controlled by repeated practice and detachment" [1] echoes modern strategies for regulating cognition and emotion. He asserts that one can control disturbed mind through the repeated practice of meditation and disinterestedness. Similarly, Jasmine Hearn *et. al.* [19] align with Krishna's idea of self-inquiry and mindfulness traits that reduce exam stress and enhance performance.

Krishna advocates for Karma Yoga that focuses on selfless act. Selfless act refers to social work or the work for the sake of divinity. Practitioner of selfless act performs activities for others. Krishna's doctrine of selfless action, emphasizes disciplined engagement without clinging to outcomes. In Chapter 2, Verse 47, Krishna instructs: "You have the right to work, but never to the fruit of work" [1]. Krishna's selfless work mirrors Acceptance and Commitment Therapy (ACT). ACT fosters value-based action amid psychological distress and helps the patients to relieve from mental disturbances. Easwaran writes, "By focusing on action alone, the practitioner gains freedom from anxiety about success or failure" [1]. Krishna reiterates the psychological value of purposeful action in Chapter 3, Verse 19: "Therefore, always perform your duty without attachment. By doing work without attachment, one attains the Supreme" [1]. This perspective supports ACT's goal of psychological flexibility. In Psychological Trauma: Theory, Research, Practice, and Policy, Lang, Ariel J., *et al.* [20] affirm that ACT reduces depression and anxiety by anchoring individuals in meaningful, intentional behaviors. Conversely, misaligned duties cause emotional disturbance. Krishna warns: "Better to fail in your own dharma than to succeed in the dharma of another" [1]. This is echoed in occupational research by Kumari *et. al.* [21], who show that ambiguity and overload contribute to burnout and impaired mental health. Katherine Petrie, similarly, links unclear job expectations to anxiety and depression. In a clinical context, Akhouri D *et. al.* [22] demonstrate that ACT reduces obsessive-compulsive symptoms by



helping patients accept intrusive thoughts while remaining committed to values.

Krishna introduces Bhakti Yoga, the path of loving devotion, to address psychological suffering through surrender. Krishna states: "Whatever you do, make it an offering to me... and you will be freed from the bondage of karma" [1]. Krishna instructs his devotees to surrender to Him in order to be free from bondage. Bhakti's emphasis on devotion and inner surrender parallels compassion-based therapies. These therapies cultivate nonjudgmental awareness and emotional safety. Maung, JJ *et. al.* [23] observed that equanimity training based on meditative devotion improved inner peace among long-term care residents. Krishna believes that his concept of devotion develops mental calmness. We can see the application this idea in equanimity training developed by modern medicine. Nonjudgmental awareness enhances self compassion and cognitive flexibility, helping patients address shame and emotional trauma. Krishna's teaching in Chapter 12, Verse 15 "He by whom the world is not agitated and who is not agitated by the world is dear to me" [1] provides a psychospiritual ideal of emotional resilience and tranquility. Zhang, D *et. al.* [24] notes that mindfulness-based interventions, which cultivate compassionate awareness, consistently reduce anxiety and depression by lowering cortisol levels.

Krishna's broader metaphysical vision reflects a psychotherapeutic model of ego transcendence. "Those who see all beings in the Self and the Self in all beings such people never shrink away in fear" [1]. This spiritual insight corresponds with existential therapies that emphasize unity, perspective, and interconnectedness. Bhati *et. al.* [25] affirm that self-inquiry and nonattachment foster emotional clarity and balance. A quasi-experimental study further confirms that mindfulness training improves sleep quality, social support, and life satisfaction while reducing stress and depression among college students. Thus, Krishna's synthesis of Jnana, Karma, and Bhakti Yoga offers a timeless, empirically supported blueprint for mental health anchored in wisdom, action, and love.

Conclusion

The Bhagavad Gita stands as a fusion of both spiritual and profound psychological approaches that enrich modern psychiatric approaches. Through its teachings on dharma, abhyāsa, vairāgya, and ātma-jñāna, the Gita addresses

essential dimensions of mental health purpose, discipline, detachment, and self-awareness. Krishna's therapeutic engagement with Arjuna on the battlefield models an early psychospiritual intervention. His therapeutic approaches parallel the techniques of cognitive behavioral therapy, mindfulness, and existential counseling. This paper has explored structured tools for cognitive reframing, emotional regulation, and identity restoration. Gita's message of action without attachment reduces anxiety and promotes psychological flexibility. Its notion of action without attachment resonates with Acceptance and Commitment Therapy (ACT) and Mindfulness-Based Cognitive Therapy (MBCT). Furthermore, the triadic path of Jnana, Karma, and Bhakti Yoga corresponds with therapeutic models that value insight, purposeful engagement, and compassion.

Clinical literature increasingly supports the integration of Gita-based principles into therapeutic settings, particularly for culturally attuned and spiritually grounded care. Krishna's responses to Arjuna's moral and emotional crisis highlight how ancient wisdom can offer healing in contexts of fear, doubt, and existential distress. The Gita's insights thus transcend cultural and historical boundaries, providing a timeless, universal framework for psychospiritual healing. As psychiatry continues to seek holistic and integrative approaches, the Bhagavad Gita emerges as a vital text bridging science and spirituality to promote inner strength, clarity, and peace.

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