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CONCEPT OF "प्रवृत्तिर्दुःखं" IN DEVELOPMENT OF MENTAL DISORDER

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ABSTRACT

Pravritti, or attachment, leads to suffering (*Dukhagama*) and mental disorders, as explained in Charaka Samhita.Causes of *Pravritti* are *ahamkara* (ego), *sanga* (attachment), *samshaya* (skepticism), *abhisamplava* (mistaken self-identity), *abhyavapata* (false sense of ownership), *vipratyaya* (sensing opposite of reality), *avishesha* (inability to distinguish between consciousness/unconsciousness) and *anupaya* (inappropriate means) Consequences such as Mental disorders, including anxiety, depression, personality disorders, and substance use disorders. Adolescence A critical period for developing mental health habits, vulnerable to stress, adversity, and media influence. Mental Health Determinants includes Protective environments, Quality home life and relationships, Access to support and services. Prevention and Salvation (*Moksha*) explains *Nivrutti*, or detachment from worldly affairs, leads to emancipation and salvation. Ways to Attain *Moksha* Disinclination from worldly desires, Cultivating self-awareness and wisdom and Practicing detachment and serenity.

INTRODUCTION

Pravritti, explained in *Charaka Samhita's Sharira Sthana* chapter, causes *Upaplava*, the root cause of all diseases.

Pravritti inclines individuals towards disobedient behaviour, leading to *Dukhagama* i.e. Suffering at both physical and mental levels.

Modern Relevance

Pravritti contributes to various mental disorders, including:

1. Anxiety disorders
2. Psychotic disorders
3. Personality disorders

Due to: Improper healthy lifestyle choices, such as :

- *Aahara* (diet)
- *Vihara* (lifestyle)

Critical Stage: Adolescence – a sensitive period where individuals can develop either:

- Positive traits through good habits
- Negative traits through addictive and societal influences

Solution: *Pravritti* can be prevented through *Nivrutti*, a method for attaining *Moksha* (liberation)

The root cause of all *Upaplava*

तस्य हेतुः, उत्पत्तिः, वृद्धिः, उपप्लवः, वियोगश्च| तत्र हेतुरुत्पत्तिकारणं, उत्पत्तिर्जन्म, वृद्धिराप्यायनम्, उपप्लवो दुःखागमः, षड्धातुविभागो वियोगः सजीवापगमः सप्राणनिरोधः स भङ्गः स लोकस्वभावः| तस्य मूलं सर्वोपप्लवानां च प्रवृत्तिः, निवृत्तिरुपरमः| प्रवृत्तिर्दुःखं, निवृत्तिः सुखमिति यज्ज्ञानमुत्पद्यते तत् सत्यम्| तस्य हेतुः सर्वलोकसामान्यज्ञानम्| एतत्प्रयोजनं सामान्योपदेशस्येति|| (Cha. Sha. 5/8)

Purusha (man) and *loka* (universe) have *hetu*, *utpatti*, *vriddhi*, *upaplava*, and *viyoga*. *Upaplava* is the adventure of sorrows, *vriddhi* is growth, *utpatti* is germination or

birth, and *hetu* is the source of manifestation. *Viyoga* is the dissolution of the six constituents, the departure of the soul, the stopping of vital breath, and the return to the primordial state. *Pravritti* (action/attachment) is the fundamental cause of the universe and all *upaplava* (advent of miseries). Its destruction (of all miseries) results from *nivritti*, or inaction or disengagement from worldly matters. Detachment brings happiness, while attachment brings misery. When this fact is realized, it is called truth (pure knowledge). The goal of explaining this idea is to impart this knowledge.[2]

Cause of *Pravritti* (attachment)

तज्जा

ह्यहङ्कारसङ्गसंशयाभिसम्प्लवाभ्यवपातविप्रत्ययाविशेषानु

पायास्तरुणमिव

द्रुममतिविपुलशाखास्तरवोऽभिभूयपुरुषमवतत्यैवोत्तिष्ठन्ते;

यैरभिभूतो न सत्तामतिवर्तते|(Cha. Sha.5/10)

"The source of attachment are ignorance, desire, hatred and purposeful action. This in turns give rise to *ahamkara* (ego), *sanga* (attachment), *samshaya* (skepticism), *abhisamplava* (mistaken self-identity), *abhyavapata* (false sense of ownership), *vipratyaya* (sensing opposite of reality), *avishesha* (inability to distinguish between consciousness/unconsciousness) and *anupaya* (inappropriate means) that engulf an individual just like the very long branches of a big tree smother a sapling. A person overwhelmed by these emotions stays trapped in the affairs of the world.

1) *Ahamkara* means egoism. E.g., "I belong to a high descent and possess beauty, wealth, conduct, intelligence, character, modesty, learning, fame, age, power and influence."
2) *Sanga*, or attachment, includes the mental, vocal, or physical deeds associated with attachment that are not conducive to the attainment of emancipation or salvation.
3) *Samshaya*, or skepticism regarding the existence of the result of the past action, salvation, soul, life after death, etc.
4) *Abhisamplava* is the mistaken perception of identifying one's atman with one's body, such as "I am second to none in any situation; I am the creator; I am an accomplished person by nature and I am the aggregate of body, sense organs, intelligence and memory."
5) *Abhyavapata* is the sense of ownership, such as "mother, father, brother, wife, progeny, keen, friend and servants belong to me and I am theirs."
6) *Vipratyaya*, or considering a desirable act as undesirable, a beneficial thing as harmful and an auspicious act/thing as inauspicious (and vice versa).
7) *Avishesha*, or the lack of distinction between a consciousness and unconsciousness, nature and its modifications, attachment and detachment.
8) *Anupaya*, or inefficient religious rituals such as *prokshana* (consecration), *anashana* (fasting), *agnihotra* (oblation to the fire), *trishavana* (worship with soma thrice a day while performing sacrifice), *abhyukshana* (wetting), *aavahana* (invocation), *yajana* (leading or guiding sacrificial rituals), *yajna* (sacrificial rituals), *yachana* (begging) and entering into water and fire. (Though these means are listed in good code of conduct, these can create attachments to life and desires. Therefore these means are inefficient in attaining liberation.)[2]

एवमहङ्कारादिभिर्दोषैर्भ्राम्यमाणो नातिवर्तते प्रवृत्तिं, सा च मूलमघस्य|| Cha. Sha. 5/11

Thus, if a person is devoid of intellect, restraint and memory, but is egoistic, skeptic, self-centered, is attached (to objects or actions), and is unable to discern between good or bad, self and the physical body, etc. He is an abode of all miseries. Such feelings are the root cause of vitiation of *doshas* relating to the mind and body. Such a person is trapped in the cycle of life and death and cannot attain salvation (from miseries). The ultimate goal of *Ayurveda* is salvation from all sorts of miseries which depends upon the wellbeing of the *purusha* – individually as well as socially.[3]

Modern Correlation

प्रवृत्तिर्दुःखं is main cause behind in development of mental disorders.

As uncontrolled mind performs all 8 causes of *Pravrutti.*

Mental Disorder

A mental disorder, also referred to as a mental illness, a mental health condition, or a psychiatric disability, is a behavioural or mental pattern that causes significant distress or impairment of personal functioning.

A clinically significant disruption in a person's behaviour, emotions, or thought processes, frequently in a social setting, is another characteristic of a mental illness. These disruptions can manifest as recurrent episodes, chronic episodes, or single episodes. Mental disorders come in a vast variety, and each one has its own set of symptoms and indicators. One facet of mental health is a mental disorder.

Symptoms

Agitation, anxiety, depression, mania, paranoia, psychosis.

Complications

Cognitive impairment, social problems, suicide.

Types

1) Anxiety disorders
2) Eating disorders
3) Mood disorders
4) Personality disorders
5) Psychotic disorders

6) Substance use disorders

Causes
Genetic and environmental factors.

Treatment
Psychotherapy and medications.

Medication
Antidepressants, antipsychotics, anxiolytics, mood stabilizers, stimulants.[5]

Mental health of adolescents
Adolescence is a crucial period for developing social and emotional habits important for mental well-being. These include adopting healthy sleep patterns; exercising regularly; developing coping, problem-solving, and interpersonal skills; and learning to manage emotions. Protective and supportive environments in the family, at school and in the wider community are important.

Multiple factors affect mental health. The more risk factors adolescents are exposed to, the greater the potential impact on their mental health. Factors that can contribute to stress during adolescence include exposure to adversity, pressure to conform with peers and exploration of identity. Media influence and gender norms can exacerbate the disparity between an adolescent's lived reality and their perceptions or aspirations for the future. Other important determinants include the quality of their home life and relationships with peers. Violence (especially sexual violence and bullying), harsh parenting and severe and socioeconomic problems are recognized risks to mental health.

Some adolescents are at greater risk of mental health conditions due to their living conditions, stigma, discrimination or exclusion, or lack of access to quality support and services. These include adolescents living in humanitarian and fragile settings; adolescents with chronic illness, autism spectrum disorder, an intellectual disability or other neurological condition; pregnant adolescents, adolescent parents, or those in early or forced marriages; orphans; and adolescents from minority ethnic or sexual backgrounds or other discriminated groups.

Mental health determinants
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Emotional disorders
Emotional disorders are common among adolescents. Anxiety disorders (which may involve panic or excessive worry) are the most prevalent in this age group and are more common among older than among younger adolescents. It is estimated that 4.4% of 10–14-year-olds and 5.5% of 15–19-year-olds experience an anxiety disorder. Depression is estimated to occur among 1.4% of adolescents aged 10–14 years, and 3.5% of 15–19-year-olds. Depression and anxiety share some of the same symptoms, including rapid and unexpected changes in mood.

Anxiety and depressive disorders can profoundly affect school attendance and schoolwork. Social withdrawal can exacerbate isolation and loneliness. Depression can lead to suicide.

Behavioural disorders
Younger adolescents are more likely than older teenagers to suffer from behavioral disorders. 2.9% of children aged 10 to 14 and 2.2% of children aged 15 to 19 have attention deficit hyperactivity disorder (ADHD), which is characterized by trouble focusing, excessive activity, and behaving without considering the consequences. Conduct disorder affects 1.9% of 15–19-year-olds and 3.5% of 10–14-year-olds, characterized by symptoms of challenging or destructive behavior. Adolescents with behavioral issues are more likely to engage in criminal activity and have an impact on their education.

Eating disorders
Adolescence and early adulthood are when eating disorders like bulimia nervosa and anorexia nervosa typically manifest. Abnormal eating habits and obsession with food are hallmarks of eating disorders, which are typically accompanied by worries about one's appearance and weight. Compared to boys, girls are

more frequently impacted. In addition to having an impact on physical health, eating disorders frequently co-occur with substance use disorders, anxiety, and depression. An estimated 0.1% of children aged 10 to 14 and 0.4% of those aged 15 to 19 experience them. They are linked to suicide. Anorexia nervosa has a greater mortality rate than any other mental illness and can cause early death, frequently from suicide or medical complications.

Psychosis

The majority of conditions involving psychotic symptoms appear in late adolescence or early adulthood. Delusions or hallucinations are possible symptoms. In addition to frequently resulting in stigma or human rights abuses, these events might hinder an adolescent's capacity to engage in everyday activities and education. Schizophrenia affects 0.1% of those aged 15 to 19.

Suicide and self-harm

The third most common cause of mortality for young adults and older adolescents (15–29 years old) is suicide. Suicide risk factors are complex and include problematic alcohol use, childhood maltreatment, stigma around getting help, obstacles to care, and access to suicide tools. Like all forms of media, digital media can have a big impact on how well or how poorly suicide prevention initiatives are working.

Risk-taking behaviours

Adolescence is when many risky behaviors for health, such substance abuse or sexual risk-taking, begin. Risk-taking behaviors can negatively affect an adolescent's mental and physical health and can be an ineffective coping mechanism for emotional challenges. Adolescents are particularly susceptible to negative substance use patterns that might last a lifetime. Worldwide, the prevalence of alcohol usage among those aged 15 to 19 was high in 2019 (22%) with minimal gender variations, and consumption was rising in some areas.

The use of tobacco and cannabis are additional concerns. Many adult smokers had their first cigarette prior to the age of 18 years. In 2022, the prevalence of cannabis use among adolescents was higher than that of adults globally (5.5 per cent compared with 4.4 per cent, respectively).

Perpetration of violence is a risk-taking behaviour that can increase the likelihood of low educational attainment, injury, involvement with crime or death. Interpersonal violence was ranked among the leading causes of death of older adolescents in 2021.

Moksha (Salvation) and ways and means of attaining it:

निवृत्तिरपवर्गः; तत् परं प्रशान्तं तत्तदक्षरं तद्ब्रह्म स मोक्षः||११||

Disinclination/detachment from worldly affairs is *apavarga* (salvation). It is the para (the supreme), *prashanta* (the serene), *akshara* (the immutable), the *Brahman* (the super-consciousness), and the *moksha* (emancipation).[6]

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