The Ayurvedic Model of Human Occupation

Venthan J. MAILLOO, BSc(Hons), MCSP, CertMgmt1

1Band 5 Rotational Occupational Therapist. Barnet Primary Care Trust, Finchley Memorial Hospital

Abstract: Ayurveda is an Eastern system of medicine that has been practised for over 5000 years. The relationship between occupations and health is a fundamental aspect of the ayurvedic health model. It could contribute a strong spiritual element to modern occupational therapy practice and may be more culturally appropriate for people with strong Hindu/Buddhist beliefs than modern occupational therapy models. The aim of this paper is therefore to introduce the ayurvedic model to occupational therapists that are unfamiliar with it. It describes assumptions underlying the ayurvedic model and related frames of reference that are relevant to occupational therapy. Yoga is the main occupational therapy intervention advocated by the model. The branches of yoga are described. Other traditional interventions are summarised but not described in detail. Sanskrit terminology has mostly been removed and concepts have been simplified for the ease of a general readership.

Key words: Ayurveda, yoga, Tantra, spirituality

Introduction

In the British Journal of Occupational Therapy Ilott et al. (2006, p.39) recently suggested “English is the language for science and occupational therapy”. Their statement arguably imposes occupational injustice on occupational therapists and researchers for whom English is not the first language. That it slipped through the review process of the British journal may be an indication of a cultural insensitivity or lack of cultural awareness pervading the profession in Britain. Occupational therapy was practised in different forms by various cultures worldwide long before the term ‘occupational therapy’ was formally applied (Wilcock, 2001), and health models incorporating occupation existed before the English language. Two closely related (Frawley & Lad, 1988) examples of this are traditional Chinese medicine (Williams, 1999) and Ayurveda (ancient Indian medicine). Both of these feature occupational regulation for the maintenance of good health.

Modern Western occupational therapy has largely failed to embrace traditional Eastern concepts and could arguably be improved if it did so. Relatively recent advances in modern Western science, such as quantum physics Vicente et al. (2005) and psychoneuroimmunology (Mailoo, 2006b) are steadily bridging the gap between modern Western and traditional Eastern
philosophies. Healthcare provisions based on these advances have exploited advantages the occupational therapy profession is largely yet to embrace. An example of this is Reverse Therapy (Eaton, 2006), a modern successful chronic fatigue treatment approach that parallels a much older Tantric frame of reference (a component of Ayurveda). As communication construction is culturally determined (Venth, 2007), if the occupational therapy profession imposes modern Western constructs onto traditional health systems when determining their quality as models, its understanding and growth may be adversely restricted. It would arguably be better to research established health models fully with an open mind, and understand them fully before judging them. This article is therefore intended to introduce one Eastern model to occupational therapists that are unfamiliar with it. The model is Ayurveda.

The term ‘ayurveda’ is derived from the Sanskrit words ‘ayu’ that means ‘daily living’ and ‘veda’ that means ‘knowing’. Ayurveda has been practised for over 5000 years (Lad, 1985). The relationship between occupations and health is a fundamental aspect of the ayurvedic health model. It is comprised of three key frames of reference. These are the Three Humours, the Three Natures and the Tantric frame of reference.

Yoga is the main occupational therapy-relevant ayurvedic intervention. Mailoo (2005) provided a very brief introduction to yoga but Grieve (2006) suggested that if components of yoga are used without a proper understanding of their context, their value might be significantly diminished. One could compare this to a person with no knowledge of haemo-dynamics using a sphygmomanometer on a patient and then giving advice on salt consumption. This paper therefore covers the assumptions underlying the ayurvedic model, its three main frames of reference and the umbrella of yogic techniques. A thorough understanding of yoga or ayurveda would require a significant volume of reading with experiential learning and is beyond the scope of a journal article. This article does not therefore provide any technical information on diagnostic or therapeutic techniques; it merely describes the underlying framework to enable a contextual understanding that learning can be built upon. This could be compared to reading about anatomy and physiology before trying to use a sphygmomanometer. Appendix recommends specific further reading and opportunities for experiential learning for occupational therapists interested in taking the ayurvedic model further. Sanskrit terminology has mostly been removed and concepts have been simplified for the ease of a general readership.

Assumptions

Assumptions about the universe

Everything is believed to have developed from a unified field termed ‘Brahman’. This could be considered the collective consciousness of everything in the Universe (Sharma & Clark, 1998). The energy of this field generates matter. Everything the human mind can perceive is therefore just transient forms of energy. Nothing can exist forever in material form, but the underlying energy has always existed and always will exist. An example of this transience is birth and death. After death the outer-most material manifestations of humans (the material bodies) decay, but the underlying energy invariably re-manifests elsewhere (Jinpa et al., 2006). The nature of re-manifestation depends entirely on the energy’s reactions to its previous experiences. This may be interpreted as re-incarnation, heaven or hell.

A common belief in cultures following this philosophy is that material existence is a mistake resulting from misperception of the Universe and an illusion of individuality (Dalai Lama, 2006). The body and mind are seen as burdens to escape from. Many of the techniques used for escape fall under the umbrella term ‘yoga’. Various schools of yoga are based on austerity, control of the senses and withdrawal from material experience, with the ultimate aim of returning to a state of unity with the Universe. The austerity usually involves abstinence from sexual activity, meat eating and alcohol consumption. This approach to wellbeing is unlikely to be culturally appropriate outside ascetic sub-cultures and has therefore been excluded from this article.
According to ayurveda, on the deepest level each person is believed to be eternal and unchangeable (a fragment of Brahman). This is the true (spiritual) self. It is indistinguishable from the Universe and is in a constant state of bliss. In its pure inactive form it is unable to experience material existence. It manifests more superficial energies for this purpose. During gestation the superficial energies develop a body and mind in circumstances designed to meet the desires of the self (Redfield, 1994).

The self is unable to experience distress. The mind and body are simple tools for its use. The ego (in the intellectual aspect) can experience distress when it becomes active and identifies with the mind and body as an individual. “This sense of self is simply a mental construct, a mere label given to this cluster of dependently arising mental and physical events in dependence on their continuity” (Dalai Lama, 2006, p xvi). This type of identification leads to suffering, which indicates that the mind is not being used appropriately as a tool. Various Eastern religions are therefore based upon looking inwards to find the bliss aspect by transcending the ego, to escape from suffering.

Ayurveda identifies three broad performance components of thinking. These are sensate thinking, feeling and reasoning (Frawley, 1994). The sensate mind creates instinctive emotions such as desire, fear and anger and harbours likes, dislikes and personal opinions. It works through from the physical to intellectual aspects of the psyche but has no direct interaction with the bliss aspect. It is essential for survival of the material body. The feeling mind enables intuitive knowing and the reasoning mind discriminates between reality and illusion. The feeling mind generates the human will to live. The reasoning mind creates the ego but also ultimately guides it towards spiritual development. The feeling and reasoning components of the mind work through all five aspects of the manifest self from the physical to bliss aspects (Frawley, 1994). They are tools to guide the material body to fulfill the desires of the self.

Ayurvedic physiology

Ayurveda draws no clear distinctions between mind and body or physical and mental illness. These beliefs are congruent with those of Chinese medicine (Williams, 1999), modern advances in psychoneuroimmunology (Mailoo, 2006b) and some developing Western alternative therapy techniques (Gordon, 1999). The mind is not thought to reside in the brain, but in the energy that permeates the entire body. Health is believed to depend on a constant flow of that energy through the body. The energy flows according to consciousness through a complex system of channels and centres partially described by Sir Donald Woodruff when he translated original Sanskrit accounts in 1918 (Avalon, 1974).

<table>
<thead>
<tr>
<th>Energy aspect</th>
<th>Experiences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bliss</td>
<td>bliss, joy calmness, peace</td>
</tr>
<tr>
<td>Intellectual</td>
<td>higher reasoning, discrimination and decision making, individualism (ego)</td>
</tr>
<tr>
<td>Mental</td>
<td>sensations of sight, sound, smell, taste and touch, emotions, basic thought, memories</td>
</tr>
<tr>
<td>Vital</td>
<td>hunger, thirst, heat, cold</td>
</tr>
<tr>
<td>Physical</td>
<td>Birth, growth, decay and death</td>
</tr>
</tbody>
</table>

Table 1. The psyche (Adapted from True World Order, 2000).

<table>
<thead>
<tr>
<th>Sanskrit terminology</th>
<th>Metaphorical terminology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vata</td>
<td>Wind / air</td>
</tr>
<tr>
<td>Prana</td>
<td></td>
</tr>
<tr>
<td>Pitta</td>
<td>Fire</td>
</tr>
<tr>
<td>Tejas</td>
<td></td>
</tr>
<tr>
<td>Kapha</td>
<td>Earth / water</td>
</tr>
<tr>
<td>Ojas</td>
<td></td>
</tr>
</tbody>
</table>

Table 2. The three humours
Detailed knowledge of the energy channels is not required for occupational therapy, but energies are the basis of two frames of reference underlying the ayurvedic model. These are ‘the Three Humours’ and ‘the Three Natures’. The main energies considered in ayurvedic physiology are vata, pitta, kapha, prana, tejas and ojas (Frawley, 1994). Subtle differences between them are important for the medicinal aspects of ayurveda but they can be matched into pairs by occupational characteristics. For simplicity therefore, occupational therapists need only remember them as earth, wind and fire.

**Frames of Reference**

*The three humours*

This frame of reference works on 3 humours that permeate the human being, metaphorically termed earth, wind and fire. For ideal health the three humours must be in perfect balance. They are influenced by diet, thoughts, habits and the environment. Of these, only the latter 3 are relevant to occupational therapy. Earth is necessary for functioning of the sensate mind. Table 3 shows symptoms of and treatments for earth imbalance.

Wind balance is essential for intuition. Table 4 shows symptoms of and treatments for wind imbalance.

Fire is essential for the functioning of the reasoning mind. It is associated with will power. Table 5 shows symptoms of and treatments for fire imbalance.

<p>| Table 3. Earth symptoms and treatments (Lad, 1984, Frawley, 1994). |</p>
<table>
<thead>
<tr>
<th>Signs of excessive earth</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of drive, greed, attachment (hoarding behavior), envy, slow to learn but with good long-term memory, lethargy, obesity.</td>
<td>Breathing exercises, physical exercise, travel, stimulating leisure activities.</td>
</tr>
<tr>
<td>Signs of inadequate earth</td>
<td>Left nostril breathing, rest, meditation, control of sexual energy, regular routine, environmental adaptation (housing), facilitation of: acquisition of necessities, household tasks, economic life, religious devotion or faith occupations, informal and formal associations and relationships, love, intimate relationships</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signs of excessive wind</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental instability, rapid thought with good short-term but poor long-term memory, rapid speech, recklessness, indecisiveness, poor financial management due to compulsive spending, loss of confidence, anxiety, hyperventilation, insomnia, neurological weakness, intolerance of cold conditions, fatigue, emaciation, cracked tongue, brittle nails.</td>
<td>Rest, meditation, regular routine, environmental adaptation (housing), facilitation of household tasks and economic life.</td>
</tr>
<tr>
<td>Signs of inadequate wind</td>
<td>Breathing exercises, meditation, physical exercise, travel, music.</td>
</tr>
</tbody>
</table>

<p>| Table 4. Wind symptoms and treatments (Lad, 1984, Frawley, 1994). |</p>
<table>
<thead>
<tr>
<th>Signs of excessive wind</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental instability, rapid thought with good short-term but poor long-term memory, rapid speech, recklessness, indecisiveness, poor financial management due to compulsive spending, loss of confidence, anxiety, hyperventilation, insomnia, neurological weakness, intolerance of cold conditions, fatigue, emaciation, cracked tongue, brittle nails.</td>
<td>Rest, meditation, regular routine, environmental adaptation (housing), facilitation of household tasks and economic life.</td>
</tr>
<tr>
<td>Signs of inadequate wind</td>
<td>Breathing exercises, meditation, physical exercise, travel, music.</td>
</tr>
</tbody>
</table>
The three natures

The material universe is characterised by three natures: essence, activity and inertia (Sharma & Clark, 1998). Essence is pure in nature and is the closest of the three to Brahman. In humans it is responsible for altruistic motivation, tolerance and compassion. Activity is the nature of passion. This nature underlies the drives that keep the material body alive and ambition for material achievement. Inertia is the nature of ignorance.

All three natures are required for human life. Table 6 illustrates disorders caused by imbalance of the natures. As material existence is impermanent and the ego is an illusion of individuality that hides a constant state of bliss, many have argued that life is pointless and we should try to escape from it. Inertia enables humans to suspend their disbelief and remain involved in life. Without it there would be no motivation for life. Passion (activity) is required to motivate any achievement in the material world. Through the practice of yoga it is possible to leave the inertia and activity behind to reach constant awareness of the underlying bliss. This stage of yoga practice is termed ‘Turiya’. Once Turiya has been achieved, the human body can only survive for three days as the yogi has no motivation to maintain it (True World Order, 2000). Without essence the ego is motivated by activity and inertia alone. When this happens people are totally vulnerable to societal influences and act in ways incongruent with their inner selves. As the energy of material being originates from the self, it progressively weakens if it becomes incongruent with the self. This predisposes people to all manors of diseases and leads to the decay of the human mind and body.

Disorders of the Three Natures are self-perpetuating. A depressed person for example, may withdraw from activity (NICE, 2007) and view everything from a negative perspective.

---

**Table 5.** Fire symptoms and treatments (Lad, 1984, Frawley, 1994).

<table>
<thead>
<tr>
<th>Signs of excessive fire</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overly critical mind, dominating personality, paranoia, irritability, anger, hatred, burning headaches, food cravings for sweet and bitter tastes, moles and freckles, intolerance of heat or sunlight, excessive perspiration.</td>
<td>Conflict resolution, environmental adaptation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signs of inadequate fire</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cloudy perception, irrational judgement, confused speech, uncritical acceptance, passivity.</td>
<td><strong>Right nostril breathing</strong>, clear honest communication, silence (avoiding unnecessary communication), yoga (for spiritual development), housing, environmental adaptation, stimulating leisure activities.</td>
</tr>
</tbody>
</table>

---

**Table 6.** The three natures.

<table>
<thead>
<tr>
<th>Nature</th>
<th>Human characteristic</th>
<th>Problems (if excessive)</th>
</tr>
</thead>
<tbody>
<tr>
<td>activity</td>
<td>Passion: ambition and drive, attachment.</td>
<td>Lust, frustration, anger, hatred, violence, mania.</td>
</tr>
<tr>
<td>inertia</td>
<td>Ignorance: laziness, withdrawal.</td>
<td>Selfishness, loss of libido, depression, lethargy.</td>
</tr>
</tbody>
</table>

are beyond the scope of this article but were described in detail by Lad (1984).

---
(Griffin & Tyrell, 1999), thus increasing his or her depression, while an angry person is likely to create conflict that provokes anger. Such disorders must therefore be treated with facilitated occupational change.

**The tantric frame of reference**

Tantra is a branch of yoga that values material existence (Isaacs, 2006). Its origins have been shrouded by politics (Lysebeth, 1995), but it has permeated through both the Hindu and Buddhist religions. Sexual intercourse, meat eating and alcohol consumption feature as spiritual practices in some aspects of Tantra (Frawley, 1994). The body and mind are seen as tools for spiritual development. For this reason, great care is taken of them. This is reflected by the popular saying “my body is a temple”. As the body and mind were designed specifically to achieve the needs of the self, they suffer undue stress if they follow any path not conducive to fulfilling those desires. Such stress renders one vulnerable to disease.

Consciousness is a continuum but for convenience this frame of reference divides it into 7 domains. A balance of consciousness between all 7 domains is essential for survival of the human mind and body. People may sacrifice their needs for honest communication in order to maintain a sense of power (Revill, 2003; Page, 2006) though material success and hedonism if unbalanced are not protective of mental health (Stack, 1987; Read & Purse, 2006; Vaughn, 2007). This is likely to happen if intuition is not permitted to guide one to the altruistic motives of the self. Ultimate success with Tantra depends on this altruistic motivation (Dalai Lama et al., 2005). At the other extreme advanced yogis may become incapable of survival due to excessive altruism, or may neglect their physical bodies in favour of spiritual pursuits. One aspect of Tantra utilises sexual energy to reach bliss consciousness (Gyatso, 1995), but this has poor generalisability and so will not be described in this paper.

It is important to remember that the significance of any occupation depends on individual interpretation (Paley et al., 2006). Taking military bravery as an example, one soldier may undertake acts of courage to build social status for egotistical reasons. Another may undertake similar acts for altruistic reasons to satisfy universal consciousness.
Intervention Modalities

Ayurvedic concepts traditionally influenced government and societal rules, environmental planning and personal occupational routines. Yoga is the main occupational therapy-relevant ayurvedic intervention. Western occupational therapists have used yoga for mental health (Anderson & Winterbone, 1979; Eakin, 1979; Giles, 1985; Kluge, 2004), health services for older people (Batcheller, 2005), paediatrics (Behar, 2005; Bowen-Irish, 2005), neurology (Volz, 2002), occupational health (Taylor, 2001), and general physical rehabilitation (Cooney, 2005) specifically to treat autism (Behar, 2005) attention deficit disorder, Down syndrome and cerebral palsy (Klimas, 2003), multiple sclerosis (Volz, 2002), anxiety and respiratory disorders (Sabel & Gallagher, 2004), osteoarthritis and polio (Batcheller, 2005), reduced exercise tolerance (Bowen-Irish, 2005) and work-related injuries (Taylor, 2001). Reported benefits have included decreased anxiety (Sabel & Gallagher, 2004), improved digestion (Cantu, 2005), muscle tone, strength, flexibility (Bowen-Irish, 2005), lateral thinking and social integration (Batcheller, 2005), respiratory function (Proctor, 2004), joint control and posture (Volz, 2002). Yoga is a system of occupational regulation. It can be broken down into different branches, each more or less applicable to specific occupational domains and treatment approaches.

Karma yoga

Karma yoga is altruistic work (True World Order, 2000). This is the vocational rehabilitation element of the ayurvedic system and should be considered when the Tantric frame of reference reveals lacking altruistic occupations causing a lack of meaning in life. As the self is continuous with the Universe a sense of lasting fulfilment is unlikely unless one is contributing to the Universe in some way. Karma yoga can be used to reduce inertia and depending on the type of work chosen may reduce the earth humour. Excessive work can deplete earth and fire leading to excessive wind. Work-life balance should therefore be maintained ensuring that all of the seven domains of consciousness specified in the Tantric frame of reference are occupationally satisfied. The type of work chosen should be according to an individual’s intuition. Many people remain in jobs that make them unhappy due to social pressure. Adverse social pressures are remedied with Jnana Yoga.

Bhakti yoga

Bhakti yoga is any devotional religious activity (True World Order, 2000). It increases the earth humour but is only applicable to those individuals who feel it is important. People that value this area of occupation should be encouraged to keep protected time for it during their everyday routines as well as during convalescence. People of no religion may also practise bhakti with their own personal methods if they are devoted to a higher power.

Raja yoga

Raja yoga is a structured method for facilitating psychological and physical development. It consists of simple rules for ethical social conduct, postural exercises, breathing exercises and meditation (Taylor, 2003). The social conduct rules are: non-violence, non-stealing, non-lying, non-attachment and moderation of the senses (Cirone, 2005). These strengthen social congruence by increasing trust. Non-attachment prevents greed and envy, and moderation of the senses subdues the sensate mind thereby increasing clarity of intuition. This reduces the possibility of addictions and maladaptive changes that may lead to secondary anti-social behaviour.

Suppression or repression of any impulses or desires is believed to be harmful (Lad, 1984). For this reason moderation of the senses using will power alone is not advised. Breathing exercises and meditation used in yoga slow the sensate mind to a stop. As the physical body and sensate mind manifest from the self, deep meditation on any thoughts or desires from the sensate mind ultimately leads back to the self that is constantly content (Osho, 1998). This naturally dulls lust and the effects of society’s influences on the mind. There are several breathing exercises and
meditation techniques used in yoga. Some of these work on specific humours and domains of consciousness. Description of the techniques is beyond the scope of this article. The breathing exercises were described in detail by Swami Vishnu-devananda (1988) and have been the subject of literature reviews (Shannahoff-Khalsa, 2001; Mailoo, 2006a). One-hundred and twelve simple meditations were described by Osho (1998) and more complex ones by the Dalai Lama et al. (2005).

Steady postures are used in raja yoga to improve concentration and maintain physical fitness. Particular postures are used to increase or reduce the influence of particular humours but this modality falls into the domain of physiotherapy (Taylor & Majmundar, 2000) rather than occupational therapy.

**Jnana yoga**

Jnana yoga is the process of study and critical analysis to determine the truth of all things (True World Order, 2000). This is the cognitive-behavioural element of ayurveda. Jnana yoga is used to discriminate between a person’s true desire and the desires of the sensate mind that arise due to societal influences. Products of Jnana yoga include emotional release, detachment and preparation for death.

Emotional Release: Society exerts pressure on individuals to repress their natural drives though fear, guilt, and shame (Kapke, 2000). These feelings are processed by the ego. Identifying the impermanence of society, the ego and the feelings it generates and comparing it to the permanence of the self liberates one from these restraints.

Detachment: Society and the ego create psychological attachments that may make the will of the self impractical. Examples of these attachments may include addictions, interpersonal relationships (such as marriage), religious beliefs or material possessions (such as a mortgage). Attachment to financial debt due to consumerist behaviour has become a Western norm (Fincher, 1999; Healey, 2007). Once the impermanence of the material world is recognised and accepted, distressing attachments seem illogical and are more easily left aside. Material experiences that are stressful with attachment can be enjoyed blissfully in the absence of attachment. This was illustrated well by Mendes (1999) with the narrative of a man who was very unhappy living a normal secure middle-class North American lifestyle but was able to find bliss (even in death) by detachment.

Dying: Many fear dying is a passive process. Death is a taboo subject in many cultures and no preparation is made for it. Jnana yoga identifies the impermanence of material existence and the inevitability of death. Death may be less devastating for individuals and families who are prepared for it. People who reflect on the inevitability of death may have preferences as to how it happens. This is not an indication for suicide, as Tantra views the human body as a sacred vehicle to be cared for, but when people are dying their experiences may feel less traumatic if their wishes are followed. Reflection on the certainty of death increases the appreciation of life and the motivation to live it well (Jinpa et al., 2006). According to ayurveda ones desires at the end of life shape ones next incarnation. For this reason a main aim of yoga is attainment of a pure desire-less state of mind before death. This may require fulfilment of all desires during life or years of meditation.

**Environmental interventions**

Inner peace is difficult to find in cities due to imbalance between human and plant life (Redfield 1994) that leads to depletion of the wind humour (Frawley, 1994). For this reason serious yogis usually move to remote areas. This could be avoided if planning of cities accounted for better harmony with and tolerance of nature (Fig. 1).

Ayurvedic planning as carried out according to a process named ‘vastu’. This takes into account the directions of sunlight and natural magnetic fields. Vastu is complex and beyond the scope of this article. A detailed explanation can be found in Sharma & Rao (2005). The adaptations used by modern Western occupational therapists to allow physically impaired people freedom of occupation can be applied using the Tantric frame of reference. Bathing and toileting equipment for
example may be needed to satisfy the material consciousness’ need for hygiene occupations.

Political and social intervention

Societal pressures can discourage people from acting according to their own occupational needs (Wilcock, 2001), and social norms can cloud intuition, preventing people from identifying lifestyle changes that would benefit them (Vicente et al., 2005). Internalised societal values may inspire unnatural occupational efforts. Common examples in modern societies are dieting or excessive exercise to compensate for body image dissatisfaction (Foltz-Gray, 2006). Occupational alienation may occur due to societal values or prejudice. Young people in the United Kingdom for example are alienated by the behaviour of adults (Redfield, 1994) and legislation restricting their engagement in paid employment and sexual activity. This limits their opportunities for occupations motivated by bodily and egotistical consciousness (Table 7). Homework given by schools teaches children to disregard occupational balance from an early age (Brown, 2007). Mismatches between occupational needs and opportunities may lead to maladaptive antisocial behaviour at individual (Johnson, 2006) or group (Balasingham, 2000) levels. In some Eastern societies people traditionally engaged in productive and family roles at the ages when these instincts emerged rather than at artificially socially determined ages (Rasamandala, 1994; Osho, 2001). Another cause of occupational alienation in the United Kingdom is the over-standardised education system in which children are expected to learn- and are tested on an array of subjects regardless of personal interest. This can alienate people who might experience greater success with more vocational schemes. In Vedic culture yogis were responsible for advising politicians and teaching the youth. Modern occupational therapists may have to adopt similar roles in the future.

Limitations of this Paper

A thorough understanding of yoga or ayurveda would require several weeks of full-time study and is therefore beyond the scope of this journal article. The concepts presented here have been highly simplified and described without the authentic Sanskrit terminology. The terminology used in this paper is not suitable for professional communication with practitioners of authentic ayurveda, or service-users from cultural backgrounds familiar with these concepts.
Aspects of the yoga, ayurveda and Tantra that cannot be easily generalised or applied to modern societies have been omitted, as they may not be relevant outside their historical context. This article is broad and lacks specific detail for each area of the subject matter covered. It was written this way to substantially reduce the time and effort required by occupational therapists to gain a contextual understanding of ayurveda and yoga. Appendix therefore provides recommended reading and networking opportunities for occupational therapists wishing to deepen their understanding of the concepts presented.

Acknowledgements

This paper does not represent the policies or practices of any National Health Service Trust.

This work was completed in respectful memory of Mailoo Jeyaratnam LL.B., M.Sc., M.I.F.S.T., M.I.Mgt., C.Chem., F.R.S.C., Homeopath, LLFCH 27/6/1929-29/6/2004

The author wishes to thank the Asian Journal of Occupational Therapy’s anonymous reviewer(s) for their constructive feedback.

References


Cirone, M.W. (2005). Yoga philosophy in yoga therapy: teaching the yamas and niyamas to
Revill, J. (2003, May 11). Hospitals faking cuts in

### Appendix: Recommended Learning Resources

1. Vedic Perspectives of the Universe:
2. Vedic Psychology:
3. Vedic Physiology:
4. The Three Natures (frame of reference):
5. The Tantric Frame of Reference:
6. Assessment and Diagnostics:
7. Raja Yoga:
Three Rivers Press.

8. Meditation:

9. Detachment:

10. Active Dying:
    Basic: http://death-and-dying.org/

11. Vastu:

12. Practical Learning:
    It is not the author’s intention to endorse any educational establishment. Readers may discuss training opportunities with occupational therapists experienced in yoga at these internet web-pages: http://www.dynamicsystemsrehab.com//directory.php
    http://www.facebook.com/group.php?gid=2352527880