



Dhyan According To Traditional Scriptures In Modern Era

Reetu Singh* & Dr. Bhanu Pratap Prajapati**

*Research Scholar, Dept. of Physical Education, Yoga and Sports Science, Guru Ghasidas
Vishwavidyalaya (A Central University) Bilaspur, Chhattisgarh, India

**Dr. Bhanu Pratap Prajapati, Sports Officer Govt. College Tendukheda, District -Narsingpur, Madhya
Pradesh, India

Abstract: People today, especially students, are overburdened with mental exertion to the point where many suffer memory loss and impairment of focus. The mind's tendency to flit from one idea to the next renders it unfocused and unable to concentrate. Students who practice dhyana (meditation) gain a deeper understanding of their own self and experience a greater sense of calm and contentment. The results demonstrated that dhyana, concentration, and smriti have a substantial impact on students. Raj yoga's dhyana, or meditation, is a unique method of calming the mind (satang yoga). The process is voluntary at first, but thereafter becomes involuntary. Since there are no withdrawal symptoms, it is a very unique product. Shrimad Bhagavad-Gita's method is straightforward and doesn't necessitate the use of any external media, such as music or video. Even saints' practices like prekshya dhyana, transcendental meditation, etc. can be used. In the Shrimad Bhagavad-Gita's method, the approach is simple and straightforward.

Hypertension increases the risk of heart attack, stroke, glaucoma, and kidney failure. Maintaining a blood pressure (BP) of 140/90 mm Hg or less is recommended to reduce the long-term effects of hypertension. Meditation aids with blood pressure management. Immediately, it lowers blood pressure, lowers the pulse, and increases cardiac strength, while the long-term effects of meditation regulate complex bio-chemical and brain processes to lower blood pressure. Hypertension and its complications can be better controlled when meditation is practiced on a regular basis.

Key Words: Yoga, Dhyan, Vedic, Blood Pressure, Yogashastra, Buddhi, Medha, Smriti.

INTRODUCTION

You are in the pure condition of dhyān, which transcends both your inner and outside sense. Samādhi is the culmination of Dhyān. It's a tool for spiritual development in Indian mythology. Western psychologists associate it with mental focus and regard it as a distinct psychological state. However, this is just the beginning of Dhyān. Even if Dhyān's methods and nature vary, recent scientific research confirms and emphasises the benefits of the practice.

When practicing yoga, the term Dhyān is used to refer to the "dhyai" dhatu, which is used in the practice of "lat" practicing. It refers to the natural tendency and direction of the senses, or contemplation. ekagrata, or focus, is a key component of Patanjali Yogashastra's teachings. When one's inner thought seeks to see the truth, it's called Dhyān by Sri Aurobindo. Ekagrata is the practice of concentrating one's attention on a single object or subject and maintaining that focus.

Dhyān ragopahati dhyānam, according to Sankhya philosophy, is the elimination of attachment. With a tranquil mind, Agni Puran defines contemplation as Dhyān. Dhyān is also being absorbed in Brahmi Bhav. To put it another way: Dhyān is the practice of concentrating one's thoughts on an object, such as the dhatu Visnu Chinta muhurmuhi. You can't get away from the fact that Anaksi's mind is filled with thoughts of death. "Brahma" means "the creator" in Sanskrit. It has been employed in Garud Puran as Brahma Chintan: Dhyān. 'Aham Brahmetyavasthanam samardhibrahmana' is the name of the place where the Buddha attained enlightenment,' says the hymn.

Picture: 1



According to the Mahabharata, Dhyān is the yogi's finest and greatest accomplishment. It comes in two varieties: pranayama and ekagrata. A person can have twelve different types of dharanas, according to Bhavedishvar sangatvam dhyānam dvadvasham dharanam, by combining pratyahara with five other methods. Another name for fully dedicating oneself to one's ista is Dhyān samahitenmanasam chaitayantavartita. tmano abhista deshnam dhyandhyanyabhi uchyate

A Dhyān can take three forms, according to Tantrasar. Sagun and Nirgun Dhyān, or sarup and Arup Dhyān, are the most common divisions. Full awareness (central area), dim or hazy awareness (middle region), and utter unconsciousness are the three categories used by modern philosophers (outer region). An

extremely fast transition from one condition to another. Individual or group Dhyana approaches are recommended by a variety of experts. With closed or open eyes, in stillness or even while singing, it can be practiced. Pranayama is the means through which Jains reach the enlightened state of Dhyana. In contrast to ISKCON devotees, those who practice transcendental meditation do it in silence.

Dhyana is Patanjali's eight-limbed yoga system's seventh step. Just before samadhi, this is the penultimate stage. Although the word "meditation" is often used interchangeably with Dhyana, the latter is a far deeper and more profound phrase. It is necessary to have completed the previous six phases of Yama, ethics; self-restraint; asana; pranayama; pratyahara; and dharana in order to practice dhyana, which is prolonged concentration. To practice Yama is to abstain from acts of violence, deception, theft, sensuality, and accumulation of wealth. Purity, contentment, austerity, the study of scriptures, and yielding to a higher principle are all examples of niyama's, which can be practiced. 'Asana' refers to good physical alignment, while 'pranayama' refers to mindful breathing. By dharana, we mean the act of focusing one's attention on a single point in the mind and allowing all other mental changes to be restricted to that one location in the mind. Dharana, or single-pointed attention, is a form of meditation.

In early Vedic theology, the seers of the Vedas did not employ the word "dhyana." However, they were aware of the importance of the mind and its potential to materialize things via their own personal experiences. Puritans believed that man may achieve enlightenment by practising austerity and meditating on the universal Self, referred to as Isvara or Brahman by Hindus. The sage Vishwamitra's invention of a third heaven (the trisanku) serves as an example. It is claimed by British historian Jenine Miller that the Vedic prayer was an example of dhyana in which "seeing and sound" are linked with "seership and singing."

Upanishad philosophy and the belief that man personified the entire cosmos within himself and by himself, and that deep within him resided an eternal principle that was Universal Self in its particular aspect, appear to have influenced the development of the Vedic concept of Dhyana or meditation. Alternatively, the universe could be viewed as an individual self-portrait of man (purusha), and the other way around. Scholarly thinkers favoured both sides of the debate. Our existence may be a fleeting illusion if the former is accurate, and if the latter is true, our universe may be a fabrication. For millennia, Hindu scholars have been fascinated by the idea that the world is unreal or illusory, and Shankara's monistic (advaita) philosophy reflects this.

Inter Relationship of Buddhi, Medha and Smriti

Buddhi, Medhi, and Smriti are all steps in the same process after a careful study. If you don't have the other, you're missing out on things. Only until the three aspects of the psyche (Bodhi, Medhi, and Smriti) merge can the process of recall begin. In this regard, they are indistinguishable. Understanding this can be done by comparing the cognitive process to that of a machine. Everyone in today's technologically advanced society understands the value and necessity of a computer. Initially, the most important data is input, stored, and can be retrieved at any time in the future just as it was originally stored. Computers come in all shapes and sizes, and the human brain is no exception. Just because a computer can't think for itself doesn't mean it's any less intelligent than an actual human being, who has a soul and performs every action through the

conjugation of Manas. There would be no benefit to remembering anything at all if one's memory was unable to retain information or experiences. This is true for humans as well. Smriti, on the other hand, necessitates systematic interpretation and retention. Smriti creates in this way when encoding, retention, and remembering of events come together. Whereas Buddhi aids in encoding, Medh aids in memory retention, and Smriti aids in recollection in this case.

Types of Dhyana

Two Basic Varieties of Dhyana Exist.

1. According to the Atharvaveda, dhyana - Saguna dhyana is a type of Saguna dhyana, which means meditating on an icon or symbol. When you control your breathing and focus your thoughts on your selected God for sixty seconds, you are practicing Saguna Dhyana.
2. To regulate one's soul (atman) is to practice Nirgun dhyana (shandilyopnishad).

Dhyana yoga aims to help you see yourself and the rest of the universe as one interconnected whole. To become closer to this frame of mind, follow these steps:

1. Dharana is a good place to start your meditation practice. Your source of consciousness, your thoughts and feelings, and your meditating object—such as the breath or an external object like a candle—are all parts of awareness that you may encounter during dharana meditation.
2. Stop thinking and feeling about it. As you begin to relax into dhyana, you can better focus your attention on the meditation. In the absence of ideas and feelings, you will be able to concentrate just on the target of your meditation.
3. Add a mudra to it. Using a mudra or hand position to meditate might help you focus your thoughts. As you sit down, place your hands palms up in a cross-legged position. The Triratna, or three jewels of Buddhism, are symbolized by a triangle formed by the thumbs and index fingers (divine law).
4. Practice. It takes practice to master the art of self-soothing. Although dhyana may only last for a few moments at first, with practice, it becomes longer and longer. Dharana is the finest way to prepare for dhyana.

REVIEW OF LITERATURE

It is possible to open up analytic space beyond normative assertions regarding whether or not a specific therapy 'really' works by employing the health imaginary. Plato and religious anthropology have shown us time and time again that healing processes are far more complex than a simple cause-and-effect relationship (Csordas 2002; Thompson, Ritenbaugh, and Nichter 2009).

As a result of the scientific discourse that evolved in the nineteenth century, Iyengar's notion of postural yoga was influenced (De Michelis 2004)

As a result, the hypothesis of the five sheaths explains why biomedicine alone cannot treat certain disorders. It is Patanjali's understanding of yoga as the "cessation of the modifications of mind" in the fourth century

that links yoga therapy to Patanjali's goal of physical and emotional well-being rather than spiritual self-education (refining the wisdom sheath) (Nagarathna and Nagendra 2015, 3)

Assumptions about the nature of meditation are common among reviewers and academics, however this is erroneous. In other research, there are no distinctions made between the various meditation approaches and the various levels of growth. Accordingly, comparison of data from such studies may not be useful in describing their outcomes and claimed benefits without taking into account differences in these approaches' impacts. As cited in (Rao and Paranjpe, 2008),

An extensive meta-analysis was conducted by Ospina and colleagues in 2007 on a wide range of studies involving five broad meditation styles (mantra meditation, mindfulness meditation, Yoga, Tai Chi, and Qi Gong). They argued that the favourable therapeutic effects and well-being acquired by somatic relaxation training and prayer may not be specific to meditation practices but can be achieved by somatic relaxation training and prayer.

Mindfulness has recently been presented as a cognitive behavioural, rather than physiological, approach to meditation. The goal of mindfulness is to cultivate a more acute awareness of one's detectable mental processes, even when one is not consciously aware of it. As stated by Jon Kabat-Zinn in 2003, "teaching practitioners to attend to a wide range of shifting objects of attention while retaining moment-to-moment awareness (mindfulness)" (p. 145), rather than limiting one's focus to a single item such as a mantra. Since then, several mindfulness-based interventions have been established for therapeutic and empirical research on the topic, such as the Mindfulness-Based Stress Reduction (MBSR: an 8-week programme with 3 hours of weekly group sessions and daily homework). The two practices of mindfulness and concentration do not have to be in opposition (in some Buddhist contexts, concentration meditation necessitates mindfulness), and numerous researchers have presented diverse viewpoints on the meanings and origins of mindfulness (Williams and Kabat-Zinn, 2011).

Chiesa (2012) has highlighted the overlap that exists between the idea of mindfulness and other related ideas such as equanimity, ethics, knowledge, compassion, and so on. Exploration of context-effects, non-attentional components (such as sensory deprivation or augmentation approaches, chaotic as opposed to relaxed breathing), and moral disciplines could be very helpful in this regard. Findings from single case studies as well as group comparisons may potentially contribute useful contributions to the study of meditation, given that there are likely to be numerous stages involved in different types of meditation.

OBJECTIVES OF THE STUDY

- For the purpose of determining the health benefits of yoga and its effect on quality of life.
- To compare the effects of yoga with those of a control group.
- Yoga breathing (Pranayama) and meditation techniques are to be studied.
- To examine Dayan's postures.

METHODOLOGY

Data gathering, data evaluation, and study results based on study findings are all part of a research technique. A strategy for conducting a study is known as a research technique. Research can be described as the systematic collection and analysis of facts and information for the progress of knowledge in any field. Methodological strategies are used to find solutions to intellectual and practical issues in this research.

RESULTS AND DISCUSSION

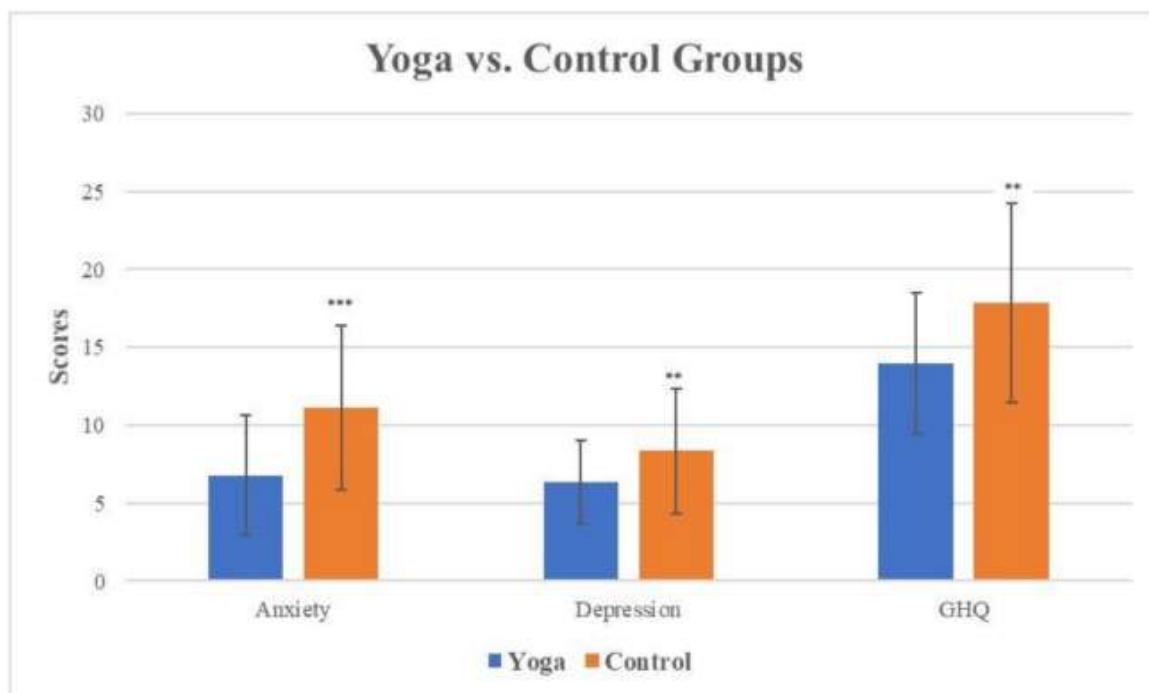
Patanjali's two limbs of Ashtanga Yoga, dharana and dhyana, allow for a mental-level operation.

Table 1

Yogic Breathing (Pranayama) and Meditation Practices

<i>Pranayama</i>	<i>Rounds</i>
<i>Vibhagiya pranayama (sectional breathing)</i>	5 Rounds
<i>Suryaanuloma viloma (4 times in a day)</i>	27 Round
<i>Nadisuddhi (4 times in a day)</i>	9 Rounds
<i>AAA chanting</i>	21 Rounds
<i>Meditation practices</i>	
<i>OM Meditation</i>	15 min
<i>Cycle Meditation (CM)</i>	30 min

The cultivation of the mind is done by first focusing on the mind (dharana) and then relaxing the mind in a single thought (dharana samadhi) (dhyana). The mind is able to remain calm during meditation because to gradual habituation. Table 1 is a list of many forms of yoga.

Figure 2**Figure 2** The comparisons between yoga and control groups in all assessments

After two weeks of an integrated approach to yoga treatment, anxiety ($p = 0.04$, 23 %) and depression ($p = 0.001$, 32 %) ratings were significantly reduced.

Table 2**Effect of Yoga on Health-Related Quality of Life.**

Health-related quality of life characteristic	Mann-Whitney <i>U</i> test
Quality of life	924263.500
Adopting healthy lifestyle	915778.500
Coping with day-to-day stress	898958.000
Improving workplace productivity	908140.500
Staying healthy during the COVID-19 pandemic	896486.500

Wilcoxon <i>W</i>	Z statistic	<i>P</i> value
2075666.500	-13.381	<.001
2067181.500	-13.814	<.001
2050361.000	-14.424	<.001
2059543.500	-14.016	<.001
2047889.500	-15.060	<.001

Participants who practiced yoga on a regular basis showed statistically greater improvements in all areas of HRQOL than those who did not.

CONCLUSION

By reducing blood pressure, oxidative stress, and dyslipidemia through a psycho-spiritual healing process known as dhyana, all of the known risk factors for heart disease are addressed, lowering the likelihood of cardiovascular disease. Further reducing the risk of cardiovascular disease (CVD) is achieved by reducing IMT, i.e., the amount of arteriosclerotic and atherosclerotic alterations in the arteries. Vata is the sole regulator of all bodily functions, including the propulsion of rasa (the nutritional fluid-plasma). All tissues and metabolic processes will be appropriately nourished and regularized if the Gati (movement) of rasa in the body is proper. When tissues are well-nourished, they are able to endure stress. Thus, the pathogenic abnormalities in IMT that are addressed in this way diminish cardiovascular disease. This may explain why the state of effortless meditation (dhyana) has been linked to improved perception. During dhyana, functional magnetic resonance imaging (fMRI) demonstrated discrete areas of activation linked with sophisticated functions, such as the ability to separate deliberately from the external world.

REFERENCES

1. Sibinga EM, Kemper KJ (2010) Complementary, holistic, and integrative medicine: meditation practices for pediatric health. *Pediatr Rev* 31: e91-e103.
2. Canter PH, Ernst E (2003) The cumulative effects of Transcendental Meditation on cognitive function--a systematic review of randomised controlled trials. *Wien Klin Wochenschr* 115: 758-766.
3. Castillo-Richmond A, Schneider RH, Alexander CN, Cook R, Myers H, et al. (2000) Effects of stress reduction on carotid atherosclerosis in hypertensive African Americans. *Stroke* 31: 568-573.
4. Saraswati, Swami Satyananda. *Meditation from the Tantras*, Yoga Publication Trust, Munger, Bihar, 2005.
5. Sivananda, Swami. *The Bhagavad Gita*, The Divine Life Society, P.O.- Shivanand Nagar, 249192. Dist.- Tehri-Garhwal, Uttaranchal, Himalayas, India, 2003.
6. Swarup Ananda, Swami. *Shrimad Bhagavad Gita*, Advaita Ashrama, 5 Delhi Entally Road, Kolkata – 700014, March 2016.
7. K. Boehm, T. Ostermann, S. Milazzo, and A. Bussing, “E ” effects of yoga interventions on fatigue: a meta-analysis,” in press.
8. T. Krisana Prakorn kit, W. Krisana Prakorn kit, N. Piyavhatkul, and M. Leapai boon, “Meditation therapy for anxiety disorders,” *Cochrane Database of Systematic Reviews*, Article ID CD004998, 2006.
9. C. S. Chong, M. Tsuna Ka, H. W. Tsang, E. P. Chan, and W. M. Cheung, “Effects of yoga on stress management in healthy adults: a systematic review,” *Alternative Therapies in Health and Medicine*, vol. 17, no. 1, pp. 32–38, 2011.
10. S. Telles, N. Singh, and A. Balkrishna, “Managing mental health disorders resulting from trauma through yoga: a review,” *Depression Research and Treatment*, vol. 2012, Article ID 401513, 9 pages, 2012.

11. K. P. Roland, J. M. Jakobi, and G. R. Jones, "Does yoga engender fitness in older adults? A critical review," *Journal of Aging and Physical Activity*, vol. 19, no. 1, pp. 62–79, 2011.
12. Csordas, Thomas. 2002. *Body/Meaning/Healing*. Hounds mill: Palgrave Macmillan.
13. Thompson, Jennifer Jo., Cheryl Ritenbaugh, and Mark Nichter. 2009. "Reconsidering the Placebo Response from a Broad Anthropological Perspective." *Culture, Medicine and Psychiatry* 33 (1): 112–152. doi:10.1007/s11013-008-9122-2.
14. De Michelis, Elizabeth. 2004. *A History of Modern Yoga: Patanjali and Western Esotericism*. London: Continuum.
15. Nagarathna, Raghuram, and Hongasandro Ramarao Nagendra. 2015. *Yoga for Promotion of Positive Health*. Bangalore: Swami Vivekananda Yoga Prakashan.
16. Rao, K. R., and Paranjpe, A. C. (2008). "Yoga psychology: theory and application," in *Handbook of Indian Psychology*, eds K. R. Rao, A. C. Paranjpe, and A. K. Dalal (New Delhi: Cambridge University Press India), 163–185.
17. Ospina, M. B., Bond, T. K., Karkhaneh, M., Tjosvold, L., Vandermeer, B., Liang, Y., et al. (2007). *Meditation Practices for Health: State of the Research. Evidence Report/Technology Assessment No. 155*. Rockville, MD: University of Alberta Evidence-Based Practice Center, Agency for Healthcare Research and Quality. Available at: <http://www.ahrq.gov/clinic/tp/medittp.htm> (accessed November 01, 2011).
18. Kabat-Zinn, J. (2003). Mindfulness-based interventions in context: past, present, and future. *Clin. psychol. Sci. Pract.* 10, 144–156.
19. Williams, J. M. G., and Kabat-Zinn, J. (2011). Mindfulness: diverse perspectives on its meaning, origins, and multiple applications at the intersection of science and dharma. *Contemp. Buddha*. 12, 1–18.
20. Chiesa, A. (2012). The difficulty of defining mindfulness: current thought and critical issues. *Mindfulness*. doi: 10.1007/s12671-012-0123-4.
21. H. E. Tilbrook, H. Cox, C. E. Hewitt et al., "Yoga for chronic low back pain: a randomized trial," *Annals of Internal Medicine*, vol. 155, no. 9, pp. 569–578, 2011
22. J.N. Post-White, D.H *Mind-Body Medicine in Integrative Pediatric Oncology*. Springer, Berlin, Heidelberg (2012).