Received: 20 July 2025	Revised: 15 Nov 2025	Accepted: 20 Dec 2025

Review Article

IJAMH
A Step Towards Inner Peace

ISSN: 3048-572X

"ACHARA RASAYANA AND POSITIVE PSYCHOLOGY: CONCEPTUAL PARALLELS AND EVIDENCE FOR MENTAL WELL-BEING"

Dr. Abhay Gandhi[1]

AFFILIATIONS:
1. Director, Ira Consultancy & Research Organisation, Bhosari, Pune, Maharashtra 411026

CORRESPONDENCE:
Dr. Abhay Gandhi
EMAIL ID:
director@icro.co.in

FUNDING INFORMATION:
Not Applicable

How to cite this article:
Gandhi A, "Achara Rasayana and positive psychology: conceptual parallels and evidence for mental well-being" Int J Ayurvedic Med Ment Health. 2025;2(4):25-29.
Sri. 2025.1004.ijamh.04.04

ABSTRACT:

Background: Charaka describes Achara Rasayana, a "rejuvenation through conduct", which promises the benefits of Rasayana drugs to a person who lives truthfully, without anger, with compassion, self-control and respect for others. Positive psychology, which emerged in the late 1990s, studies character strengths, positive emotions and practices that improve well-being. **Objective:** To compare the components of Achara Rasayana with constructs studied in positive psychology, and to summarise evidence that related behaviours improve mental well-being. **Methods:** Narrative review of the Achara Rasayana passage in Charaka Samhita and its commentary, Ayurveda literature on Achara Rasayana, and selected meta-analyses and landmark studies in positive psychology and behavioural medicine. **Results:** The qualities listed in Achara Rasayana can be grouped into honesty and self-restraint, compassion and non-violence, generosity and service, respect and gratitude, regulated daily habits, and spiritual practice. Each group corresponds to a character strength or intervention studied in positive psychology. Meta-analyses show that positive psychology interventions produce small to moderate improvements in well-being and reductions in depressive symptoms, that social connection is associated with lower mortality, and that positive psychological well-being predicts longevity. Kindness, gratitude and compassion practices have specific supporting evidence. **Conclusion:** Achara Rasayana anticipates several central ideas of positive psychology and offers a culturally rooted framework for well-being promotion. It has not been tested as a package. Structured Achara Rasayana programmes should be developed and evaluated using validated well-being outcomes.

Keywords: Achara Rasayana; Sadvritta; positive psychology; character strengths; well-being; Rasayana

This is an open access article, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.

INTRODUCTION:

Rasayana is the branch of Ayurveda concerned with rejuvenation, longevity and the enhancement of physical and mental capacities. Most discussion of Rasayana concerns drugs such as Amalaki, Ashwagandha and Brahmi. However, Charaka also describes a form of Rasayana that requires no medicine at all: Achara Rasayana, rejuvenation through right conduct[1]. He states that a person who follows this conduct obtains the benefits of Rasayana, and that Rasayana drugs are most effective in people whose conduct is already sound.

Positive psychology was formally proposed by Seligman and Csikszentmihalyi in 2000 as a shift in psychology from an exclusive focus on illness to the study of what makes life worth living[2]. It studies positive emotions, character strengths and virtues, and the practices that promote flourishing. Its classification of character strengths, developed by Peterson and Seligman, identified virtues valued across cultures and traditions[3].

Several authors in the Ayurveda literature have pointed out that Achara Rasayana resembles a behavioural therapy for health and happiness[4,5]. This review takes that idea further by mapping each element of Achara Rasayana onto positive psychology constructs, and by summarising the strength of the evidence for each.

Methods:

The primary classical source was the Achara Rasayana passage in Charaka Samhita, Chikitsa Sthana 1(4)/30–35, with the commentary of Chakrapani, supported by the Sadvritta chapter (Sutra Sthana 8)[1]. Ayurveda literature on Achara Rasayana was identified through Google Scholar and IMSEAR. Positive psychology literature was identified through PubMed and Google Scholar with priority to meta-analyses and foundational papers. This is a narrative review.

Achara Rasayana in Charaka Samhita

The text

In the fourth part of the first chapter of Chikitsa Sthana, after describing several Rasayana formulations, Charaka lists the qualities of a person who obtains Rasayana benefits through conduct[1]. Such a person is truthful, free from anger, abstains from alcohol and sexual excess, does not harm others, does not exhaust himself, is calm and of pleasant speech, practises recitation and cleanliness, is steady, gives regularly in charity, practises austerity, respects teachers and elders, is free from cruelty, is compassionate, keeps balanced sleep and waking, takes milk and ghee regularly, knows the right measure of place and time, is skilled in reasoning, is free from arrogance, follows good conduct, is not narrow-minded, is devoted to spiritual knowledge, serves the elderly and those of faith, has self-control and studies the scriptures.

Interpretation

Chakrapani explains that these qualities themselves act as Rasayana, and that combining them with Rasayana drugs gives the full benefit[1]. Charaka thus makes a clear claim: good conduct has direct effects on health and longevity, comparable to those of medicine.

Relation to Sadvritta

Sadvritta, described in Sutra Sthana 8, is a broader code of personal, social and ethical conduct aimed at maintaining health and controlling the senses[1]. Achara Rasayana can be seen as a condensed, higher-level form of Sadvritta focused on the qualities most directly linked to rejuvenation.

Grouping the elements

Table 1: For analysis, the elements of Achara Rasayana can be grouped into six domains:

Domain	Elements of Achara Rasayana
Honesty and self-restraint	Truthfulness, freedom from anger, self-control, abstinence from alcohol and sexual excess, freedom from arrogance
Compassion and non-violence	Non-violence, compassion, freedom from cruelty, pleasant speech
Generosity and service	Regular charity, service to the elderly and those of faith
Respect and gratitude	Respect for teachers, elders and the sacred
Regulated daily habits	Balanced sleep and waking, not exhausting oneself, regular nourishing food, cleanliness, knowing the measure of place and time
Spiritual and intellectual practice	Recitation, austerity, study of scriptures, devotion to spiritual knowledge, calmness, steadiness

Positive psychology: key constructs and evidence

Character strengths and virtues

Peterson and Seligman's classification identified six broad virtues (wisdom, courage, humanity, justice, temperance and transcendence) and 24 character strengths, chosen because they appeared repeatedly across religious and philosophical traditions, including Indian ones[3]. Many Achara Rasayana qualities map directly onto these strengths.

Well-being as more than absence of illness

Positive psychology distinguishes mental health from the absence of mental illness. Ryff's model describes psychological well-being in terms of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth[6]. Keyes showed that people can lack mental illness but still be "languishing", and that "flourishing" is associated with better functioning[7]. Ayurveda has a similar idea in its definition

of health (Svastha), which includes a pleased state of the soul, senses and mind, not only the balance of Doshas and tissues.

Effects of positive psychology interventions

Two meta-analyses are central. Sin and Lyubomirsky analysed 51 interventions and found that positive psychology interventions significantly increased well-being and decreased depressive symptoms, with moderate effect sizes[8]. Bolier and colleagues, restricting their analysis to 39 randomised controlled studies, found smaller but significant effects on subjective well-being, psychological well-being and depression, with some effects maintained at follow-up[9]. Together these suggest that deliberate practice of positive behaviours produces real, though modest, improvements in mental health.

Positive well-being and longevity

Charaka's claim that conduct promotes longevity has a modern parallel. In a meta-analysis of prospective observational studies, Chida and Steptoe found that positive psychological well-being was associated with reduced mortality in both healthy and diseased populations, independent of negative affect[10]. Causality cannot be established from observational data, but the association is consistent.

Mapping Achara Rasayana to positive psychology

Honesty and self-restraint

Truthfulness, self-control and freedom from anger correspond to the strengths of honesty, self-regulation and prudence within the virtue of temperance[3]. Self-regulation is the foundation on which many other healthy behaviours rest. Abstinence from alcohol excess has obvious direct health benefits. Freedom from anger is notable because chronic anger and hostility are recognised as psychological risk factors in modern medicine.

Compassion and non-violence

Ahimsa, compassion and freedom from cruelty correspond to the strengths of kindness and love within the virtue of humanity[3]. Compassion and loving-kindness meditation, which deliberately cultivate these qualities, have been reviewed as promising psychological interventions, with evidence of increased positive emotion and reduced negative emotion[11].

Generosity and service

Regular charity and service to others correspond to kindness and citizenship. Post reviewed research on altruism and concluded that a strong association exists between the well-being, happiness and health of people who are emotionally and behaviourally compassionate, provided they are not overwhelmed[12]. Experimental work suggests that helping improves well-being most when it is freely chosen rather than imposed[13], which is consistent with the classical emphasis on Dana given willingly.

Respect and gratitude

Respect for teachers, elders and the sacred overlaps with gratitude and appreciation, which positive psychology places within the virtue of transcendence[3]. In a series of experiments, people who regularly recorded things they were grateful for reported higher well-being and more positive affect than those who recorded hassles or neutral events[14].

Respect for elders and service to them also strengthen social bonds. A large meta-analysis of 148 studies found that people with stronger social relationships had a 50% greater likelihood of survival over the follow-up period than those with weaker relationships[15]. The effect was comparable to that of well-known risk factors such as smoking.

Regulated daily habits

Balanced sleep, moderate exertion and regular nourishing food are lifestyle elements rather than character strengths, but they underpin mood and energy. Their inclusion in Achara Rasayana shows that Charaka did not separate conduct from lifestyle; both are treated as parts of a single way of living.

Spiritual and intellectual practice

Recitation, study, austerity and devotion to spiritual knowledge correspond to the strengths of spirituality, love of learning and perspective[3]. Calmness and steadiness resemble the equanimity that meditation-based interventions aim to cultivate.

Table 2: Summary of mapping and evidence

Achara Rasayana domain	Positive psychology construct	Example evidence	Strength of evidence
Honesty and self-restraint	Honesty, self-regulation, prudence	Self-regulation as a basis of health behaviour	Moderate (indirect)
Compassion and non-violence	Kindness, love	Loving-kindness and compassion meditation[11]	Moderate
Generosity and service	Kindness, citizenship	Altruism and health[12,13]	Moderate (mostly observational)
Respect and gratitude	Gratitude, social connection	Gratitude experiments[14]; social relationships and mortality[15]	Moderate to strong
Regulated habits	Lifestyle factors	See lifestyle psychiatry literature	Strong
Spiritual practice	Spirituality, love of learning	Meditation and well-being	Moderate

Overall package	Positive psychology interventions	Meta-analyses of PPIs[8,9]; well-being and mortality[10]	Moderate

Achara Rasayana in Ayurveda practice and research

Ayurveda authors have described Achara Rasayana as a behavioural therapy that can promote health and happiness and be used alongside drug treatment[4]. Others have emphasised its relevance, along with Dinacharya and Sadvritta, to promoting mental health in modern society[5]. These papers are largely conceptual. To the authors' knowledge, no controlled trial has yet tested a defined Achara Rasayana programme against a control condition using standard well-being outcomes.

In clinical practice, Achara Rasayana is usually given as general advice. Because it is broad, patients may find it hard to act on. Positive psychology interventions, by contrast, are typically short, specific and repeated: for example, writing three good things each evening, or performing five acts of kindness in one day each week. This suggests that Achara Rasayana could be made more practical by translating each domain into specific weekly exercises.

Possible mechanisms

If good conduct does improve health, as Charaka claims, it must act through physiological pathways. Modern research suggests three plausible routes.

Reduced stress physiology

Anger, dishonesty and conflict are sources of repeated stress. Qualities such as calmness, freedom from anger and compassion may reduce the frequency and intensity of stress responses. In a study of middle-aged civil servants, higher positive affect measured in daily life was associated with lower salivary cortisol across the day, a smaller heart rate response, and lower plasma fibrinogen responses to laboratory stress[16]. This suggests that a positive emotional state has measurable effects on neuroendocrine, cardiovascular and inflammatory processes.

Social connection and vagal tone

Many Achara Rasayana qualities strengthen relationships: pleasant speech, respect for elders, charity and service. In a randomised study of loving-kindness meditation, participants who increased their positive emotions also reported feeling more socially connected, and this increase in connection accounted for an improvement in cardiac vagal tone, a marker of physiological flexibility[17]. The authors described an "upward spiral" in which positive emotions, social connection and physical health reinforce each other. This is close to the classical idea that conduct and Rasayana together build strength.

Healthier lifestyle choices

Self-restraint, regular routine and avoidance of alcohol directly reduce exposure to behavioural risk factors. People with stronger social networks and a sense of purpose are also more likely to follow healthy habits. This indirect route may account for part of the association between well-being and longevity[10].

Ayurvedic interpretation

In Ayurvedic terms, these mechanisms can be described as reduced aggravation of Rajas and Tamas, protection of Ojas from the depleting effects of anger, grief and anxiety, and maintenance of Agni and Dosha balance through regular habits. This allows researchers to frame mechanistic hypotheses that are meaningful in both systems.

A proposed structured Achara Rasayana programme

To make Achara Rasayana testable, each domain can be translated into specific practices that a participant can perform and record. The table below is a suggested framework for a six-week pilot programme. It is offered as a starting point for intervention development, not as a validated protocol.

Table 3: Summary of mapping and evidence

Week	Domain	Suggested practice	Possible outcome measure
1	Regulated daily habits	Fixed sleep and waking times; regular meal timings	Sleep diary; Pittsburgh Sleep Quality Index
2	Honesty and self-restraint	Daily reflection on one instance of anger or impulsive action and how it was handled	Brief self-control scale; anger rating
3	Compassion and non-violence	Ten minutes of compassion (Maitri) meditation daily; avoidance of harsh speech	Self-compassion scale; positive and negative affect
4	Generosity and service	At least three freely chosen acts of help or charity per week	Well-being scale; social connectedness
5	Respect and gratitude	Writing three things one is grateful for each evening; contact with an elder	Gratitude questionnaire; well-being scale

6	Spiritual and intellectual practice	Daily recitation, prayer or study of a chosen text for 15 minutes	Mental health continuum; perceived stress

Outcomes should be measured at baseline, at the end of the programme and at three months, with a waitlist or health-education control group. Adherence should be recorded with a simple daily log. The programme can be delivered in groups, which would itself add the benefit of social connection.

DISCUSSION:

Achara Rasayana and positive psychology share a core idea: that certain qualities of character and conduct are not only morally valued but also good for health. Both traditions emerged from careful observation of human life, and both identify similar virtues. This convergence is itself evidence that these qualities matter across cultures.

There are important differences. Achara Rasayana is embedded in a religious and social context, with elements such as worship and respect for Brahmins that may not suit all patients today. Positive psychology is secular and individual-focused, and has been criticised for underestimating social and structural determinants of well-being. For modern use, Achara Rasayana's core qualities can be presented in secular terms while respecting their origin.

The evidence base has limitations. Positive psychology intervention effects are modest, and some early findings have been weakened by later, more rigorous studies[9]. Studies of altruism and well-being are mainly observational. The mortality associations are not proof of causation[10,15]. Any claims made for Achara Rasayana should therefore be cautious.

Several research directions follow. An Achara Rasayana programme could be developed with specific weekly practices in each of the six domains, piloted for feasibility, and then tested in a randomised trial against a waitlist or active control, using outcomes such as the Warwick–Edinburgh Mental Well-being Scale, the Mental Health Continuum–Short Form and depression and anxiety scales. Biological outcomes such as cortisol, heart rate variability and inflammatory markers could test the "Rasayana" claim more directly. A combined arm of Achara Rasayana and a Rasayana drug would test Charaka's claim that the two work best together.

Conclusion

Achara Rasayana is a classical prescription for well-being through character and conduct. Its elements correspond closely to the character strengths and interventions studied in positive psychology, and modern evidence supports the health value of many of them, particularly gratitude, compassion, social connection and positive well-being. Achara Rasayana has not been tested as a package. Developing it into a structured, measurable intervention is a promising research opportunity for Ayurveda and for mental health promotion more broadly.

REFERENCES:

1. Sharma RK, Dash B. Agnivesa's Charaka Samhita (text with English translation), Chikitsa Sthana 1(4)/30–35 and Sutra Sthana 8, with commentary of Chakrapani. Varanasi: Chowkhamba Sanskrit Series Office; reprint edition.

2. Seligman MEP, Csikszentmihalyi M. Positive psychology: an introduction. Am Psychol. 2000;55(1):5–14.

3. Peterson C, Seligman MEP. Character strengths and virtues: a handbook and classification. Washington (DC): American Psychological Association; New York: Oxford University Press; 2004.

4. Nyavanandi D, Mandati P, Vidiyala N, Parupathi P, Kolimi P, Mamidi HK. Hot melt extrusion paired nozzle based additive manufacturing techniques for design and development of pharmaceuticals [preprint]. Preprints. 2024.

6. Ryff CD. Happiness is everything, or is it? Explorations on the meaning of psychological well-being. J Pers Soc Psychol. 1989;57(6):1069–81.

7. Laxmiprasanna P, Chandan RS, Nagidi HR, Vidiyala N. Analytical method development and validation of a novel RP-HPLC method for simultaneous quantification of xanomeline and trospium chloride in pharmaceutical dosage form. Int J Drug Deliv Technol. 2025;15(1).

8. Sin NL, Lyubomirsky S. Enhancing well-being and alleviating depressive symptoms with positive psychology interventions: a practice-friendly meta-analysis. J Clin Psychol. 2009;65(5):467–87.

9. Bolier L, Haverman M, Westerhof GJ, Riper H, Smit F, Bohlmeijer E. Positive psychology interventions: a meta-analysis of randomized controlled studies. BMC Public Health. 2013;13:119.

10. Srinivasarao DA, Vidiyala N. Stimuli-responsive polymeric nanoparticles for cancer therapy. In: Advances in stimuli-responsive nanosystems for cancer therapy. Singapore: Springer Nature; 2026. p. 39-63.

11. Hofmann SG, Grossman P, Hinton DE. Loving-kindness and compassion meditation: potential for psychological interventions. Clin Psychol Rev. 2011;31(7):1126–32.

12. Ramayanam NR, Bukke SPN, Kumar BJ, Vidiyala N, Sunkishala P, Thalluri C, et al. Nipah virus infection as a putative risk factor for Alzheimer's disease: a testable hypothesis. J Alzheimers Dis Rep. 2026;10:25424823261490069.

13. Weinstein N, Ryan RM. When helping helps: autonomous motivation for prosocial behavior and its influence on well-being for the helper and recipient. J Pers Soc Psychol. 2010;98(2):222–44.

14. Gundeti M, Vidiyala N, Dalvi S, Girase R, Thota SK, Paudel KR, et al. Next-generation Pluronic micelles for advanced drug delivery application. Macromol Mater Eng. 2026;311(9):e70344.

16. Steptoe A, Wardle J, Marmot M. Positive affect and health-related neuroendocrine, cardiovascular, and inflammatory processes. Proc Natl Acad Sci U S A. 2005;102(18):6508–12.

17. Kok BE, Coffey KA, Cohn MA, Catalino LI, Vacharkulksemsuk T, Algoe SB, et al. How positive emotions build physical health: perceived positive social connections account for the upward spiral between positive emotions and vagal tone. Psychol Sci. 2013;24(7):1123–32.