

## OBSERVATORY RESEARCH

# Initial Standardization of a Shorter *Tridosha* Scale for Children

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### ABSTRACT

**Background:** Studies on *Prakriti* and its importance in health are published. The relationship between *Prakriti* and genetics is established. Scales to recognize the *Prakriti* are developed. Ayurveda child personality inventory, *Charaka* Child Personality Inventory, is available for measuring tridosha in children. The present study had the objective to validate a shorter version of the *Charaka* child personality.

**Materials and Methods:** The 21 items were developed based on the *Charaka* Child Personality Inventory (CCPI) scale, on the basis of translation of Sanskrit verses described in Ayurveda texts and by taking the opinions of 5 Ayurveda experts and psychologists. The scale was administered on children of the age group 8–12 years in New Generation National Public School, Bangalore.

**Results:** This inventory showed excellent internal consistency. The Cronbach's alpha for A, B and C scales was above 0.8. The Split-Half reliability scores for the inventory were above 0.6. The result of the shorter CCPI was compared with the original CCPI. Subscales of shorter CCPI correlated significantly highly (above 0.80) with subscales of CCPI, which was done for the purpose of cross-validation with respect to CCPI.

**Discussion:** Cronbach's alpha demonstrated the uniformity of the items. Concurrent validity was demonstrated by correlation with the original scale. According to traditional Ayurvedic writings, the strength of the study is the first attempt to develop and validate a shorter scale.

**Conclusions:** The *Tridoshas* of the children can be measured consistently by this scale. Correlations with CCPI pointed toward concurrent validity.

## 1. INTRODUCTION

Ayurveda, an ancient branch of Vedic knowledge, is primarily founded on the *Tridoṣas* of *Vata*, *Pitta*, and *Kapha*. *Tridoṣas* are essential principles that preserve physical function; in the same way as the sun, moon, and air sustain the cosmos, so *Doṣhas* maintain somatic functions.<sup>[1-8]</sup>

Psychologists in the West categorise a person's personality according to their temperament, behavior, and traits like "extrovert" and "introvert," which they expanded to include aspects of neuroticism and psychoticism.<sup>[9,10]</sup>

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The Ayurvedic classics, on the other hand,<sup>[1-8]</sup> offer a comprehensive perspective on personality that takes into account an individual's tridosha, which determines their physiological characteristics as well as their mental and behavioral traits. Physical aspects of personality, such as eye color, hair texture, appetite, sleep, behavior, attitudes, and interests, as well as memory, intelligence, and mental stamina, are all considered. Furthermore, based on the preponderance of one, two, or all doshas, the writings propose seven forms of personality: *Vata*, *Pitta*, *Kapha*, *Vata-Pitta*, *Vata-Kapha*, *Pitta-Kapha*, and *Sama*.

According to Ayurveda, health is defined as the *Tridosha*'s balanced condition, or *sama*. A person who possesses a high proportion of single and double doshas will perpetually suffer from one or more illnesses. To prevent health issues, Ayurveda suggests a certain diet and daily routine for various personality types. The concept correlates with modern typologies of personality.

A statistical model of *Dosha Prakriti* has been established using questionnaire analysis. A study that connects the physiology of the *Tridosha* to the process of cellular physiology has been conducted.<sup>[11,12]</sup> Similarly, it has been suggested that the composition of *Tridoshosha* has a genetic foundation.<sup>[13,14]</sup>

The Chinese humoralism and the four components of Buddhist medicine have been contrasted with the Ayurvedic *Tridosha* doctrine.<sup>[15-17]</sup> *Prakṛti*'s significance in ageing has been examined.<sup>[18]</sup> It has been noted that isotonic exercise has an impact on various forms of *Prakṛti*.<sup>[19]</sup>

It has been explained that different *Prakṛti* have distinct metabolisms.<sup>[20]</sup> Dominance of doshas has been linked to left and right hemisphere chemical dominance.<sup>[21]</sup> ADP-induced maximum platelet aggregation was shown to be greatest in vāta-pitta prakṛti persons, according to another research. There has been research on the connection between Parkinson's disease and vāta prakṛti.<sup>[22,23]</sup> A tridoshas scale has been created to assess psychotic patients.<sup>[24]</sup> The Ayurvedic Child Personality Inventory and self-rating *Charaka* Child Personality Inventory (CCPI) were developed and standardised.<sup>[25,26]</sup>

CCPI had 77 questions and was taking a long time for the assessment. So, this shorter scale was considered to develop.

## 2. MATERIALS AND METHODS

The original CCPI was developed based on the Sanskrit translation of the *Prakṛti* description in classical texts. Out of the 522 writings, 155 were selected for further consideration and, after being translated into English, given to 10 Ayurvedic specialists. They were instructed to assess each statement's accuracy and determine

1. Whether any of the items were duplicated, or whether any new ones needed to be added.

Two questions remain:

1. Are the characteristics of vātajā, pittajā, and kaphajā prakṛti chosen for the scale accurate?; and
2. Were the objects created an appropriate rendering of the Sanskrit found in the source texts? A total of 147 articles were kept from which a few were modified and improved.

The researcher developed the final collection of assertions from the Sanskrit scriptures to inform the formulation of 77 CCPI questions. Five Ayurvedic specialists and one psychologist were given the scale once again. They examined its format and suggested a two-point scoring system (zero and one), which was included in the final CCPI. Questions were reworded to address suggestions made. Every query that was approved by three or four psychologists and Ayurvedic specialists was kept.

The final CCPI consisted of 77 items: 26 items for the subscales of *Vātajā Prakṛti* (A-scale), *Pittajā Prakṛti* (B-scale), and *Kaphajā Prakṛti* (C-scale). The kids were supposed to respond to the questionnaire.

The researcher selected 21 CCPI questions. Five Ayurvedic specialists and one psychologist were given the scale once again. They examined its correctness for assessing the tridosha traits and suggested a two-point scoring system (zero and one), which was included in the final shorter CCPI. Questions were reworded to address suggestions made. Every query that was approved by three or four psychologists and Ayurvedic specialists was kept.

## 2.1. Data Collection and Analysis

The scale was given to children of both sexes enrolled at Bangalore's New Generation National Public School between the ages of 8 and 12 to assess its internal consistency and validity.

180 children were given the last 21 items of the shorter version of CCPI. CCPI was given to thirty of the children. Cross-validation was the reason for comparison.

Data analysis was done using the Statistical Package for Social Sciences 16.0. Reliability analysis was done on the data. The internal consistency analysis used the split-half and Cronbach's alpha tests. The degree of correlation between test and retest reliability and *Vāta*, *Pitta*, and *Kapha* scores was examined using Pearson's correlation analysis. The validity was examined using principal component analysis, also known as factor analysis.

## 3. RESULTS

Internal consistency was assessed by administering the scale to 190 children.

Cronbach's alpha and split-half reliability coefficients were above 0.80, except for vata, for which it was above 0.6.

Subscales of the shorter scale correlated significantly with the subscales of the original scale.

## 4. DISCUSSION

The current work has detailed the creation and preliminary standardization of a 21-item shorter CCPI.

Cronbach's Alpha coefficient was above 0.80, and Split-half analysis, which was above 0.60, supported the subscales' reliability. This demonstrated the uniformity of the goods.

Concurrent validity was demonstrated by correlation with the original scale. According to traditional Ayurvedic writings, *Pitta* reduces when *Vāta* and *Kapha* (cold) rise, and vice versa when *Vāta* drops, *Kapha* increases.

The study's strength is that it's the first attempt to create a self-rating scale that is reliable and consistent for gauging kids' prakṛti. Three *Doshas* in balance are seen as indicators of health. In order to evaluate the therapeutic importance of a *Prakṛti*-based regimen in the prevention of physical and mental disorders, a tool created in this study would be helpful.

Even while there is published scale CCPI available to evaluate children, *Prakṛti*, it has more questions, consuming more time for data collection. Present shorter CCPI can be completed in a short duration.

### 4.1. Study Limitations

Despite being a reliable and consistent tool, the shorter CCPI has not examined the scale's norms. To verify whether the inventory's items are sensitive enough to evaluate *Prakṛti* with a predominance of a specific *Doṣha*, more research is required. More samples should be used in studies, and standards should be set.

## 5. CONCLUSION

The shorter *tridosha* scale was associated with good content validity, internal consistency and concurrent validity. The study in near future

is implemented on a large sample, so the standardization of the scale is done accurately and precisely.

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## 9. ETHICAL STATEMENT

Ethical approval was not required for this study as it was an observatory research

## 10. CONFLICTS OF INTERESTS

The authors declare no conflicts of interest regarding the publication of this paper.

## 11. DATA AVAILABILITY STATEMENT

The data analyzed in this review were obtained from publicly available sources, including peer-reviewed articles, observational studies, and surveys accessible via databases.

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Subscale	Cronbach's alpha	Split-half reliability coefficient
<i>Vata</i>	0.83	0.67
<i>Pitta</i>	0.93	0.88
<i>Kapha</i>	0.84	0.89

Correlation with original CCPI	
Subscales	Pearson r
Vs-Vo	0.93
Ps-Po	0.84
Ks-Ko	0.92