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# Evolution Of Preksha Meditation: From Jainism To The Contemporary World

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**Abstract**
Preksha Meditation has not stayed where it started. Born within the Terapanth Jain monastic order of Rajasthan, the practice today appears in pediatric pain clinics in Orlando, epigenetics laboratories at Florida International University, and psychoneuroimmunology research at AIIMS New Delhi. This paper examines how that happened, tracing three phases: the philosophical and canonical foundations of meditation in Jainism; Acharya Mahapragya's construction of Preksha Dhyana between 1975 and 1994; and the contemporary scientific literature documenting its neurological, epigenetic, psychological, and clinical outcomes. Drawing on a wide-ranging review of religious studies, contemplative science, and biomedical research, the paper argues that Preksha's evolution reflects a tension not unique to this tradition, between preserving an ethical and spiritual inheritance and pursuing credibility in a world that prizes clinical evidence. Preksha has retained stronger institutional ties to its tradition of origin than most comparable practices, and what that means for the practice's long-term integrity is a question the field has only recently become equipped to examine seriously.

**Keywords:** *Preksha Meditation, Preksha Dhyana, Jainism, Terapanth, Acharya Mahapragya, Contemplative Science, Jain Meditation, Mindfulness, Secularization, Traditional Medicine*

## I. INTRODUCTION

Preksha Meditation is named, roughly, 'to perceive carefully' or 'to look within.' That name has taken on layers it never originally had. Today, the practice is examined through FDG-PET scanners at AIIMS New Delhi, DNA methylation assays at Florida International University, and randomized clinical trials at a children's hospital in Orlando. When Acharya Mahapragya began formalizing the system in 1975 within the Terapanth Jain monastic order, none of this was the stated goal. The goal was considerably older: helping practitioners quiet the mind and progress along the Jain path toward liberation. What has happened since is the subject of this paper.

Meditation science has grown considerably over the past four decades, but it has grown in one direction above others. The preponderance of peer-reviewed literature has concentrated on practices derived from Buddhist traditions, particularly Mindfulness-Based Stress Reduction (MBSR), which Jon Kabat-Zinn introduced at the University of Massachusetts in 1979 (Kabat-Zinn, 2003). The two systems, MBSR and Preksha Dhyana, emerged within a few years of each other, yet have experienced vastly different levels of scientific attention. Traditions rooted in Jainism have received a fraction of what Buddhist-derived practices have attracted, despite being considerably older and philosophically distinctive. The gap in academic attention is not a reflection of limited reach. Preksha is practiced across India and by Jain diaspora communities in the United Kingdom, the United States, and East Africa, with an estimated half-million or more active practitioners (Pragya, 2017). This paper addresses that gap by tracing Preksha's development across three phases: its ancient philosophical roots in Jainism, Acharya

Mahapragya's pivotal 20th-century systematization, and the contemporary scientific work now testing its effects with molecular-level precision. Doing so requires drawing on both the religious studies literature on Jain contemplative history and the peer-reviewed biomedical evidence, a combination that few existing treatments attempt. Tracing Preksha from its canonical roots to clinical trials requires holding both bodies of evidence honestly, without reducing the tradition to its therapeutic outputs or retreating from the empirical findings it has generated.

## II. REVIEW OF LITERATURE

The scholarship on Preksha Meditation has developed unevenly across disciplines that do not always engage with each other. Historical and philological work laid the groundwork. Bronkhorst's (1993, 2016) comparative studies established that ancient Jain canonical texts contain remarkably little procedural guidance on meditation technique, unlike the Buddhist Pali Canon. Dundas (2002), arriving at similar conclusions through a broad survey of Jainism, identified a significant discontinuity in Jain meditative practice across the medieval period. Both observations have direct bearing on how Mahapragya's 20th-century reconstruction should be understood. The most thorough account of Preksha's origins remains Samani Pratibha Pragya's (2017) doctoral thesis at SOAS University of London, supervised by Professor Peter Flügel, the leading Western scholar of the Terapanth, which traced the practice to seven distinct sources, including Jain canonical texts, Hindu yoga, Buddhist Vipassana, Ayurvedic concepts, astronomical elements, modern science, and Mahapragya's own meditative experience. Chapple (2015) edited the first academic comparative volume on yoga in Jainism, and Bilimoria et al. (2024) have since produced the widest-ranging academic survey of Jain contemplative practice to date.

Critical scholarship has approached the practice with more skepticism. Jain (2010) analyzed the ideological choices embedded in Mahapragya's design, particularly his mapping of leshyas (psychic colorings of the soul in Jain metaphysics) onto the body's endocrine glands, reading this as a deliberate bid for scientific legitimacy. Her later ethnographic work (2014) placed Preksha within a global marketplace for Indian spiritual practices, raising questions about commercialization and authenticity that the biomedical literature tends not to address. The distinction matters because a practice designed with ethical formation in mind may require different evaluative criteria than one designed primarily for symptom relief. Reading (2019), examining the companion Anuvrat Movement founded by Acharya Tulsi in 1949, offered a counterpoint: whatever its adaptations, Preksha was never designed in isolation from Jain moral philosophy.

Biomedical research has accelerated sharply since 2015. Two institutional clusters account for most of the empirical output: a neuroimaging and psychoneuroimmunology group at AIIMS New Delhi led by Dr. Dipti Magan and Dr. R.K. Yadav; and a molecular biology group at Florida International University and Arnold Palmer Hospital for Children, led by Dr. Devendra Mehta and Samani Unnata Pragya. These two clusters have developed largely in parallel, with limited cross-citation, and their integration with the historical and critical scholarship remains a significant gap in the field. Community-based research by Sanchetee et al. (2017), Sharma et al. (2020), Jain et al. (2017), and Bora et al. (2024), across elderly populations, school children, and healthy adults, provides the applied foundation on which this clinical and molecular work now builds.

## III.HISTORICAL FOUNDATIONS IN JAIN TRADITION

Meditation is not optional in Jainism, even if the canonical texts are oddly quiet about how to do it. The tradition's core commitments, to non-violence (ahimsa), non-possessiveness (aparigraha), and the liberation of the individual soul (jiva) from accumulated karmic matter, make inward discipline a structural necessity rather than an optional supplement (Jaini, 1998). The karmic theory at the heart of Jain soteriology holds that every action, thought, and emotion generates karmic particles that adhere to the soul and determine its future states. Liberation requires not only ethical conduct but a systematic stilling of the mental processes that attract and bind karma. Meditation, in this sense, is not a technique added to Jain practice. It is written into the logic of what Jain practice is for.

The Jain Agamas describe four modes of dhyana: arta-dhyana (concentration rooted in pain or frustration) and raudra-dhyana (concentration directed at harmful ends), both of which bind the soul further; and dharma-dhyana and shukla-dhyana, which progressively clear the path toward liberation (Mukherjee, 2022). Shukla-dhyana, the highest form, is considered in traditional Jain teaching to be accessible only to souls that have already achieved near-complete purification, which explains in part why the canonical texts describe it in philosophical rather than procedural terms. Kayotsarga, the complete bodily relinquishment practiced in standing or seated posture, and Samayika, a 48-minute daily practice of equanimity, appear throughout the Agamas as the foundational contemplative forms accessible to lay practitioners (Chapple, 2015; Bilimoria et al., 2024).

The problem, which Bronkhorst (1993, 2016) documented carefully, is that the texts largely stop there. They describe meditative states in philosophical terms without providing procedural instruction. By the medieval period, Jain commentators had supplemented their canonical sources with material borrowed from Hindu yogic frameworks, particularly the Yoga Sutras of Patanjali, to fill the gap (Williams, 1963; Dundas, 2002). What appeared from outside as a continuous Jain meditative tradition had in practice been repeatedly reconstructed from whatever materials were available. This pattern is not a historical embarrassment. It is a recurring feature of how living

contemplative traditions sustain themselves across centuries, and it explains why reaching outside the Jain canon, when Mahapragya set out to build Preksha Dhyana in the 20th century, was entirely consistent with how the tradition had always managed the gap between its philosophical aspirations and its practical resources.

## IV.THE DISCONTINUITY AND REVIVAL: MAHAPRAGYA'S SYSTEMATIZATION

Mahapragya was born in 1920 in Tamkor, Rajasthan, and became the tenth head of the Terapanth Jain monastic order after a long apprenticeship under Acharya Tulsi. Tulsi had already begun softening the Terapanth's historically strict insularity. The Anuvrat Movement he launched in 1949 translated Jain ethical precepts into principles anyone could adopt regardless of religious affiliation, a conscious step from the sectarian toward the universal (Reading, 2019; Bothra, 2013). This outward movement created the institutional permission on which Mahapragya would later build.

Samani Pratibha Pragya's (2017) historical research identified seven sources Mahapragya consciously used: the Jain Agamas, Hindu yoga and Ayurveda, Buddhist Vipassana, modern neuroscience and biology, Astronomical and cosmological elements from Jain tradition, his own meditative experience, and comparative contemplative literature from other traditions. The challenge Mahapragya faced was not doctrinal but practical: how to give someone without decades of ascetic training a way into the kinds of inward attention the tradition had always demanded. The eight-component system he devised was an answer to that specific pedagogical problem. The resulting system comprises: Kayotsarga (total bodily relaxation and relinquishment); Antaryatra (a systematic internal journey of awareness through the body); Shvas Preksha (sustained breath perception); Sharira Preksha (bodily sensation awareness); Chaitanya Kendra Preksha (perception of psychic centers mapped to the endocrine system); Leshya Dhyana (visualization of colored light corresponding to the Jain doctrine of psychic colorings of the soul); Anupreksha (contemplative reflection on impermanence, non-attachment, and the nature of karma); and Bhavana (cultivation of equanimity, friendliness, and compassion) (Mahaprajna, 2012; Pragya, 2017). This was not a recovery of ancient technique. It was a construction, using the best materials Mahapragya could find.

Jain (2010) read the ideological stakes clearly. Mapping the metaphysical leshyas onto the endocrine glands was not a casual metaphor. It placed Jain metaphysics inside a biomedical vocabulary in a way that made the system legible to audiences who would otherwise have had no entry point. Jain (2014) noted that similar moves appeared across 20th-century Indian contemplative reform, from modern postural yoga to Transcendental Meditation. What set Preksha apart was institutional anchoring. Jain Vishwa Bharati Institute in Ladnun, established as the center for Preksha research, teacher training, and certification, and subsequently recognized as a Deemed University under Section 3 of the UGC Act, 1956, gave the practice a formal academic infrastructure that most globally spreading meditation systems do not have (Vibha, 2009). MBSR, by contrast, was deliberately stripped of its Buddhist framing from the outset. That difference has shaped how Preksha has developed ever since, and it becomes particularly relevant when evaluating the scientific literature now building on it.

## V. FROM SPIRITUAL PRACTICE TO SCIENTIFIC SUBJECT: CONTEMPORARY RESEARCH

Neuroimaging research at AIIMS New Delhi began in the late 2010s. Magan et al. (2019) used FDG-PET imaging on 12 long-term Preksha practitioners and found heightened metabolic activity in the fronto-parieto-temporal regions of the right hemisphere, a pattern consistent with neural correlates of sustained attention and interoceptive awareness found in other long-term meditation traditions. A subsequent paper proposed a neurophysiological model of attention control specific to long-term Preksha meditators (Magan & Yadav, 2020a). A cross-sectional study of 97 long-term meditators against healthy controls found markedly better stress physiology in the meditator group, including lower cortisol, interleukin-6, and tumor necrosis factor-alpha levels, alongside reduced BMI and systolic blood pressure (Magan & Yadav, 2020b). These threads came together in a 2022 review providing the first psychoneuroimmunological framework for long-term Preksha practice from an Indian research group (Magan & Yadav, 2022).

The Florida International University and Arnold Palmer Hospital research has been more molecularly ambitious. Pragya et al. (2021), in a prospective controlled study of 178 college students registered at ClinicalTrials.gov (NCT03779269), found that Mahapran Dhvani and Leshya Dhyana each produced significant improvements in positive affect, attention, and emotional regulation against controls. Transcriptomic profiling following an eight-week Preksha program identified 494 differentially expressed genes, enriched in innate and adaptive immunity pathways (Abomoelak et al., 2022). A methylation study reported changes at 470 CpG sites across the same duration (Pragya et al., 2023), and a further analysis demonstrated that six of nine cognitive assessments improved significantly and correlated with those epigenetic changes (Abomoelak et al., 2023). The clinical work is equally notable: Mehta et al. (2021) found 46% pain resolution in children aged 9 to 17 with functional abdominal pain disorder following a short Preksha course, against 12% in the treatment-as-usual group. For a pediatric condition where pharmacological options are limited, that gap matters.

Earlier community-based research provides important context. Sanchetee et al. (2017) reported significant gains in psychological well-being and EEG alpha activity in 58 elderly participants over four months. Jain et al. (2017) found significant aggressiveness reductions across 2,080

primary school students in a school-based program in New Delhi. Sharma et al. (2020) documented reduced stress and anger reactivity in healthy adults following a seven-day residential Yoga-Preksha program, and Bora et al. (2024) found meaningful reductions in perseverative negative thinking among 462 adults practicing the Anupreksha component. The range of populations studied, from elderly community members to primary school children to college students to adult outpatients, suggests the practice adapts meaningfully across contexts, which has implications for how future clinical research designs its inclusion criteria and outcome measures.

## VI. DISCUSSION

Mahapragya's synthesis was creative rather than recuperative. He was not recovering a lost practice; he was building something suited to contemporary people from whatever materials he found useful, including materials the Jain canonical texts had never used. Bronkhorst (2016) and Dundas (2002) established this clearly, and Samani Pratibha Pragya (2017) showed how transparent Mahapragya was about it. The parallel with Kabat-Zinn is instructive. Both men built from within traditions they knew well, borrowed across those traditions' boundaries, and produced systems that traveled far beyond their original communities (Kabat-Zinn, 2011). What they were doing was translation, with all the loss and gain that implies.

The losses are harder to measure than the gains. Bhikkhu Bodhi (2011) pressed this point in relation to Buddhist mindfulness: extract a practice from its ethical and soteriological setting, and you may preserve its psychological effects while losing the reasons the tradition considered those effects meaningful. In Jain understanding, Kayotsarga and Leshya Dhyana are not stress management techniques. They are steps toward the soul's liberation from karma. Measuring them in terms of cortisol and DNA methylation is genuinely useful, but the measurement is necessarily partial. The risk of not maintaining ethical grounding is not hypothetical. MBSR's decades-long separation from its Buddhist roots has generated sustained critique, most forcefully articulated by Purser (2019), who argued that contemporary mindfulness has been reduced to a technique for individual productivity stripped of the moral commitments that originally gave it purpose. Van Gordon and Shonin (2020) have proposed second-generation mindfulness interventions that restore ethical and spiritual dimensions rather than treating them as optional. Preksha's continuing institutional ties to the Terapanth through JVBI create structural space for this kind of depth to survive alongside clinical application, and in that respect Preksha may offer a more instructive test case for the second-generation framework than MBSR does. Whether that structural possibility is realized in practice depends on choices being made now by teachers, researchers, and the institution at Ladnun.

The visibility gap in the literature also deserves attention. Scientific output on Preksha Meditation remains limited relative to the practice's reach, and the shortfall is not explained by an absence of evidence. Jainism's smaller global presence relative to Buddhism, persistent under-representation in English-language journals, and Western contemplative science's tendency to route concepts through a Buddhist conceptual framework have all contributed (Monteiro et al., 2015). The molecular biology coming out of Florida may help shift this, because epigenetic and metabolomic findings carry their own authority and do not require a reader to be familiar with Terapanth history to take them seriously.

## VII. CONCLUSION

Contemplative traditions survive by being useful, not by staying still. Mahapragya understood this, which is why he borrowed from Buddhist Vipassana and modern endocrinology without apology and built a system that laypeople in cities could practice without taking monastic vows. The scientists at AIIMS and FIU understand it too, which is why they have applied PET imaging and methylation arrays to a practice whose original home was Rajasthani monasticism. The outcomes of both efforts have been real: a wider practice, a growing evidence base, and genuine benefit for people who needed it.

What has not been settled is whether expanded reach comes at any cost to the tradition's depth. That question is not answered by biomedical research alone, and it is not resolved in the literature reviewed here. Preksha Meditation has crossed a substantial distance, from Jain monastic life to a children's hospital in Orlando, and the crossing has demonstrably worked. Whether what arrived at the other end still carries what made the practice worth preserving is harder to say, and it belongs as much to scholars of religion as to scientists. The history traced here also suggests that this is precisely the moment to ask that question more rigorously. Future work that holds the religious studies and biomedical evidence in active conversation, rather than treating them as separate tracks, would serve both literatures and the practice itself. The field now has better data and better historical scholarship than it did a decade ago. Whether it asks the harder questions with the same rigor it has brought to the easier ones is, at this point, still open.

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