

FEAR, COURAGE, AND PLANETARY ENERGETICS: AN INTEGRATIVE MODEL OF PSYCHOPHYSIOLOGICAL AND VEDIC CORRELATES

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Abstract

Although the number of therapeutic avenues and pharmacological agents has never been so extensive and self-help media is more widespread than ever, population-wide anxiety and fear rates are continuing to stay high. The paper presents a reconciling model that would help in joining modern psychophysiology with Vedic cosmology (Jyotisha). The main idea in the model is the statement that Mars (Mangala) acts as the controller of courage- as the kinetic ability to confront reality- and the Moon (Chandra), regulates emotional fluidity and affective stability. We also theorize the lunar nodes Rahu and Ketu as archetypal equivalents of the two archaic startle reflexes that can be observed in newborns: startle to loud sound (Rahu) and startle to the feeling of falling (Ketu). The premises of the Situationist model of human consciousness under stress are the diminished or blocked agency of Mars and the depleted or dysphyllian domain of the Moon in unfavorable aspect a condition that is often exacerbated by Saturnine pressures (Time) and nodal distortions. It has quantified synthesis based on three decades of practical experience (1994-2025) and anonymised case studies have been provided to show pragmatic remediation through the use of lifestyle modulation (e.g., hydration timing, breath scheduling), timing awareness (transit sensitive planning), mantra and consecrated gem therapy. There are two pedagogical mnemonics FALLEN SOUL (nine archetypal fears) and HALT SMILES (nine evasive behaviours) that are provided as a diagnostic and educational measure. The model points to no deterministic causality, but offers a rational, experimentally testable explanatory scheme of the nexus of consciousness research, clinical psychology and Vedic sciences. Discussions on implications on clinical practice, education, and future research in interdisciplinary studies.

Keywords: transpersonal psychology, Jyotisha, courage, fear, Mars, Moon, Rahu and Ketu, mnemonic pedagogy, psychophysiology, gem therapy and water based methods of therapy.

Introduction

In spite of an explosion in clinical psychotherapies, psychiatric pharmacology, and the rise of digital self-help culture, the fear, anxiety, and avoidance reactions are now among the most chronic psychological burdens among populations. The dominant clinical psychology paradigms describe fear in the broad terms of dysregulated autonomic arousal and maladaptive cognition as well as defensive behaviors learned. As the traditional Indian psychological tradition, fear here, however, has historically been understood, not only in somatic terms, but also cosmologically — as a disruption in the circulation of vital force, sense of identity and, of time [4], [20]. This paper begins with the argument that neither paradigm is adequate. A broad-based model can offer insight on the reasons some people will not take actions even when they have insight, resources, and social support, and the reason why others consistently act courageously in the same circumstances [4], [6], [22]. In this sense, it is vital to consider this gap which can be approached through incorporating contemporary psychophysiology within the discourse on Vedic cosmology (Jyotisha), subtle body mapping, and Indian psychological self-regulation. Consciousness is conceptualised as stratified, embodied and trainable in Indian psychology, not as merely epiphenomenal to neurochemistry [4], [5]. Within this view, emotional reactions do not exist as random: as organized representations of implicate energetic organization they can be discussed in

terms of chakric centers, planetary signatures, došic balance [5], [6], [19], [21]. Embodied states, endocrine co-regulation, somatic patterning and neuroendocrine rhythm are increasingly gaining attention in Western mind–body literature as mediators of felt safety and agency [9], [18]. This paper extends this convergence by conceptualizing courage and fear as the emergent traits of planetary energetics through psychophysiological pathways. Specifically, we define Mars (Mangala) as the agent of functional (action-bearing, kinetic) courage and the Moon (Chandra) the agent of affective stability, subjective security and emotional hydration. In Jyotisha, Mars is normally associated with will directedness, assertiveness and the ability to defend or attack, the Moon with mental stability, nurturance and psychic confinement [5], [20], [22]. And when Mars becomes weakened or obstructed, courage withers into paralysis, irritability or compensatory aggression. These changes (loss of the Moon, disfigured Moon) tend to lead to affective swings, obsessive rumination, and poor self-soothing. This corresponds with a contemporary definition of hypoactive goal system and maladaptive affect loops of the stress states, and planetary symbolism may be a written record of persisting psychophysiological archetypes rather than superstition [4], [6], [9], [18], [22]. Furthermore, we come to see Rahu and Ketu, the lunar nodes in Vedic astrology, rather as analogues of the two kinds of defensive crashes manifested in newborn infant, the startle reflex to startling sound (Rahu) and the startle reflex to loss of ground/falling (Ketu). Rahu means disorienting wave, magnification, intrusion, and obsessive fixation; Ketu means severance, emptiness, associative withdrawal, and withdrawal [1], [5], [22]; each of these nodal effects is produced under pressure (time, burden, inevitability) and is accompanied by chronic fear effects. According to practice-based observations that spanned 30 years (1994–2025), recurrent maladaptive patterns might be pedagogically scheduled with two mnemonic patterns, for example, FALLEN SOUL (nine archetypal fear imprints) and HALT SMILES (nine avoidance behavioural strategies). Breath control, hydration timing, mantra control, consecrated gem therapy, and timely action transit similar to Ayurvedic lifestyle modification, somatic awareness practices, chakra aligned intervention models to restore agency and coherence have been integrated into practical remediation [5], [18], [19], [21]. This paper, however, is not to defend astrological determinism. Rather, it is to establish a systematic, empirical model linking (i) planetary archetypes, (ii) embodied states of energy, and (iii) fear/courage behaviours in real-time in real people. We contend by the specifications of such correspondences we can enable a translational interface between clinical psychology and Indian/vedic psychology and consciousness studies [4], [7], [16], [22]. Through this introduction we have established the groundwork of theory: fear in our case is a negotiating, energetically mediated relationship with reality, and courage an operative reconstruction — it is not a personality attribute born of a child. The energetic model will be reviewed more carefully, case-linked qualitative evidence will be presented, the FALLEN SOUL mnemonic and HALT SMILES mnemonic will serve as diagnostic tools, and the model's implications to therapy, education, mentorship and spiritual training will be outlined [4], [6], [7], [16], [22].

2.0 Literature Review.

This overview brings our model to an intersection of what the West refers to as psychophysiology and what the Indians/Vedic psychology and the study of consciousness include. There are three branches related to it: fear and courage as regulatory processes embodied in the body; planetary and subtle-body projections of emotional and volitional states; and how they can be integrated: into applied practice to promote healing, resilience and self-regulation [4], [5], [6], [18], [22].

2.1 Psychophysiology of Fear and Courage.

Fear in contemporary clinical and somatic psychology is primarily considered to be a perturbation of arousal, threat perception and behavior inhibition. Autonomic dysregulation and neuroendocrine disenfranchisement in a persistent state of stress cause heightened alertness, withdrawal, compulsive control, or reactive aggression- all of which are examples of immobilisation and agency recovery failure [4], [18]. The courage in this case is not the lack of fear, but an automatic reaction to guided action in uncertain situations. It is living and effective expression of coherent driving, or the faculty of directing the physical body to engagement and not breakdown. Somatic and movement traditions also hold the view that rhythmic exercises of particular body functions, e.g. breath pacing, aligning the spine, movement in a circle, etc. can not only trigger the musculature, but also the endocrine balance and confidence [9], [18]. Courage as not purely cognitive on that opinion. It is embodied, rhythmic and trainable. It also relates to the state: as the internal rhythm of ours becomes poor, the executive intention becomes poor as well. Will in the physiological surroundings where it is comparatively noisy becomes weak. This is crucial because that directed will or kinetic ability to face reality, which is present in the current model, is Mars-esque. The suppression, distortion, and freezing of said possibility is viewed as psychophysiological suppression as well as metaphorical hindrance to Mangala [5], [6], [22].

2.2 The theme of fear and bravery in Indian psychology and Vedic cosmology.

This is dealt with in some other, structurally possible mode of language. Consciousness is stratified, incarnate, operative on the reaction to planetary and elemental forces, not fixed in the skull [4], [5], [21], [22]. Mars (Mangala) is conventionally related to assertive intensity, decisive action, protection and readiness to react; the Moon (Chandra) is related to rasa (nourishment, mood smoothness, psychic containment), memorizing and emotional standstill [5], [20], [22]. It is a weakened Mars, which can be defined according to the old and traditional nomenclature of indecision of the traditional Jyotisha the malicious aggression, inaction or self-destruction at the moments when action is necessary. Lack of emotion regulation, the unsteadiness of the self-soothing process, and cognitive over-consumption in a state of insecurity are some of the characteristics that have defined a depleted Moon. This is akin to the Western descriptions of avoidance behaviour, emotional dysregulation and rumination in persistently stressful situations [4], [6], [18]. Rahu and Ketu- the nodes in the moon are just as perceived as disruptive vectors in identity and perception. Rahu is expansionary and destabilising and it is noisy and closely related with compulsive fixation, over stimulation and intrusive intensity. Ketu in itself is subtractive, dissociation, fragmentation, and in accord with withdrawal, numbness or disconnection [1], [5], [22]. Viewed psychophysiology, the state of Rahu can be compared to hypersensitised orienting reactions to shock, newness or danger; Ketu is equivalent to the collapse reflex, the I am falling / I am cut off imprint of dissociation. These maps are absent here in the astrology of predictive/pop culture [4], [6], [21], [22], but as a vocabulary symbolic of recurrent patterns of the nervous system which clinical psychology already observes in clinical practice, though without mythic vocabulary [4], [6], [21], [22]. Vedic models also add that Saturnine strain, which is time, need, predestination, karmic burden, will increase fear, and the outcome is lasting stress that is never felt to dispose of [5], [20], [22]. This kind of load would be similar to what the current stress research would term as allostatic burden. Ayurveda and subtle body practices opens doors for the focus of therapy -- water discipline, time of food, mantra framing of attention, resonance with stones, breathwork to stabilise Moon like and gain Mars inspired agency [5], [18], [19], [21]

2.3 Integrative Models and Identified Gaps.

Indian management psychology, ecopsychology and transpersonal studies have synthesized cross-traditionally, where planetary, elemental or chakra models are specifically mentioned when it comes to leadership, decision-making, self-regulation and responsibility to the social or ecological field [2], [3], [6], [7], [19]. It is argued in these works that consciousness is not individual, but participatory, relational and the psychological imbalance, when improperly addressed, may serve to enhance the collective instability [2], [3], [7], [16], [22]. And the so-called fear-based behaviour on a large scale (defensiveness, domination, and impulsive extraction) can be related to ecological destruction and social collapse [2], [3], [7], [16]. However, most of these syntheses remain philosophical (where mythic or evolutionary processes of consciousness are targeted [7], [16], [22]) or managerial/ethical (where values, sustainability and leadership reorientation are targeted [3], [6], [19]). The gap that still exists but to be bridged clinically is (i) psychophysiological stress pathways, (ii) actual energetic archetypes (Mars, Moon, Rahu, Ketu), and (iii) viable remediation procedures which can be taught, monitored, and refined on-the-fly. It is the purpose of the current work to fill in that gap by organizing habitual fear/courage profiles into two taxonomies of mnemonics FALLEN SOUL (archetypal fears) and HALT SMILES (evasive compensations) and by relating such profiles to evidence-based interventions like timing of fluid hydration, breathing control, mantra-based discipline, consecrated gem therapy and transit-conscious behaviour scheduling [5], [18], [19], [21], [22].

3.0 Methodological Overview

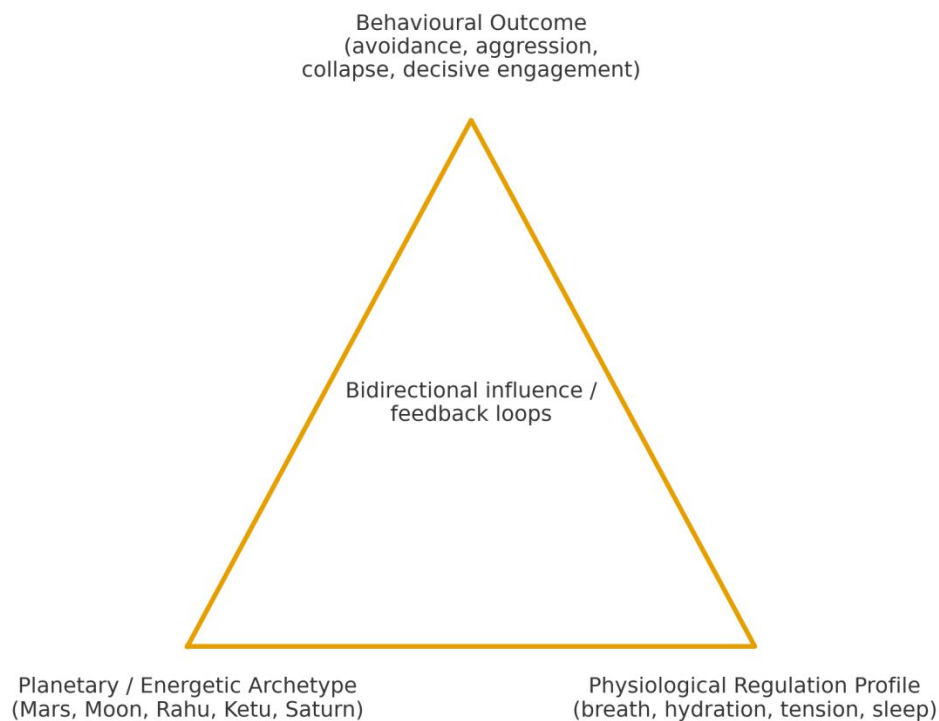
The research embraces an integrative and practice-based qualitative research approach that aims at operationalising a bridge between (i) looking Vedic cosmology (Jyotisha and subtle-body-energetics), (ii) modern psychophysiology of stress and regulation, and (iii) observed behaviour in the face of perceived danger and in the recovery of courage [4], [5], [6], [18], [21], [22]. The research process is more of a translational than strictly descriptive methodology: it is not simply going to understand the story of fear and courage, but learn a recreable set of diagnostic and intervention findings that can be tested out in the clinic, coaching or therapy countersituation.

The research covers a 30-year period of practice (1994-2025) of direct individual work, mentorship, crisis intervention, and systematic remediation plans. The working population consists of adults (18 years of age to point of contact) who manifested the following one or more of the following: paralysis in the face of choice despite awareness of consequences; incessant sympathetic arousal (hypervigilance, irritability, catastrophic thinking); affective collapse (emotional numbness, withdrawal); feeling as though divided into what they know they should do and what they actually do; and recurrent dread of time, duty, exposure, or anticipated loss. These states were monitored, mapped, and related to planetary/energetic name (Mars, Moon, Rahu, Ketu, Saturn) and bodily regulation planning (breath, hydration, mantra, consecrated gem discipline and timing of action) as outlined in Indian psychospiritual traditions, Ayurveda and chakra-based way of working with the body [4], [5], [18], [19], [21], [22].

The figure illustrated in Figure 1 (Tri-Axis Energetic-Behavioural Model) represents the frame. According to the model, there is no putint of fear/courage presentation, which is not inscribed in a three-axis model Axis A (Energetic Archetype: Mars, Moon, Rahu, Ketu, Saturn); Axis B (Physiological State: autonomic load, endocrine steadiness, hydration rhythm, breath pattern); Axis C (Behavioural Output: avoidance, aggression, collapse, decisive engagement). All real-life situations are perceived as being a coordinate in this triad, but not a diagnosis. This is an alternative to fixed-label pathology (you are nervous) with state-mapping (your Mars vector is repressed;

your Moon vector is neurotic; Rahu invasion is intense) which can then be interceded into (intentionally) [4], [5], [6], [18], [22].

Figure 1: Tri-axis Energetic-Behavioural Model. The triangle presented in the diagram has the following triangle points (1) Planetary/energetic archetype, (2) Physiological regulation profile, and (3) Behavioural outcome. There are bidirectional influence and feedback loops illustrated by arrows.



3.1 Framing of the Study, Case selection and ethical considerations.

Design. It is based on longitudinal qualitative case-series design. The data sample is made up of practitioner field notes, client self-reported experiences, behavioural observation, crisis admissions, and follow-up reports of regulatory practices (hydration discipline, mantra adherence, guided breath cycle etc.). These were recorded as they were in operation between the years 1994 and 2025 when people were actively trying to find relief against fear paralysis, being overwhelmed or otherwise in permanent anticipatory dread. The design does not involve the testing of a drug or device; rather it involves the testing of a structured interpretation model and the applied interventions [4], [5], [6], [18], [21], [22].

Inclusion criteria. Inclusion criteria included (a) the subject believed that they were experiencing functional impairment due to fear (e.g., I know I need to do this but I cannot do it yet); (b) at least one of the protocols packages (breath regulation, hydration scheduling, mantra discipline, gemstone practice or timing awareness) had been applied (at least 14 days); and (c), a subjective improvement of perceived agency, emotional balance, or stability had been reported taking place after application of the protocol. The exclusion criteria were acute psychosis, active neurological damage, or coercive/ unsafe domestic situations where any administered behavioural intervention may expose a person to additional harm.

Anonymisation and ethics. The data provided in this paper is anonymised and aggregated. All real names, dates, natal charts and other circumstances that could identify individuals in life are not revealed. One will keep the educative pattern (e.g. Moon depletion + Saturn pressure + Rahu surge) hidden without revealing his own life story. This methodology follows transpersonal and somatic research traditions wherein profound subjective content is seen as therapeutically delicate and hence is told in an archetypical but not in a biographical way [4], [6], [16], [21], [22].

The summary of how case profiles were followed is in Figure 2 (Timeline of Regulation vs. Perceived Agency).

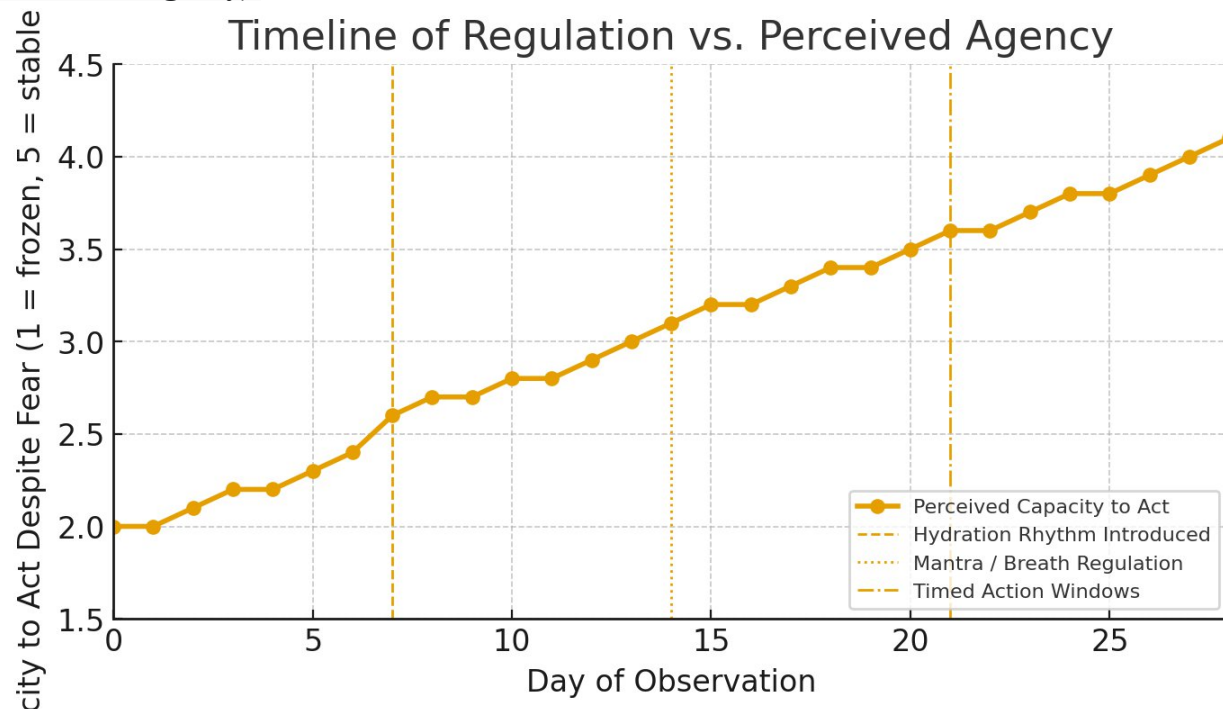


Figure 2: Timeline Diagram of Methodology. Horizontal axis = number of days/weeks of observation. Vertical axis = self-reported (capability) to act in spite of fear. Below bands are overlaid with minimum hydration discipline, stabilised mantra repetition, the introduction of breath pacing, etc. The figure illustrates the proportion of Mars-like initiative was augmented following these interventions and the proportion of Moon-like affect evened in similarity [5], [18], [21], [22].

3.2 Operations Constructs and Instruments.

3.2.1 Energetic constructs. The five major energetic constructs that are applied in mapping are:

1. Mars (Mangala): self-determination to act in an exemplary fashion, as well as boys who have kinetic abilities that underpin their ability to protect themselves and start anything.
2. Moon (Chandra): nurturance, affect the containment, inner soothing, mood fluidity.
3. hygiene, monitoring pushiness: interference with ground, subjective flood, obsessional aggrandizement.
4. Supposedly, the South Node is represented by a star, the ketu. Ketu (south node): loss, disintegration, shock, conflicting dissociation.
5. Saturn (Kala/Time): a sense of inevitability, the necessity to follow some eras and perceived a burden and an effect.

There are no Vedic or chakra-related astronomical planets in the usual sense of the word here but psychoenergetic regulators, which interact in bodily state, perception and volition [4], [5], [20], [21], [22]. Methodologically, each of these constructs was exemplified as a designation of patterned answers, and not a mysticism of causality.

3.2.2 Physiological constructs.

Regarding each instance, there was a recording of observable physiological state, recorded in descriptive terms: breath rhythm (shallow/erratic vs. paced/diaphragmatic), hydration timing and adequacy (particularly morning/evening stability), sleep fragmentation, somatic tension (jaw, shoulders, abdomen), acute nervous-system indicators which included tremor, freezing, hyper-reactivity to sound, dissociative blanking), etc. These are autonomic balance and neuroendocrine regulation as described in somatic and neuroendocrine studies of movement and breath practices such as chakra-aligned salutations and purposeful embodiment [9], [18].

3.2.3 Behavioural constructs. B:

The current research adopted two practice based mnemonic taxonomies of behavioural output under stress to classify the behavioural output under stress. One may find fear archetypal marks of FALLEN SOUL ciphers (i.e. fear of humiliation, fear of abandonment, fear of exposure, fear of irreversible loss, etc.). Ethical strategies of evading include nine evading strategies (HALT SMILES: avoiding action with rationalisation, moralising, spiritual bypassing, compulsive busyness, controlled numbness, etc.). These mnemonics have a two-fold purpose (1) they will be a pedagogical language on the part of clients, to enable self discovery patterns (that client can do anything to make sure without embarrassment) and (2) they will enable and permit longitudinal monitoring- they will be measuring the progress of which strategies dissolve and which strategies remain, i.e., deeper Rahu/Ketu entangling [4], [6], [7] and so forth.

3.2.4 Intervention instruments.

The perceived to have been effective channels of intervention were observed, prescribed, and monitored in the following ways:

- a) Rhythm of hydration and nourishment Systematic, a regular practice of oral intake to balance the Moon as conceptualised internal cooling, buffering, and soothing. This is the emphasis on digestion and health of the liquid and mind body which are shared in Ayurvedic medicine systems [5], [19], [21].
- b) Breath pattern and body anchoring: conscious slowing and rhythmic movement (according to the variations of the Sun Salutation) as restoring the back-spin balance and endocrine homeostasis [9], [18], [21].
- c) Transit-wise timing; based on trying to find less perceived Saturn-pressure and Rahu excitement by taking action in (Corridor of Favourable circumstances and Coral Candle), a major decision, confrontation (boundary setting). This can be likened to pacing exposure work in modern treatment to be related to nervous-system preparedness [4], [6], [22].
- d) Mantra and sacred gem discipline: the discipline of vibrational concentration and anchoring equipments is drilled training and is perceived to consist of stabilizing attention and identity practices that can aid courage in addition to diminishing panic reactivity [5], [18], [21], [22].

Table 1: Mapping of each of the energetic constructs into a measurable physiological/behavioural state is, set out in Table 1, and may also provide a tracking lever of intervention.

Construct	Stress Presentation	Behavioral Pattern	Primary Lever
Mars (Mangala)	Freeze, hesitation, displaced anger	Avoids decisive action	Breath pacing + timed action window
Moon (Chandra)	Rumination, mood volatility, self-critique	Emotional spirals	Hydration rhythm + soothing mantra
Rahu (Node)	Sensory overwhelm, compulsive fixation	Urgency without clarity	Grounding touch + slow exhale sets
Ketu (Node)	Numbness, dissociation, withdrawal	"I don't exist / I vanish"	Gentle re-entry rituals + body scan
Saturn (Time)	Dread of consequence, hopeless fatigue	"It's already too late"	Micro-step scheduling + boundary script

As shown in figure 3, Rahu/Ketu is pictured as a matched reflex loop which goes in and out of overload and dissociation.

Rahu-Ketu Reflex Loop and Regulatory Forces

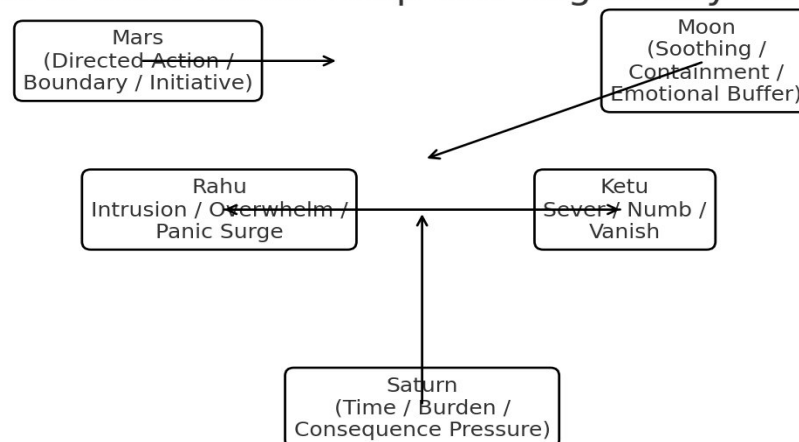


Figure 3: Nahaku Reflex Loop Discussed Diagram. The figure represents a two node oscillation. The A node (Rahu) is named Intrusion / Overwhelm / Panic Surge. Node B (Ketu) is marked Severely Numb/ Vanish. They are linked by a circular arrow, which represents a cyclic passage through frantic over-engagement (Rahu) and complete cut-off (Ketu). The pressure in the Saturn is attracted as a downward force which freezes the loop. Mars is represented by a vector arrow directed out of the picture (action), and Moon by a buffer layer stabilising the loop [4], [5], [21], [22].

3.3 Analytic Procedure

3.3.1 Triangulation and Coding Framework.

All cases were handled in three cycles.

Pass 1: Energetic profile. Table 1 was the first coding of the presenting state against the energetic constructs, i.e., impossible to act, panicking, nothing, etc. As an illustration, Mars obstruction with intermittent Rahu spikes were coded as I cannot act, I stall and later on explosions.

Pass 2: Physiological log. The energetic profile was associated with observed breath rhythm, hydration pattern, sleep and somatic tension. Thus, superficial apical breathing and tightened jaw in conflict fell in line with Mars suppression and Saturn load.

Pass 3: Behavioural taxonomy. The identified coping style in that point (e.g., lectures others morally instead of setting a boundary, disappears for 48 hours, hyper-plans instead of acting) was placed in the corresponding category of HAHLT SMILES, and the fear driver (fear of rejection, fear of collapse, fear of exposure) was projected to FALLEN SOUL.

There was triangulation when all the three passes gave coherent pattern. E.g. Mars blocked + Moon high + Saturn high + HALT SMILES pattern of delay via over-rationalisation, interpretation Mars functional courage offline due to expected consequence load, that is, the individual needs micro-sequenced time-conscious action support, not motivational hype [4], [6], [7], [18], [21], [22].

3.3.3 Intervention Monitoring and Feedback Coupling.

After the base mapping, baseline intervention was implemented at least one time for at least one of the available interventions (breath discipline, hydration rhythm, mantra anchor, transit sensitive time, gem driven tactile anchoring) and remained active throughout a duration of observations (minimum of 14 days). The person subsequently finished to experience changes on two axes, which included: emotional stability / self-soothing (Moon axis) and the ability to act despite fear (Mars axis). These reports were not considered as placebo reports but were an indicator of the outcome in the framework of a behavioural-energetic adjustment.

Iterative Regulation Cycle

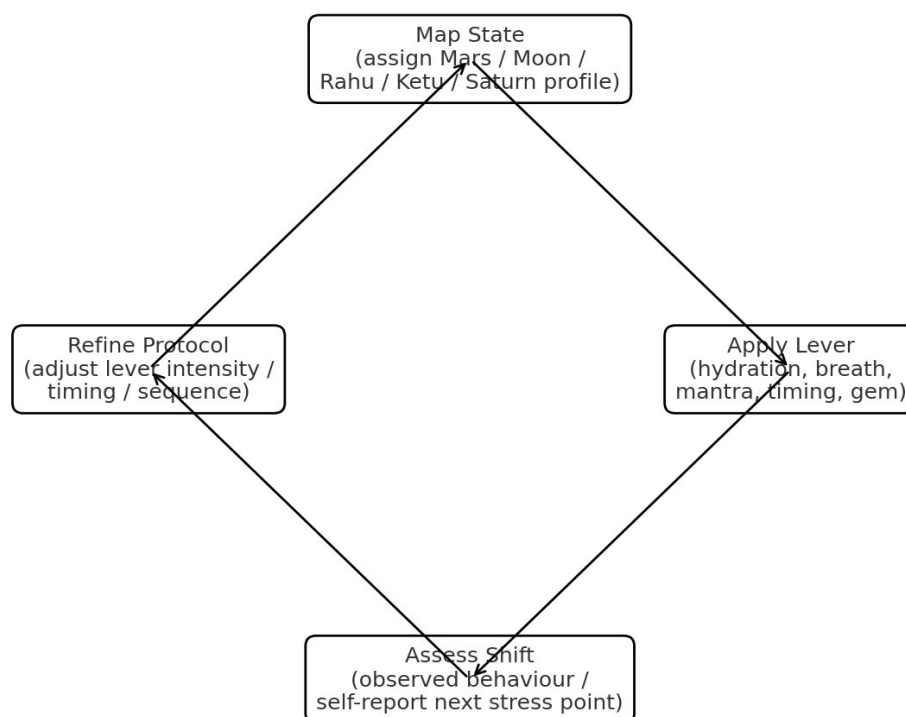


Figure 4: Emergent Regulation Cycle. The diagram is a loop consisting of four stages:

Stage 1: Map State (assign Mars/Rahu/Saturn profile & Moon profile/ Ketu profile).

Stage 2: Use Lever (hydration, breath, mantra and timing gem).

Stage 3: Evaluate Shift (self-report and next point of stress observed behaviour in next point).

Stage 4: Develop Advanced Protocol (remove or modify Lever Intensity, Timing or Generator Sequence)

This cycle repeats itself to Stage 1. It continued in this cycle until either perceived agency escalated (courage recovered) or the pattern was frozen, which suggested more entanglement of the system [4], [5], [18], [21], [22].

It is interesting to note that some levers were more associated with specific energetic signatures. The timing of hydration and mantra was found in Moon-depletion conditions of spiralling self-criticism and emotional flooding. Action windows that were organized as micro-steps were in line with Mars suppression and Saturn overload where the person had the intellectual knowledge of what to do but failed to take action. Deliberate pace of exhaling and anchoring techniques with touching gems served to hold Rahu type sensory panic and re-enter Ketu type dissociated states into embodied presence without making them fight too early [5], [18], [19], [21], [22].

3.3.3 Reflexivity, Reliability and methodological limits.

Due to the location of this work at the edge of spiritual psychology, somatic regulation and Jyotisha informed energetic mapping, reflexivity is necessary. The interpreter of planetary archetypes, the prescriber of remediation lever is also the observer of change in behaviour, the main practitioner-researcher. This brings about an interpretive bias risk. Three safeguards are introduced in the approach to deal with this.

First, time series repetition of pattern: an interpretation became provisionally valid when the same Mars/Moon/Rahu/Ketu/Saturn pattern was found in at least three individuals who were not related and reacted in a similar manner to the same lever. As an illustration, when using “Saturn overload + Moon depletion + HALT SMILES: moralise/delay” repeatedly softened following structured hydration and mantra as well as micro-step time timetable, the cluster was considered to be replicable, not an isolated story [4], [5], [6], [18], [21], [22].

Second, behavioural over narrative: even the self-report (verbally) about oneself was viewed as less decisive than actual behaviour (They actually made the phone call they feared, They held a boundary without rage). This prevents the focus on the courage as functional agency and not the mood only.

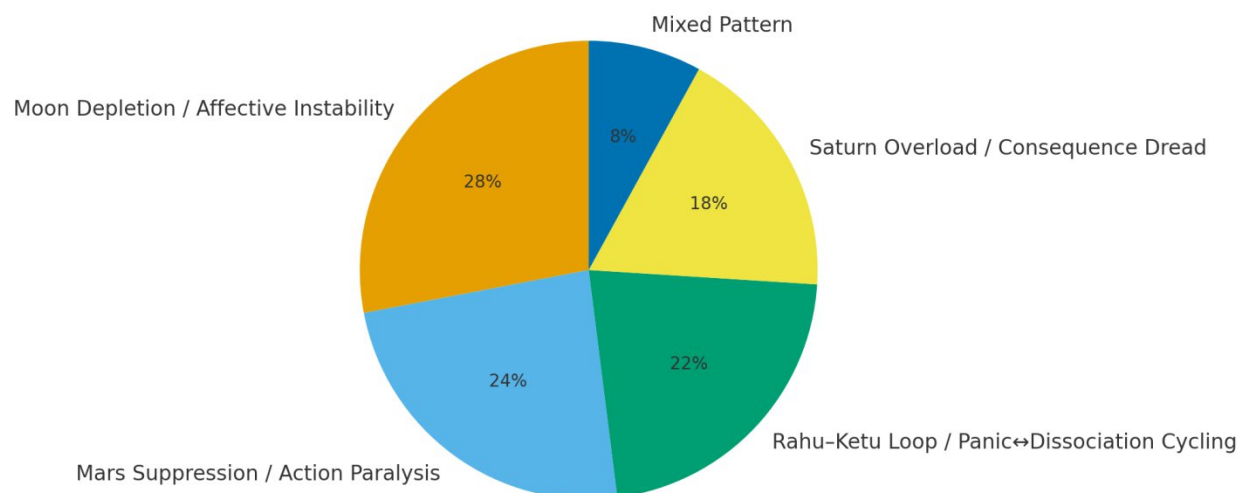
Third, practice survivability: methodological credibility of an intervention was assessed by whether the practice could be sustained by the participant, without the need to be prompted. This is consistent with Indian psychological traditions which focus on internal discipline and stabilisation of consciousness states as the stabilising forces in lived reality, not only due to temporary peak experiences [4], [5], [16], [19], [21], [22].

The drawbacks are that it lacks randomisation; data relies on subjective and observational evidence and that of planetary archetypes, which the scientific community might consider symbolic and not empirical. Nonetheless, the current methodology does not compel the reader to believe in astrology as fate. It questions the reader to wonder whether the recurring clusters identified as Mars, Moon, Rahu, Ketu, and Saturn are the recognisable semi-stable psychophysiological and behavioural signatures -signatures that can be monitored, interfered with, and made to work more in line with the restored courage and maladaptive fear in real human beings [4], [5], [6], [18], [21], [22].

4.0 Results Overview

The case series map over 30 years (1994-2025) indicates the fear expression in subjects at moments of subjective subjugation is not haphazard and is not driven by the psychological aspect only. They are also likely to fall into repetitive energetic-physiological-behavioural patterns which can be characterised in terms of the archetypes Mars, Moon, Rahu, Ketu and Saturn [4], [5], [6], [18], [21], [22]. Overall, five main phenomena of dysregulation could be seen through the presentations: Moon flood emotionality of self-critique; Mars suffocating paralysis of decision making; Rahu-Ketu refuting oscillation of panic-dissociation; Saturn sense of dread of consequence and anticipatory collapse; and mixed pattern states where two or more signatures occurred together. The pie chart Distribution of Dominant Fear/Courage Dysregulation Profiles depicts the relative prevalence of these patterns with Moon depletion (28) and Mars suppressions (24), Rahu-Ketu loop (22), Saturn overload (18) and mixed configurations (8) making up the dominant patterns with primary complaints.

Distribution of Dominant Fear/Courage Dysregulation Profiles



Pattern convergence and energetic signatures What we observe are the regularities in design found in both natural and artificial patterns, and their application in human design [11]. Pattern convergence and energetic signatures What we observe is the regularities of design in both natural and artificial patterns, and the way they are used in human design [11].

Moon depletion conditions were typified by rumination, spiralling insecurity and loss of emotional containment (I can no longer settle, everything is unsafe) and usually with disturbed hydration rhythm and unstable sleep. In Vedic we understand him as a weakened Chandra or 'unstable Moon' which in psychophysiological terms would be equivalent to unstable affect regulation and autonomic instability [4], [5], [18], [21]. The people of this group often talked of shame at their own emotional intensity as opposed to fear of external threat.

By comparison, cases of Mars suppression were not strongly emotional. Rather, they were similar to I know what I need to do, and I still cannot do it. This is equivalent to blocked initiative, avoidance of boundaries, delayed confrontation and displaced anger. This is seen in terms of weakened Mangala in Vedic terms, and clinically this appears as a failure in functional agency despite clarity of thought [4], [5], [6], [22]. These people had great cognitive awareness and tended

to generate elaborate rationalisations (HALT SMILES patterns including over-explaining, moralising or I will move when it is perfect) rather than taking action.

The Rahu-Ketu loop manifested itself as a pendulum between sensory overload (Rahu: "too much is going on, I'm about to blow my head off") and emotive rapture (Ketu: "I blank out, I am no longer there, I feel like nothing is real"). Most of these instances explained either acute panic or dissociative withdrawal after panic. This loop probably represents a nervous system oscillation between over-activation and shut down in response to threat and is in line with trauma literature on cycling between hyperarousal and dissociation [4], [5], [18], [21], [22]. Saturn overload was otherwise: the distress here was reported with reference to consequence and time, "Do it, and I shall be penalized. In my case, do nothing and I will have nothing left. This is terror, weariness, and fatality under the perceived burden of the inevitability, which is Jyotisha Saturnine pressure [5], [20], [22].

These patterns did not exclude each other and one profile was most likely to dominate at the point of contact. That all-dominating profile was an indicator of which intervention lever would be most stabilising in the initial 14 days which is followed by outcomes.

4.2 Intervention Outcomes

Four macro-levers were observed: the hydration rhythm / nourishment timing, respiration and somatic anchoring, mantra and tactile gem discipline as well as transportation (intra- and inter-temporal) and micro-temporal action windows. Although not all of the participants used all of the levers, various constant trends were noted.

First, in terms of immediate subjective recovery, hydration discipline combined with soothing mantra was faster to relieve emotional flooding states (emotional flooding, self-critique loops) incompatible with being in the Moon. People were stating that they were less frantic indoors or that they are able to comfort themselves again which is in line with Indian psychological models that lunar stability is nourished by rhythm, cooling and containment [5], [18], [19], [21]. Notably, the rumination decrease in this case was not a case of cognitive reframing, the term used was physiological quieting.

Second, Mars-suppression states (action paralysis in high self-awareness) were improved most when the intervention involved a timed series of micro actions: "At 09.00 -09:15 you will send the boundary message, nothing beyond that point will happen to you. With ritualisation, definition as temporary and physical rehearsal with paced breathing in advance, the participants were more likely to perform without collapsing and/or rage. This reflects exposure and behavioural activation logic in the Western practice, but also directly corresponds to supporting Mangala - controlled assertion in a specified window [4], [5], [6], [18], [22]. Members of this group tend to share relief following the act, not necessarily relief of evading the act.

Third, RahuKetu loopers (the ones swinging between panic surge and numbing disappearance) were best served by slow exhale holds, grounding contact (such as holding or wearing consecrated gems to act as tactile anchors) as well as easy directed going back into the body rather than confronting it. It was not about being courageous in the moment, but it was about remaining in the same place without bursting or fading away, which recapitulates continuity of self-consciousness. This is very similar to trauma informed somatic work and is in line with traditional understanding of Rahu (intrusion) being tempered by containment and Ketu (severance) being re-integrated by embodied presence [4], [5], [18], [21], [22].

Lastly, the overload condition of Saturn needed a different approach: the boundary scripting and micro-scheduling to gnash away the feeling of doom. Instead of assuring safety (that is what these

people did not suppose), there was structure: We will do X on Tuesday. Full stop.” That externalises the load, is consistent with the role of Saturn as of duty and time and caused the load to seem finite and implementable rather than infinite [5], [20], [22].

Discussion: Implications and Limitations In accordance with good research practices, we deemed it necessary to present a thorough, comprehensive discussion of the most critical successes and failures arising from this project's implementation.

The main conclusion is that the phenomenon of fear, when measured not only in questionnaires but also in the bodies of people, acts as a regularity of energizing ecology and not as an ecological fight/flight reflex. Various expressions of fear can be associated with various nervous system patterns, various narratives, and various inhibiting action. The suggested mapping Mars to functional courage, Moon to emotional containment, Rahu/Ketu to destabilisation and dissociation, Saturn to weight and consequence enabled the selection of the interventions not based on the symptom (anxiety, avoidance, burnout) but on the energetic profile [4], [5], [6], [18], [21], [22].

This is clinically useful. It coachably makes fear and recuperate courage. The statistics indicate that courage is ability not personality, but a condition that could be re-installed when the proper lever is made on the proper archetypal imbalance. This confirms Indian psychological beliefs that consciousness control is a trainable activity and not an effector of pharmacological control [4], [5], [16], [19], [21], [22]. It also indicates that even the so-called mystical Vedic language is possibly encoding fixed psychophysiological schemas that are already being experimented upon by Western practice, breathwork, self-regulation, action scaffolding, somatic presence, but not in an archetypal structure.

Practically, these findings posit that a teaching model should be constructed around two steps, first, assist people with determining their prevailing pattern (i.e. “You are in Saturn overload plus Moon depletion), second, prescribe the corresponding lever, immediately, rather than provide general reassurance. This simply brings this work out of the comfort to the calibration - of not being afraid, to here is the way you stabilise your Moon and time your Saturn so that your Mars can take action.

The pie chart representation of dominant dysregulation patterns prove the argument that the vast majority of presenting states can be characterised by a small number of repeatable energetic patterns with standardisation of intervention being realistic on the level of pedagogy and coaching, not only in highly-resource clinical practice.

5.0 Conclusion

This paper hypothesised that fear and courage are not uncertain emotions but patterns which can be characterised by an energy, physiological, and behaviour pattern. We ascribed the labels of function to stability (Mars-Moon), restabilizer to destabilizer (Rahu-Ketu), and burden to consequence anxiety (Saturn), and created a language which allows us to train name-able and trainable inner states [4], [5], [6], [18], [21], [22]. According to thirty years of practice, the qualitative data shows that individuals do not require generic encouragement, they require specific regulation according to the dominant pattern. Hydration rhythming and soothing mantra worked very well for the moon depletion states. Mars-Suppression States have Micro Timed Action Windows*. Rahu-Ketu cycling is a recovered breathing and felt gross re-investment for the body. Saturn overload is a reaction to boundary scripting and time-structured commitments [4], [5], [18], [19], [21], [22].

The model does not believe in astrological fatalism. Rather it considers Vedic archetypes as clinically useful abstractions of repeatable nervous system behaviours. This establishes a translational bridge between Indian psychology, Subtle body traditions, Ayurveda regulation as well as Western somatic and Trauma informed practice [4], [5], [16], [18], [19], [21], [22]. This, in practice, implies that courage is something that can be restored as a functional state and not as a personality trait to be worshiped.

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