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Bridging Spiritual Intelligence and Self- Efficacy in to foster Holistic health Practices among higher education professionals in Uttarakhand

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Abstract

The study has managed to examine the influence of self-efficacy and spiritual intelligence on holistic health practices. For this purpose, higher education professionals in Uttarakhand were referred as the suitable demographics for the study, since it referred to primary quantitative data findings based on close-ended survey questionnaire. The literature review was formed based on existing literature studies where the study constructs or variables were earlier evaluated, either independently or collectively. The theories such as Spiritual Intelligence Theory and Bandura's Self-Efficacy Theory were used to conceptualize the data findings. Descriptive statistics, demographic tables, reliability analysis, Pearson correlation, multiple regression analysis, and normality testing was performed with the help of SPSS tool, where sample of N=101 came in handy. Based on the statistical results, it is conclusively proved that educators' spiritual awareness and confidence in their professional capabilities could lead towards healthier wellbeing.

Keywords: Holistic Health Practices, Spiritual Intelligence, Self-Efficacy, Higher Education Professionals, Employee Wellbeing, Uttarakhand, SPSS, Quantitative Research.

1. Introduction

The health practices of individuals are influenced by a wide range of factors, tying the link with intellectual factors. Spiritual intelligence (SI) is listed as a core element connected with intellectual elements. In modern healthcare, psychological and physical well-being receives simultaneous focus (Ibrahim *et al.* 2022). It is important to note that emotional and SI comprises a crucial support towards the psychological well-being of individuals. Appropriate consideration of competencies and abilities plays a promising role in enhancing support for well-being by resolving life problems. Such intelligence is also regarded as an innate psychological element. However, its integration within health practices has resulted in the identification of a wide range of initiatives utilised by professionals linked with higher educational institutions.

Holistic healthcare is recognised as a core area linked with the application of SI. It is important to note that the higher education professionals residing in Uttarakhand, India are accustomed to varied types of health practices that have contributed to their spiritual intellect. These initiatives include meditation, pranayama and yoga. Acknowledging SI enables the acquisition of innate comprehension of existential awareness and associated questions, while interconnecting an exceptional extent of consciousness (Walter *et al.* 2024). Indeed, these factors are closely involved with human capacity and self-efficacy towards health initiatives among education professionals in Uttarakhand. High education institutions are involved with dynamic responsibilities and challenges, enhancing the physical and psychological stress of the professionals.

In this scenario, the involvement of self-efficacy and SI has contributed to maintaining a healthy perception towards work activities. The associated contribution is enormous regarding the holistic health benefits, as the major bodies of spiritual literature in India promote certain principles and philosophy supporting well-being (Kumari, 2025). It is further noted that some of the core cognitive problems are involved with psychological well-being, while following spiritual principles and values offer cognitive as well as social abilities. This project depicts the entangled contribution of SI and self-efficacy towards health consciousness and work activities. Indeed, A keen focus is placed on the evaluation of different health practices that are interlinked with these variables. Self-efficacy promotes the assumption of acquiring intended health outcomes through relevant initiatives and measures.

1.2 Aims

- To uncover the projected effects of SI on the holistic health practices of higher education professionals in Uttarakhand
- To elaborate on the benefits of linking SI with self-efficacy for health practices of higher education professionals in Uttarakhand
- To investigate associated health practices utilised by higher education professionals residing in Uttarakhand

The efficiency of incorporating the foundational beliefs relating to self-efficacy is identified to endorse the goals of a healthy lifestyle. On another note, the focus of this project is placed on Uttarakhand, a mountainous location in Northern India that is accustomed to distinguished spiritual and socio-cultural elements. In addition to this socio-cultural diversity, spirituality is a well-known factor in this location due to the existence of renown pilgrimage. These factors have contributed to upholding the contributions of SI regarding the health practices that the local communities are protecting for generations (Saini and Chhetri, 2025). Additionally, Uttarakhand is also part of the rich cultural and spiritual heritage of India, home to a wide range of renowned higher educational institutions. The presence of these institutions indicates the promising presence of professionals as well as work stress, which may impact their overall health performance. Excessive pressure alongside the mountainous locations may hamper both the physical and psychological health of the teachers.

At the same time, due to the popularity, the academic pressure can also be enormous on the professionals, enhancing the need for health practices. The higher educational facilities in Uttarakhand endorse some of the ancient spiritual health initiatives, including meditation (Bhandari and Pandey, 2024). Self-efficacy is one of the core beneficial components acquired through associated health practices, such as meditation, pranayama, and yoga. An intense academic schedule and higher academic expectations have affected self-efficacy and psychological progress. The presence of psychological health issues, including burnout, depression and anxiety, has become quite common among the professionals in Uttarakhand. This project contributes to uncovering the entire scenario by bridging self-efficacy and SI towards holistic health initiatives taken by these professionals.

2. Literature Review

2.1 Spiritual intelligence and its effectiveness for health

As depicted by Pinto *et al.* (2024), SI can be regarded as a core gateway towards improved psychological well-being among individuals. This variable involves advancing the cognitive ability to resolve complexities and improve the quality of daily life. Some of the core elements promoted through SI includes improved social behaviour and resilience, eventually contributing to improving psychological health. At the same time, SI also maintains a crucial interaction with spiritual health through encouraging individuals to participate in health practices that are closely linked with spirituality (Amram, 2022). This variable is also optimised to contribute towards the increased comprehension regarding the benefits of health and well-being through extensive support in the procedures.

The Spiritual Intelligence theory depicts a crucial inquiry process for a diverse range of abilities and competencies that support the adaptation process. The adaptive need regarding spiritual wisdom is entangled with the different components, such as appropriate use of spiritual resources and associated abilities (Ibrahim *et al.* 2022). Nonetheless, this theoretical concept evaluates the link between health benefits through spiritual cognition regarding the resolution of daily complexities. SI is closely linked with emotional intelligence due to its involvement with cognitive elements and compassion regarding in-depth comprehension of existential confusion. The theoretical cognition revolves around the core abilities that are gained through advanced SI among individuals. It can be stated that improved focus on SI offers extended abilities that are reflected through improved health and consciousness (Huda *et al.* 2025).

The interconnection of spirituality in daily life is proven to be a subjective yet cognitive experience that dictates life decisions and well-being. Despite its undeniable significance for health and well-being, scarce training and inadequate facilities have hindered associated progress and awareness (Pinto *et al.* 2023). It is important to note that higher education professionals may often endure such complexities regarding the adaptive nature of spiritual health initiatives. The presence of knowledge on SI empowers the professionals to boost their consciousness and transcendental awareness, preventing stress and burnout (Saad *et al.* 2023). These two complexities may lead to a notable range of health problems that are ultimately resolved through SI.

2.2 Interconnection between self-efficacy and health practices

Self-efficacy promotes an individual's capability to synthesise regular activities and actions (Manipol *et al.* 2024). This value maintains a crucial interaction with health initiatives by encouraging individuals to adopt healthier behavioural attributes. It is revealed by Bhati and Sethy (2022) that individuals with high self-efficacy are focused on improving their capabilities and skills. In particular, this ability promotes productivity and keeps higher education professionals active, which eventually involves updating their health behaviour and

initiatives. The Self-efficacy theory maintains a link with social cognition through its underlying endorsement for motivation and learning. Improved knowledge in this particular area helps resolve complex operations more resiliently, reducing the stress from health. It is important to note that reinforcing capability and comprehension plays a magnificent role in strengthening personal competencies and health attributes (Graham, 2022).

These abilities may include health literacy and awareness of how to access health initiatives. Self-efficacy, along with the ability of self-care, is known to contribute towards improved eHealth literacy (Wang *et al.* 2022). On another note, the improved ability to utilise health initiatives and the needed initiatives for different health problems is known to hold an enormous role in strengthening overall health and well-being. The scarcity of tie with such ability and knowledge may affect the accessibility of appropriate initiatives, which is suggestive of improved health behaviour and performance among higher educational professionals residing in Uttarakhand. They, at the same time, play a remarkable role in promoting feasible health practices for holistic development in the mountainous locations across Uttarakhand.

2.3 Health initiatives taken by higher education professionals in Uttarakhand that are linked to spiritual intelligence

The magnitude of spiritual awareness and intelligence has increased among individuals regarding health initiatives due to the increased complexities of the workspace, especially academia. In this scenario, SI promotes empathy, mindfulness and emotional balance, encouraging individuals to maintain purposeful initiatives (Baidya and Shrivastava, 2025). Higher education professionals, including professors and teachers, are accustomed to an extended obligation towards shaping spiritual and cognitive values. They are prone to prioritise breathing techniques and yoga for exercise instead of modern workouts. It is also revealed that oftentimes, the teacher preparation programs involve such initiatives for extending associated comprehensive and interest among the professionals, which later endorses their well-being. Indian spiritual heritage supports a range of breathing and yoga techniques that provide different health benefits.

As highlighted by Singh and Kumar (2023), certain forms of yoga and meditation are known to provide exceptional health benefits for teachers. Rajyoga is one such form of yoga-linked meditation, which is one of the oldest and extremely useful for well-being. Teachers have been able to improve the quality of sleep as well as their holistic well-being through this particular yoga form, indicating consistent practice and the need for appropriate knowledge regarding the yoga forms. Another such initiative is pranayama, which is also linked with meditation to maintain mindfulness.

2.4 Conceptual framework

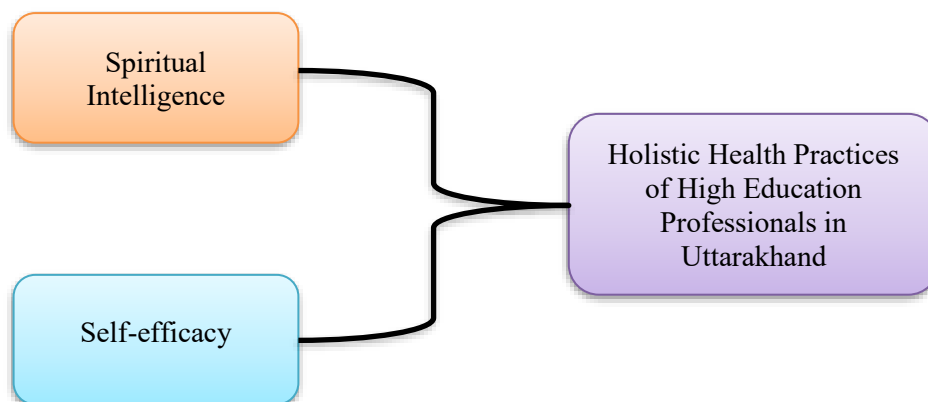


Figure 2.4: Conceptual framework

(Source: Self-developed)

2.5 Hypothesis Development

H1: Spiritual intelligence maintains a positive correlation with holistic health practices utilised by higher education professionals in Uttarakhand.

H2: Self-efficacy maintains a strong positive effect on holistic health practices taken by higher education professionals in Uttarakhand.

H3: Both of these variables collectively influence the underlying variations within the holistic health practices of higher education professionals in Uttarakhand.

3. Research Methodology

3.1 Methods

The significance of philosophical assumptions offers a factual stance towards the foundational values and assumptions relating to the subject of choice. Regarding this scenario, the present project acquired in-depth cognition relating to the interconnected efficiency of SI and self-efficacy towards the health initiatives accessed by higher education professionals. The underlying notion of positivism is rooted in scientific objectivity regarding the subjective philosophy (Maretha, 2023). A positivism philosophy has been employed in this project to explore factual insights on linking self-efficacy and SI associated with the health behaviour of teachers. This philosophical approach has been useful for evaluating the foundational principles associated with the entire phenomenon. Employing a relevant research approach involves maintaining appropriate assistance regarding the steps and procedures.

A deductive approach is employed for this purpose, opening a broader dimension for acknowledging the factual stance relating to the subject through numerical insights. This approach is mainly utilised in quantitative inquiries (Hall *et al.* 2023). In this project, a deductive approach has tested the existing insights relating to SI and self-efficacy and their contribution to the health practices of teachers linked with the higher education facilities located in Uttarakhand. This technique has contributed to the advancement of knowledge relating to the maintenance of associated interventions, which are actively utilised by teachers and professors. The perception regarding SI benefits and usefulness has shifted thoroughly by highlighting the proficiency of practices that are actively being used by the professionals. These initiatives have provided proactive support to mitigate the health implications that generally emerge from work challenges and pressure.

Academic professionals engaged with higher educational facilities are identified to experience major pressure and stress, which affects their health attributes. However, regular involvement with different health initiatives that are linked with self-efficacy and SI has made a radical transition. An online survey is carried out to gather accurate details by illustrating the first-hand experiences of the teachers. Exploring social interactions and experiences is a key form of gathering appropriate details (Chand, 2025). In this scenario, the interpersonal experience of teachers regarding their SI and self-efficacy is uncovered through an online survey that involved approximately 101 respondents. These respondents have been employed through online channels and the primary criterion that has been followed is involvement with teaching in higher education facilities located in Uttarakhand.

The questionnaire comprised approximately 10 questions involving the variables and basic demographic recognition of the teachers and no gender or ethnic bias is entertained. Relevant ethical measures are taken, which include prioritising the consent of the respondents and proper storage of the gathered details. Additionally, the questionnaire was generated to keep the teachers comfortable by excluding confidential details. These measures have protected the accuracy and credibility of this project. (*Refer to Appendix*)

3.2 Timeline

Activities	Timeline									
Investigating the topic										
Reviewing previous literature										
Starting the project										
Method Selection										
Selecting data source										
Making questionnaire										
Collecting primary data										
Analysis										
Interpretation										
Summarising										
Final submission										
Final submission										

Table 3.2: Timeline

Results

4.1 Demographic Profile

Variable	N	Mean	Median	Mode	Std. Deviation	Minimum	Maximum
Gender	101	1.67	2.00	2	0.650	1	3
Teaching Experience	101	2.44	2.00	2	0.943	1	4

Table 4.1: Demographic Profile

(Source: IBM SPSS)

The demographic profiling helps explore the characteristics of the 101 higher education professionals that took the survey for the current research. All 101 responses were valid, with no case of missing responses. The mean score for gender remained 1.67, with standard deviation (SD) value of 0.650 and the teaching experience registered mean of 2.44, with SD of 0.943. The median and modal values showed that majority of the participants belonged to the second category (female) for both demographic variables.

4.2 Reliability Analysis

Scale	Number of Items	Cronbach's Alpha
Spiritual Intelligence, Self-Efficacy and Holistic Health Practices	10	0.736

Table 4.2: Reliability Analysis

(Source: IBM SPSS)

Cronbach Alpha value is predicted to ensure that the collected primary data is reliable for statistical analysis. The consistency of the questionnaire items were also noticed based on the value of Cronbach Alpha. According to current findings, 0.736 Cronbach Alpha score referred to satisfactory internal consistency, with ideal value being more than 0.70.

4.3 Descriptive Statistics

Variable	Mean	SD	Skewness	Kurtosis
SI1: I find personal meaning in the challenges I experience at work	3.69	1.164	-0.694	-0.548
SI2: I often reflect on the deeper purpose of my professional life	3.71	1.417	-0.767	-0.857
SI3: My spiritual beliefs help me remain calm during difficult situations	3.68	1.280	-0.696	-0.810
SE1: I am confident in my ability to handle unexpected work-related challenges	3.65	1.330	-0.611	-0.985
SE2: I can effectively solve difficult problems when they arise	3.54	1.397	-0.622	-1.008
SE3: I believe I can successfully achieve the goals I set for myself	3.35	1.431	-0.300	-1.404

HHP1: I regularly engage in activities supporting overall wellbeing	3.59	1.365	-0.575	-1.040
HHP2: I consciously maintain a healthy work-life balance	3.53	1.467	-0.584	-1.163

Table 4.3: Descriptive Statistics

(Source: IBM SPSS)

The descriptive statistics outline the respondents' perceptions towards spiritual intelligence, self-efficacy alongside holistic health practices. Mostly there were positive responses for all of the variables. Mean scores ranged from 3.35 to 3.71, which signified moderate to high agreement with the questionnaire. Standard deviation values ranged from 1.164 to 1.467 to indicate moderate variability in responses.

4.4 Correlation Analysis

Variables	SI1	SI2	SI3	SE1	SE2	SE3	HHP1	HHP2
SI1	1	.528**	.343**	.292**	.387**	.287**	.267**	.238*
SI2	.528**	1	.490**	.355**	.267**	.227*	.187	.392**
SI3	.343**	.490**	1	.234*	.142	.213*	.246*	.400**
SE1	.292**	.355**	.234*	1	.447**	.342**	.247*	.352**
SE2	.387**	.267**	.142	.447**	1	.300**	.306**	.237*
SE3	.287**	.227*	.213*	.342**	.300**	1	.421**	.344**
HHP1	.267**	.187	.246*	.247*	.306**	.421**	1	.619**
HHP2	.238*	.392**	.400**	.352**	.237*	.344**	.619**	1

Table 4.4: Correlation Analysis

(Source: IBM SPSS)

Pearson correlation test helped examine the relationship shared by the study variables. The correlation tests showed statistically significant positive relationships among majority of study variables. Pearson correlation value of $r = .528$, $p < .001$ suggested SI1 and SI2 to share a moderate positive relationship. On the contrary, Self-efficacy dimensions were also linked positively due to SE1 and SE2 score of $r = .447$, $p < .001$. Holistic health practices also registered a positive relationship, with a score of $r = .619$, $p < .001$ for HHP1 and HHP2. The preliminary support for the proposed conceptual framework is also validated because of positive relationships between spiritual intelligence and self-efficacy, alongside self-efficacy and holistic health practices.

4.5 Multiple Regression Analysis

4.5.1 Model 1: Spiritual Intelligence and HHP1

Model	R	R ²	Adjusted R ²	Std. Error	F	Sig.
1	0.314	0.098	0.071	1.316	3.529	0.018*
Source	Sum of Squares	df	Mean Square	F	Sig.	
Regression	18.336	3	6.112	3.529	0.018	
Residual	168.020	97	1.732			
Total	186.356	100				
Predictor	B	β	t	p		

Constant	2.016	—	3.976	0.000
Personal meaning in work	0.249	0.212	1.854	0.067
Reflection on professional purpose	-0.012	-0.012	-0.101	0.919
Spiritual beliefs remain calm	0.191	0.179	1.612	0.110

Table 4.5.1: Model 1: Spiritual Intelligence and HHP1

(Source: IBM SPSS)

The multiple regression test scores indicate that spiritual intelligence shares statistically significant relationship with holistic health activities. Variance of 9.8%, although none of the predictors scored 5% significance level, with only personal meaning in work approaching the significance mark due to $\beta = 0.212$, $p = 0.067$.

4.5.2 Model 2: Spiritual Intelligence and HHP2

Model	R	R ²	Adjusted R ²	Std. Error	F	Sig.
3	0.459	0.211	0.186	1.323	8.638	0.000***
Source	Sum of Squares	df	Mean Square	F	Sig.	
Regression	45.355	3	15.118	8.638	0.000	
Residual	169.774	97	1.750			
Total	215.129	100				
Predictor	B	β	t	p		
Constant	1.363	—	2.674	0.009		
Personal meaning in work	0.013	0.010	0.095	0.924		
Reflection on professional purpose	0.262	0.253	2.201	0.030*		
Spiritual beliefs remain calm	0.312	0.272	2.616	0.010*		

Table 4.5.2: Model 2: Spiritual Intelligence and HHP2

(Source: IBM SPSS)

The results indicate that this regression model stood statistically significant due to $F = 8.638$, $p < 0.001$, and explained 21.1% of the variance effectively. Two dimensions within spiritual intelligence managed to influence HHP2, whereas finding personal meaning in work did not contribute towards HHP2.

4.5.3 Model 3: Self-Efficacy and HHP1

Model	R	R ²	Adjusted R ²	Std. Error	F	Sig.
3	0.463	0.214	0.190	1.229	8.810	0.000***

The statistical results show that self-confidence and goal attainment remain to be highly influential in promoting healthy work–life balance as compared to problem-solving ability. The fourth regression model is statistically significant in a positive way due to values of $F = 7.249$, $p < 0.001$, under 18.3% variance.

4.6 Normality Test

Variable	Skewness	Kurtosis	Kolmogorov–Smirnov (Sig.)	Shapiro–Wilk (Sig.)	Interpretation
SI1	-0.694	-0.548	0.000	0.000	Approximately normal
SI2	-0.767	-0.857	0.000	0.000	Approximately normal
SI3	-0.696	-0.810	0.000	0.000	Approximately normal
SE1	-0.611	-0.985	0.000	0.000	Approximately normal
SE2	-0.622	-1.008	0.000	0.000	Approximately normal
SE3	-0.300	-1.404	0.000	0.000	Approximately normal
HHP1	-0.575	-1.040	0.000	0.000	Approximately normal
HHP2	-0.584	-1.163	0.000	0.000	Approximately normal

Table 4.6: Normality Test

(Source: IBM SPSS)

The output from surveyed data highlights statistically significant values for Kolmogorov–Smirnov and Shapiro–Wilk tests. Negative skewness value suggested that responses were more inclined towards agreement scale. Furthermore, kurtosis value stood within the limit to suggest no substantial departure from normality. No substantial deviation from normality was noticed based on the illustrated histograms, normal probability (Q–Q) plots, and stem-and-leaf plots. Hence, the findings from Pearson's correlation and multiple regression analysis remain to be valid.

5. Discussion

The statistical findings have helped prove that both spiritual intelligence and self-efficacy influence the holistic health practices among higher education professionals in Uttarakhand. The alternative hypothesis developed is therefore acceptable. On the contrary, self-efficacy managed to share a comparatively stronger explanatory power than spiritual intelligence. This managed to refer to the fact that employee confidence towards individual capabilities has a more substantial role for the promotion of holistic wellbeing practices in higher education in Uttarakhand. Partial support can be extended for the developed conceptual framework as H1 was partially supported by the statistical data. Spiritual Intelligence Theory argues that individuals who have the ability to derive personal meaning, can develop transcendental awareness (Fidelis *et al.*, 2024). These individuals could regulate emotions through spirituality and are adequately equipped to deal with varied occupational demands for better wellbeing. On the other end, H2 was supported, due to the fact that self-efficacy demonstrated a stronger impact on HHP than spiritual intelligence. The findings suggested that Self-Efficacy Theory is proven to be true since it also considers individuals with greater confidence have better capacity to sustain behaviors which boost positive health outcomes (Poluektova *et al.*, 2023). Apart from this, H3 managed to indicate that both of the independent variables such as self-efficacy and spiritual intelligence influence HHP positively. The results show that spiritual intelligence offers internal purpose and emotional resilience needed to deal with the varied workplace challenges. In contrast, self-efficacy manages to translate these psychological resources into optimized health-promoting behaviors.

6. Implications

The findings managed to provide crucial theoretical, practical and policy implications. Theoretically, the study has highlighted the growing body of knowledge with the integration of spiritual intelligence and self-efficacy to be the complementary psychological resources which boost holistic health practices among higher education experts. Previous studies evaluated these constructs independent manner, as the current research has shown the combined influence of these constructs within an educational management context. This has helped in the

process of understanding the employee wellbeing from a holistic aspect. The proposed framework could also serve to be a foundation for future studies. It could assist investigation of positive organizational behavior and workplace illness within the stream of academic institutions.

From a practical standpoint, institutional leaders and university administrators shall be able to recognise that wellbeing of employees extend beyond physical health and includes several other aspects. These remain to be emotional, psychological, and spiritual values. The strengthening of the holistic health practices can be done by the institutions based on organization of mindfulness programs, resilience training, stress management workshops and professional development plans. These activities are able to contribute towards enhanced spiritual awareness and self-efficacy for the participants. Furthermore, building a healthier work environment would become possible alongside management of professional challenges due to higher level of confidence level for the educators. HRM practices in higher education face implications as well because certain practices such as recruitment, induction, and initiatives for faculty development could incorporate wellbeing-oriented interventions. These would thereafter reinforce abilities to self-reflect, become emotionally resilient, and gain confidence as a professional. Furthermore, the level of teaching effectiveness shall also increase alongside reduction of stress from work.

Policy perspective has helped realize that university governing bodies and educational institutes could integrate holistic wellbeing into the existing policies. It could be also associated with the faculty development frameworks as a part of long-term management of professionals in the domain of education to offer better quality education. The institutional resilience and employee productivity can be strengthened via provision of counselling support, wellbeing assessments, flexible work practices. A sustainable approach to build better workplace environment could be tied with fostering of spiritual intelligence and self-efficacy. Furthermore, policymakers and educational managers could look to use the critical insights from the research to shape the wellbeing-oriented academic environments, and build supportive workplace.

7. Limitations and Future Research

The study is surrounded by several limitations despite the contribution it makes based on primary data evidences. A cross-sectional research design was employed in the study which restricted the ability to build the causal relationships among the research constructs. On the other end, longitudinal studies share better evidence driven approach to indicate the changes in constructs over time. Data collection was done based on self-reported questionnaire as no specific scale was referred. This created a sense of bias and subjective perceptions were influenced during the data collection. Future research could look to rely on a mixed method or qualitative interview driven research to gain explorative insights surrounding the experiences of the employees. The generalizability of the findings to other regions, education facilities, or cultural contexts stood limited because of the focus on a moderate sample of 101 participants from Uttarakhand based educational institutes.

Future studies could look to incorporate a larger sample size for the quantitative data analysis, as consideration of diverse samples from multiple locations could improve the external validity. The mediating and moderating roles of certain variables were not explained in the current study, which can be explored in future studies. Several of the moderating and mediating constructs such as emotional intelligence, institutional support, job satisfaction, psychological wellbeing, leadership style, and work engagement could be referred. This will allow to highlight broader set of evidences for developing effective wellbeing strategies.

8. Conclusion

It can be summarised that involvement with psychological awareness provides health benefits. A growing body of literature has suggested that educational professionals are accustomed to a diverse range of health initiatives that are linked with SI and self-efficacy and these initiatives strengthen their capability to deal with the regular complications. The psychological and spiritual values of the professionals are closely linked with the initiatives. Indeed, a wide range of benefits have been identified through the survey, which include improved self-efficacy and spiritual awareness. These interventions have contributed to the formation of a healthier environment for the professionals, preventing stress and enhancing confidence levels.

It is important to note that the professionals have also accessed an exceptional opportunity to self-reflect through improved spiritual awareness and consciousness. At the same time, the HRM initiatives are impactful within higher educational facilities across Uttarakhand due to a scarcity of well-being initiatives within the procedures. The survey has provided exceptional insights regarding the usefulness of linking self-efficacy and SI, including improved quality of education through increased consciousness and values of the administrators and other professionals. The need for a sustainable initiative is also highlighted, which suggests the prominence of existing complications that may have impacted the quality of the entire atmosphere.

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