

Effectiveness of Yoga Therapy on Psychological Well-Being among School Students

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ABSTRACT

School age is regarded as a very difficult stage in the process of development. Because of the changes that occur, this is regarded as a period of crisis. Well-Being refers to the state of a particular individual or a group of individuals. Increase in the level of well-being implies to some extent that the individual's or the group's condition or state is positive. Psychological well-being is often regarded as an integration of positive states like joy, happiness (hedonism) and states that lead to self-fulfillment (eudaimonic). Yoga aids in reducing stress, anxiety and thereby promotes sleep. Regular Yoga practice improves one's well-being and to be aware of one's own body. The current study aims to determine the effectiveness of Yoga Therapy on Psychological Well-Being among School students. The participants include 20 school students between the age groups 10-15 years. The results revealed that that the intervention has significantly increased the level of Psychological Well-Being among School Students and there is a significant difference in the post-test level of Psychological Well-Being among School students between the experimental group and control group. Yoga Therapy plays a vital role in maintaining and improving both physical as well as mental health. Using Yoga as an intervention, it shows a significant effect on improvising the Psychological Well-Being of School Students.

Keywords: School Students, Well- Being, Psychological Well-Being, Yoga

School age is regarded as a very difficult stage in the process of development. Because of the changes that occur, this is regarded as a period of crisis. The mental health issues among school students keep rising. Many students go through this very easily without experiencing any stress, reporting a level of relative well-being (Bandura, 1964; Offer & Schonert-Reichl, 1992; Douvan & Adelson, 1966). Well-Being refers to the state of a particular individual or a group of individuals. Increase in the level of well-being implies to some extent that the individual's or the group's condition or state is positive. Well being is also referred to as Wellness. Wellness is a diverse concept that includes aspects of physical, psychological and social aspects of health. Psychological well-being is often regarded as an integration of positive states like joy, happiness (hedonism) and states that lead to self-fulfillment (eudaimonic).

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Psychological well being is about lives going well. It is the combination of feeling good and functioning effectively (Huppert, 2009). Ryff's (1989) stated that there were 3 main components to psychological well-being that were related to one another: pleasant affect, unpleasant affect and life satisfaction. A study was conducted to determine the psychological well-being and its relationship with active and passive procrastination by Ismail (2016). The study shows that there is a small positive correlation between active procrastination and psychological well-being, and a small negative correlation between the two.

Carol Ryff proposed 6 factor model of psychological wellbeing and they are:

1. Autonomy	Refers to the sense of being able to internally regulate within oneself.
2. Personal Growth	Refers to the Growth and development of oneself.
3. Environmental Mastery	Refers to the ability to succeed and compete regardless of the situation or surroundings.
4. Purpose in Life	Refers to the meaning and objective of one's life.
5. Positive Relation with others	Refers to the idea of maintaining a good interpersonal relationship or bonding with others.
6. Self Acceptance	Refers to the ability to accepting one's positive as well as negative qualities.

Yoga is the practice of yoking together or unifying body and mind (Kabat-Zinn, 1990). Yoga aids in reducing stress, anxiety and thereby promotes sleep. Regular Yoga practice improves one's well-being and to be aware of one's own body. Yoga was designed to promote whole body health and fitness with an additional goal of inner peace and freedom (O'Neill, 2011). There has been much variability in the yoga techniques and styles examined in the context of healthcare interventions (Khalsa, 2007). Even though different forms and styles of yoga exist in the West, Hatha Yoga is the style of yoga that is known the most. Hatha yoga is comprised of all three of the aforementioned components, and the combination of such activities within a yoga series is intended to promote a power and balance of receptive and active energies that enhance an awareness of self (Riley, 2004). Yoga is a well-known physical, mental and spiritual practice since the ancient time and still benefiting people globally.

Ashtanga Yoga

According to Patanjali, yoga is of 8 forms/ steps. These are called as the 8 limbs of yoga or otherwise known as Ashtanga Yoga. The goal of Ashtanga Yoga is enlightenment and self-realization. The 8 limbs are as follows:

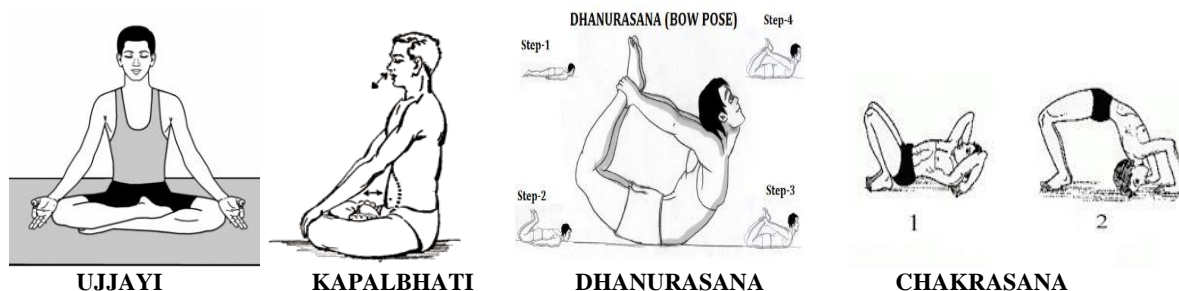
1. **Yama:** self- restraint, abstinences
2. **Niyama:** self- discipline, observances
3. **Asana:** body posture that helps in concentration
4. **Pranayama:** breathing exercise
5. **Pratyahara:** Transcendence
6. **Dharana:** Concentration
7. **Dhyana:** Meditation
8. **Samadhi:** state of ecstasy or enlightenment

Ivan and Karlijn (2008) conducted a study on Effects of Mindfulness-Based Stress Reduction Intervention on Psychological Well-being and Quality of Life and the results

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revealed that in the post intervention scores, the perceived stress decreased significantly and quality of life and the psychological well-being increased significantly.

Yoga Asanas



Objective

- To determine the effectiveness of Yoga Therapy on Psychological Well-Being among School students.
- To determine the effectiveness of Yoga Therapy on post-test Psychological Well-Being level between the experimental and control group.

Hypotheses

- There will be a significant difference between the before and after intervention on psychological well-being among students in Experimental group.
- There will be a significant difference in the post-test of both Experimental and Control group.

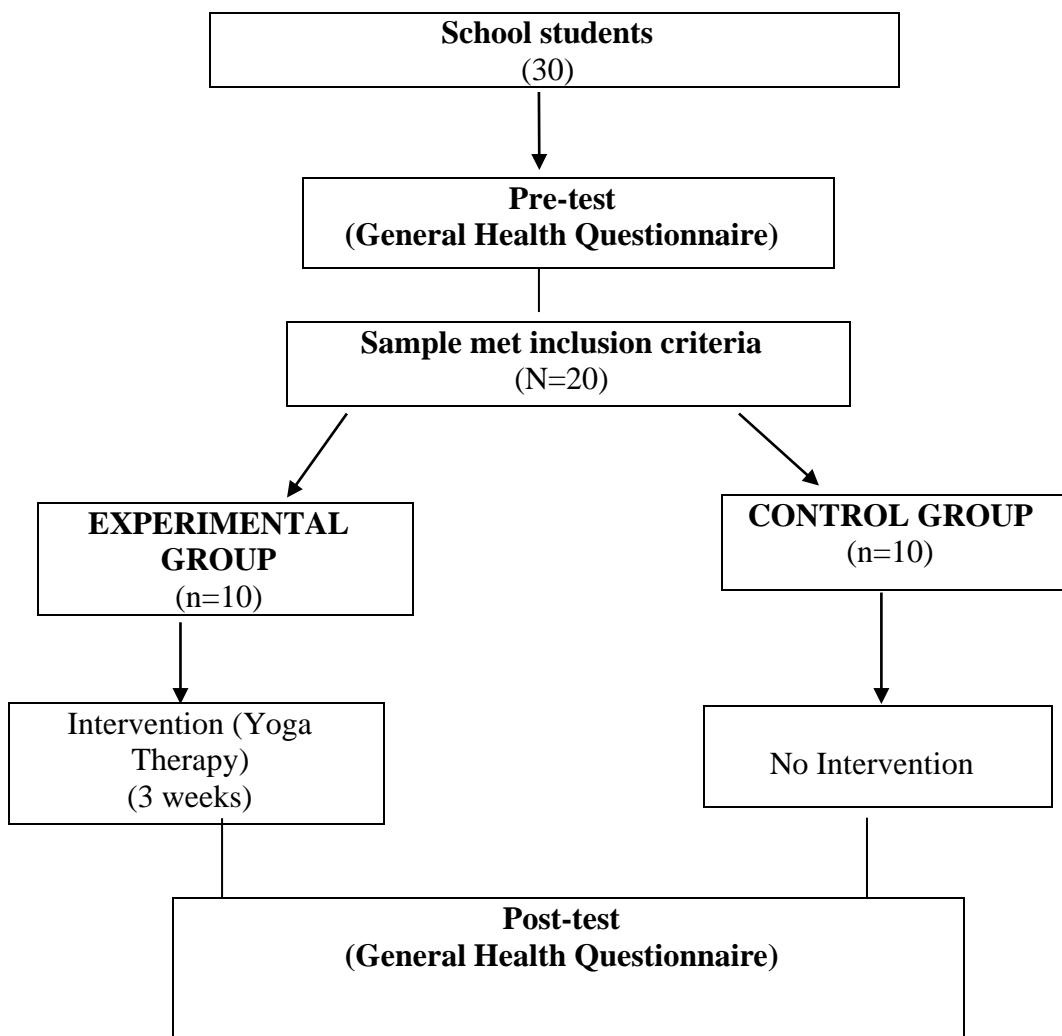
Tools

1. **General Health Questionnaire (GHQ-12)** In order to measure the psychological well-being among undergraduates, the General Health Questionnaire (GHQ-12) developed by Goldberg and Williams in 1988 was used. This scale consists of 12 items that are rated on a 4-point Likert Scale. The test includes both positive (0 to 3) as well as negative items (3 to 0). The total scores are ranged from 0 to 36.
2. **Social Demographic Sheet:** It was used to collect information regarding relevant variables such as initial, age, gender, socio economic status and illness.

Procedure

After establishing the proper rapport with the school students (N=10), they were administered with General Health Questionnaire (GHQ-12) developed by Goldberg and Williams in 1988. The pretest data for the psychological well-being of the sample were collected. Those samples having low level of psychological well-being are grouped under the experimental group and are being provided with intervention- Yoga Therapy for 3 weeks. After the intervention of 3 weeks, the participants were administered with the same questionnaire and the scoring was done. The pretest and post test data of the participants are collected and the variables are analyzed using mean, standard deviation and t test using SPSS.

Figure-1 conceptual framework for the study



Intervention

Yoga Therapy is used as an intervention in order to enhance the psychological well-being of the school students. Yoga Therapy focuses on using techniques that help to calm both body and mind. Yoga Therapy helps individuals to modify their health and well-being. The state of well-being is often attained through breathing exercise (pranayama), asana (body postures)

Initially the students are asked to sit comfortably on the yoga mat. The therapy was administered for a period of 30 minutes each day for 3 weeks. The students underwent sessions of both asanas as well as pranayama. First, they are asked to close their eyes and then chant “om” for 5 minutes. Next, they are instructed to keep both the nostrils open and then to inhale and exhale with both the nasal openings quickly for a period of 15 seconds. After the basic breathing exercise was done, next Ujjai Pranayama was administered where in which the children were instructed to sit straight in padmasana with their spine straight. They were asked to take deep breath in deeply to the maximum capacity through their nostrils. They were instructed to hold their breath for one second and then slowly exhale by constricting their breath at the back of throat and while doing that it would sound like an ocean wave. This is repeated up to 20 times. After that, the next exercise involved that of kapalabhati. The students were asked to take 2-3 deep breaths at the initial phase and then

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they are asked to exhale forcefully from the abdomen rapidly and continuously. The exhalations are then gradually increased for about 10-15 minutes. Next, the students underwent sessions of asanas. The first asana that was administered was the “chakrasana” or the wheel pose. The students were first instructed to lie down on their back with their feet apart and bend their knees and place their feet on the ground close to the body. Next, they were asked to bring their palms under the shoulder in such a way that the fingers point towards the shoulders and elbows are shoulder-width apart. They were asked to inhale and lift their hips by pressing their palms and elbow firmly into the floor for a period of at least 15-30 seconds. After that they are instructed to go back to their original position by bending their elbows and knees back to the ground. This is repeated up to 5 times. The students next underwent “Dhanurasana” or the Bow Pose Yoga. At first, they were made to lie down in prone position, then they were asked to bend their knees and hold the ankles with their hands and inhale raising their thighs, head and chest as high as they can and they were asked to maintain the position for about 3-5 minutes. Then, after 5 minutes they were asked to come back to the original position. This asana is repeated up to 3 times. Finally, the students underwent the “Shavasana” or the Corpse Pose where in which they were instructed to lie on their back and by keeping their arms and legs open and their eyes closed. They were asked to take deep breaths through the nose and to scan the body from their toes to fingers till the crown of the head. This is done for a period of 10 minutes to relax and calm both mind and body free from tensions, stress and muscle contractions.

RESULTS, ANALYSIS AND DISCUSSION

Table 1: Shows the difference on Psychological Well-Being between before and after intervention among School Students in Experimental group. (N=10)

Psychological Well-Being (Experimental Group)	Mean	Std. Deviation	Mean Difference	t value
Before Intervention	23.7	5.03	-7.0	-8.573**
After Intervention	30.7	4.98		

** $p < 0.01$

Table 1 shows the level of Psychological Well-Being among School Students before (**M= 23.7; S.D=5.03**), and after intervention (**M= 30.7; S.D= 4.98**). The mean difference was **-7.0** and the ‘t value’ was **-8.573**. It reveals that there is a significant difference on Psychological Well-Being among School Students between before and after intervention. Therefore, the hypothesis is accepted. It shows that the intervention has significantly increased the level of Psychological Well-Being among School Students.

Table 2: Shows the difference on Psychological Well-Being before and after intervention among School Students in Control group. (N=10)

Psychological Well-Being (Control Group)	Mean	Std. Deviation	Mean Difference	t value
Before Intervention	25.6	2.65	0.3	1.09NS
After Intervention	25.3	2.70		

NS= Not Significant

Table 2 shows the difference on Psychological Well-Being before intervention (**Mean = 25.6; SD= 2.65**) and after (**Mean =25.3; SD= 2.70**) intervention. The mean difference is **0.3**. The ‘t’ value is **1.09**. This reveals that there is no significant difference on psychological well-being among school students before and after intervention in the control group.

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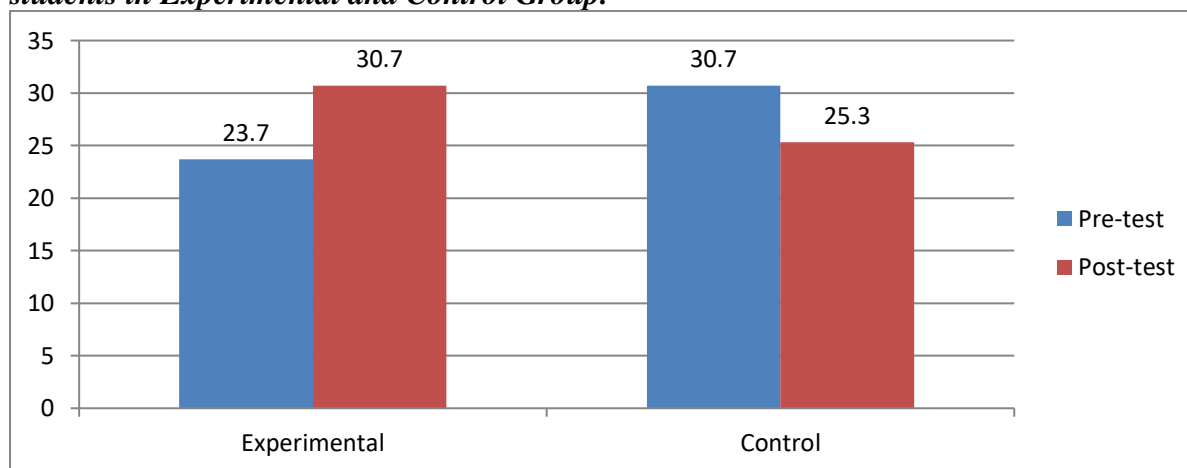
Table 3: Comparison of Post-test Psychological Well-being scores among School students between experimental and control group. (N=20)

Post-test Anxiety	Mean	Std. Deviation	Mean Difference	't value'
Control Group (n=10)	25.3	2.70	-5.4	-12.65**
Experimental Group (n=10)	30.7	4.98		

** $p < 0.01$

Table 3 shows the post-test mean score of Psychological Well-Being among School Students in the control group **25.3** which is with **S.D 2.70** and the post-test mean score of Psychological Well-Being among School Students in the experimental group was **30.7** and **S.D** was **4.98**. The calculated unpaired 't' value of **t = -12.65** was found to be significant at $p < 0.001$ level. This indicates that after administering Yoga Therapy in the experimental group, there was significant increase in the level of Psychological Well-Being than the control group who underwent normal routine. Therefore, the hypothesis is accepted. It shows that the intervention has significantly increased the level of Psychological Well-Being among School Students

Figure – 2 Pre-test and Post-test level of Psychological Well-Being among School students in Experimental and Control Group.



CONCLUSION

The analysis of the data revealed that the level of Psychological Well-Being has been increased significantly after giving intervention among School Students in the experimental group, but no changes have been found in the control group because. Yoga Therapy plays a vital role in maintaining and improving both physical as well as mental health. All the above results indicate that using Yoga as an intervention has a significant effect on improving the Psychological Well-Being of School Students.

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Conflict of Interest

The author declared no conflict of interest.

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