



## A Study of yogic breathing effect on mental health in relation to gender and age

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### Abstract

The main purpose of this research was to compare the mental health in relation to their gender and age. With reference to the above problem, the main objectives of the study were: 1] To study and compare the mental health between yogic person and Non – Yogic Persons. 2] To study and compare the mental health between male and female. 3] To study and compare the mental health between 20-35 yrs old subjects and 40.-55 yrs old subjects. 4] To study and compare the mental health between yogic-non yogic and gender. 5] To study and compare the mental health between yogic – non yogic gender. 6] To study and compare the mental health between gender and education. 7] To study and compare the mental health between yogic-non yogic, gender and education. The total sample consisted of 240 among 120 are male and 120 female. The research tool for Mental Health Inventory (M.H.I) originally written by Dr. Jagdish and Dr. A.K.Srivastav. These scores were tabulated under adequate sub groups formed by 2 X 2 X 2 factorial design for the main variable study. All these scores were then analyzed using adequate statistical techniques, viz. technique of analysis of variance to examine overall significance of difference among the levels of each variance.

**Keywords:** Yogic and non-yogic, Mental Health,

### Yogic Breathing:

Yogic breathing makes good physical and mental health. People can remove their disease by regular practice of yogic breathing. In ancient times, recluses lived healthy long lives by practice of yogic breathing. Yogic breathing is not only for the mind but it affects all over the body. It cures disease of body and mind both. It helps to maintain health and let people live long. Yogic breathing relaxes the body and mind so people feel relief from stress. Various researches on yogic breathing are carried on at different institutes of the world. The effects of various diseases are shown in the mental health of 25-40 and 41-55 yrs yogic-Nonyogic, men-women in present research.

## **History of Yogic Breathing:**

Yogic breathing know as a PRANAYAM. Pranayama is the fourth stage in pathanjali's eight stage yoga discipline. Two Sanskrit words are combining in the word 'Pranayam' – Prana and Ayam. 'Prana' means life or life force. 'Ayama' means development or control.

Breath is the life source that sustains life. Nobody can survive more than a few minutes without air. The Forefathers of yoga developed a special system – 'Pranayam' to increase, develop and control this life source.

## **Definition of Yogic Breathing:**

- (Yogic Breathing) Pranayam is the fourth limb of ashtanga yoga. Pranayam is the measuring, control and directing of the breath. Pranayama controls the energy within the organism, in order to restore and maintain health and to promote evolution.

## **Stages of yogic Breathing:**

- 1] Puraka (inhalation);
- 2] Abhyantara Kumbhaka (Pause after Inhaling) Full Pause;
- 3] Rechaka (exhalation);
- 4] Bahya Kumbhaka (Pause After Exhaling) Empty Pause.

## **Types of Types of Yogic Breathing:**

- Ujjayee; Shitali; Viloma; Kapalbhathi; Anuloma; Suryabhedana; Bhastrika etc.

## **Mental Health**

Mental health refers to our cognitive, and/or emotional wellbeing - it is all about how we think, feel and behave. Mental health, if somebody has it, can also mean an absence of a mental disorder. While there are as many as two crore (20 million) Indians suffering from mental illnesses, the country has only 3,500 psychiatrists and 1,500 psychiatric nurses to treat them. According to the Head of the Department of Psychiatry at New Delhi's G B Pant Hospital R C Jiloha, an estimated 1-2% of India's 100-crore plus population suffer from major mental disorders and about 5% of the population from minor depressive disorders. Most of the psychiatrists are based in cities or private hospitals. However, government hospitals face an acute shortage, although they are the ones which treat the poor. In the United States there are 45,615 psychiatrists. (Annual Report The MINDS Foundation, 2012).

Health is the level of functional or metabolic efficiency of a living being. In humans, it is the general condition of a person's mind, body and spirit, usually meaning to be free from illness, injury or pain (as in "good health" or "healthy"). The World Health Organization

- (WHO) defined health in its broader sense in 1948 as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." Although this definition has been subject to controversy, in particular as having a lack of operational value and the problem created by use of the word "complete", it remains the most enduring. Classification systems such as the WHO Family of International Classifications, including the International Classification of Functioning, Disability and Health (ICF) and the International Classification of Diseases (ICD), are commonly used to define and measure the components of health.
- The maintenance and promotion of health is achieved through different combination of physical, mental, and social well-being, together sometimes referred to as the "health triangle". The WHO's 1986 Ottawa Charter for Health Promotion furthered that health is not just a state, but also "a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities."
- Systematic activities to prevent or cure health problems and promote good health in humans are delivered by health care providers. Applications with regard to animal health are covered by the veterinary sciences. The term "healthy" is also widely used in the context of many types of non-living organizations and their impacts for the benefit of humans, such as in the sense of healthy communities, healthy cities or healthy environments. In addition to health care interventions and a person's surroundings, a number of other factors are known to influence the health status of individuals, including their background, lifestyle, and economic and social conditions; these are referred to as "determinants of health".
- Mental health describes a level of psychological well-being, or an absence of a mental disorder. From the perspective of 'positive psychology' or 'holism', mental health may include an individual's ability to enjoy life, and create a balance between life activities and efforts to achieve psychological resilience. Mental health can also be defined as an expression of emotions, and as signifying a successful adaptation to a range of demands.
- The World Health Organization defines mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community". It was previously stated that there was no one "official" definition of mental health. Cultural differences, subjective assessments, and competing professional theories all affect how "mental health" is defined. There are different types of mental health problems, some of which are common, such as depression and anxiety disorders, and some not so common, such as schizophrenia and Bipolar disorder.
- Most recently, the field of Global Mental Health has emerged, which has been defined as 'the area of study, research and practice that places a priority on improving mental health and achieving equity in mental health for all people worldwide'.

- Mental health can be seen as a unstable continuum, where an individual's mental health may have many different possible values. Mental wellness is generally viewed as a positive attribute, such that a person can reach enhanced levels of mental health, even if the person does not have any diagnosed mental health condition. This definition of mental health highlights emotional well-being, the capacity to live a full and creative life, and the flexibility to deal with life's inevitable challenges. Many therapeutic systems and self-help books offer methods and philosophies espousing strategies and techniques vaunted as effective for further improving the mental wellness of otherwise healthy people. Positive psychology is increasingly prominent in mental health.
- An example of a wellness model includes one developed by Myers, Sweeney and Witmer. It includes five life tasks—essence or spirituality, work and leisure, friendship, love and self-direction—and twelve sub tasks—sense of worth, sense of control, realistic beliefs, emotional awareness and coping, problem solving and creativity, sense of humor, nutrition, exercise, self-care, management, gender, and cultural identity—which are identified as characteristics of healthy functioning and a major component of wellness. The components provide a means of responding to the circumstances of life in a manner that promotes healthy functioning. The population of the USA in its majority is considered to be mostly uneducated on the subjects of mental health .
- *History*
- In the mid-19th century, William Sweetzer was the first to clearly define the term "mental hygiene", which can be seen as the precursor to contemporary approaches to work on promoting positive mental health. Isaac Ray, one of thirteen founders of the American Psychiatric Association, further defined mental hygiene as an art to preserve the mind against incidents and influences which would inhibit or destroy its energy, quality or development.
- An important figure to "mental hygiene", would be Dorothea Dix (1802–1887), a school teacher, who had campaigned her whole life in order to help those suffering of a mental illness, and to bring to light the deplorable conditions which they were put in. This was known as the "mental hygiene movement" Before this movement, it was not uncommon that people affected by mental illness in the 19th century would be considerably neglected, often left alone in deplorable conditions, barely even having sufficient clothing. Dix's efforts were so great that there was a rise in the number of patients in mental health facilities, which sadly resulted in these patients receiving less attention and care, as these institutions were largely understaffed..
- At the beginning of the 20th century, Clifford Beers founded the National Committee for Mental Hygiene and opened the first outpatient mental health clinic in the United States of America.

- The mental hygiene movement, also known as the social hygiene movement, had at times been associated with advocating eugenics and sterilization of those considered too mentally deficient to be assisted into productive work and contented family life
- **Review of Relevant Literature:**
- Smith (1978) reported that those who maintain Meditation and yogic breathing practice; they display greatest reduction in trait anxiety score.
- Ferguson and gowan (1976) reported a significant decrease in depression in a group of meditators after 6 weeks of meditation practice. Zurcher L. A. And snow D. A. (1981) found a significant decrease in depression after 30 weeks of Yogic breathing practice.
- Smith (1976) found that yogic breathing practice effective in reducing anxiety in anxious college students was no more so than highly credibility procedures, which are design to control for expectation or relief and for the ritual of sitting twice daily.
- Bandura (1977) Gecas (1982), Rosen berg (1965) found that a beneficial by product of yoga practice self-esteem, positive self-evaluation and the feeling of self-efficiency.
- Nagendra (1984), Digambarji swami (1995), Kuvalayanda swami (1993) discovered that yoga therapy is fast advancing as an effective therapeutic tool in many physical, psychological and psychosomatic disorder.

### ***Problem of study:***

#### **A Study of yogic breathing effect on mental health in relation to gender and age**

### ***Objectives:***

The main objectives of study were as under.

- 1] To study and compare the mental health between yogic person and Non – Yogic Persons.
- 2] To study and compare the mental health between male and female.
- 3] To study and compare the mental health between 20-35 yrs old subjects and 40.-55 yes old Subjects.
- 4] To study and compare the mental health between yogic-non yogic and gender.

- 5] To study and compare the mental health between yogic – non yogic gender.
- 6] To study and compare the mental health between gender and education
- 7] To study and compare the mental health between yogic-non yogic, gender and education.

***Hypothesis:***

To related objective of his null-hypothesis were as under.

- 1) There is no significant difference in mental health between yogic person and Non – Yogic Persons.
- 2) There is no significant difference in mental health between male and female.
- 3) There is no significant difference in mental health between 20-35 yrs old subjects and 40.-55 yes old Subjects.
- 4) There is no significant difference in mental health between yogic-non yogic and gender.
- 5) There is no significant difference in mental health between yogic – non yogic gender.
- 6) There is no significant difference in mental health between gender and education
- 7) There is no significant difference in mental health between yogic-non yogic, gender and education.

***Method***

***Samples:***

According to the purpose of present study total 240 sample has been selected. There were 120 male and 120 female of yogic and non-yogic subjects were taken as a sample from different area in Ahmedabad city. (Gujarat).

***Research Design:***

The aim of present research was to study and compare the mental health between yogic person and Non – Yogic Persons were taken as a sample. Here to measure mental health Inventory [M.H.I] was used which was mode by Dr.Jagdish and Dr. A. K. Shrivastva. To check the difference between groups F-test on method was used. The result discussion of mental health of yogic and non –yogic persons is as under.

***Instruments:***

For this purpose the following test tools were considered with their reliability, validity and objectivity mentioned in their respective manuals. In present study two inventory used in research.

- **Mental Health Inventory:**

Mental Health Inventory [M.H.I] was used which was made by Dr.Jagdish and Dr. A. K. Shrivastva.

Reliability coefficient of various dimensions of  
Mental Health Inventory.

<i>SR. NO.</i>	<i>Dimensions of mental health</i>	<i>Reliability Index</i>
1	Positive Self Evolution	.75
2	Perceptual of reality	.71
3	Integration of Personality	.72
4	Autonomy	.72
5	Group-oriented attitudes	.74
6	Environmental Mastery	.71
7	Over all	.73

- Here we measure the overall mental health.

***Procedure:***

The testing was done on a group of Yogic and non-yogic peoples. The whole procedure of fill the inventory was explained to them fully and clearly. The Instruction given on the questionnaire were explained to them. It was also made clear to them that their scores would be kept secret. It was checked that none of the subjects left any questions unanswered or that no subjects encircled both the answer given against question.

***Result and discussion:***

The main objective of present study was to study yogic breathing effect on mental health's relation gender and age in is statistical F method was used. Result discussion of present study is as under.

Table-1  
Showing Result of ANOVA on  
Score of overall Mental Health of Various Groups

<i>Source of Variation</i>	<i>SS</i>	<i>DF</i>	<i>MS</i>	<i>F</i>	<i>Level of Significance</i>
Ass	2275.50	1	2275.50	15.38	0.01
Bss	95.00	1	95.00	0.64	NS
Css	178.54	1	178.54	1.21	NS
AXB	82.84	1	82.84	0.56	NS
AXC	119.00	1	119.00	0.82	NS
BXC	130.54	1	130.54	0.88	NS
AXBXC	632.22	1	632.22	4027	0.05
Wss	33795.39	232	145.64		
<b>Tss</b>	<b>37078.50</b>	<b>239</b>			

The F ratio for yogic-Non-yogic and Age is 0.80, which is not significant. Than mean Yogic-non-yogic and Age have do not interact significantly to each other on over all mental health score. The mean score of yogic 20-35 yrs old subjects M=175.13 and Yogic 40-55 yrs old subjects M=178.27 and Non-yogic 20-35 yrs old subjects M=170.38 and non-yogic 40-55 yrs old subjects M=170.70.

The F ratio for Gender and Age is 0.88, which is not significant. That mean gender and age have do not interact significantly to each other on overall Mental health score. The mean of male 20-35 yrs old subjects M=172.65 and male 40-55 yrs old subjects M=175.85 and female 20-35 yrs old subjects M= 172.87 and female 40-55 yrs old subjects M=173.12.

The F ratio for yogic-Non-yogic, gender and Age is 4.27, which is significant at .05 level. That means Yogic-Non-yogic, gender and Age significantly interact each other over all mental health score.

The mean score of yogic male 20-35 yrs old subjects M=174.70 and yogic male 40-55 rs old subjects M=181.13 and yogic female 20-35 yrs old subjects M=175.57 and yogic female 40-55 yrs old subjects M=175.40.

The mean score of Non-yogic male 20-35 yrs old subjects M=170.60 and Nonyogic male 40-55 yrs old subjects M=170.57 and Non-yogic female 20-35 yrs old subjects M=170.17 and Non-yogic female 40-55 yrs old subjects M=170.83.



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