



## Effect of Yogic Practices on Mental Health of Orphans Children

**Morteza Alibakhshi Kenari\***

*Martyr Beheshti University of Medical Sciences and Health Services, Tehran, Iran*

\*Corresponding author: Morteza Alibakhshi Kenari, Martyr Beheshti University of Medical Sciences and Health Services, Tehran, Iran, Tel: +989121794118; E-mail: [Morteza.Alibakhshikenari@gmail.com](mailto:Morteza.Alibakhshikenari@gmail.com)

### Abstract

Orphan children suffer greatly from much physical, physiological and mental disorders leading to the bad effect on their, over-all adjustment, emotional stability autonomy, security-insecurity, intelligence and self concept. Yogic practices are providing the best method to achieve good mental health. Thus keeping in view the benefits of yogic practices, an attempt has made to investigate scientifically the effect yogic practices on mental health of orphan children. In this study the investigator has selected the 60 (Boys and Girls) orphan children from Guru Nanak Anath Ashram (Orphan Home) Jalandhar Punjab India. After the pre test subjects were divided into two groups i.e. Yogic group (experimental) and Control Group (non experimental). Mental health battery by Singh and Gupta was applied to collect the data. Training of yoga practices was given to Yogic group for eight weeks. No training was imparted to control group. The results of the investigation shown significant effect of yogic practices on the different parameters of mental health i.e. overall adjustment, emotional stability, autonomy, security-insecurity, intelligence and self concept which were tested on 0.01 level of confidence.

### Keywords

Yogic practices, Mental health and Orphan children

### Introduction

In the heart of every child, there is a desire of hunger for home. It is not only for food, place and sleep, but for safety and community also. Most importantly: for love. "There are 153 million children are orphaned worldwide, 145 million reside in less wealthy nations where their number has increased dramatically because of HIV/AIDS and other causes" (UNICEF2011). "India has the highest population of children below the age of 18 years- 41% of the total population. Although over 4% of them are orphan as per the study, around 13% live with a single parent [1]. "The children of India are in high need as they consistently get lost in the continuously developing, and densely populated country" [2]. Punjab state is situated in the northwest of India. State is bordered by Jammu Kashmir, Himachal Pradesh, Haryana, Rajasthan and Pakistan providence Punjab. Punjab is one of the planet's most bountiful regions. Census report of India 2011, states the total population of Punjab is 27743338 in which there are 14639465 males and 13103873 females. 17344192 population is living in rural area where as 10399146 is living in urban areas. For much of the last decade, it has been recognized as the Indian state offering the best quality of life to its inhabitants. This is the one side

of a coin, in the other side slums are developing in this bountiful region as the people from other states are in fluxing to migration. This impacts long-term occupational opportunities, making it very tough for families to escape their life in the slums. Most subsist on menial labor, such as scavenging for saleable scraps, shoe-shining and begging etc. It is very hard for these migrant people to meet with the basic needs of their children. "The major cause of children becoming orphans in India is illiteracy. Most of the people in India are unaware from sexually transmitted diseases. Many of the people, mostly labor class are involved in unprotected sexual activities" (Guru Nanak Dev Anath Asharam2009). There are approximately 39 cities in Punjab, having orphan home for children, ranging from newborn to young adults. "In the recent week, there have been several cases of new born girls found abandoned in garbage dumps, park fields and canals. Taking the serious note, the Punjab government recently notified five orphan age across the state that assured protection for abandoned babies" [3]. Orphan children need more additional support and mental health services as compare to the normal children. Death of parents introduces a major change in the life of a child. This change may involve moving from a middle or upper-class urban home to a poor rural relative's home, separation from siblings, forced to live on own and constituting child-headed families. All these changes easily affect not only the physical but also the psychological well-being of a child. A study was conducted in Cambodia, India, Ethiopia, Kenya and Tanzania by [4] and found that "increased traumatic events during childhood were linked to statistically significant increases in anxiety and emotional and behavioral difficulties that can last into adulthood and result in poor performance in school". They concluded in a study that "both AIDS orphans and children living with HIV/AIDS-infected parents showed heightened psychosocial symptoms [5]. The present evidence also highlighted the interactive, cooccurrence of contextual factors, cumulative and HIV/AIDS unique exposures to create heightened vulnerabilities for psychological difficulties among children. The findings call for a comprehensive intervention programme that addresses factors specific to HIV/AIDS and contextual variables". A mentally unhealthy child suffers greatly from mental and emotional imbalance and other problems of mental illness like depression, suicide, headache, eating disorder, mentally handicap, with attention disorder encircle them. Yoga is an ancient physical and spiritual discipline and branch of philosophy that originated in India reportedly more than 5,000 years ago. "The origins of yoga are a matter of debate" [6]. It has been discussed quite frequently in the Vedas, Gita, Upanishads, Patanjali's Sutras, Katha Upanishad etc. Yoga has its different type. In this research

the investigator is dealing with Ashtang Yoga. It incorporates with Asanas, breathing techniques, healing movement, meditation Kriyas and other practices which calm and unite the body and mind. Yoga Journal, recently claimed that “yoga as medicine represents the next great wave.” Yoga in America Market Study [7]. According to a 2008 survey, “an estimated 6.9 percent (15.8 million) people in the United States practice yoga. Additionally, another 4.1 percent (9.4 million) of those who are not currently practicing yoga said they would definitely try yoga during the next year.1 While many clinicians remain unfamiliar with the practice of yoga, the same 2008 survey indicated that 6.1 percent (14 million) of Americans said a doctor or therapist had recommended yoga to them” [8]. Mental health is related with psychological and emotional well being of a child. Yoga has become very popular now day a day, as a people are very healthy and personality conscious. Yoga is a panacea for the orphans especially because it helps them to throw out depression and irregularity or imbalance of mind. It maintains the stable feelings which have positive value for the orphans. Orphan children can have mental, emotional and behavioral problems which are real, painful and costly, but with the help of yoga asana, pranayama, meditational techniques the orphans can improve their mental health. Yoga is a very effective stress reduction and relaxation tool for orphan children. Yoga has a specific function to perform and works for the well being of mind and body. There are incalculable benefits of practicing yoga. The most important benefit is to achieve a life state which is free from mental illness. To attain the maximum benefit from yoga, one will have to combine the practice of Aanas, Pranayama and meditation [9-12].

## Objective of the study

To find out the effect of yogic practices on the mental health of orphan children

## Hypotheses

There exists significant effect of yogic practices on emotional stability of orphan children. There exists significant effect of yogic practices on over-all adjustment of orphan children. There exists significant effect of yogic practices on autonomy of orphan. There exists significant effect of yogic practices on the variable security-insecurity of orphan children. There exists significant effect of yogic practices on self-concept of orphan children. There exists significant effect of yogic practices on intelligence level of orphan children.

## Method

The study was experimental in nature .The prior permission from the orphanage home authority was taken. The instructions of the experiment, tool and design of the study were made clear to samples. After that the tool was administered on them according to the instructions given in the respective manual and the response-sheets were collected. Sixty samples of both sexes, which were enrolled from Guru Nanak Anath Ashram Jalandhar (Orphanage home) through random sampling technique. All samples were divided into two groups, named as Yogic Group (Experimental Group) and Control Group (Non- experimental group. All samples were ranging between the age group of 13-18 years.

## Design of the Study

After studying the review of related literature and considering the objective and hypotheses of the study, one group pre test and post test experimental design was used. The selected samples for experimental group were subjected to one hour yoga class thrice in a week. No training was imparted to Control group. Before the training of yogic practices mental health battery was pre tested by the investigator, then training of yogic practices was given to the subject's upto 12 weeks. After that same subject were post tested by the same battery.

## List of Yogic exercises Used in experiment

### Asana

Vajra Asana

Makarasana

Bhungasana

Surya namaskara

Bakasana

Gomukhasana

Garudasana

Natarajana Asana

Vasisthasana

Hasta Padangusthasana

### Pranayama

Anuloma and Viloma

Ujjayi

Sheetali

Seetkari

Bhramari

### Meditation (Dhyana)

Dot Meditation

Om Chanting

### Tools Used

Mental health battery by Singh and Gupta (2010) was used to collect the data.

### Statistical techniques used

For analysis and interpretation of data t-test was applied

## Results

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Yogic Group and Control Group on Emotional Stability in orphan children

The number of subjects in yogic group is 20. The mean score of pre test and post test of yogic group are found to be 4.90 and 8.30 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.61 and 1.71, indicating that there is more variation in the scores of subjects in post and pre test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 9.48\*\* and it is more than the table t-value at 0.01. Hence, the calculated' value is found significant on emotional stability in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 5.05 and 5.10 respectively. This implies that the score of control group in post test is higher than the pre test. Standard deviation of the pre test and post test is 2.13 and 1.65, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 0.13 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on emotional stability in orphan children.

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Leisure group, Yogic group and Control Group on Overall Adjustment in orphan children

The number of subjects in \yogic group is 20. The mean score of pre test and post test of yogic group are found to be 17.25 and 20.75 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 3.78 and 2.09, indicating that there is more variation in the scores of subjects in pre and post test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 4.34\* and it

is more than the table t-value at 0.01. Hence, the calculated' value is found significant on overall adjustment in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 16.25 and 16.75 respectively. This implies that the score of control group in post test is higher than the pre test. Standard deviation of the pre test and post test is 2.17 and 1.55, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 1.31 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on emotional stability in orphan children.

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Leisure group, Yogic group and Control Group on Autonomy in orphan children

The number of subjects in yogic group is 20. The mean score of pre test and post test of yogic group are found to be 4.75 and 9.30 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.44 and 1.92, indicating that there is more variation in the scores of subjects in post and pre test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 9.00\*\* and it is more than the table t-value at 0.01. Hence, the calculated' value is found significant on autonomy in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 4.80 and 5.20 respectively. This implies that the score of control group in post test is slightly higher than the pre test. Standard deviation of the pre test and post test is 1.67 and 0.89, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 1.03 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on autonomy in orphan children.

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Leisure group, Yogic group and Control Group on Security-Insecurity in orphan children

The number of subjects in yogic group is 20. The mean score of pre test and post test of yogic group are found to be 5.15 and 9.25 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.69 and 2.09, indicating that there is more variation in the scores of subjects in pre and post test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 8.25\*\* and it is more than the table t-value at 0.01. Hence, the calculated' value is found significant on security-insecurity in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 5.15 and 5.55 respectively. This implies that the score of control group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.49 and 1.27, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 0.92 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on security-insecurity in orphan children.

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Leisure group, Yogic group and Control Group on Self Concept in orphan children

The number of subjects in yogic group is 20. The mean score of pre test and post test of yogic group are found to be 5.15 and 9.45 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.08 and 2.11, indicating that there is more variation in the scores of subjects in pre and post test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 9.02\*\* and it is more than the table t-value at 0.01. Hence, the calculated' value is

found significant on self concept in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 4.70 and 5.10 respectively. This implies that the score of control group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.30 and 1.02, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 1.28 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on self concept in orphan children.

### Significance Differences in Mean Scores between the Pre-Test and Post-Test of Leisure group, Yogic group and Control Group on Intelligence in orphan children

The number of subjects in yogic group is 20. The mean score of pre test and post test of yogic group are found to be 3.90 and 9.95 respectively. This implies that the score of yogic group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.55 and 1.84, indicating that there is more variation in the scores of subjects in pre and post test. Degree of freedom of both groups is found to be 19. The calculated' value from the data is 15.10\*\* and it is more than the table t-value at 0.01. Hence, the calculated' value is found significant on intelligence in orphan children. The above table also shows the number of subjects in control group is 20. The mean score of pre test and post test of control group are found to be 4.55 and 4.90 respectively. This implies that the score of control group in post test is higher than the pre test. Standard deviation of the pre test and post test is 1.43 and 0.91, indicating that there is more variation in the scores of subjects in pre and post test. The calculated' value from the data is 0.96 and it is less than the table t-value at 0.01. Hence, the calculated' value is not significant on intelligence in orphan children [12-14].

## Conclusions

After analysis of the results on the different parameters of mental health i.e. Emotional Stability, Overall Adjustment, Autonomy, Security-Insecurity, Self Concept and Intelligence, have been concluded that yogic practices have significant effect on mental health of orphan children (Table 1-6).

**Table 1:** Differences in Mean Scores of Yogic Group and Control Group on Emotional Stability.

Group	Number	Mean	S.D.	SEm	t' Value
Yogic Group(Pretest)	20	4.90	1.61	0.36	9.48**
Yogic Group(Posttest)	20	8.30	1.71	0.38	
Control Group(Pre-test)	20	5.05	2.13	0.47	0.13
Control Group(Posttest)	20	5.10	1.65	0.36	

\*\*Significant at 0.01 level – 2.53

Degree of freedom=19

**Table 2:** Differences in Mean Scores of Yogic Group and Control Group on overall adjustment.

Group	Number	Mean	S.D.	SEm	t' Value
Yogic Group(Pretest)	20	17.25	3.78	0.84	4.34**
Yogic Group(Posttest)	20	20.75	2.09	0.46	
Control Group(Pre-test)	20	16.25	2.17	0.48	1.31
Control Group(Posttest)	20	16.75	1.55	0.34	

\*\*Significant at 0.01 level- 2.53

Degree of freedom=19.

**Table 3:** Differences in Mean Scores of Yogic Group and Control Group on autonomy.

Group	Number	Mean	S.D.	SEm	t' Value
Yogic Group(Pretest)	20	4.75	1.44	0.32	9.00**
Yogic Group(Posttest)	20	9.30	1.92	0.42	
Control Group(Pre-test)	20	4.80	1.67	0.37	1.03
Control Group(Posttest)	20	5.20	0.89	0.20	

\*\*Significant at 0.01 level- 2.53

Degree of freedom=19

**Table 4:** Differences in Mean Scores of Yogic Group and Control Group on security-insecurity.

Group	Number	Mean	S.D.	SEm	't' Value
Yogic Group(Pretest)	20	5.15	1.69	0.37	8.25**
Yogic Group(Posttest)	20	9.25	2.09	0.46	
Control Group(Pre-test)	20	5.15	1.49	0.33	0.92
Control Group(Posttest)	20	5.55	1.27	0.28	

\*\*Significant at 0.01 level- 2.53

Degree of freedom=19

**Table 5:** Differences in Mean Scores of Yogic Group and Control Group on self concept.

Group	Number	Mean	S.D.	SEm	't' Value
Yogic Group(Pretest)	20	5.15	1.08	0.24	9.02**
Yogic Group(Posttest)	20	9.45	2.11	0.47	
Control Group(Pre-test)	20	4.70	1.30	0.29	1.28
Control Group(Posttest)	20	5.10	1.02	0.22	

\*\*Significant at 0.01 level- 2.53

Degree of freedom=19

**Table 6:** Differences in Mean Scores of Yogic Group and Control Group on Intelligence.

Group	Number	Mean	S.D.	SEm	't' Value
Yogic Group(Pretest)	20	3.90	1.55	0.34	15.10**
Yogic Group(Posttest)	20	9.95	1.84	0.91	
Control Group(Pre-test)	20	4.55	1.43	0.32	0.96
Control Group(Posttest)	20	4.90	0.91	0.20	

\*\*Significant at 0.01 level- 2.53

Degree of freedom=19

## References

- Chauhan Chetan (2011) 20 Million Young Orphans: India's Abandoned Children.
- Marilyn Villanueva (2013) Volunteering With Children in India.
- Dogra Chander Suta (2008) Girl interred. Outlook the Weekly Magazine: 88-90.
- Thielman N, Ostermann J, Whetten K, Whetten R, O'Donnell K; Positive Outcomes for Orphans Research Team (2012) Correlates of poor health among orphans and abandoned children in less wealthy countries: the importance of caregiver health. PLoS One 7: e38109.
- Paul Narh Doku (2012) The mental health of orphans and vulnerable children within the context of hiv/aids in Ghana (unpublished Doctoral Thesis) College of Medicine.
- Flood, Gavin D (1996) An Introduction to Hinduism, Cambridge University Press.
- Yoga in America Market Study (2008) (August 26, 2010) Yoga Journal.
- Lisa C Kaley-Isley, John Peterson, and Emily Peterson (2010) Yoga as a Complementary Therapy for Children and Adolescents. Edgmont 7: 20-32.
- Buhemann, Gudaum (2007) Eighty four Asanas in Yoga DK Printworld Pvt. Ltd, New Delhi (India).
- Coulter H David (2007). Anatomy of Hathayoga MLBD, New Delhi.
- Guru Nank Dev Anath Asharam (2009) Causes of children becoming orphans in Punjab and other states of India.
- Gharote MM (2010) Therapeutic references in Traditional Yoga Texts. The Lonavla Institute, Lonavla (India).
- Iyengar BKS (2009) Astadal Yoga Mala, (Vol I – VIII). Allied publishers Pvt. Ltd, Lucknow (India).
- Veterinary and Life Sciences University of Glasgow, Scotland – UK. UNICEF (2011) The State of the World's Children 2011: Adolescence An Age of Opportunity.