

Effect of an Intervention Programme on Anxiety, Depression and Stress of Pre-Service Teachers about Yoga

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Abstract: Yoga has meaningful and relevant on sociological, philosophical and mental aspect of human being. The effect of yoga has been seen on patient and supports persons. How our it has been observed investigator that studies done to mega anxiety, depression, and stress among human being, especially study pre – service teacher are not connected on these variable, there for keeping views these aspect the researcher connected the present study. It is hoped that the present study make the effective generating awareness among the pre – service teacher as how to use yoga effect for managing the level of anxiety depression and stress well as among the school level students than pre – service into would job after their degree.

Key Words: Anxiety, depression, stress, yoga, teacher.

1. INTRODUCTION TO YOGA:

Yoga is a science of right living and it works when integrated in our daily life. It works on all aspects of the person: the physical, mental, emotional, psychic and spiritual. The word yoga means ‘unity’ or ‘oneness’ and is derived from the Sanskrit word ‘yuj’ which means ‘to join’. There are too many misconceptions clouding the science of Yoga. People perceive it to be some kind of black or white magic, sorcery, physical or mental debauchery through which miraculous feats can be performed. For some it is an extremely dangerous practice which should be limited to only those who have renounced the world. Few others think it to be a kind of mental and physical acrobatism that is compatible only to a Hindu mind.

The human mind is subject to certain weaknesses which are universal. avidya-wrong notions of the external world, asmita-wrong notions of the external world, asmita-wrong notions of oneself, raga-longing and attachment for sensory objects and affections, dweshad is like and hatred for objects and persons, and abinivesha or the love of life are the five defects of the mind that must be removed. Yoga, the constant meditation and introspection eradicate these mental flaws.

1.1 Yoga as Science

The two great methods of Yoga are one related to the Self and the other to the Not-Self. Here, we are dealing only with the science of Yoga and not with other means of attaining union with the Divine. The scientific method is one that follows the old Indian conception. The Yoga we are studying specially concerns the Marga of Jnanam or knowledge, and within that way, within that Marga or path of knowledge, we find that three subdivisions occur, as everywhere in nature.

1.2 Yoga as Practice

The lower mind, unruffled, waveless, reflects the higher, as a waveless lake reflects the stars. You will remember the phrase used in the Upanishad, which puts it less technically and scientifically, but more beautifully, and declares that in the quietude of the mind and the tranquility of the senses, a man may behold the majesty of the Self. The method of producing this quietude is what we have now to consider in this section.

Ancient Yogis had a belief that in order for man to be in harmony with himself and his environment, he has to integrate the body, the mind, and the spirit. For these three to be integrated, emotion, action, and intelligence must be in balance. The Yogis formulated a way to achieve and maintain this balance and it is done through exercise, breathing, and Meditation - the three main Yoga structures.

1.3 Need of modern methods in yoga education

- There are many roads to successful learning to try for meeting particular needs and situations. To make the subject interesting, vital and living the teacher should also use permutations and combinations of methods, devices, and techniques for example to land colure to class teaching.
- Different lessons or units should be taught by different methods of teaching. It can be very to use the same methods for every circumstance. In the past few decades a tremendous increase in equipment materials, means and teaching procedures has been witnessed.

- No single method can be the best for all situations, and for all teacher and pupils. The suitable method should emerge out of the abundance of information and skill of the teacher. Every teacher of yoga education should be familiar with the different means for reckoning the desired ends.

2. REVIEW OF LITERATURE:

Prem, Sahajpal and Rinpari and Ralte (2000) have shown very beneficial effects on quality of sleep, reduction in stress level & improvement in self concept by IYRT (Induced Yogic Relaxation Training). Similar beneficial effects of yogic interventions for stressed persons have been found by some other studies also (Udupa, 1985; Nagendra & Nagarathana, 1988; Subrahmanyam, 1988; Sahajpal & Verma, 1993; Sahajpal & Khanna, 1994).

Shirley, Telles, K.V. Naveen and Manoj Dash (2004) In this research Swami Vivekananda Yoga Research Foundation (A Yoga University), Bangalore, India, a month after the December 2004 tsunami the effect of a 1 week Yoga program was evaluated on self rated fear, anxiety, sadness and disturbed sleep in 47 survivors in the Andaman Islands. Polygraph recordings of the heart rate, breath rate and skin resistance were also made. Among the 47 people, 31 were settlers from the mainland (i.e. India, ML group) and 16 were endogenous people (EP group). There was a significant decrease in self rated fear, anxiety, sadness and disturbed sleep in both groups and in the heart and breath rate alone in the EP group, following Yoga. This suggests that Yoga practice may be useful in the management of stress following a natural disaster in people with widely differing social, cultural and spiritual beliefs

Ray, U. Mukhopadhyaya, S. Purkayasha, S.S. et al. (2001) viewed that although Yoga has been shown to be beneficial in a variety of conditions. However, one of the most important benefits of Yoga is its application in relieving stress, fatigue, invigorate.

Woolery, A. Myers, H. Sternlieb, B. Zelter, L. (2004) examined the effects of a short-term Iyengar Yoga course on mood in mildly depressed young adults. Twenty-eight volunteers aged 18 to 29. An intake, all participants were experiencing mild levels of depression, but had received no current psychiatric diagnosis or treatments. None had significant Yoga experience. Subjects in the Yoga group attended two 1-hour Iyengar Yoga classes each week for 5 consecutive weeks. The classes emphasized Yoga postures thought to alleviate depression, particularly back bends, standing poses, and inversions. The results show that subjects who participated in the Yoga course demonstrated significant decreases in self-reported symptoms of depression and trait anxiety. These effects emerged by the middle of the Yoga course and were maintained by the end. Changes also were observed in acute mood, with subjects reporting decreased levels of negative mood and fatigue following Yoga classes. Finally, there was a trend for higher morning cortisol levels in the Yoga group by the end of the Yoga course, compared to controls. These findings provide suggestive evidence of the utility of Yoga asanas in improving mood.

Jennifer Chodzinski (2000) examined the effect of Rhythmic breathing on blood pressure in hypertensive adults. The purpose of this study is to explore the effect of a simplified version of Pranayama (rhythmic breathing exercise) on blood pressure. Six white female hypertensive adults were taught a 15-minute breathing technique. The third time subjects performed the breathing technique; they were able to significantly decrease their mean arterial pressure and heart rate. While more research is needed, this stress-reduction technique may help hypertensive person to better control their blood pressure.

Hafner-Holter, Kopp and Gunter (2009) conducted a study on Effects of fitness training and yoga on well-being, social competence and body image. It describes and compares influences from physical activity program and a yoga program on well-being, mood, stress coping, body-image and social competence in healthy people. 18 persons attending a gym and 21 taking part in a yoga program answered following questionnaires before entering the program and taking part for 20 units: Body-Image-Questionnaire (25), Symptom – Checklist – 90 R (8), Complaint-List (31), Adjective Mood-Scale (32) and a Visual Analogue Scale for assessing stress-level (10). Statistical analyses show significant improvement in social competence in both training groups; the gym-group show a reduction in summarization and body-related anxiety as well as an improvement in physical and emotional well-being. Our findings support the evidence that physical activity in general improves psychological wellbeing, however, gym and yoga seems to have different psychological impacts. Future research should focus on comparing the Psychological effects of different physical activity interventions in prevention programmes as well as exercise prescriptions in patients with mental illness.

3. RATIONALE OF STUDY:

The present study make the effective generating awareness among the pre – service teacher as how to use yoga effect for managing the level of anxiety depression and stress well as among the school level students than pre – service into would job after their degree .

Anxiety is a phenomenon that people frequently encounter in their daily life. Anxiety can be described as the tense, unsettling anticipation of a threatening but vague event; a feeling of uneasy suspense.

Depression is a common mental health problem that varies in severity and duration. In its less serious form, depression is a temporary reaction to loss, stress, or life challenges. It can be alleviated through the passage of time

and/or the natural healing effects of social support, daily routines, and simple coping strategies like distraction and exercise. Severe or chronic depression usually requires professional help.

Stress in the absence of positive coping strategies may lead to a more negative outcome; teachers may experience emotional exhaustion leading to burnout due to their lack of ability and/or skill to handle stress appropriately.

4. EDUCATION FOR YOGA:

The 1969 white house conference on food, nutrition, and health recommended that teachers trained in principal of nutrition, but little was done until the passage of PL95- 166 provided funding through the nutrition education and training program.

NEPT has brought increased awareness of the vital role of school personnel in the nutrition area and increased the availability of training, but many needs remain vaguely defined or unfilled. Without clearly stated goals and adequate preparation, teachers are severely conduct effective nutrition education. Several states have made some attempts to recognize the need for nutrition education for students by requiring it has part of health course or as a separate subject: many have developed their own nutrition education curricula or recommended others for classroom uses. But until recently, few states took steps to assure that their teachers could fulfill this demand. Your day-to-day activities will be harder to perform, and in severe cases, you may feel like life is hardly even worth living. The symptoms can be confusing because they are not just limited to your mind and mood, but may also become physical.

5. ANXIETY:

Human beings are born and grown in a socio-physical environment. As we know the life functioning depends on a balance or harmony between the demands made on the organism by the environment & organism's functioning to deal with such demands. We all have experienced situations in our lives which have posed challenges for us. All the challenges, problems put us to stress and that result in anxiety. Education is not the amount of information that is put into one's brain and runs riot there undigested throughout one's life, but it is the character making, life making and man making assimilation of ideas. The present situation is an era of competition in which every individual is trying to go ahead of another, keeping in view the intensity of competition. Academic anxiety is a kind of state of anxiety which relates to the impending danger from the environment of the academic institution including teacher and certain subject like Maths, English etc. other factors contributing to anxiety are : not understanding the subject, teacher's behavior, lack at motivation in class room & lack of total absence of interest in studies.

Everybody is under stress now-a-day for one reason or the other, Adolescent is a critical age and a difficult period in young person's life they face many changes in this period like developmental challenges, Physical and Psychological need, parental behaviour, Attitudes, Ambition Education, Career, frustration, conflict, stress and Anxiety has a profound role in the development of any individual not only the personality development but achievement is also affected by this behavior.

5.1 Types of Anxiety

5.1.1 Trait Anxiety

This form of anxiety is relatively stable aspect of the personality. Individuals who have an anxiety trait will tend to have any attitude reflecting their perception of certain environmental stimuli and situation as dangerous or threatening. In practice, the anxious perceptive style of these persons will eventually become pervasive, extending to and influencing other areas of experience and in effect finally becoming characteristics of the personality. Those who show a more developed anxiety trait are much more prone to reacting to a large number of stimuli and will tend to worry also in situations which for most individuals would not represent a source of threat. These individuals are more likely to present state anxiety in circumstance with low anxiety generation potential such as normal day today activities, and will probably experience higher levels of state anxiety in the presence of anxiety generating stimuli.

5.1.2 State Anxiety

State anxiety manifests itself as interruption of an individual's emotional state, heading a sudden subversion of one's emotional equilibrium. A person experiencing state anxiety will feel tension or worry or might enter a state of restlessness. In such moments, the individual may feel very tense and easily react or over react to external stimuli state anxiety involves activation of the autonomous nervous system and the consequent triggering of a series of physiological reaction and conditions.

5.2 Symptoms of Anxiety

The symptoms of test anxiety can very considerable and range from mild to serve. Some students experience only mild symptoms to test anxiety and are still able to do fairly well on exam. Other students are nearly incapacitated by their anxiety, performing dismally on tests or even experiencing panic attacks before or during exams.

5.2.1 Physical symptoms

Physical symptoms of test anxiety include sweating, shaking, rapid heart beat, dry mouth, fainting and nausea. Milder cases of test anxiety can cause a sense of 'butterflies' in the stomach, while more severe cases can actually cause students to become physically ill.

5.2.2 Emotional symptoms

Emotional symptoms of test anxiety include depression, low-self esteem, anger and feeling of hopelessness. Students often feel helpless to change their situation or belittle and berate themselves about their symptoms and poor test performance.

5.3 Causes of anxiety

There are four main factors that are thought to be responsible for the development of anxiety disorders.

5.3.1 Life experience

One of the main factors that professionals believe is a direct link to the development of anxiety disorders is the way in which people live. For instance people who are exposed for lengthy periods of time to violence, poverty or abuse tend to be more prone to excessive anxiety. When people live under the threat of those external factors, their natural response is to worry about if and when they will have to deal with the aftermath.

5.3.2 Heredity

Research has proven that anxiety disorders are passed down from family member to family member. Several studies have shown that anxiety disorders are more common in identical twins than in fraternal twins. It is believed that this genetic component could lie dormant until it is activated by life experience

5.3.3 Personality

Some studies have shown that a person's personality could be responsible for excess anxiety. These studies indicate that people who suffer from a lack of confidence or do not know how to deal with unexpected or new situations appear to be more susceptible to the development of an anxiety disorder. On the other hand, if a child suffers from an anxiety disorder, it is clear that it can lead to a lack of confidence. This means the development process can be circular in nature with anxiety leading to low self-esteem and low self-esteem leading to anxiety.

6. DEPRESSION:

The word depressed is a common everyday word. People might say "I'm depressed" when in fact they mean "I'm fed up because I've had a row, or failed an exam, or lost my job", etc. These ups and downs of life are common and normal. Most people recover quite quickly. With true depression, you have a low mood and other symptoms each day for at least two weeks. Symptoms can also become severe enough to interfere with normal day-to-day activities. More than just feelings of unhappiness, clinical or major depression is a mood disorder—a medical illness that involves both the body and mind. The difference between clinical depression and feeling unhappy or blue is an inability to shake this feeling of sadness, which will last more than two weeks at least. Also, the sad or despairing mood will affect your ability to work or go to school, as well as negatively impact your social relationships. In addition, there are many different and often effective treatments available.

6.1 Symptoms of depression include:

- Feelings of emptiness, hopelessness, helplessness, and worthlessness
- A deep sense of sadness
- An inability to experience pleasure
- Irregular eating and sleeping
- Difficulties with concentration, memory, and decision-making
- Fatigue and social withdrawal

6.2 Who gets depressed?

Though depression affects people of all ages, about twice as many women as men are diagnosed with clinical depression. The age groups with the highest rates of depression are those under 20 years old, with adolescence being the usual age of onset for depression. Depression is also an issue for seniors, with those living in long-term care facilities.

Other risk factors for developing depression include:

- Having relatives with depression
- Having a traumatic experience as a child
- Having personality traits such as low self-esteem, worrying, being overly dependent on others, perfectionism and hiding your feelings
- Experiencing stressful life events, such as the death of a loved one, divorce, the loss of a job, retirement, serious financial problems, and family conflict
- Experiencing unusual physiological changes, such as childbirth, and viral or other infections

6.3 How to prevent depression:

There appears to be no definite way to prevent clinical depression. However, the following list offers ways to help elevate your mood, and to stay on top of what may be developing into a clinical episode of depression:

- Take steps to identify and manage stress
- Find strategies that help you increase your resilience
- Work on ways to boost your self-esteem and confidence
- Develop and nurture friendships and social support networks
- Be aware of the difference between feeling low or sad and entering a clinical depression, and take appropriate steps if you cannot overcome your low mood what are the signs and symptoms

The signs and symptoms of depression may be different from one person to the next, especially depending on which type of depression you are experiencing.⁶ General symptoms may include one or more of the following:

- Feelings of sadness, anxiety or emptiness that won't go away
- Feeling hopeless and/or pessimistic
- Feeling guilty, worthless and/or helpless
- Feeling irritable or frustrated, even over minor issues
- Loss of interest in activities or hobbies you once enjoyed, including sex
- Feeling tired or low on energy
- Difficulty concentrating, remembering details, or making decisions
- Difficulty falling asleep, early-morning wakefulness, or oversleeping
- Overeating or loss of appetite
- Slowed thinking, speaking or body movements
- Thoughts of suicide, or even attempting suicide

7. STRESS:

Teachers are faced with stress on a day-to-day basis. While stress is common among professions and is pervasive in U. S. culture, teachers who do not learn to deal with stress may deal with the negatively progressive consequences associated with stress: emotional exhaustion, burnout and impairment. An examination of each follows.

Further, there are physical and psychological stressors that influence one's maintenance, development, or regression of physical and psychological integrity (Lazarus & Folkman, 1984). Teachers are not immune to the effects of stress as they face the demands and expectations of their students, parents, administrators, and society in general. There are several stressors a teacher may face in and outside the classroom on a typical day. One of these stressors is classroom management which includes the facilitation of appropriate individual student conduct, the interactions of groups of students, as well as application of behavioral intervention for the entire classroom. Another stressor a teacher may experience is the development of effective pedagogy and a curriculum that meets and exceeds the expectations of administrators including choosing a method of delivery that meets the learning needs of diverse students. Choosing and applying the appropriate strategies to enhance learning while meeting the demands of a rigorous schedule might also add to the level of stress a teacher may experience. In addition, the amplified weights of workloads-- particularly due to the heightened importance of assessment, accountability, and high stakes testing—as well as increased number of students in the classrooms, may add to teachers' level of stress. For example, Frysh (2011) reported that in Atlanta, 178 educators were accused of cheating on state standardized test scores from the years 2007-2009; Frysh postulated that this may have been due to the overwhelming emphasis placed on the importance of students' scores. Other stressors include violent acts committed by students (sexual assault, physical assault, verbal harassment) to other students and to teachers. The collegial working relationship may also present stressors to teachers whether they are working with another teacher, in team collaborations, or with administrators and other staff in the educational environment (Montgomery & Rupp, 2005).

8. CONCLUSION:

Teacher input through nutrition education classes is only one of many factors influencing children's diets. Nevertheless, the teachers' role is significant because teachers are in a unique position to provide accurate nutrition information and to influence student's food attitudes and behavior. In conjunction with actual food experiences provided by school feeding programs, classroom experiences can have powerful impact on students.

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