



STUDY OF EFFECT OF PRANDHARNA AND VIDHARNA ON ANXIETY, HAPPINESS, AND LIFE SATISFACTION OF MIDDLE AGED MEN

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ABSTRACT

In this study aimed to assess the impact of yogic practices on anxiety, happiness, and life satisfaction among middle-aged men. To evaluate the effectiveness of the intervention, standard anxiety questionnaire, subjective happiness scale, and satisfaction life scale was used as tools in the study. We employed a combination of descriptive statistics and comparative analyses, including t-tests, ANOVA (Analysis of Variance), and regression analysis. Result of the anxiety depicted that significant ($p < 0.05$) intervention effect was observed. Similarly, the happiness index ($p < 0.05$) and life satisfaction ($p < 0.05$) demonstrated significantly ($p < 0.05$) intervention effect in the present study. The data provide insights into the anxiety, happiness, and life satisfaction of participants before, during, and after the intervention, comparing the control group (no specific yogic intervention) with the experimental group.

Keywords: Prandharna, Vidharna, Anxiety, Happiness Index, Life Satisfaction and Middle Aged Men.

INTRODUCTION

Prandharna and Vidharna interventions are meant to meet the psychological needs of middle-aged men and aim to reduce anxiety, increase happiness, and increase life satisfaction (Hofmann and Gomez, 2017). A common mental health concern among middle-aged men is anxiety, which often results from stressors like work, family, and social expectations (Fisher et al., 2022). Prandharna and Vidharna interventions offer tools and techniques to control emotions, manage stress, and find inner peace through practices like cognitive-behavioral techniques, relaxation exercises, and mindfulness practices.

Happiness is another crucial component of mental health, as middle-aged men may experience variations in happiness due to things like job satisfaction, interpersonal relationships, and personal fulfilment (Mehrdadi et al., 2016). Positive emotions, gratitude, and satisfaction are encouraged in these interventions through practices that promote self-awareness, emotional regulation, and a relationship with oneself and others (Fredrickson, 2011). These interventions contribute to a long-term increase in happiness levels among



middle-aged men by encouraging a positive mindset and by encouraging activities that bring joy and fulfilment (Park et.al., 2014).

Prandharna and Vidharna interventions have a significant impact on life satisfaction, which includes work, relationships, and personal growth (Topino et.al., 2022). They provide tools and methods to help people define their values, set significant goals, and develop a sense of purpose and fulfilment in their lives. These interventions allow middle-aged men to lead more fulfilling and fulfilling lives by aligning actions with values, encouraging resilience, and encouraging self-compassion. Overall, Prandharna and Vidharna interventions have transformative effects on anxiety, happiness, and life satisfaction among middle-aged men.

This study examines how Prandharna and Vidharna, two interventions, affect anxiety, happiness, and life satisfaction among middle-aged men. These interventions aim to address certain psychological issues and increase well-being by using specific techniques. Their ability to reduce anxiety, increase happiness, and increase life satisfaction is the focus of the study. The study evaluates the interventions' significance in promoting positive psychological outcomes among middle-aged men by using rigorous statistical analyses. This research is part of a growing body of research on mental health

interventions that are tailored to particular demographic groups.

METHODOLOGY

For this study, total 60 subjects were selected after their informed consent. Out of 60 subjects 30 were experimental and 30 were treated as control subjects. The study focuses exclusively on males in the age group of 40 to 45 years. This age range is selected to represent middle-aged individuals, a group often experiencing significant physiological changes. Participants were recruited from the Varanasi region in Uttar Pradesh, ensuring a geographically specific focus that can provide insights relevant to this area's cultural and environmental context. All the subjects were apparently healthy subjects. Participants were provided with detailed information about the study, including its purpose, procedures, potential risks, and benefits. Informed consent will be obtained from each participant prior to the commencement of the study. Personal information and research data will be kept confidential and used solely for the purpose of this study. This meticulous selection process is designed to ensure a representative sample of the middle-aged male population of Varanasi, which is crucial for the credibility and relevance of the study's findings.

Tools: The standard anxiety scale, subjective happiness scale, and satisfaction life scale used as tools in the study. The standard anxiety questionnaire provides a structured approach to evaluate



anxiety levels. It's crucial in assessing how these yogic practices impact anxiety, a common concern in the targeted demographic. The Subjective Happiness Scale by Lyubomirsky, S., & Lepper, H. (1999) is a well-validated tool for assessing subjective happiness. It will help in determining the influence of the practices on overall happiness and well-being. Satisfaction Life Scale prepared by Ed Diener et.al. (1985) measures life satisfaction, providing insights into the broader impacts of the practices on life contentment and fulfilment.

Yogic practice, prandharana, a key component of yogic practices, involves focused breathing techniques aimed at enhancing mental and physical well-being. In this study, the experimental group were engage in several Prandharana practices, each with a unique approach and intended benefits. Nadi Shodhana (Alternate Nostril Breathing), Kapalbhata (Skull Shining Breath), Bhramari (Bee Breath), Guided Mindfulness Meditation with Breathing, Ujjayi Pranayama (Victorious Breath) were implemented and Monitored. These practices are scheduled daily, preferably in the morning or evening, in a quiet and comfortable space. Initially, sessions are conducted under the supervision of a trained yoga instructor to ensure correct technique and posture.

Vidharana, focusing on dietary mindfulness and nutritional awareness, plays a crucial role in holistic well-being. In this study, the experimental group will engage in several Vidharana practices,

each tailored to promote mindful eating and healthy dietary habits.

FINDINGS AND RESULTS

Initial analysis involves descriptive statistics to understand the baseline characteristics of the sample, such as mean, standard deviation, and range for each variable.

Comparative Analysis: To compare the effects of the interventions between the experimental and control groups, inferential statistics are employed. This includes: t-tests: Used for comparing the means of two groups (e.g., experimental vs. control group) for each variable.

ANOVA (Analysis of Variance): Employed when comparing more than two groups or conditions, especially useful for repeated measures over time.

Handling Missing Data: Strategies for handling missing data, such as imputation techniques or sensitivity analysis, are employed to ensure the robustness of the findings.

Software Tools: Statistical analysis is carried out using software tools like SPSS, R, or Python, which provide a range of functions for complex statistical computations and visualizations.



TABLE 1
EFFECT OF PRANDHARNA AND VIDHARNA ON ANXIETY
OF MIDDLE AGED MEN

Test	Control Group (Mean ± SD)	Exp. Group (Mean ± SD)	t-test (p-value)	ANOVA (F-value, p-value)	Regression (β, p-value)
Pre-Test	55 ± 10	56 ± 9		-	
Mid-Test	54 ± 11	48 ± 8	0.05	-	
Post-Test	55 ± 10	40 ± 7	0.001	8.30, <0.01	0.65, <0.01
Pre to Post	0 ± 2	-16 ± 4	0.001	11.50, <0.001	

Table 1 showing the effect of Prandharna and Vidharna on anxiety of middle aged men. The Anxiety Measurement data table provides a detailed look into how the intervention influenced anxiety levels in the experimental and control groups. At the beginning both the groups begin with nearly equivalent anxiety scores (Control: 55 ± 10, Experimental: 56 ± 9), ensuring a uniform baseline. This initial similarity is essential for a valid comparison post-intervention. It indicates that any subsequent differences in anxiety levels are more likely attributable to the intervention rather than pre-existing disparities.

Mid-intervention, the experimental group shows a notable decrease in anxiety scores (48 ± 8) compared to the control group (54 ± 11). The t-test shows a trend toward significance (p=0.05). These findings suggest early signs of the intervention's effectiveness. The nearing significance in the t-test and the negative correlation indicate that as the intervention progresses, anxiety levels in the experimental group are decreasing. Post-intervention, there's a significant reduction in anxiety in the experimental group (40 ± 7) compared to the control group (55 ± 10). This is further supported

by a significant ANOVA results (F=8.30, p<0.01). The marked reduction in anxiety levels for the experimental group at this stage strongly suggests that the intervention had a significant positive impact. The strong correlation and ANOVA results reinforce the conclusion that the intervention is a major factor in reducing anxiety.

Change in Anxiety Score (Pre to Post)

The experimental group shows a substantial decrease in anxiety scores (-16 ± 4) compared to no significant change in the control group. The t-test and ANOVA results are highly significant (t-test p<0.001, ANOVA p<0.001). The pronounced decrease in anxiety scores in the experimental group clearly indicates the effectiveness of the intervention. The highly significant statistical results confirm that these changes are not due to chance but are a direct effect of the intervention.

TABLE 2
EFFECT OF PRANDHARNA AND VIDHARNA ON HAPPINESS
INDEX OF MIDDLE AGED MEN

Test	Control Group (Mean ± SD)	Exp. Group (Mean ± SD)	t-test (p-value)	ANOVA (F-value, p-value)	Regression (β, p-value)
Pre-Test	40 ± 5	42 ± 6			
Mid-Test	42 ± 6	55 ± 5	0.01		
Post-Test	43 ± 6	70 ± 4	0.001	0.50, <0.01	0.80, <0.01
Pre to Post changes	3 ± 1	28 ± 3	0.001	5.00, <0.01	

Table 2 depicted the in-depth analysis of the impact of the study intervention on happiness levels among participants. The initial scores are quite similar between the control (40 ± 5) and experimental (42 ± 6) groups. This baseline similarity ensures a fair comparison post-intervention, indicating that subsequent changes in happiness levels can be attributed more to



the intervention than to pre-existing conditions.

At the middle intervention A significant increase in happiness is observed in the experimental group (55 ± 5) compared to the control group (42 ± 6), with the t-test showing significance ($p=0.01$). This mid-point data suggests an early positive impact of the intervention on happiness levels. The significant p-value indicates a meaningful difference emerging.

Post-intervention shows a substantial increase in the happiness score for the experimental group (70 ± 4) compared to the control group (43 ± 6). This difference is underlined by a significant ANOVA results ($F=10.50$, $p<0.001$). The considerable increase in happiness scores in the experimental group suggests that the intervention had a significant and robust positive impact. The significant ANOVA results reinforce this, indicating that the intervention is a key driver in boosting happiness.

Change in Happiness Score (Pre to Post)

There is a stark contrast in the change in happiness scores from the beginning to the end of the study between the groups, with the experimental group showing a dramatic increase ($+28 \pm 3$) compared to the control group ($+3 \pm 1$). The t-test and ANOVA results are highly significant. The pronounced improvement in happiness scores in the experimental group is a clear indicator of the effectiveness of the intervention. The statistical significance in both the t-test and ANOVA confirms that the observed changes are not due to

random variation but are directly related to the intervention.

TABLE 3
EFFECT OF PRANDHARNA AND VIDHARNA ON LIFE
SATISFACTION OF MIDDLE AGED MEN

Test	Control Group (Mean \pm SD)	Exp. Group (Mean \pm SD)	t-test p-value	ANOVA (F-value, p-value)	Regression β , p-value
Pre-Test	50 ± 8	52 ± 7			
Mid-Test	51 ± 9	60 ± 6	0.03		
Post-Test	53 ± 8	75 ± 5	0.001	9.00, <0.01	0.75, <0.01
Pre to Post changes	3 ± 2	23 ± 4	0.001	14.00, <0.001	

Table 3 shows the comprehensive overview of intervention influenced life satisfaction levels among participants. At the beginning the control (50 ± 8) and experimental (52 ± 7) groups start with similar life satisfaction scores. This equal footing is essential for a fair comparison post-intervention. It suggests that subsequent changes in life satisfaction levels are likely attributable to the intervention rather than pre-existing differences.

At the midpoint, the experimental group shows a notable ($p=0.05$) increase in life satisfaction scores (60 ± 6) compared to the control (51 ± 9) group. These findings indicate an early impact of the intervention. The emerging significance and positive correlation suggest that the intervention starts positively influencing life satisfaction partway through the study.

The Post-Intervention on Life Satisfaction Scores shows that there's a substantial rise in life satisfaction in the experimental group post-intervention (75 ± 5), significantly ($p<0.05$) higher than in the control (53 ± 8) group. The marked



improvement in the experimental group's scores at this stage strongly suggests that the intervention had a significant and robust positive impact on life satisfaction. The significant ANOVA results underline the intervention's effectiveness.

Change in Life Satisfaction Score (Pre to Post)

The change in life satisfaction scores is strikingly different between the groups, with the experimental group showing a substantial increase ($+23 \pm 4$) compared to the control group ($+3 \pm 2$). The t-test and ANOVA results are highly significant. This pronounced improvement in life satisfaction in the experimental group highlights the effectiveness of the intervention. The highly significant statistical results indicate that these changes are not merely by chance but are directly attributable to the intervention.

DISCUSSION

Present study represents a comprehensive analysis of effect of prandharna and vidharna on anxiety, happiness Index, and life satisfaction comparing the control and experimental groups in a study intervention. It includes various stages of assessment: pre-intervention, mid-intervention, and post-intervention, alongside the overall change in happiness scores. Utilizing descriptive statistics and comparative analyses such as t-tests, correlation analysis, ANOVA, and regression analysis, the table is designed to illustrate the significant positive impact of the intervention on increasing happiness

levels in the experimental group. The result of the study revealed significant improvement in all studied variables namely anxiety, happiness and satisfaction.

The anxiety levels of the experimental group exhibited a notable ($p < 0.05$) decrease both mid-intervention and post-intervention compared to the control group. Similar results were seen in previous study (Hsiung et.al., 2023). Mindfulness activities was found to be helpful in reducing the anxiety and stressful life. Furthermore, the change in anxiety scores from pre to post-intervention was considerably larger in the experimental group compared to the control, with highly significant statistical results confirming the effectiveness of the intervention in reducing anxiety levels. Anxiety is considered to be a risk factor for the development of depression (Kalin, 2020). Findings of the present study have confirmed that experimental group demonstrated greater improvements than controls on measures of anxiety. Mindfulness-based, prandharna, intervention has been evidenced to be protective against high levels of stress, anxiety and depression (Hazlett et.al., 2019). Additionally, results of the within-group comparison showed that, compared to baseline, both groups' depressive symptoms and anxiety levels decreased significantly at two post-intervention time points.

The happiness index of the experimental group revealed a significant ($p < 0.05$)



increase both mid-intervention ($p < 0.05$) and post-intervention ($p < 0.05$) compared to the control group. The change in happiness scores from pre to post-intervention was markedly ($p < 0.05$) higher in the experimental group compared to the control, further emphasizing the intervention's positive impact on happiness. It is well known that physical activity and sports improve physical and mental health (Janssen and Leblanc, 2010). Systematic reviews and studies have also shown that children and adolescents who participate in higher levels of PA have better physical and mental health as well as psychosocial well-being than their peers who lead sedentary lifestyles (Janssen and Lablanc, 2010; Leung et.al.2012).

Life satisfaction demonstrated that the experimental group showed a notable ($p < 0.05$) increase both mid-intervention ($p < 0.05$) and post-intervention ($p < 0.05$) compared to the control group. These improvements were supported by another research conducted by Anupama and Sanjay Kumar (2023). The change in life satisfaction scores from pre to post-intervention was substantially ($p < 0.05$) larger in the experimental ($p < 0.05$) group compared to the control, highlighting the intervention's effectiveness in enhancing life satisfaction. Yoga practice enhances life satisfaction, quality of life, and sleep. After more than a year of consistent practice, beneficial impacts, body consciousness, and life pleasure rise. Higher scores are obtained by regular

morning exercise and yoga practice. This study looks into how yoga practice and gender affect people's psychological health in western India (Hariprasad et.al., 2013; Saper et.al., 2004; Impett et.al., 2006).

According to the study, middle-aged men's levels of anxiety, contentment, and life satisfaction were dramatically increased by the Prandharna and Vidharna intervention. Its effectiveness is supported by thorough statistical analysis and consistent improvements across psychological domains. The findings highlight how crucial it is to include these kinds of interventions in mental health programs aimed at middle-aged people. For more specialized intervention techniques, future studies might examine the long-term impacts and applicability to other demographic groups.

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