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Effect of Sahaja Yoga Meditation on the Nutritional Assessment of University Students

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Abstract. The objective of the study was to find out the effect of Sahaja Yoga Meditation on Nutritional Assessment of University Students. (The objective of the study was to find out the significant difference between pre-test means, post-test means and adjusted post-test means of experimental (Sahaja Yoga Practice) group and control group. Subjects for the study were selected from Banaras Hindu University. Total of 60 students were be selected. Age of the Subjects was ranged from 17 to 25 years. All the subjects were divided randomly in to two groups i.e. 30 in experimental group and 30 in control group. Practice of Sahaja Yoga Meditation was considered as Independent variables and Nutritional Assessment was considered as dependent variables. To find out the effect of sahaja yoga meditation on Nutritional Assessment of the University students, Analysis of Covariance (ANCOVA) was used. It was concluded that: Significant difference was found among the adjusted post test means of experimental group and control group in Nutritional Assessment, since the F-value (7.251 , $p < .05$) was found significant at .05 level with 1, 57 df.

Keywords: Sahaja Yoga Meditation, Nutritional Assessment

1. Introduction

Sahaja Yoga is a method of meditation which brings a breakthrough in the evolution of human awareness. It was created by Shri Mataji Nirmala devi in 1970 and has since spread all around the world. Sahaja-Yoga works on awakening of primordial energy within us called Kundalini. When the Kundalini rises and crosses the sixth energy centre, it brings us into a state of thoughtless-awareness - no distracting thoughts from future or past are bombarding the mind. All conflicts residing in the mind that create stress, evaporate. We enter into a state of peace within, remaining completely in the present and aware of everything around us. Inside every human being there is a network of nerves and sensory organs that interprets the outside physical world. At the same time, within us resides a subtle system of channels (*nadis*) and centers of energy (*chakras*) which look after our physical, intellectual, emotional and spiritual being. Each of the seven chakras has several spiritual qualities. These qualities are intact within us, and even though they might not always be manifest, they can never be destroyed. When the Kundalini is awakened, these qualities start manifesting spontaneously and express themselves in our life. Thus, through regular meditation, we become automatically very dynamic, creative, confident and at the same time very humble, loving and compassionate. It is a process which starts to develop by itself when the Kundalini rises and starts to nourish our charkas.

2. Significance, Objective and Hypothesis

2.1. Significance of the Study

(1) The study may be useful to improve the life style standard of the individuals. **(2)** The study may help university students for self assessment.

2.2. Objective

The objective of the study was to find out the effect of Sahaja Yoga Meditation on Nutritional Assessment of University Students. (The objective of the study was to find out the significant difference

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between pre-test means, post-test means and adjusted post-test means of experimental (Sahaja Yoga Practice) group and control group.)

2.3. Hypothesis

It was hypothesized that there shall not be any significant effect of sahaja yoga meditation on Nutritional Assessment of the University students.

3. Methodology, Findings, Conclusions and Discussions

3.1. Methodology

Subjects: Subjects for the study were selected from Banaras Hindu University. Total of 60 students were selected. Age of the Subjects was ranged from 17 to 25 years. All the subjects were divided randomly in to two groups i.e. 30 in experimental group and 30 in control group. Variables / Contents selected: Practice of Sahaja Yoga Meditation was considered as Independent variables and Nutritional Assessment was considered as dependent variables. Questionnaire used: Life Style Assessment Inventory by Anspangh Davids, Michael, H. Hamrich and Frank D. Rosato was adopted to collect data for Life Style Assessment. Validity of the questionnaire in Indian Conditions was found .89. Experimental Design: Random group design was adopted for this study as all the subjects were randomly divided in to two groups. Further the Experimental treatment was also assigned randomly. The experimental group participated in the sahaja yoga practice. Sahaja yoga practice was conducted for the duration of 12 weeks.

	Randomized	DV	IV	DV
Group 1 (Sahaja Yoga Meditation)	R	O1	X	O2
Group 2 (Control)	R	O1		O2

Experimental treatment (Sahaja Yoga Practice): Subjects performed the practice of Sahaja Yoga as per following details under the supervision of investigator: (1) Right in the beginning a lamp was lightened in front of portrait of Shree Mata Ji Nirmala Devi.(2)Subjects assumed the position of comfortable posture (Sukhasana).(3)Performed "Kundalini Bandhan".(4)Took "Bandhan".(5)Placed left forearm on left knee with palm facing upward and right palm on the floor by the side of the body and prayed " Shree Mata Ji, with your blessings, absorb the barriers and defects of my 'tamo' qualities in earth".(6)After feeling vibrations on left palm, subjects placed right forearm on right knee with palm facing upward and lifted left hand(palm facing them)towards sky and prayed "Shree Mata Ji, with your blessings, absorb the barriers and defects of my 'Rajo' qualities in the sky".(7)Placed left palm on the right side of abdomen (right forearm remained on right knee) and prayed "Shree Mata Ji, with your blessings, keep my mind free of thoughts".(In steps 8 to 10, left forearm remained on left knee) (8)Placed right palm on the heart and prayed "Shree Mata Ji, with your blessings, I am 'Atma' ".(9)Placed right palm horizontally on forehead, with slightly leaning forehead forward, prayed "Shree Mata Ji, with your blessings, I forgive everyone with my heart and I am not having anger for anyone in my mind".(10)Placed middle part of right forearm on vertex with straight fingers and rotated seven times clock wise and prayed "Shree Mata Ji, with your blessings, allows me to feel self realization.(11) Placed both forearms on respective knees and meditated for 15 minutes with fixing mind on "Sahastrar Chakra".(12)Performed the practice of 3rd step.(13)Performed the practice of 4th step.In addition to above procedure, Sahaja Yoga Meditation was performed by the subjects with attention under the supervision of Sahaja Yoga Expert, Mrs. Versha Pradhan. Meditation was performed with the following steps: Subject kept their 'Chitta' on central heart. After that, they kept their 'Chitta' on 'Sahastrara'. After that, subjects brought their 'Chitta' in the sky and tried to feel vibrations. In the last step subjects kept their 'Chitta on 'Anahata Chakkra'.

Statistical Analysis: To find out the effect of sahaja yoga meditation on Alcohol and Drug Assessment of the University students, Analysis of Covariance (ANCOVA) was used.

3.2. Findings

Table 1. Descriptive Statistics of Nutritional Assessment of Experimental Group and Control Group in Pre-Test and Post-Test

		Mean	Std. Deviation	Std. Error	Minimum	Maximum
Pre Test	Experimental Group	55.9000	15.07075	2.75153	26.00	88.00
	Control Group	55.6667	15.78811	2.88250	28.00	79.00
Post Test	Experimental Group	63.3000	14.30734	2.61215	32.00	88.00
	Control Group	55.7333	8.30012	1.51539	40.00	71.00

Figure: 1 - Summary for Nutritional Assessment score (Experimental Group Pre-Test)

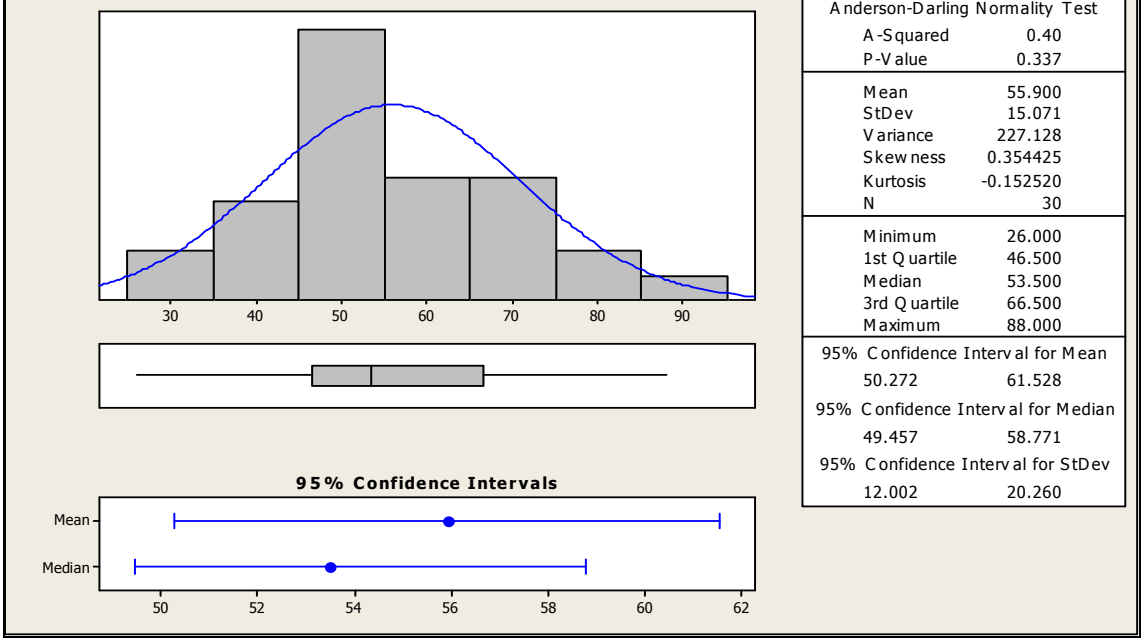


Figure: 2 - Summary for Nutritional Assessment score (Experimental Group Post-Test)

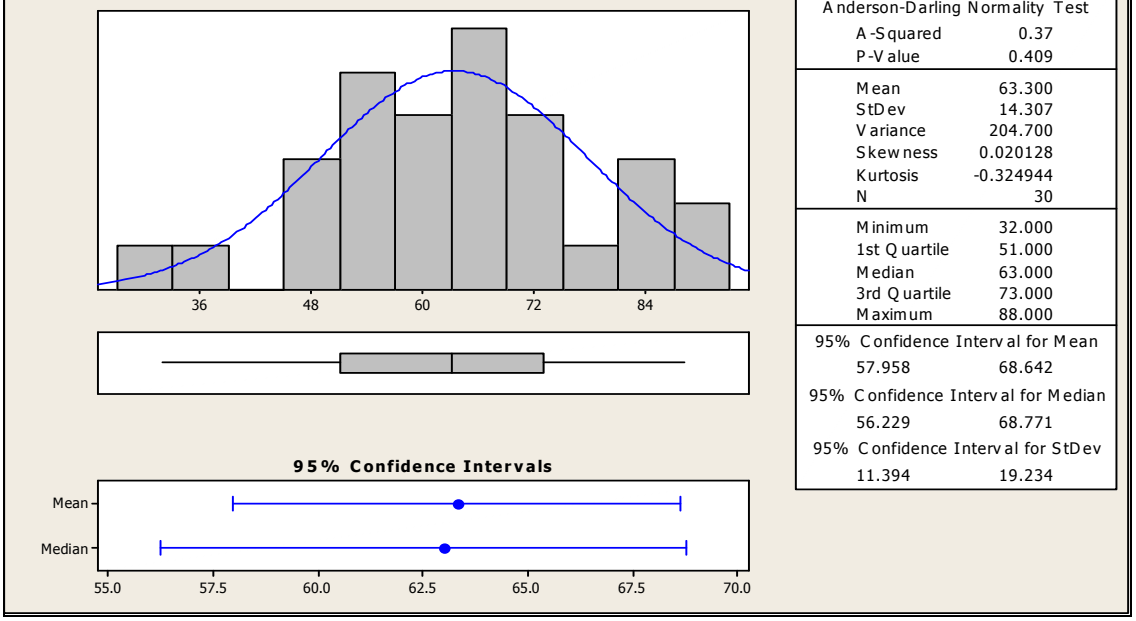


Table2. Adjusted Post Test Means of Experimental Group and Control Group in relation to Nutritional Assessment

GROUPS	Mean	Std. Error
Experimental Group	63.264	1.968
Control Group	55.769	1.968

Table3. Analysis of Variance of Comparison of Means of Experimental Group and Control Group in Nutritional Assessment

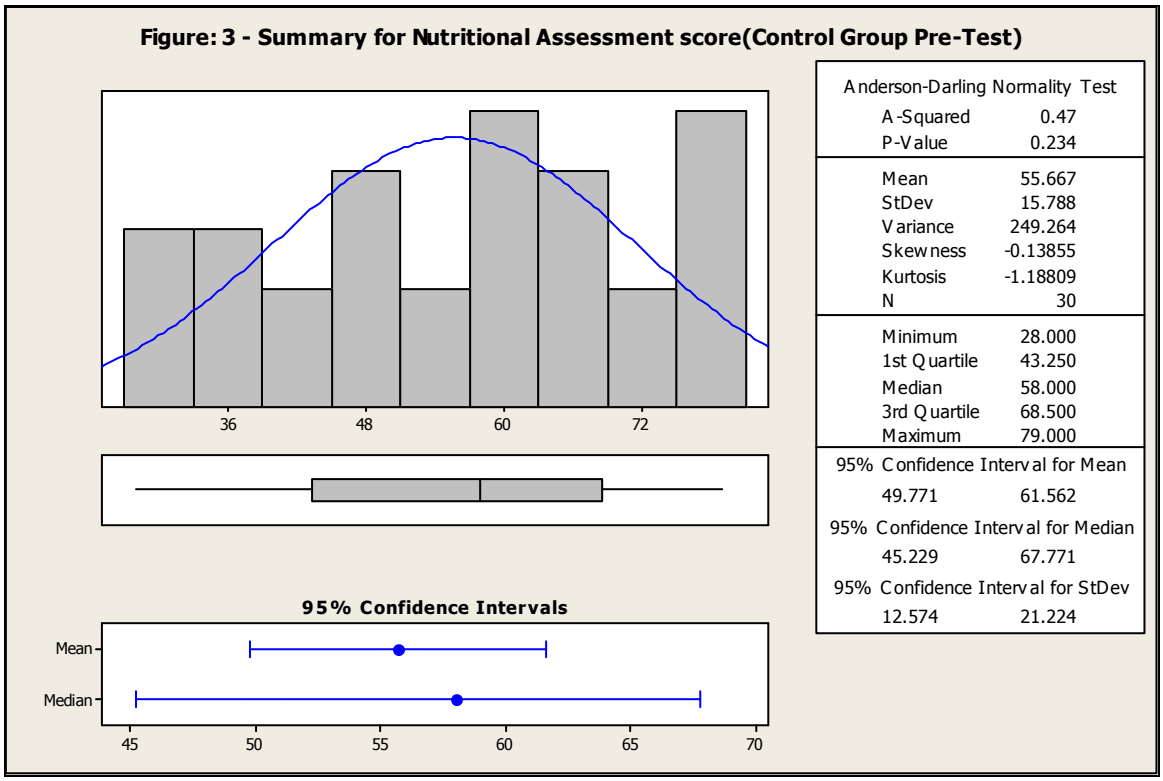
		Sum of Squares	df	Mean Square	F	Sig.
Pre Test	Between Groups	.817	1	.817	.003	.954
	Within Groups	13815.367	58	238.196		
Post Test	Between Groups	858.817	1	858.817	6.278*	.015
	Within Groups	7934.167	58	136.796		

*Significant at .05 level

F value required to be significant at 1, 58 df = 4.006

In relation to pre test, table 3 revealed that the obtained 'F' value of .003 was found to be insignificant at 0.05 level, since this value was found lower than the tabulated value 4.006 at 1, 58 df.

In relation to post test, significant difference was found among experimental group and control group pertaining to Nutritional Assessment, since F value of 6.278 was found significant at .05 level.



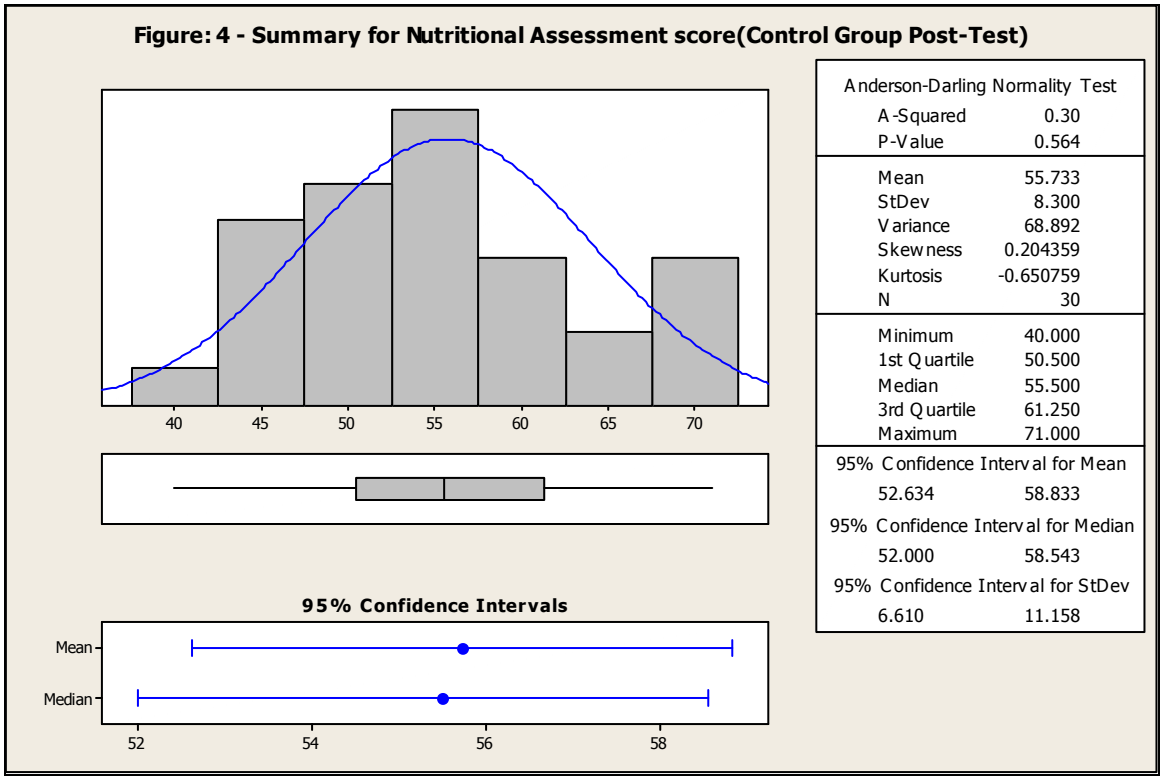


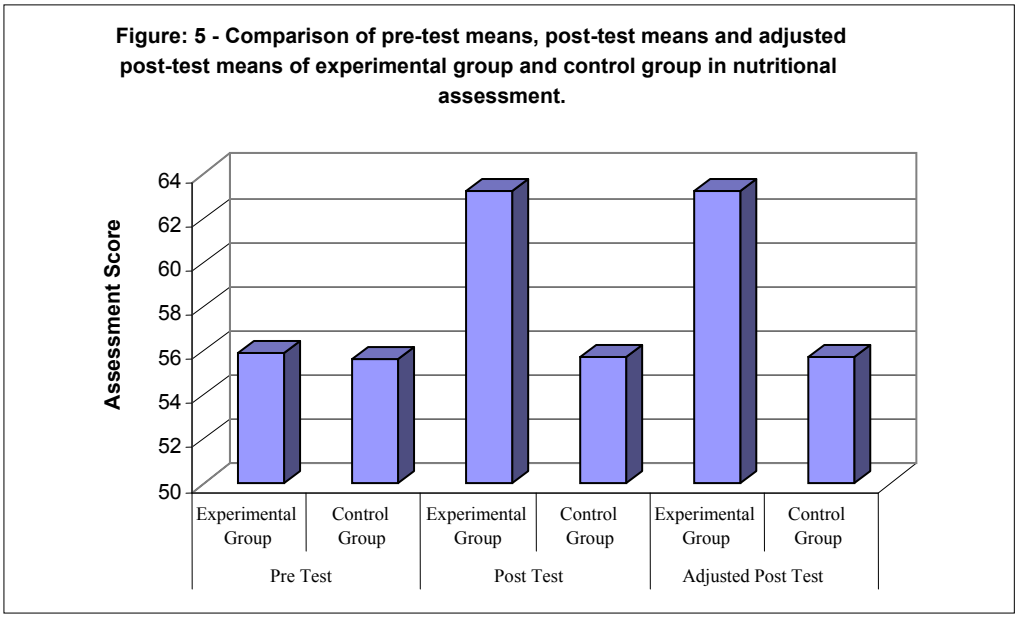
Table 4. Analysis of Covariance of Comparison of Adjusted Post Test Means of Experimental Group and Control Group in Nutritional Assessment

	Sum of Squares	df	Mean Square	F	Sig.
Contrast	842.526	1	842.526	7.251*	.009
Error	6622.908	57	116.191		

*Significant at .05 level

F value required to be significant at 1, 57 df = 4.009

Table 4 revealed that the obtained 'F' value of 7.251 was found to be significant at 0.05 level, since this value was found higher than the tabulated value 4.009 at 1, 57 df.



3.3. Conclusions

Significant difference was found among the adjusted post test means of experimental group and control

group in Nutritional Assessment, since the F-value (7.251) was found significant at .05 level with 1, 57 df.

3.4. Discussions

Hackl, W., (1995) found a significant beneficial effect of Sahaja Yoga Meditation on state and trait anxiety in healthy adults.

Manocha et al., (2002) found a significant reduction in the severity of asthma as measured in airway-hyper-responsively in response to chemical challenge (an objective indicator of the severity of asthma) as a result of Sahaja Yoga Meditation. In addition there was an increase in the subjective ratings of mood. Similar findings were observed previously in a smaller trial using the same meditation technique (Chugh et al., 1997).

Harrison, L. et al. (2003) found a significant improvement of the symptoms of Attention Deficit Hyperactivity Disorder (ADHD) as a result of Sahaja Yoga Meditation. ADHD is a disorder that develops in childhood and is characterised by problems of attention, impulsiveness and hyperactivity.

Aftanas and Golocheikine (2001, 2002, 2003) found that long-term Sahaja Yoga meditators showed increased power in low band frequency EEG activity of theta and alpha. They also found specific brain activation patterns corresponding to the subjective feelings of thoughtless awareness and happiness experienced by the Meditators. This study showed that the subjective experiences of mental silence and positive emotions during Meditation have very specific neurophysiological correlates in the activation and connectivity of regions that mediate internalised attention and positive affect.

Morgan, A. (2001) showed that Sahaja Yoga Meditation has a beneficial therapeutic effect on the symptoms of patients with depression and anxiety.

Aftanas, L. & Golosheykin S. (2005) found that long-term practitioners of Meditation showed reduced emotional reactivity and are more resilient to stressful events. Meditators showed reduced psychological, physiological and electrophysiological reactivity to stressful stimuli. Meditatore also showed reduced levels of an autonomic indicator of stress (skin potential levels).At the brain level they showed reduced gamma activity over frontal brain regions. Gamma activity over frontal regions in controls is reflective of increased focused arousal in relation to the emotional involvement. These findings provide pioneering neurophysiological evidence for the claim that long-term effects leads to greater emotional stability, reduced emotional reactivity and greater resilience to stressful stimuli.

Hackl (1995) showed highly significant effects of Sahaja Yoga Meditation on drug consumption.

Panjwani, U. & Selvamurthy, W. (1991, 1995, 1996, 2000) found significant reductions of the number of seizures in patients with epilepsy. There was also a reduction of stress-related physiological indicators only in those patients treated with Sahaja Yoga meditation. An increase in skin resistance indicating decreased sympathetic activity (more relaxation).An reduction in blood lactate indicating less anxiety. A reduction in vanillil mandelic acid (VMA), indicating reduced stress levels. The authors argue that the reduction in stress following Sahaja Yoga practice may be responsible for the clinical improvement of their epilepsy.

Manocha, M. & Semmar, B. (2007), showed that Sahaja Yoga Meditation is effective as treatment for menopausal symptoms.

Mishra, R., Barlas, C. & Barone, D. (1993) showed that Sahaja Yoga Meditation elicited a significant increase of 70% in beta-endorphins as measured in the blood in males.

Aftanas, L. & Golosheykin, S. (2005) found that Sahaja Yoga Meditators scored significantly lower in personality features of anxiety, neuroticism, psychoticism, and depression and scored higher in emotion recognition and expression. This suggests that long-term Meditation practice leads to higher psycho-emotional stability and better emotional skills.

Sharma, V. K., Das S., Mondal, S., Goswami, U. & Gandhi A. (2006) found improvement on Neuro-Cognitive Functions resulting from Sahaja Yoga Meditation**.**

In the present study, **significant difference** was found among the adjusted post test means of experimental group and control group in **Nutritional Assessment.**

In the present study**, Change in Nutritional Assessment** might be due to change in state anxiety, trait anxiety, mood, thoughtless awareness, happiness, depression, drug consumption, brain activity, number of seizures, blood lactate, vanillil mandelic acid, beta-endorphins neuroticism, psychoticism, psycho-emotional stability, emotional skills, Neuro-Cognitive Functions etc.

Present Study supports conducted by Hackl, W., (1995) ; Manocha et al., (2002) ; Chugh et al.

(1997);Harrison, L. et al. (2003); Aftanas and Golocheikine (2001, 2002, 2003); Morgan, A. (2001); Aftanas, L. & Golosheykin S. (2005); Hackl (1995); Panjwani, U. & Selvamurthy, W. (1991, 1995, 1996, 2000); Manocha, M. & Semmar, B. (2007); Mishra, R., Barlas, C. & Barone, D. (1993); Aftanas, L. & Golosheykin, S. (2005); Sharma, V. K., Das S., Mondal, S., Goswami, U. & Gandhi A. (2006).

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