Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

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ABSTRACT:

Background: The COVID 2019 is an Epidemic and a notified disaster in India as well as concern of International health and challenge to a psychological resilience Research data are needed to develop evidence-driven strategies to reduce and manage adverse psychological impacts and psychiatric symptoms during the epidemic through yoga practice. Here we added applied yoga, as a tool for improving mental wellbeing, improving quality of life, and reducing effect anxiety. Reducing the negative attitude and creating enthusiasm among the persons under quarantine. Objective: The study was to help and guide people with anxiety disorders and find a way out to get rid of the effect of Anxiety and manage it through yogic practices which improve self-awareness and strategies to respond to the setbacks. Yogic practices aim to improve self-confidence, a system of systemic conscious wellbeing.

Scope and limitation: The study is limited to sample population of Trivandrum District Kerala, India.

Method and materials: Psychological impact and mental health status were assessed by the Depression, Anxiety, and Stress Scale (DASS-21). The research design consists of two group designs of control and experiments random design with a single group of 30 no’s (females and 15 males) subjects. The data was analyzed through Paired T-test and one-way ANOVA test.

Results: Statistical Results shows a significant value of P< 0.05 and the hypothesis have been proved.

Conclusion: Yoga practices decrease the degree of anxiety and improve mind contextual focus of subjects under training. Finally all dimensions of human potentials and well-being revelation detention of novel idea etc.

KEYWORDS: Yoga training, KOVID 19, Anxiety, Stress, Depression.

I. INTRODUCTION

Anxiety is a common worldwide debit ability that cuts across the natural racial and economic boundaries. Apprehension of danger or misfortune is the reason for anxiety, which manifested as mental distress or uneasiness. It is a state of feeling of anticipation of something unpleasant about to happen, accompanied by a feeling of inner tension, and somatic manifestation such as tense muscles sweating, etc. Anxiety is the body’s response to fear. It plays a vital role in self-preservation due to the fear of consequences and psychosis. Anxiety disorders involve an excessive level of negative emotions such as fear, worry, nervousness, and tension. Anxious feelings occur involuntarily despite best attempts to avoid them. Anxiety is the commonest epidemic of our civilized society. Anxiety is just anticipation of pain that occurs in the future or bad memories of the past. When anxious thoughts come observe it and be aware of that thought. Awareness of thought is not thought of Anxiety. Awareness of anxiety is not anxiety. When you become a nonjudgmental observer, you are free from anxiety. When u live in the present and are free from results and repercussions from your actions or focused analysis of results then u can dilution from anxiety. Yoga advocates living in the present and a way of life that is free from warring and hurrying. Anxiety is often seen as a triggering response of the fight-to-flight reaction. Causing excessive adrenalin to be produced from the adrenalin gland. Supported by the Production of Catecholamine. Which affects heartbeat and respiration.
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

Anxiety affects basically three main components. 1. Subjective response of tension, apprehension, sense of impending danger, dread, and expectations of inability to cope. 2. Behavioral responses Such as avoidance of feared situations, impaired performance on complex cognitive tasks. 3. Physiological responses including muscle tension, increased heart rate, and blood pressure, rapid breathing, dry mouth, nausea, diarrhea and dizziness. Anxiety is a part and parcel of human productivity and existence. If it is to a moderate degree it is an adaptive response. If some people feel anxious most of the time it is not adaptive but extreme distress. One third of the populations already facing anxiety disorders due to various reasons on or another time of their life span... In this pandemic situation which increases uncertainty about the aspect of the job, loss of business, denial of better treatment, postponement, indecisions important goals and targets, loneliness, denial of social gathering missing educational future opportunities, and basic needs like scarcity of food clothing, etc. missing relationship, etc. Suck down a rabbit hole of loss. The conspiracy news stuff that fueling anxious thought come up on social media. Anxiety disorders- Anxiety disorder is tenacious and becomes a way of life.

Anxiety disorders are highly prevalent throughout the life span, with determined effects on daily life. Anxiety is the approach of an avoidance emotion. Anxious thought can define the way we look at life, how we act, how we do, the way we think of other people and ourselves. Anxiety Disorders are not associated with a single condition but with a spectrum of related disorders including Panic Attacks, Panic Disorders, Specific Phobia, Social Phobia Obsessive-compulsive Disorders, and Acute stress disorders, Post-Traumatic disorder. Generalized Anxiety Disorder. Substance-Induced Disorders. However some of the same will attract an imbalance change in brain chemistry. The following symptoms are characteristic of all Anxiety disorders. The fear Psychosis,, Tension, worry, agitation, trembling, nausea, hot or cold flashes, dizziness, shortness of breath, frequent urination, etc. Cause of Anxiety Biological factors Genetic underpinning. One Anxiety-related gene has been identified as human’s 5-HTT. It regulates serotonin, a neurotransmitter that regulates Mood. Gene variation speedup neuron metabolism of serotonin. Leaving less of the chemical available in the brain. Low levels of serotonin seem to be characteristic of Anxiety and depression disorders.

A duplication on a region of Chromosome15 is responsible for panic disorder and Phobia Chromosomes 11and 1 are observed as potential genetic markers for Panic disorders. Chromosome 3 is a possible marker for Agoraphobia. So far no test genetic disorders to check the individuals at high risk of anxiety. Regulation of brain chemistry Neurotransmitters, the brain chemical messengers like serotonin, nor epinephrine, Gamma-amino butyric acid are responsible for transmitting signals from brain cells to organs. Brain regions influence Anxiety the Amygdala is associated with emotions and coordinates the body’s response to fear. The cerebral cortex evaluates and analyzes the perceived data about fear and forms a judgment, and shaping the response to fear. The hippocampus process emotions in long-term memories. The Locus Ceruleus helps to determine which stimuli deserve attention. Researches reveal that the HPA axis in persistent overdrive may be the reason for depression and anxiety. Evidence points to excess secretion of corticotrophin-releasing factor from the Hippo thalamus. Other factors the irregular Patten of breathing also tends to increase the feeling of anxiety. They show further symptoms like lightheadedness. Dizziness and possibly fainting. Psychiatric disorders Depression and psychosis will heighten a person’s anxiety. Medical factors Alcohol, medications, and illicit substances usage may induce anxiety. Roll of yoga on Anxiety management

As per Patanjali yoga sutra, Yoga focuses on the sensory and physical aspect of the present movement. Yoga is an applied method and technique for avoiding negative expectations of reminiscences and help to adapt to life in the present. Yoga is an emerging holistic perception of mental wellbeing on the areas of brain impairments related to anxiety disorders, such as Nero progression, Neurogenesis, structural molecular and cellular Modifications It is a nonjudgmental approach which in turn contributes to the tranquility of the mind. Yoga improves alertness, awareness, and consciousness. Yoga restructures and confounds the metacognitive approach. It Separates fiction from fear and develops tolerable tactics. Yoga improves three-dimensional awareness such as pointed awareness, surface awareness, and lateral awareness. Belly breathing with awareness will send calming signal to the brain and finally relaxing the total body and mind.

Yoga is a behavioral approach and process it can teach more about you. It improves self-observation skills. Yoga provides skill in action. Self-observation skill improves awareness. Evoked awareness reduces ruminative thinking, managing and differentiate the fictions and reality of anxiety, over urgency and over a generation of circular thinking, helplessness, aggression anger, loneliness, hardness, and various combinations of problems. Yoga liberates your mind from anxious thought fortifying the body consciousness, awareness, and intellect, ingenuity, and will. It leads to lightening the allostatic load stabilize gain and get ahead. It modifies the behavior Patten from consistent error conning yourself into thinking. It avoids the consequence of procrastination learning to recognizing and end cognitive disorder Building a realistic evaluation skill in a cognitive way.

Yogic practices enable you to differentiate between what you can control and realize what you cannot. Yoga advocates believing in a good future, divine guidance, right action, and all the blessings of life. Anxiety is a part of the limbic or emotional brain. Yoga is a process to upgrade the mind and brain by changing the mindset thereby self-directed Nero plasticity of the brain. It is a learning
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

process of the anxious panic stage to relax. Yoga is a relaxing method to counteract anxious arousal. Square berthing can help to decrease anxious arousal and set the stage for you to think clearly about yourself. Yoga supplies emotional granularity which is a critical predictor for our wellbeing. Amygdala which is located in the emotional brain is the warden and the custodian of fear and anxiety. Normal condition neo cortex, the thinking part of the brain will activate all stimulation in a controlled way. When we are under panic attacks of anxiety the amygdala will act quickly and supersede the thinking brain and sizes the control over that to safeguard human life. That is why anxious condition it is difficult to talk to yourself. Yoga is a strong alternative to the anxiolytic and hypnotic drug used for medically treating Anxiety.

Yoga is a NERO diagnostic approach in multiple complex problems simultaneously. Yoga is an applied method, for now, yourself and how to manage yourself. Yoga is cutting-edge knowledge and technology provides practical strategies to deal and cope with anxiety. Yoga breaks cognition and anxiety connection. Yoga can break Anxiety cognition connections as effectively as CBT. It can pinpoint and identify the activators, cognitive triggers, and amplifiers that differentiate fixation from fact. Yoga can also address the ravage of fear, psychological demons, and way to combat anxiety thwart wellbeing. Yoga evokes Tranquility and a sense of serenity yoga brings the right knowledge to your intellect. Anxiety is a common worldwide disability that cuts across the natural racial and economic boundaries. Being young is not a buffer for anxiety. Transcending mind to any sights, visuals, sound, smell, taste, touch imaginary feelings like heat, cold, bitter, sour, heat, cold, imagination of raining, gentle breeze, sunrise, waves of the ocean, waterfalls, etc, Emotions like love, compassion, empathy sympathy, anger, sadness, cry, joy, happiness, etc through guided meditation can decrease the anxious thoughts, Anxiety is a time-domain dimension of Disorder transcending can extend the present time to beyond mind process and extended entanglement of time reduce the panic attack and relieve anxiety.

Yoga provides a comprehensive research-driven technique which is an affordable self-practicing strategy and insight to anxious laypersons.

II. LITERATURE REVIEW
The word anxiety is derived from the Latin “anxiety” (to choke, throttle, trouble, and upset) and encompasses behavioral, affective and cognitive responses to the perception of danger [1]. The ancient text mundukya Upanished explains that the realization of silence in the universe is the way to overcome sufferings that is Nrvikalapla Samadhi .As pranayama leads to predominance in abdominal/diaphragmatic breathing which in turn vagal tone and parasympathetic dominance. Pranayama in Yoga practices reduce blood pressure hypertension, reduces the heart rate, reduces parasympathetic tone, increase cutaneous peripheral vascular resistance, Induces vagal nerve stimulations deactivate limbic brain regions amygdala, hippocampus, Para hippocampus gyrus, insula, and orbito frontal and anterior cingulate cortices and thalamus. Salivation is one of the parasympathetic activation process response, the proteomic profile of thus produced will be differ from basal saliva which influences stress response. [2]

During Meditation vagal tone, gamma-amino butyric acid (GABA) levels, serum prolactin, are increased whereas hypothalamic-pituitary-adrenal axis down regulation, decrease in serum cortisol, and promotion of frontal electroencephalogram (EEG) alpha wave activity which improves relaxation) [3]. (Janakiramaiah et al., 1998, 2000; Kamei et al., 2000; Streeter et al., 2007 .Yoga improves cognitive processes. yoga practices help increase Stress tolerance rate by increasing heart rate variability [4]. Most diseases of the body and mind arise first as an imbalance in the Swara (nostril flow). For example, you may notice that one nostril feels blocked over some days and later you may come down with the flu, but more seriously if a nostril predominates constantly over the other then you may experience serious depression or anxiety. While the Swara was flowing in my right nostril, which influences the left side of the brain, that is the Sympathetic nervous system the attack of anxiety is more continuous and prolonged till shift in nostril flow. On such occasion one had to block the right nostril if I could not go somewhere and rest to try and make the Swara flow in the left nostril, thus stimulating the right side of brain and the Para-sympathetic nervous system. One needs to balance the Swara more effectively.[5] If the right nostril is continuously blocked (left nostril open) so the right side of brain dominates, the person will see their world in an overcautious or pessimistic way, think in a self-preservative way. Tend to feel the emotions of fear, anxiety, pessimism, dejection and may be depression, and behave in an avoidant way. If the left nostril is permanently blocked (right nostril is open), the left side of the brain is dominates the person will tends to be under cautious, daring, may be careless, fail to see the warning signals, fell all emotions at its positive anticipation, even though elation, and step in where angle fear to tread. The practices of Nathi Kriyas, Breath practices and meditation, and adopting nasal flow balancing technique will maintain the person’s mental tranquility and calmness. (Practical Yoga Psychology Dr. Rishi Vivekananda Yoga publication trust, Mungar, Bihar, INDIA,) Research and studies of Nostril and mouth inhalation reveals that berthing Patton also changes cognitive activity throughout the breathing cycle. As many of us are anxious about time and its management. The degree of anxiety will be more with bad time management and mental distractions. But yoga gives a better way-out on emotional management with intelligence, thereby providing the emotional permission to spend more time on things at present which will
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

fetch more time in feature. Since yoga practices develop self-reinforcing behavior with a personal and group effect. These behavioral modulations from yoga may assist the individual to have a healthier physical and psychological response of Anxiety. Yogic perspective of wellbeing is more psychological than physical. It means physical fitness, mental agility, and spiritual verve.[7] According to Goleman (1971), of the nervous system Meditation leads to the liberation of tension of nerves systems without any effort or disposition. (Scientific Meditation Dr. Olga Gomez de Martinez, Ph D, Colombia) [8] For Swami Satyananda (1975) the objective of meditation is to explore the different regions of the mind in order to eventually transcend it. The different techniques of meditation help the individual to purify the mind and give it the rest and revitalization necessary for its appropriate functioning. By focusing on the interior, the person becomes aware of the chaotic and endless flow of thoughts, memories, fears, etc. which do not have any definite goal or objective. [9] Yogic practices recondition the whole body.

III. METHOD AND MATERIALS

The study was designed to measure pre and post test score from the general population 50 participants were selected on random basis according to the inclusion criteria. 30 days Yoga training schedule was prepared and training was given for one hour per day except Sundays. Depression, Anxiety, and Stress Scale (DASS-21) quittance was used to measure the degree of depressions, Anxiety, stress score before and after training.

Hypothisis-I

Ho- There is no difference between Pretests and post test scores on the Psychological dimension Stress

H1- There is a difference between Pretests and post test scores on the Psychological dimension Stress

Hypothesis-I

Ho - There is no difference between Pretests and post test scores on the Psychological dimension Anxiety.

H1-There is a difference between Pretest and post test scores on the Psychological dimension Anxiety.

Hypothesis-II

H0-There is no difference between Pretest and post test scores on the Psychological dimension Depression.

H1- There is a difference between Pretest and post test scores on the Psychological dimension Depression.

IV. RESULTS

The demographic status of the participants items of gender (Male 31 female 19) Age (25 to 50 years) qualifications and Occupation were analyzed the data collected was analyzed with JMP software. Data quality was checked against normality, correlation, regression etc. and reported. “t” Test, F test were conducted for hypotheses probability testing, Data of Depression Anxiety and Stress variable were tested with descriptive statistics.

4.1 Graphs -Comparison of densities
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

Table 1.1 Descriptive statistics

<table>
<thead>
<tr>
<th>Summary of Statistics</th>
<th>Depression Pre Test</th>
<th>Depression Post test</th>
<th>Anxiety Pre test</th>
<th>Anxiety Post test</th>
<th>Stress Pre Test</th>
<th>Stress Post Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Std Dev</td>
<td>2.6093435</td>
<td>4.2843252</td>
<td>3.1560869</td>
<td>5.3774219</td>
<td>4.0295465</td>
<td>6.4807407</td>
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<tr>
<td>Std Err Mean</td>
<td>0.3727634</td>
<td>0.6120465</td>
<td>0.4508696</td>
<td>0.7682031</td>
<td>0.5756495</td>
<td>0.9258201</td>
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<tr>
<td>Upper 95% Mean</td>
<td>9.8107155</td>
<td>14.985704</td>
<td>5.4575544</td>
<td>8.8302902</td>
<td>7.790074</td>
<td>13.004343</td>
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<tr>
<td>Lower 95% Mean</td>
<td>8.3117335</td>
<td>12.5245</td>
<td>3.6444864</td>
<td>5.7411384</td>
<td>5.4752322</td>
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<tr>
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<td>49</td>
<td>49</td>
<td>49</td>
<td>49</td>
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<tr>
<td>Sum Wgt</td>
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<td>49</td>
<td>49</td>
<td>49</td>
<td>49</td>
<td>49</td>
</tr>
<tr>
<td>Sum</td>
<td>444</td>
<td>674</td>
<td>223</td>
<td>357</td>
<td>325</td>
<td>546</td>
</tr>
<tr>
<td>Skewness</td>
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<td>2.2620135</td>
<td>1.1416551</td>
<td>1.6793942</td>
<td>1.1324375</td>
<td>0.6837636</td>
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<tr>
<td>Kurtosis</td>
<td>0.335134</td>
<td>9.4046783</td>
<td>1.2361669</td>
<td>3.1191108</td>
<td>1.2349913</td>
<td>-0.580431</td>
</tr>
<tr>
<td>CV</td>
<td>28.796809</td>
<td>31.147171</td>
<td>69.348994</td>
<td>73.807752</td>
<td>60.753162</td>
<td>58.160493</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
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<td>N Zero</td>
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<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>N Unique</td>
<td>13</td>
<td>12</td>
<td>12</td>
<td>12</td>
<td>16</td>
<td>15</td>
</tr>
<tr>
<td>Uncorrected SS</td>
<td>4350</td>
<td>10152</td>
<td>1493</td>
<td>3989</td>
<td>2935</td>
<td>8100</td>
</tr>
<tr>
<td>Corrected SS</td>
<td>326.81633</td>
<td>881.06122</td>
<td>478.12245</td>
<td>779.38776</td>
<td>2016</td>
<td></td>
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<td>Autocorrelation</td>
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<td>0.3898837</td>
<td>0.2988357</td>
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<td>0.667122</td>
<td>0.7182438</td>
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</table>
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

| Minimum | 4 | 8 | 1 | 0 | 1 | 2 |
| Maximum | 16 | 34 | 14 | 26 | 20 | 26 |
| Median | 8 | 13 | 4 | 6 | 6 | 9 |
| Mode | 7 | 12 | 1 | 8 | 3 | 8 |
| 5% Trimmed Mean | 8.9302326 | 13.395349 | 4.2325581 | 6.627907 | 6.3255814 | 10.790698 |
| Geometric Mean | 8.7149317 | 13.228651 | 3.5187568 | 0 | 5.5164297 | 9.2975919 |
| Range | 12 | 26 | 13 | 26 | 19 | 24 |
| Interquartile Range | 4 | 5 | 4 | 4 | 5 | 10 |
| Median Absolute Deviation | 1 | 3 | 2 | 2 | 2 | 4 |
| Proportion Zero | 0 | 0 | 0 | 0.0204082 | 0 | 0 |
| Proportion Nonzero | 1 | 1 | 1 | 0.9795918 | 1 | 1 |
| Robust Standard Deviation | 2.6231941 | 3.3275029 | 2.9404344 | 3.8646978 | 6.7659494 |

Table No 1.2 Correlations

<table>
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<th>Correlation constant</th>
<th>Depression</th>
<th>Anxiety</th>
<th>Stress</th>
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<tr>
<td>X</td>
<td>Pre Test</td>
<td>Pre Test</td>
<td>Pre Test</td>
</tr>
<tr>
<td>Y</td>
<td>Post Test</td>
<td>Post Test</td>
<td>Post test</td>
</tr>
<tr>
<td>Σx</td>
<td>444</td>
<td>223</td>
<td>325</td>
</tr>
<tr>
<td>Σy</td>
<td>674</td>
<td>257</td>
<td>546</td>
</tr>
<tr>
<td>Σxy</td>
<td>6561</td>
<td>2341</td>
<td>4794</td>
</tr>
<tr>
<td>Σx²</td>
<td>4350</td>
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<td>8100</td>
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<tr>
<td>r</td>
<td>0.8456</td>
<td>0.8793</td>
<td>0.9354</td>
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</tbody>
</table>

Fig no 1.3 Regression Graph [Depression] Pre Vs Post test
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

![Fig no 2 regression graph [Anxiety] Pre Vs post](image1)

![Fig no 3. regression graph [Stress] Pre Vs Post test](image2)

### Table No 1.3 T test for Depression pre and Post test.

<table>
<thead>
<tr>
<th>Depression</th>
<th>Pre test</th>
<th>Post test</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>49</td>
<td>49</td>
<td>98</td>
</tr>
<tr>
<td>Σ X</td>
<td>444</td>
<td>674</td>
<td>1118</td>
</tr>
<tr>
<td>ΣX²</td>
<td>4350</td>
<td>10152</td>
<td>14502</td>
</tr>
<tr>
<td>SS</td>
<td>326.8163</td>
<td>881.0612</td>
<td>1747.6735</td>
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<tr>
<td>Mean</td>
<td>9.0612</td>
<td>13.7551</td>
<td>11.4082</td>
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</table>

### Table 1.4 t test Depression Pre and Post

<table>
<thead>
<tr>
<th>Depression [Mean Post test- mean Pre Test]</th>
<th>T</th>
<th>df</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.6939</td>
<td>6.55</td>
<td>96</td>
<td>One- Tiled &lt;.0001</td>
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</tbody>
</table>

### Table 1.5 F- Test Depression Post and Pre Test.

<table>
<thead>
<tr>
<th>df1</th>
<th>df2</th>
<th>F</th>
<th>P</th>
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<tbody>
<tr>
<td>48</td>
<td>48</td>
<td>2.7</td>
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</table>

### Table No 1.6 t test for Anxiety Pre and Post test

<table>
<thead>
<tr>
<th>Anxiety</th>
<th>Pre test</th>
<th>Post test</th>
<th>Total</th>
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<tbody>
<tr>
<td>N</td>
<td>49</td>
<td>49</td>
<td>98</td>
</tr>
<tr>
<td>Σ X</td>
<td>223</td>
<td>357</td>
<td>580</td>
</tr>
<tr>
<td>ΣX²</td>
<td>1493</td>
<td>3989</td>
<td>5482</td>
</tr>
<tr>
<td>SS</td>
<td>478.1224</td>
<td>1388</td>
<td>2049.3469</td>
</tr>
<tr>
<td>Mean</td>
<td>4.557</td>
<td>7.2857</td>
<td>5.9184</td>
</tr>
</tbody>
</table>
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

<table>
<thead>
<tr>
<th>Anxiety [Mean Post test - mean Pre Test]</th>
<th>t</th>
<th>df</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.7347</td>
<td>3.07</td>
<td>96</td>
<td>Two-tailed</td>
</tr>
<tr>
<td>One-tailed</td>
<td>.0001392</td>
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</table>

Table no 1.8 F-Test Anxiety Pre and Post Test.

<table>
<thead>
<tr>
<th>df1</th>
<th>df2</th>
<th>F</th>
<th>P</th>
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</thead>
<tbody>
<tr>
<td>48</td>
<td>48</td>
<td>2.9</td>
<td>0.000167</td>
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</tbody>
</table>

Table no 1.9 t-test for Stress Pre and post test.

<table>
<thead>
<tr>
<th>Stress</th>
<th>Pre test</th>
<th>Post test</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>49</td>
<td>49</td>
<td>98</td>
</tr>
<tr>
<td>Σ x</td>
<td>325</td>
<td>546</td>
<td>871</td>
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<tr>
<td>Σx²</td>
<td>2935</td>
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<td>11035</td>
</tr>
<tr>
<td>SS</td>
<td>777.3878</td>
<td>2016</td>
<td>3293.7653</td>
</tr>
<tr>
<td>Mean</td>
<td>6.6327</td>
<td>11.1429</td>
<td>8.8878</td>
</tr>
</tbody>
</table>

Table No 1.10 t – test for Stress

<table>
<thead>
<tr>
<th>Stress [Mean Post test - mean Pre Test]</th>
<th>t</th>
<th>df</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.5102</td>
<td>4.14</td>
<td>96</td>
<td>Two-tailed</td>
</tr>
<tr>
<td>One-tailed</td>
<td>.000000639</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table No 1.11 - F-test [stress]

<table>
<thead>
<tr>
<th>Stress.</th>
<th>df1</th>
<th>df2</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>48</td>
<td>48</td>
<td>2.59</td>
<td>0.000639</td>
</tr>
</tbody>
</table>

Table No 1.12 Wilcox on Signed-Rank Test

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>W</th>
<th>Mean difference</th>
<th>+ sum of positives</th>
<th>Sum of Negatives</th>
<th>Deviation</th>
<th>Z value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>49</td>
<td>0</td>
<td>-24.94</td>
<td>0</td>
<td>1225</td>
<td>100.53</td>
<td>6.0927</td>
<td>.0001</td>
</tr>
<tr>
<td>Anxiety</td>
<td>49</td>
<td>110</td>
<td>-3.52</td>
<td>110</td>
<td>1066</td>
<td>-4.9026</td>
<td>-4.9026</td>
<td>.0001</td>
</tr>
<tr>
<td>Stress</td>
<td>49</td>
<td>0</td>
<td>-9.37</td>
<td>0</td>
<td>1225</td>
<td>100.53</td>
<td>-6.0927</td>
<td>.0001</td>
</tr>
</tbody>
</table>

V. RESULTS DATA ANALYSIS

Data were tested and analyzed against correlation and regression shown on the table no 1 obtained r values are for pre and post-test Depression is 0.8456, Anxiety is 0.8793 and that of stress is 0.9354 values are large and near to 1, yields well correlated each other. The regression the equation for Depression [pretest Vs Post test, Y=1.175+1.388 X, that of Anxiety [Y, =0.4677+1.498X] and for Stress Pre Vs Post test is Y=1.1646+1.504X.

VI. HYPOTHESIS TESTING

T test has been conducted and obtained value for Depression is t [96]=6.57, P=<.001, F[48,48]=2.7 and P=0.0003965 at α=0.05., For Anxiety t [96]=3.07, P=.002784, F[48,48]=2.9 and P=0.000167 at α=.05 and for stress t [96]=4.14, P=.001, F [48,48]=2.59 and P=0.000639 at α=.05. The test results shows Null Hypothesis can be rejected on account of P values obtained in all case. On referring to Wilcoxon on signed – rank Test Z value for depression=6.0927, P Value=.0001, Z value for Anxiety =-4.9026 and p=.0001, Z value of Stress =-6.0927, and P =.0001. Referring to all the results and graphs we reject the null hypothesis formulated in all
Effect of selected yogic practices on psychological dimensions of Anxiety, Stress, and Depression, etc among the persons during pandemic COVID 19 Lockdown periods

cases and force to accept the All the alternate hypothesis on account of statically significant difference between pretest and post test. The test results and analysis of that can be interpreted as there is a statistically significant difference between Pre and post test of stress, Anxiety and Depression score of participant before and after practicing yoga. In other words Anxiety, stress and depression can be reduced by Practicing Yoga.

VII. DISCUSSIONS
The present study revealed that Yogic intervention had decreased the degree of stress, anxiety and depression to a significant level there by establishing the effect of Yoga practice on such dimensions. Yoga and meditative practices leads to lightening the allostatic load stabilize gain and get ahead. It modifies the behavior Patten from consistent error conning yourself into thinking. It avoids the consequence of procrastination learning to recognizing and end cognitive disorder Building a realistic evaluation skill in a cognitive way. Being holistic and integral approach yoga can do more clarity on realistic life and well-being.

VIII. CONCLUSIONS
We force to draw conclusions that there is a statistically significant difference between the pre and post test values of Depression, Anxiety, and Stress. The practitioners who underwent yoga training shows significant reductions in preserved the Anxiety, stress, and depression score. Hence it is evidently accepting that effect of yoga practices on reducing the psychological disorders like stress, Anxiety, depression. Here the correlation and regression analysis were performed for verifying the association of each factors and the predictive power of the regression equation is examined. It is recommended to conduct similar studies with biochemical examinations along with psychological test to acess more keen findings with a larger population of subjects.

Expression of Interest- The researcher declares that no competing financial interest exists.

IX. ACKNOWLEDGEMENT
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