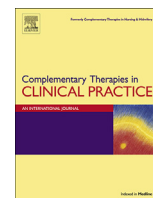




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Yoga and health promotion, practitioners' perspectives at a Brazilian university: A pilot study



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ABSTRACT

The purpose of this paper is to present the results of the Program Yoga and Health Promotion offered to 18 participants, lecturers, workers and students of the State University of Campinas, Brazil. The program aimed at favoring well-being in relation to their physical, emotional and mental condition. Practitioners completed the Measure Yourself Medical Outcome Profile to identify the symptoms and the perception of self-reported well-being, and the T test was applied to the results of the participants' profiles before and after the program. Narratives were used based on trigger phrases. Seven categories (self-control; self-perception; well-being; body awareness; balance; mind-body; reflexivity), were identified through thematic analysis. The results were discussed according to the triangulation of methods. Results: 14 participants scored better profiles, with a p-value <0.05. As regards the narratives, there were no negative perceptions about the yoga practice. In conclusion: yoga was a positive intervention for the group of participants.

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1. Introduction

Yoga is a Hindu tradition which can be traced back roughly to the first millennium bce. Eliade [1] affirms that, etymologically, yoga stems from the root *yuj*, meaning to bring together, unite, maintain united. He continues saying that the word can signify techniques of asceticism and the whole method of meditation. According to him, there are several forms and yoga traditions, including Classic Yoga, to which Patanjali refers in his work *Yoga Sutras* (a compilation on the philosophy and yoga techniques), one of the most accepted and known in the West. In these aphorisms Patanjali defines yoga as the silencing of the changeable mental states [2].

Although Singleton [3] (2008) argues that Classic Yoga never constituted a yoga lineage in itself, and Liberman [4] (2008, p. 106)

affirms that.

Classic yoga formulated by the Bramins of the nineteenth and twentieth centuries is what the Europeans, who studied yoga, learned. Their interest was mostly philosophical and they met with Hindus who were intellectualized Bramins.

In this study, we consider Patanjali as the authority-source of the so-called Classic period.

Yoga, according to Hermógenes [5], is the unification of oneself. It allows the human being to transcend the present state he/she lives in, which is a fragmented state of being. Gomes's study [6] indicates that the human being is fragmented, out of balance and sick, and yoga could be used as a tool for reintegration, rebalancing and cure of oneself. The higher goals of yoga are to transform the individual into a harmonious whole, allowing for the transcendence of pain and suffering. According to Yasudian and Haich [7] the essence and ultimate goal of yoga are always the same: the perfect knowledge of oneself. In order to reach this goal there are several paths, different modalities or yoga systems, among which is Hatha Yoga, which proposes using the control of the body and body work, together with the search for transcendence, and unity and

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control of the mind [8].

The practice is complete when taught according to the Yoga Sutras, which consists of eight steps, including the ethics of behavior of a subject towards the others and himself, which are the *yamas*, universal moral principles (non-violence, truthfulness, non-stealing, non-perversion of sex, and greedlessness) and the *niyamas*, life rules (purity, harmony, serenity, contentment and self-study). Next come *asanas* (physical postures), *pranayamas* (breath regulation), *pratyahara* (sensory withdrawal), *dharana* (concentration), *dhyana* (meditation) and *samadhi*, identification with something greater than oneself. The benefits of yoga are directly linked to the way in which these steps are conducted during practice [2].

Birdee, Eisenberg et al. [9,10] studied the prevalence and the use of yoga in the US. In 1998, the research team conducted a survey by phone with a sample of 2055 English-speaking adults. Sixty percent answered the survey. The results were: 21% used yoga specifically for back and cervical pain, and in the second study, the most common complaints reported by yoga practitioners were musculoskeletal ailments, mental health and asthma. Ninety percent felt yoga was beneficial.

The number of distressed people who developed illnesses derived from stress contributes to the high rate of absenteeism at work [11]. Evidence suggests that stress is associated with the change in unhealthy eating habits, which include a higher consumption of foods rich in sugar and fat, besides the increased consumption of alcohol [2]. Some of the illnesses linked to distress are: chronic pain, psychiatric symptoms such as anxiety and depression, musculoskeletal disorders, muscular tensions which can affect the thoracic mobility and the breathing pattern, among others. Besides, distress, depression and anxiety are factors that influence the perception of well-being negatively [11]. Many illnesses like diabetes type 2, obesity and cancer are associated with unhealthy behaviors, such as an inadequate diet, lack of physical exercise, smoking, excessive consumption of alcoholic beverages and drugs, in addition to unstable mental health, low social support and poor quality sleep [2].

The practice of yoga has been the subject of research in health and several studies have shown positive results. Therefore it has gained momentum as a mind-body practice [12–15]. Yoga has been included in the National Institutes of Health (NIH) of the UK, related to: allergies and intolerances; anxiety and panic syndrome; asthma; cardiovascular disorders; headaches and migraine; infections; irritable bowel syndrome; back pain; cranial and cervical pain; osteoarthritis; painful menstruations; premenstrual syndrome; menopause problems; painful muscles and joints; rheumatoid arthritis; tiredness and fatigue, in primary health [16], besides showing positive results for chronic pain [17]. Adding to the physical and physiological action highlighted in numerous research papers on yoga, the practice also enables practitioners to develop skills to deal with symptoms related do distress and to better control their lives [11].

From an Ayurvedic perspective, the concept of health encompasses the physical, emotional, mental and spiritual dimensions. According to Dhar [18], the spiritual dimension can be evaluated by the Spiritual Health Scale (SHS 20-11), which operates in three domains: self-evolution; self-update and transcendence, wherein yoga is one the tools for reaching these objectives.

In Brazil, yoga was incorporated into the National Health System (SUS) with the bill # 719, dated April 7th, 2011, which created the “Program of the Academy of Health” [19].

The purpose of this article is to present the results of the Program Yoga and Health Promotion carried out with a group of 18 students, lecturers and workers of the State University of Campinas (Unicamp), in the first semester of 2013.

2. Methods

The program Yoga and Health Promotion was a university extension project offered to workers, lecturers and students of the Faculty of Sciences/Unicamp, and conducted by members of the study group for yoga (G.E.Y.), which is linked to the Laboratory for Alternative, Complementary and Integrative Practices in health (Lapacis).

Yoga classes were offered on a weekly basis, on Tuesdays and Thursdays, from 7 to 7:50 am, from February to May 2013, in the lobby of the main classrooms' building. There were 20 vacancies, of which only 18 were occupied from the beginning to the end of the program. The demographic characteristics of the participants were the following: three were men and 15 women, with ages between 20 and 62. Their professions were distributed in the following way: health field (8), with a majority of nurses; technical field (5); social sciences and pedagogical fields (4) and exact sciences (1). They were consented before beginning the program and signed a form in which they pledged to respect the limits of their bodies and receive their doctor's consent in case of being under medical treatment or feeling any kind of discomfort. In the application form they were asked if they had any physical or mental health problems.

The yoga program consisted of 27 classes given in three months and the practice was based on the philosophical aspects of yoga together with body techniques: *asanas* (physical postures), *pranayamas* (breathing techniques), *mudras* (gestures), mantras e relaxation. All the eight yoga steps were discussed during the classes, but more emphasis was given to the *yamas* and *niyamas*. The person leading the yoga classes was a certified yoga instructor who was at the time finishing her masters' studies in Collective Health. The classes were structured with the following features, although sometimes one or other technique was left out, such as meditation or relaxation:

2.1. Philosophical concepts

The ashtanga yoga of Patanjali, with its eight steps, was presented in the first classes. Each of the *yamas* and *niyamas* were mentioned at the beginning of the classes and it was suggested that participants think about them throughout the practice and the day.

2.2. Harmonization

This moment happened before the practice of yoga techniques *per se*, during which participants were stimulated to simply observe their breathing and enhance its depth, with the purpose of bringing one's attention to the present moment.

2.3. Warm up

Simple and dynamic movements were performed which prepare the body for the postures in a gradual way, “warming up” the muscles and joints to avoid lesions and discomfort, and to exercise a combination of movements and breathing.

2.4. Asana practice

marjariyasana (cat), *adho mukha shvanasana* (downward-facing dog), *navasana* (boat), *balasana* (child), *bhujangasana* (cobra), *shamlabhasana* (locust), *dhanurasana* (bow), *paschimotanasana* (seated forward bend), *janu sirsasana* (head-to-knee forward bend), *dandasana* (staff pose), *vakrasana* (simple twist), *vrikhasana* (tree), *utthita parsvakonasana* (extended side angle pose), *trikonasana* (triangle), *talasana* (palm tree), *ganeshasana* (elephant), *padahasthasana* (hand under foot pose), *baddha konasana* (bound

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