Field Project report on **Effect Of Meditation On Health** taking into account various aspects of Health of people in and around a specific location (Thodupuzha, Kottayam, Kerala) along with solutions and suggestions to improve the Health of people in this specific area and in general.

PROJECT REPORT

submitted to

The Annamalai University

In partial fulfillment of the requirement for the award of **The post graduate diploma in Value education and spirituality**

-a course of study from

The Annamalai university, Tamilnadu

in collaboration with

The Prajapita Brahmakumaris Ishwariya Vishwa Vidyalaya

& Education wing of the Rajayoga Education and Research Foundation

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PCP CENTRE

Kottayam, Kerala

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AKNOWLEDGEMENT

Iam greatful to Annamalai University for choosing the subject 'VALUE EDUCATION AND SPIRITUALITY' with the motive of enriching our knowledge.

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I express my gratitude towards the valuable jewels and pillars of Brahmakumaris, Dadi Janakiji, Dadi Hirdayamohiniji, B.K.Nirwairji, B.K.Mruthyunjayaji for their farsightedness and broadmindedness regarding their approach towards Education. Their valuable versions about Education, motivated me a lot.

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With the heartful gratitude I wish to thank every person who helped me as a team to accomplish the task of writing this project, and the senior brothers and sisters of Brahmakumaris, whose good wishes, inspiration and support was instrumental in accomplishing this task.

RANJINI DAMODARAN

CERTIFICATE

This is to certify that the project report titled Effect Of Meditation On Health which is submitted to the Annamalai University, Tamilnadu in partial fulfillment of the requirement for the award of the degree of PG Diploma in Value Education and Spirituality is a record of original project work done by me during the period of study under the supervision of PCP Center, Kottayam, Kerala, and this project was done independently.

Place : Thodupuzha Name : **Ranjini Damodaran**

Reg.No: 294M11132F01547

Date:9-7-2011

Signature

Submitted for Practical Examination Held on 20.07.2011

Internal Examiner External Examiner

SYNOPSIS

This project was conducted in an around of Thodupuzha, Kottayam, Survey was carried out taking samples from the higher, middle and lower levels of society. The various components of Health were studied and analyzed in detail.

Data was collected by the use of separate questionnaires, and was distributed among housewives, Working women, Gents, Senior Citizens, and students. Interview method was also used to collect data.

The collected data was analyzed in detail and inferences were formed.

According to the observations, suggestions for improvement are provided by the researcher.

INTRODUCTION

A quiet revolution is underway in medical science. Only a relatively few years ago, the role of the psyche as a factor in physical diseases was almost universally downplayed. Today, however, with the widespread recognition of the importance of the work of Walter Cannon and Hans Selye on the psychic causation of stress and its role in maintaining homeostasis; with the advent and success of holistic medicine as an alternative approach; with the recognition of the value of MEDITATION in preventing disease; as well as with the series of advances in neurophysiology and clinical psychology which go a good way towards explanning the above insights, the recognition of the importance of mental and spiritual factors in fighting illness has grown into an imperative of medical treatment nearly everywhere in the world.

When Prince Charls of England, in his official capacity as president of the british Medical Association, called for a thorough review of treatment research to bring the personal factor into greater relief and understanding, he was merely formalizing that reveloution. In the United States, various events, such as the "miraculous" cures of Norman Cousins and others from serious diseases such as cancer through attitudinal healing

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methods, has brought the question dramatically into public awareness.

But even revoluotion move in the world of medicines, which employes a materialist base of assumptions and feels limited by the difficulty of harnessing subtle psychological data to a system of laboratory testing designed to measure more tangible phenomina.

A way exists to move more swiftly to gain the fruits of this revolution, both for patients and doctors. This is to gain a first-hand experimental understandind of the nature of the deepest levels of the mind, and of the ways of mobilizing one's spiritual resources to maintain positive health and overcome many kinds of desease.

This understanding and mastery of mind can be achieved easily and naturally, as numerous case histories have shown, through the correct and regular practice of Meditation. Meditation works so efficiently is that it is based on the accurate conceptual knowledge about the self's inner working and thus acts as a road map to lead one gently, safe and permanently back into one's "center", into one's orginal state of inner peace and self-harmony, wherein the powers of spiritual development and physical holistic health is the healthy soul. The pre-requisite of a healthy soul is

maintenance and restoration are all automatically available. The foudarion of systematic understanding of the nature and functioning of the soul.

Meditation practice is also advised by several medical consultants. For the treatment of specific psychological diseases some specific positive thoughts are suggested. Special Visualisation techniques are added during meditation practice for the treatment of psychosomatic diseases such as headache, acidity, peptic ulcer, high blood pressure, etc.

How to lead a healthy life is one of the most misunderstood subjects. Most people seek a comfortable and easy life and in doing so they adopt such a life style that causes or precipitates large number of deseases. High cholesterol and low fiber diet, lack of exercise, living in congested dwellings, fast urban life, smoking and consumption of alcoholic beverages are some of the disease-promoting factors.

In addiction to all these factors stress and strain of day-to-day life has increased to an epidemic proportion. Due to the development of science and technology, life has become much more easy but at the same time people have become materialistic. In modern society people are looking for happiness and pleasure from material comforts and

external objects. In psyological term our locus of control has become external. Our state of mind fluctuates according to external circumstances. Many people are addicted to substances like tobacco, alcohol and psycotrophic drugs for pieasure but they are extremely hazardous to health.

Experts in the field of stress management point out that no situation is stressful by itself. It is due to our way of thinking and attitudes, we perceive various circumstances as stress. By transforming our attitudes we can transform pain into pleasure, criticism into blessing and sorrow into bliss. The research study done by Dr.Herbert Benson and others, point out that we must learn and practice a technique that elicits relaxation responses.

The experiment of hundreds of doctors and scientists imply that MEDITATION is the most promising technique for transforming our attitudes towards stressful situations and elicit the relaxation response.

SCOPE OF THE STUDY

Health is our birthright. It is a treasure which neither science nor wealth can buy, and to get which most people would give up everything. Yet the subject of health was overlooked when the covenant of the League Of Nations was drafted after the first world war. Only at the last moment were sections on health added in. Health was again forgotten when the United Nation Charter was drafted at the end of world war II. Belatedly, the matter of world health was introduced during the San Francisco U.N, Conference in 1945.

A reawakening to the importance of health has occurred in the past few decades, a recognition that health is not merely a precious possession but a resource in which the whole human community has a stake. The spread of toxic substances in the environment, the nature and war imposed condition of malnutrition, over crowding and unhigenic surroundings have increased the strains upon this resources. Morover dangerous insects and bacteria have built up immunities to the agricultural chemicals and medicinal drugs on which we have depended for protection. And together with that, the costs of health care have risen dramatically. In short, we are wide open for a medical disaster.

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Given this situation, it is imperative that we takeanother look at this resource we call 'Health'. Just as in the field of energy resources, we are seeking alternative our dependence on oil, in the field of health, we must seek an alternative to traditional concept of health care. This means we must understand what health really is.

Aside from general agreement that it is something which should be promoted and maintained, there no universally accepted definition of health. Many experts employ the version of the definition offered by the World Health Organisation which states "Health is a state of complete physical, mental and social well being and not merely the absence of disease or infirmity". Other authorities add a fourth dimension to the definition, suggesting spiritual welbeing as essential to the true condition of human health.

The mind plays in the origin of physical illness. The mind is an entity separate from the brain mechanism. This study is to is to experience the method of applying this information practically to restore and maintain positive health. This study is to go deep into the health problems of people of different level and find out its solutions.

OBJECTIVES OF THE STUDY

HOLISTIC MEDICINE – THE NEED OF THE HOUR

According to an Arabian proverb, 'Where there is health, there is hope and where there is hope, there is everything.' Hence, good health should be the highest priority but researches imply that health is pushed to a secondary position on several occastions. Inspite of the known fact that insecticide DDT helps in controlling malaria, in north Africa several communities opposed it's sprey. Their argument was the spray killed Anopheles which is responsible for malaria as well as a special type of fly that is responsible for carrying pollen from male to female date palm. In those areas date is the source of food and financial gains. This is the example of priority given to economic gains over maintaing good health. This is also true for certain behavioural factors. Although many people know that specific behaviour is hazardous to health yet they indulge in it. They prefer to be sick rather than controlling the behaviour. Some significant examples are smoking,, alcoholism and sexually transmitted diseases. There is an urgent need to place health on the higher priority.

Certainly,there are remarkable achievements in some dimensions of health. As compared to year the 1947 there is almost 42% reduction in crude death rate in United States. On other parameters of Health

too we have reached oue goals. We're successful in eradicating smallpox. Several infective disease have become short ande less painful. It has been shown that the change in the scenario is due to the better living conditions and availability of some resources like safe drinking water and not due to the change in human behaviour.

Infact, during last several decades diseases related to life styles and stress – induced diseases have reached to an epidemic propotion. There is a relative and absolute increase in many diseases. The high blood pressure, coronary artery diseases, arthritis, obesity and all types of physiological diseases which also include violence, child abuse, atc. to name a few. Medical scientists, government and non governmental organization should focus their attention on cotrolling this factors.

Parallel to the advancement in medical science doctors have become more and more mechanichal and stereotype in treating the patients. They deal with the patiets as if they are dealing with a robot. As they depend increasingly on sophisticated digonostic tests and specialized knowledge, people tend to loose their identity as human beings.

In this modern Era the conviction was rapidly spreading that disease is just like the fault in the machine and that the doctor's job is to

just repair the fault. A professor of phycology told that in the near future a day may come when a patient suffrring from some problem in the right nostril will be refused treatment because the super specialist would be a doctor of left nostril.

Fortunately, in the last couple of decades it has been felt that patient need to be treated as a whole. Emotions, personality, lifestyle, behaviou, etc. plays a very important role in causing disease and hence there is a need to take care of these factors as well if one desires long term improvement in the patient's condition. Extensive researches in the field of stress and the significance of doctor- patient relationship is that of transforming the approach of some medical personnels.

The word 'Holistic' was described by Jan.c.Smurt, which means whole or complete. It is only after a few decades that the seed of holistic health movement was sown in California, USA. Now, the movement continue to spread and blossom throughout the world. Holistic Health Association have also been established in several coutries across the globe.

1.1 TAKING HOLISTIC HISTORY

Unless we take a complete and alround history of the patient, we won't be able to offer them the holistic treatment. Even the patients suffering from psychological problems feel that their past experiences and personality factors don't have any relevance to their present complaints. Hence it goes without saying that patients with physical complaints willo never attribute them to their past experiences and personality. Rarely patients themselves know that the particular disease is related to past experience and personality. But he may feel that it is a personal matter which need not be disclosed to the doctor. It is of vital importance to spare sme time and take the complete history of the patient which would also include his relationship with his family members and friends, parental teaching, his opinions about his parents, a brief life history and such other related speres of life. Rather than asking strait forward questions which can be replied yes or no we can formulate our questions in such a way so that the patient can give short descriptive answers. If we are very busy and hence unable to explore all the dimensions of the patients life, you can spread the detailed history taking in two or three sittings.

1.2 HOLISTIC DIAGONOSIS

During medical studies students are trained to diagonise the desease in the specific organs. We also accept the role of certain factors such as smoking, alcoholism, high calory, high fat diet, sedentary life style, wrong postures, stress and strain and so on. But doctors don't specially empasis these and other significant factors in diagonosis. There is the need to note such relevant factors along with the formal diagonosis. Recent or past stressful events, causative personality traits, relavent attitude, belief system, value system which needs a change etc. are to mention a few.

1.3UNDERSTANDING CULTURAL FACTORS

Holistic treatment becomes holistic in reality when doctors understand the significance of cultural factors, study them and appropriate utilization of it in diagonisis and treatment of patients is needed. Man has always lived with his fellow man as a part of a small or a big society. He has identified himself as a part of the society, consciously or unconsciously, accepted the habits and belief systems of the society and conditioned himself accordingly. This dependence of man on society is aptly described by Aristotle when he said, "The man who can live without society

is either a beast or god".

1.4 SOCIAL SUPPORT SYSTEM

Several research studies have shown that people who get support from their friends and family are less likely to become sick. Bereaved widows and widowers have increased possibility of suffering from several deseases because they don't receive the support of their spouse on whom they had depended so long. After the death of a near relative, if a person continuos to have enough social contacts amd receive support from them, he will not face the increased possibility of suffering from any diseases. Practice of Meditation, faith in God, a spiritual belief system, etc. also give tremendous mental support. Meditation practice fills one's mind with positive feelings and hence even in absence of friends one can maintain a sense of security and positive attitudes towards life. Practice of meditation, faith in god, a spiritual belief system, etc also give tremendous mental support. Meditation practice fills one's mind with positive feelings and hence and even in absence of friends one can maintain a sense of security and positive attitude towards life.

THE PHYSICAL EFFECTS OF PSYCHOLOGICAL STRESS

During the last few decades it has been increasingly recognized that health is immensely influenced by ones mental state. Hundreds of researches are done which imply that disease first originates in one's mind and then only it affects the physiological systems. Same truth is pointed in different medical terms: 'colonization of bacteria by itself does not lead to signs and symptoms of ineffective disorder'.

Mind can make one sick or soread the healing processes. This most ancient truth is now being accepted by the doctors of modern medicine.

Psychological stress leads to undermentioned symptoms or diseases.

PSYCHOLOGICAL STRESS LEADS TO UNDERMENTIONED SYMTOMS OR DISEASES.

SYSTEM

NAME OF THE DISEASES

DIGESTIVE Anorexia Nervosa, Peptic Ulcer, Ulcerative

Colitis, Irritable Colon, Cardiopasm, Spastic

Colitis, Spastic Cardiopasm, Spastic Colitis,

Nervous Vomiting & Diarrhoea.

RESPIRATORY

Asthmatic Wheezing, Bronchial Asthma.

CARDIOVASCULAR

Angina Pectoris, Coronary Insufficiency,
Essential Hypertension, Techycardia,
Arrhythmias, Vascular Headache.

ENDOCRINE

Hyperthyroidism, Diabetes Mellitus,
Menstrual Irregularities.

SKIN CONNECTIVE

Lupus Erythematosus, Dermatomyositis,
Scleroderma, Polyarteritis Nodosa,
Lupus Erythematosus, Dermatomyo

RESEARCH METHODOLOGY

A descriptive research method was used in this study. A naturalistic approach was adopted, by coming in contact with the subjects and studying their problems and lifestyle.

A local area was selected as the field and subjects were selected randomly from all the three classes of the society, the upper, middle and lower class.

Housewives, Working women, Gents, Senior citizens, girls and boys from different backgrounds were the targeted group.

A small group of people who regularly attend spiritual class were also studied.

Data Collection

The data was collected for this study from both primary and secondary sources. The target groups were given questionnaires and data was collected using the survey method.

The interview method was also used to collect data. People from different walks of life were approached and were asked questions regarding their attitude and approach towards the problems faced by people.

The same questionnaires which were given to the target groups were also given to a group of people who regularly attend spiritual education classes in The Brahmakumaris Ishwariya Vishwa Vidyalaya to find out how far spiritual empowerment will suffice in the eradication of root level problems faced by the people.

Books and previous research papers on the topic of Effect of meditation on health were also used to collect data for this study.

EFFECT OF MEDITATION ON HEALTH

| QUESTIONNAIRE | | | | | | |
|--|--|--|--|--|--|--|
| Name & address : Age: Academic Qualification : Phone No: E mail: Occupation: | | | | | | |
| Are you aware of Meditation? yes/no/do not know. Do you practice Meditation? | | | | | | |
| Regularly Once in a week Occationally | | | | | | |
| 3. Do you think Meditation helps you in any way? Yes/no/do not know 4. Meditation helps you in maintaining your Physical Health. Do you agree? Yes/no/do not know 5. Have practicing of meditation helped you in curing any dis (B.P, Sugar, Heart disease etc) Yes/no/do not 6. Meditation also helps us to maintain mental health. Do you agree? Yes/no/do'ntknow 7.Have you felt any positive change in your emotional stability by practicin.Meditation.? yes/no/do notknow 8.Do you feel that meditation is helping you to control your Anger?.Yes/no/do'ntknow | | | | | | |
| | | | | | | |

By practicing meditation could you exercise control over your stress? Yes/no/do not

- . By practicing meditation could you exercise control over your stress? Yes/no/do not know
- 11.Do you think Meditation has helped to increase Harmony in your family life? yes/no/do not know
- 12. Meditation could help you in developing your social relationships? Yes/no/do not know
- 13.After your practice of Meditation are you able to face the adverse situations more positively? Yes/no/do not know
- 14. Our body & mind is bein healed through meditation. Yes/no/do not know
- 15. Before practicing Meditation were you suffering from Insomnia? Yes/no/do not know
- 16. Do you find any change after practicing? Yes/no/do not know
- 17. Were you a Drug addict earlier? Yes/no/do not know
- 18. As a result of Meditation, could you find any relief from your addictio22. Meditation has helped you to improve your memory power, concentration &
- 23.grasping power.yes/no/do not know
- . Had Meditation changed your outlook towards life? Yes/no/do not know

Signatur

LIMITATIONS OF THE STUDY

The present study is limited to a small locality. Even though pains have been taken to pick subjects in a random manner, the selected locality doesn't provide much scope for a very detailed and extensive study of the subject matter because of the fact that it is not a backward area and the results may not represent the typical condition of people in general.

From a population of around 3,25,000, the study was conducted on a sample of just 180 subjects to whom questionnaires were issued, and a few were interviewed. So the study cannot be said to be comprehensive, since the life and methods of a very small group cannot be considered to represent the general condition of people.

Since the study was conducted in a short span of time, there was no scope of observing the major changes happening in the lifestyles of people and its influence on the society over a period of time.

The limitations of the questionnaire method also have put a restraint on this study. Knowing the 'comfortable' or 'right' response, subjects may not always give the 'real' response.

The lack of understanding and ignorance of the subjects, especially in the lower class, also put a limitation in the study.

Analysis and Interpretation of Data

A sample size of 50 was taken at random for the above study. It is encouraging that most of them practice meditation in some form or other and have the awareness of meditation but some understand meditation as prayer.

All the people are well educated and hence it was easy to get the feedback. The questions were simple and straight forward so that each one can understand and the response was extremely encouraging. The answers are also given honestly and seems to relevant to their life style. Some of them also enquired about the literature CDs to practice meditation. Most of them are happy about their method and practice of meditation.

Few people have not answered all the questions and left some questions hence the data is compiled based on the responses for that particular question. There are also very few who doesn't practice or understand meditation and hence filled up 1 or 2 questions and given the questionnaire, their feed back was not taken into consideration in

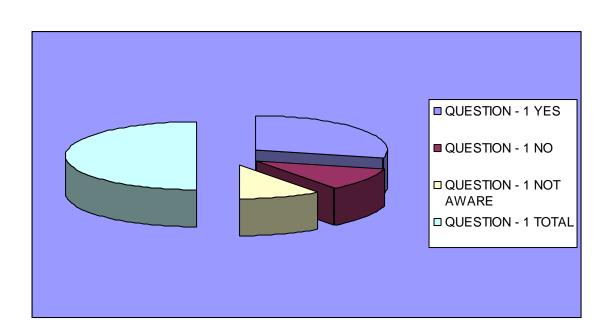
preparing the report. It was amazing for a few people to know that meditation can cure many diseases and it is our mind that creates many problems. People were very eager to learn meditation.

For a small group of people demonstration on meditation was given. They promised that they will practice it regularly in their home. Among them reported about the difference they felt after practicing meditation.

| DATA COMPILATION | | | | |
|------------------|-----|-------|-----------|-------|
| QUESTION | YES | NO NO | NOT AWARE | TOTAL |
| 1 | 29 | 11 | 10 | 50 |
| 2 | 26 | 12 | 12 | 50 |
| 3 | 30 | 15 | 5 | 50 |
| 4 | 38 | 3 | 9 | 50 |
| 5 | 42 | 4 | 4 | 50 |
| 6 | 42 | 4 | 4 | 50 |
| 7 | 27 | 10 | 13 | 50 |
| 8 | 25 | 14 | 11 | 50 |
| 9 | 30 | 15 | 5 | 50 |
| 10 | 35 | 15 | - | 50 |
| 11 | 43 | 7 | - | 50 |
| 12 | 45 | - | 5 | 50 |
| 13 | 10 | 40 | - | 50 |
| 14 | 45 | 5 | - | 50 |
| 15 | 30 | 20 | - | 50 |
| 16 | 45 | 5 | - | 50 |
| 17 | 35 | 10 | 5 | 50 |
| 18 | 42 | 8 | - | 50 |
| 19 | 38 | 6 | 6 | 50 |
| 20 | 42 | - | 8 | 50 |

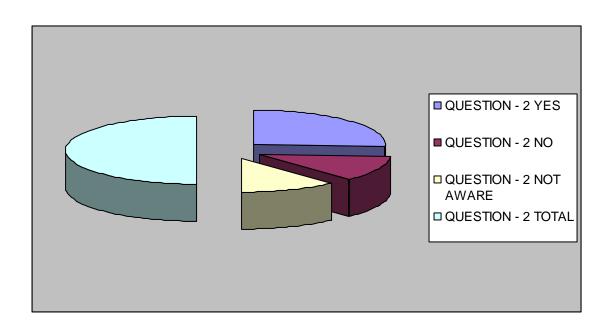
| QUESTION - 1 | | | | | |
|--------------|--------|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 29 | 11 | 10 | 50 | | |
| 70% | 20.00% | 10.00% | 100.00% | | |

On Data Analysis of the above table it reveals that, Out of **50** respondents, **29** respondents (**70** per cent) are in agreement with the statement and **11** respondents (**20** per cent) are not in agreement with the statement. Rest **10** respondents (**10**per cent) did not offer any comments.



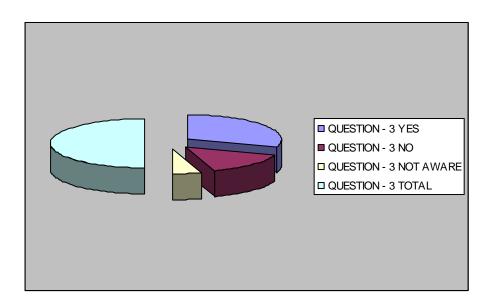
| QUESTION - 2 | | | | |
|--------------|--------|--------------|---------|--|
| | | NOT | | |
| YES | NO | AWARE | TOTAL | |
| 26 | 12 | 12 | 50 | |
| 60% | 20.00% | 20.00% | 100.00% | |

On data analysis of the above table it reveals that, out of **50** respondents, **26** respondents (**60** per cent) are in agreement with the statement and **12** respondents (**20** per cent) are not in agreement with the statement. Rest **12** respondents (**20** per cent) did not offer any comments.



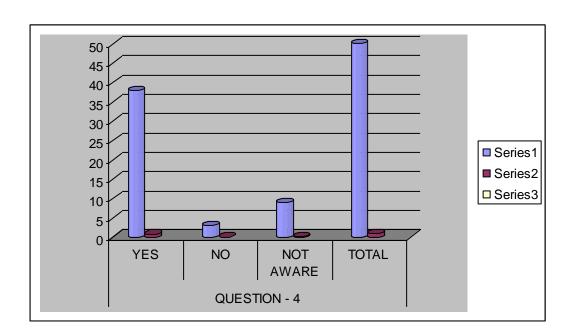
| QUESTION - 3 | | | | | |
|--------------|--------|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 30 | 15 | 5 | 50 | | |
| 75% | 15.00% | 10.00% | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **30** respondants (**75** per cent) are in agreement with the statement and **15** respondants (**15** per cent) are not in agreement with the statement. Rest **5** respondants (**10** per cent) did not offer any comments.



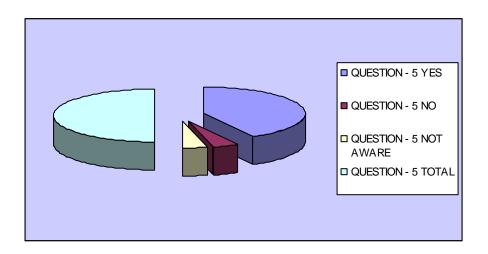
| QUESTION - 4 | | | | | |
|--------------|-------|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 38 | 3 | 9 | 50 | | |
| 80% | 5.00% | 15.00% | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **38** respondants (**80** per cent) are in agreement with the statement and **3** respondants (**5** per cent) are not in agreement with the statement. Rest **9** respondants (**15** per cent) did not offer any comments.



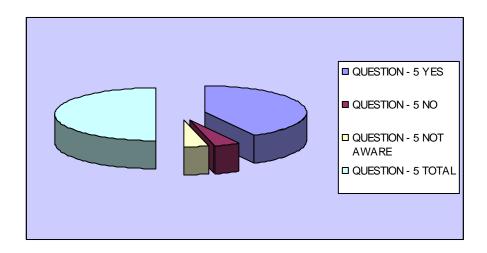
| QUESTION - 5 | | | | | |
|--------------|-------|------------------|--------------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 42 | 4 | 4 | 50 | | |
| 90% | 5.00% | 5.00% | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **42** respondants (**90** per cent) are in agreement with the statement and **4** respondants (**5** per cent) are not in agreement with the statement. Rest **4** respondants (**5** per cent) did not offer any comments.



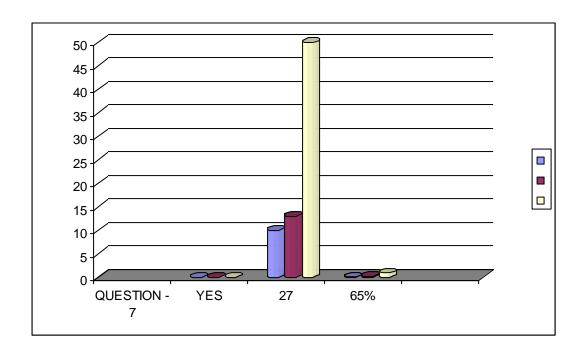
| QUESTION - 6 | | | | | | |
|------------------------|-------|-------|---------|--|--|--|
| YES NO NOT AWARE TOTAL | | | | | | |
| 42 | 4 | 4 | 50 | | | |
| 90% | 5.00% | 5.00% | 100.00% | | | |

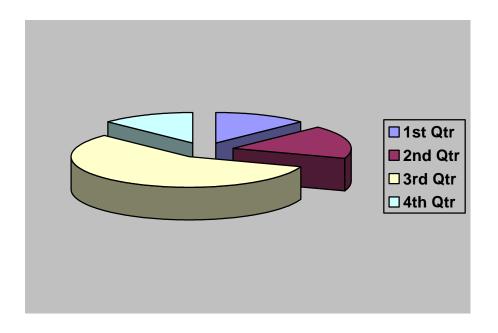
On data analysis of the above table it reveals that, out of **50** respondants **42** respondants (**90** per cent) are in agreement with the statement and **4** respondants (**5** per cent) are not in agreement with the statement. Rest **4** respondants (**5** per cent) did not offer any comments.



| | QUESTION - 7 | | | | | |
|-----|--------------|-----------|---------|--|--|--|
| YES | NO | NOT AWARE | TOTAL | | | |
| 27 | 10 | 13 | 50 | | | |
| 65% | 10.00% | 25.00% | 100.00% | | | |

On data analysis of the above table it reveals that, out of **50** respondants **27** respondants (**65** per cent) are in agreement with the statement and **10** respondants (**10** per cent) are not in agreement with the staterespondants(**25**percent)didnotoffer any comments.





| | | | QUESTION - 8 | |
|-----|--------|------------------|--------------|---------|
| YES | NO | NOT AWARE | | TOTAL |
| 25 | 14 | 11 | | 50 |
| 50% | 30.00% | 20.00% | | 100.00% |

On data analysis of the above table it reveals that, out of **50** respondants **25** respondants (**50** per cent) are in agreement with the statement and **14** respondants (**30** per cent) are not in agreement with the statement. Rest **11** respondants (**20** per cent) did not offer any comments.

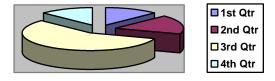
| | QUESTION - | - 9 |
|--------|------------|---------|
| NO | NOT AWARE | TOTAL |
| 15 | 5 | 50 |
| 20.00% | 5.00% | 100.00% |

YES 30 75%



On data analysis of the above table it reveals that, out of **50** respondants **30** respondants (**75** per cent) are in agreement with the statement and **15** respondants (**20** per cent) are not in agreement with the statement. Rest **5** respondants (**5** per cent) did not offer an

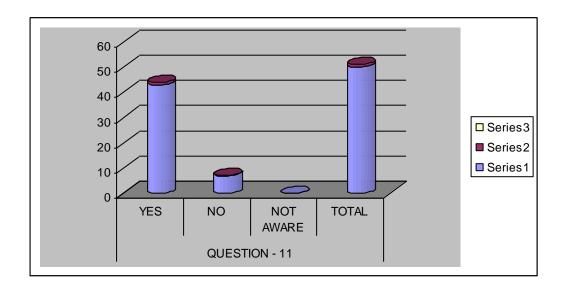
QUESTION - 10
YES NO NOT AWARE TOTAL
35 15 - 50
60% 40.00% - 100.00%



On data analysis of the above table it reveals that, out of 50 respondants 35 respondants (60 per cent) are in agreement with the statement and 15 respondants (40 cent) agreement per are not in with thestaterespondants(25percent) offer any did not comments.

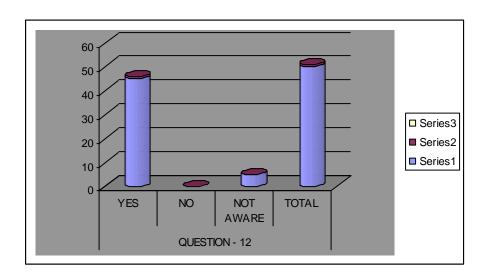
| QUESTION - 11 | | | | |
|---------------|--------|------------------|---------|--|
| YES | NO | NOT AWARE | TOTAL | |
| 43 | 7 | - | 50 | |
| 90% | 10.00% | - | 100.00% | |

On data analysis of the above table it reveals that, out of **50** respondants **43** respondants (**90** per cent) are in agreement with the statement and **7** respondants (**10** per cent) are not in agreement with the statement and 0 respondants(**0** percent) did not offer any comments.



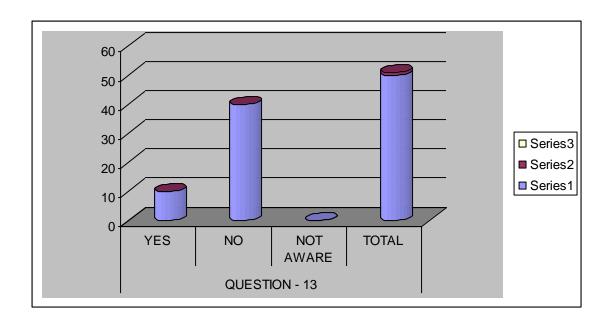
| QUESTION - 12 | | | | | |
|---------------|----|------------------|--------------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 45 | | 5 | 50 | | |
| 95% | - | 5% | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **45** respondants (**95** per cent) are in agreement with the statement, **0** respondants (**0** per cent) are not in agreement with the statement and 5 respondants(**5** percent) did not offer any comments.



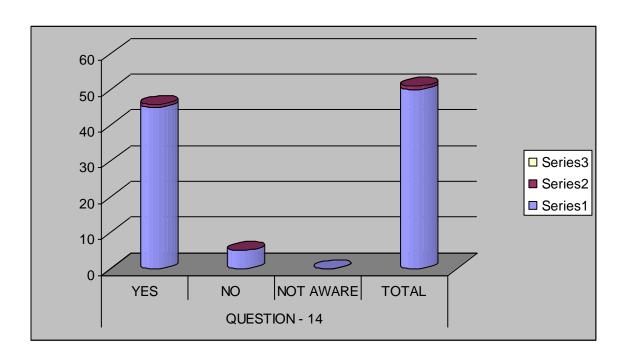
| | Q | QUESTION - 13 | | | |
|-----|-----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 10 | 40 | - | 50 | | |
| 10% | 90% | - | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **10** respondants (**10** per cent) are in agreement with the statement , **40** respondants (**90** per cent) are not in agreement with the statement and 0 respondants(**0** percent) did not offer any comments.



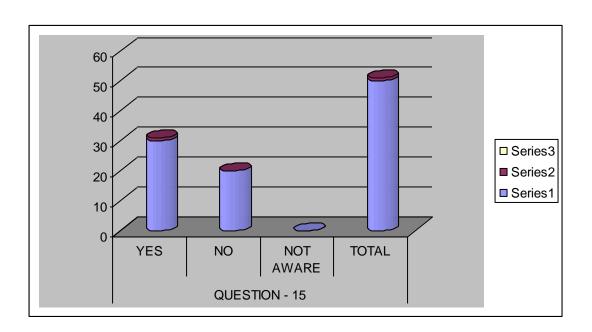
| | C | UESTION - 14 | |
|-----|----|------------------|---------|
| YES | NO | NOT AWARE | TOTAL |
| 45 | 5 | - | 50 |
| 95% | 5% | - | 100.00% |

On data analysis of the above table it reveals that, out of **50** respondants **45** respondants (**95** per cent) are in agreement with the statement, **5** respondants (**5** per cent) are not in agreement with the statement and 0 respondants(**0** percent) did not offer any comments.



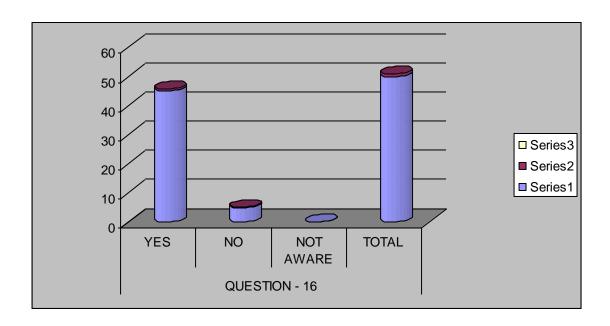
| | Q | QUESTION - 15 | | | |
|-----|-----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 30 | 20 | - | 50 | | |
| 70% | 30% | - | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **30** respondants (**70** per cent) are in agreement with the statement , **20** respondants (**30** per cent) are not in agreement with the statement and 0 respondants(**0** percent) did not offer any comments.



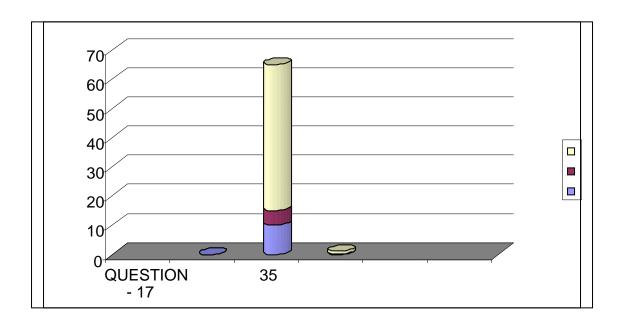
| QUESTION - 16 | | | | | |
|---------------|----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 45 | 5 | - | 50 | | |
| 95% | 5% | - | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **45** respondants (**95** per cent) are in agreement with the statement , **5** respondants (**5** per cent) are not in agreement with the statement and 0 respondants(**0** percent) did not offer any comments.



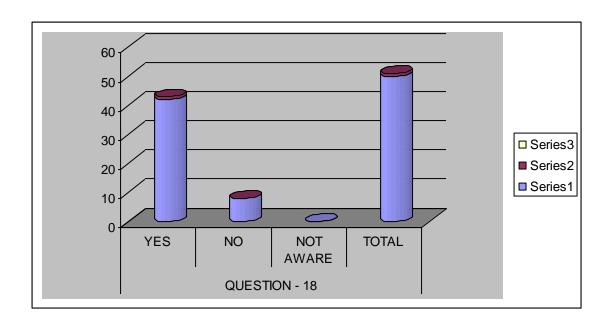
| QUESTION - 17 | | | | | |
|---------------|-----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 35 | 10 | 5 | 50 | | |
| 85% | 10% | 5% | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **35** respondants (**85** per cent) are in agreement with the statement , **10** respondants (**10** per cent) are not in agreement with the statement and **5** respondants (**5** percent) did not offer any comments.



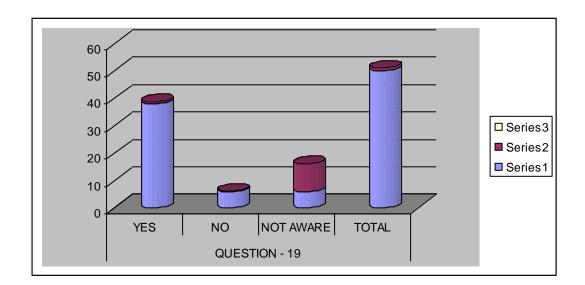
| QUESTION - 18 | | | | | |
|---------------|-----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 42 | 8 | - | 50 | | |
| 90% | 10% | - | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **42** respondants (**90** per cent) are in agreement with the statement , **8** respondants (**10** per cent) are not in agreement with the statement and 0 respondants (**0** percent) did not offer any comments.



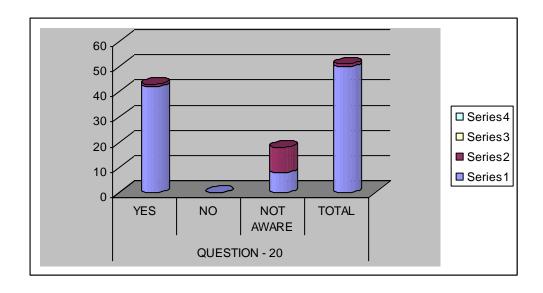
| QUESTION - 19 | | | | | |
|---------------|-----|------------------|---------|--|--|
| YES | NO | NOT AWARE | TOTAL | | |
| 38 | 6 | 6 | 50 | | |
| 80% | 10% | 10 | 100.00% | | |

On data analysis of the above table it reveals that, out of **50** respondants **38** respondants (**80** per cent) are in agreement with the statement , **6** respondants (**10** per cent) are not in agreement with the statement and **6** respondants (**10** percent) did not offer any comments.



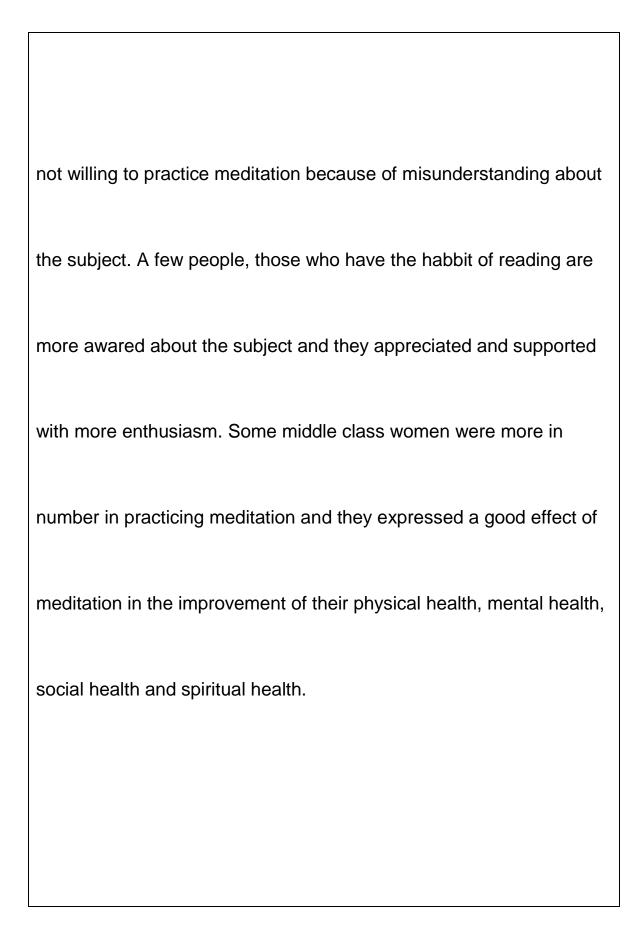
| YES | NO | NOT AWARE | TOTAL |
|-----|----|------------------|---------|
| 42 | - | 8 | 50 |
| 90% | - | 10 | 100.00% |

On data analysis of the above table it reveals that, out of **50** respondants **42** respondants (**90** per cent) are in agreement with the statement , **0** respondants (**0** per cent) are not in agreement with the statement and **8** respondants (**10** percent) did not offer any comments.



INTERPRETATION

The subject meditation is known to many of the people. But the effect of meditation on health is not known to all. The people practicing meditation surely experience a good result in their mind and body. After knowing about the benefits of meditation, some expressed their will in learning about meditation. Youths are seemed to be more unawared about the topic. They feel it something which is only meant for the adults and old ones. This is lack of proper awareness. The people affected with some or other diseases are also



Suggestions

- It is better that some course on meditation was to be conducted for 2 weeks so that people have understood then after 1 month there should have been questionnaire so that every one have practiced/understood before answering.
- Everything in the world begins from learning and training. A trained response was more fruitful than the untrained response.

Similar studies reports done in the past on the topic has to be provided to the participants so that he/she can have the reference and the guidelines to easily emulate.

Some of the reports should be placed on the internet so that all can see and acts as resource to others who are interested in practice of meditation.

Proper publicity should be given to the course and projects done by various participants

CONCLUSION

It was indeed a difficult choice to take up the topic on meditation but it was most important in the present days world where under so many stressful and tensed life the importance of doing meditation. The undersigned tried to bring the awareness of meditation among the people and for that reason this topic was chosen. The difficulty was also there to prepare questionnaire so that every one has understood it properly for enabling them to answer. The questions were also given 3 options as answers .ie., Almost always, sometimes and never.

BIBLIOGRAPHY

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Practical Meditation

Meditation and Values in Society

• Articles

Articles from Wikipedia

• News Papers

Some Articles from Indian Express

• Reports

Some reports released by Spark

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APPENDIX

QUESTIONNAIRE

BIBLIOGRAPHY

- ❖ Books
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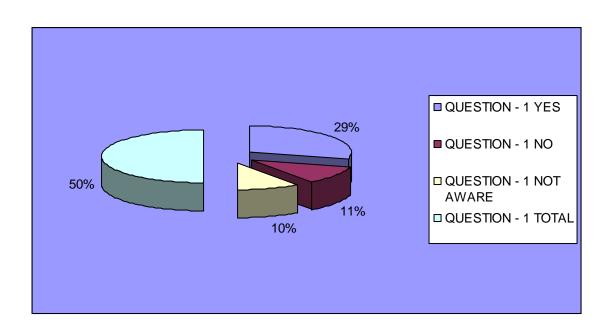
<u>Conclusion</u>

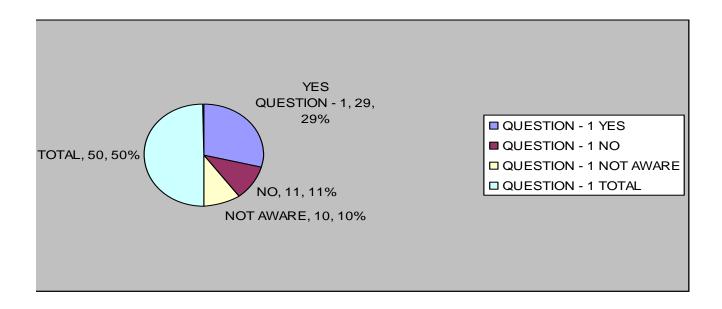
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Similar studies reports done in the past on the topic has to be provided to the participants so that he/she can have the reference and the guidelines to easily emulate.

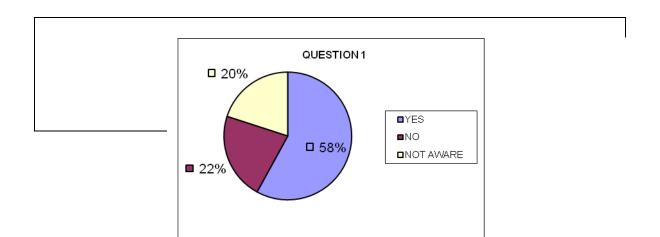
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