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Journal of Religion and Health

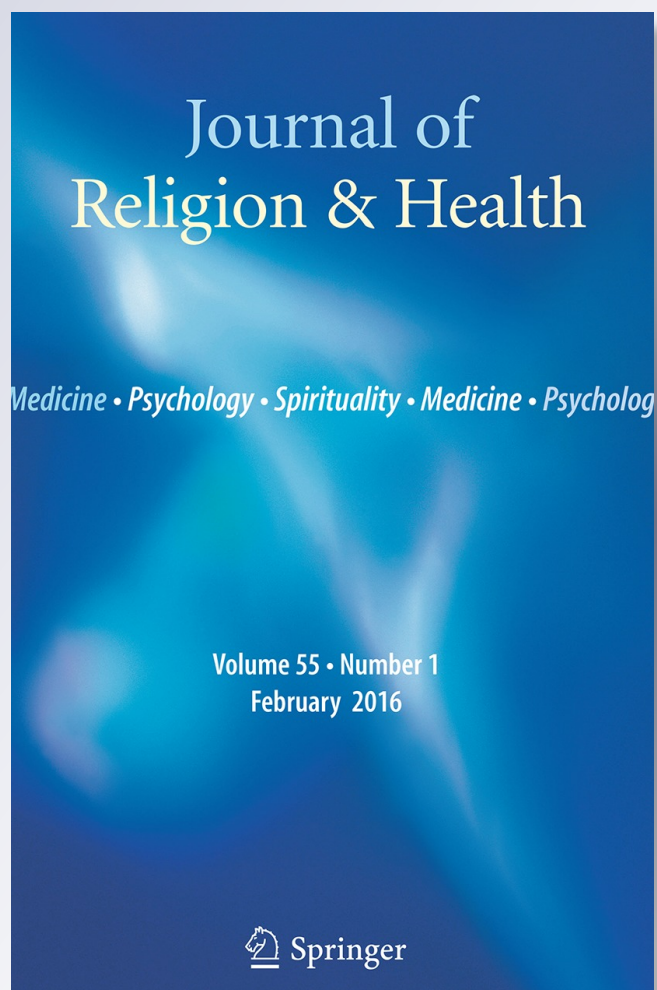
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Effect of Dynamic Meditation on Mental Health

Naved Iqbal¹ · Archana Singh¹ · Sheema Aleem¹

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Abstract Although traditional meditation has been found to be effective in improving physical and mental health of subjects, there was a paucity of research of the effect of active or dynamic meditation on these variables. Therefore, the present study was aimed at studying the effect of dynamic meditation on mental health of the subjects. Total sample of the present study comprised 60 subjects, 30 each in experimental and control group. Subjects in experimental group were given 21-day training in dynamic meditation. Mental health of the experimental and control group subjects was measured in pre- and post-condition with the help of Mental Health Inventory developed by Jagadish and Srivastava (Mental Health inventory, Manovaigyanik Parikshan Sansthan, Varanasi, 1983). Obtained data were analyzed with the help of ANCOVA. In post-condition, experimental group scored better than control group on integration of personality, autonomy and environmental mastery. Effect sizes of dynamic meditation on these dimensions of mental health were large. However, experimental group and control group did not differ significantly on positive self-evaluation, perception of reality and group-oriented attitude dimensions of mental health in post-condition. Overall, dynamic meditation training was effective in improving mental health of the subjects.

Keywords Dynamic meditation · Mental health · Experimental group · Control group

Introduction

Meditation is a holistic discipline by which the practitioner attempts to get beyond the reflexive, “thinking” mind into a deeper state of relaxation or awareness. Shapiro (1982) defines meditation as “a family of techniques which has in common a conscious attempt to focus attention in a non-analytical way and an attempt not to dwell on discursive,

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rumination thought.” One common misconception is that all meditation procedures are more or less “the same.” This is simply incorrect, for major meditation procedures often differ in important way (Jonathan 2006). Different meditation traditions also often have very different goals, ranging from physical health and mental well-being to harmony with nature, higher states of consciousness and experience of God.

Broadly, all the meditation techniques can be classified into two basic approaches: concentrative meditation and mindfulness meditation (Goleman 1996).

Concentrative Meditation

In concentrative meditation, the attention is focused on the breath, an image or a sound (mantra), in order to still the mind and allow a greater awareness and clarity to emerge.

Mindfulness Meditation

Mindfulness meditation involves expansion of the attention or awareness to become aware of the ongoing sensation and feeling, images, thoughts, sounds, smells and so forth without becoming involved in thinking about them (Kutz et al. 1985).

Apart from these broad categories, there are many other meditation techniques that do not fit in above categories, but they exist with the same goal of attaining a state of mind achieved during meditation. These meditation techniques that does not assume a fixed posture comes under active meditation.

Active/Dynamic Meditation

Active/dynamic meditation refers to any meditation technique which does not have one's body assuming a static posture. Although they are many, dynamic meditation introduced by OSHO is one of the most popular active mediation techniques. He said that if people are repressed, psychologically are carrying a lot of burden, then they need catharsis. So dynamic meditation is just to help them clean the place (OSHO 2003).

Dynamic meditation lasts 1 h and is in five stages. It can be done alone and will be even more powerful if it is done with others. It is an individual experience so you should remain oblivious of others around you and keep your eyes closed throughout, preferably using a blindfold. It is best to have an empty stomach and wear loose, comfortable clothing.

First Stage: 10 Min

Breathe chaotically through the nose, concentrating always on exhalation. The body will take care of the inhalation. The breath should move deeply into the lungs. Be as fast as you can in your breathing, making sure the breathing stays deep. Do this as fast and as hard as you possibly can—and then a little harder, until you literally become the breathing. Use your natural body movements to help you to build up your energy. Feel it building up, but do not let go during the first stage.

Second Stage: 10 Min

Explode! Express everything that needs to be thrown out. Go totally mad. Scream, shout, cry, jump, shake, dance, sing, laugh and throw yourself around. Hold nothing back; keep

your whole body moving. A little acting often helps to get you started. Never allow your mind to interfere with what is happening. Be total, be wholehearted.

Third Stage: 10 Min

With raised arms, jump up and down shouting the mantra, “Hoo! Hoo! Hoo!” as deeply as possible. Each time you land, on the flats of your feet, let the sound hammer deep. Give all you have; exhaust yourself totally.

Fourth Stage: 15 Min

Stop! Freeze wherever you are, in whatever position you find yourself. Don't arrange the body in any way. A cough, a movement—anything will dissipate the energy flow and the effort will be lost. Be a witness to everything that is happening to you.

Fifth Stage: 15 Min

Celebrate through dance, expressing your gratitude toward the whole. Carry your happiness with you throughout the day.

Dynamic meditation provides the meditator an opportunity to catharsis and purify his mind and body which is according to Osho essential to gain the meditative state of mind. Thus, this purification of mind and body helps the individual to wash out his mind from anxiety and attain a positive mental health.

Mental Health

Mental health is a complex concept which has been defined differently on different times. Before the second half of the twentieth century, mental health was explained in terms of deficit model and considered as the absence of mental disease. But in the present era, it has been described according to positive holistic model of mental health. Definitions of positive mental health are still under debate, but there has been a movement away from a focus solely on individual attributes such as coping skills or resilience, to one which incorporates environmental and social conditions (Secker 1998).

The World Health Organization (WHO) (2005) defines mental health as “a being of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”

Meditation was spread to Western world thousands of years after it was practiced in the East. It finally started to gain popularity in the West in the mid-twentieth century. Many researchers began testing the effects of meditation and found about its numerous benefits. Traditional meditation has been found to be effective in reducing stress and enhancing well-being (Carmody and Baer 2008; Jain et al. 2007), controlling addiction (Marlatt and Chawla 2007; Simpson et al. 2007), controlling aggression (Singh et al. 2007), controlling suicidality and depression (Williams et al. 2006), and other psychiatric problems (Dalton and Beach 2006).

These studies were based on yoga and Buddhist meditation. But there was a paucity of research on various dynamic or active forms of meditation. Present researcher could find only one study conducted by Vyas (2007) on dynamic meditation. As noted by researchers,

different procedures of meditation might well be expected to produce different results with regard to different variables and thus ought to be evaluated individually (Jonathan 2006).

In view of the above, the present investigation was planned to study the effect of dynamic meditation on mental health.

Method

Sample and Design

The sample of the study comprised 60 subjects of both sexes, within age group of 18–55. There were 30 subjects in the experimental group and 30 in control group. The experimental group was contacted from Osho Dhyandeeep Kendra, Bareilly, UP region (India), and control group matched with important characteristics with experimental group collected from different localities of Bareilly city. The mean age of experimental group subjects was 35.46, and the mean age of control group subjects was 31.26. There were 11 male and 19 female subjects in experimental group and 12 male and 18 female subjects in control group. In experimental group, the number of undergraduate, graduate and postgraduate subjects was 3, 20 and 7, respectively. In control group, the number of undergraduate, graduate and postgraduate subjects was 6, 11 and 13, respectively. Subjects who had serious physical or psychological problems were excluded from the study.

The present study was a pretest–posttest control group design.

Measure

Mental Health Inventory

In the present study, mental health was measured by Mental Health Inventory developed by Jagadish and Srivastava (1983). Both Hindi and English version of this inventory are available. Hindi version of this inventory was used in the present investigation. This inventory consist of 56 items, which measures mental health on six dimensions, i.e., positive self-evaluation, perception of reality, integration of personality, autonomy, group-oriented attitude and environmental mastery. The higher score on the inventory indicates better mental health, whereas lower score on the inventory indicates poor mental health.

In the present scale, four alternative responses have been given to each statement. Four scores to “Always,” 3 score to “Often” 2 scores to “Rarely” and 1 score to “Never” marked responses as to be assigned for true-keyed (positive) statements, whereas 1, 2, 3 and 4 scores for “Always,” “Often,” “Rarely” and never, respectively, in case of false-keyed (negative) statements. This scale contains 24 positive and 32 negative keyed items to have sum total of 56.

Item nos. 1, 7, 13, 19, 23, 27, 32, 38, 45 and 51 measure positive self-evaluation

Item 1: I feel lack of confidence

Item 27: I make definite plans about my future

Item nos. 6, 8, 14, 24, 35, 41, 46 and 52 measure perception of reality

Item 6: I mold myself according to circumstances

Item 14: In adverse circumstances, I act without keeping in view of the real facts

Item nos. 2, 9, 15, 18, 20, 25, 28, 33, 36, 40, 47 and 53 measure integration of personality

Item 15: I feel irritation

Item 20: I utilize my reasoning even in difficult times

Item nos. 3, 10, 29, 42, 48 and 54 measure autonomy

Item 3: I am not able to take quick decision on any subject

Item 29: I take decision easily even in difficult circumstances

Item nos. 4, 11, 16, 21, 26, 30, 39, 43, 49 and 55 measure group-oriented attitude

Item 21: I feel that my relations with others are not satisfactory

Item 26: My friends/relatives remain ready to help me in the difficult times

Item nos. 5, 12, 17, 22, 31, 34, 37, 44, 50 and 56 measure environmental mastery

Item 22: My responsibilities are like burden to me

Item 31: I am satisfied with most of the aspects of my life

Construct validity of the inventory was determined by finding coefficient of correlation between scores of Mental Health Inventory and General Health Questionnaire (Goldberg 1978). It was found to be .54.

Besides, the inventory was also validated against “Personal Adjustment” scale (a sub-scale of SD Inventory) developed by Pestonjee (1973). The two inventory scores yield positive correlation of .57 revealing moderate validity.

Reliability for the dimensions of mental health inventory on present sample

Mental health dimensions	Pre-scale Cronbach's alpha	Post-scale Cronbach's alpha
Positive self-evaluation	.72	.68
Integration of personality	.77	.66
Perception of reality	.67	.66
Group-oriented attitude	.63	.64
Autonomy	.66	.63
Environmental mastery	.55	.58

The Cronbach's alpha for various dimensions of mental health varies from .55 to .77 which shows that the internal consistency reliability of the mental health dimensions is satisfactory.

Procedure

Subjects were contacted individually. Informed consent was taken from all the subjects after explaining the purpose of the study. They were told that their identity will not be disclosed in any kind of publication of the study without their consent. Experimental group subjects were contacted from Osho Dhyandeep Kendra, Bareilly, where they received a 21-day dynamic meditation training under the guidance of Swami Gyan Samarpan coordinator of Osho Dhyandeep Kendra. Control group matched in terms of important

characteristics with experimental group was contacted from different localities of Bareilly city. Mental Health Inventory was administered to experimental and control group before and after dynamic meditation training. Post-assessment was done after 21 days of dynamic meditation training. Obtained data were analyzed with the help of ANCOVA.

Results

The obtained results are being presented in following tables.

Table 2 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 2 that there was no significant F ratio ($F = .60, p = .43$) between variance of experimental and control group on positive self-evaluation. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 3 shows that the significance level was .29 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 4, which shows that mean of experimental group (31.27) was greater than the control group (30.52).

Table 5 shows that there was no significant difference between the two groups on post-assessment scores of positive self-evaluation ($F = 1.38, p = .24$).

Table 7 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 7 that there was no significant F ratio ($F = 3.02, p = .08$) between variance of experimental and control group on perception of reality. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 8 shows that the significance level was .08 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 9, which shows that mean of experimental group (24.61) was almost equivalent than the control group (24.08).

Table 10 shows that there was no significant difference between the two groups on post-assessment scores of perception of reality ($F = .95, p = .33$).

Table 12 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 12 that there was no significant F ratio ($F = .81, p > .05$) between variance of experimental and control group on integration of personality. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 13 shows that the significance level was .34 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

Table 1 Mean and SD of experimental and control group for positive self-evaluation

Group	Condition	Mean	SD	N
Experimental	Pre	29.8	3.9	30
	Post	30.6	4.7	30
Control	Pre	31.2	4.4	30
	Post	31.2	4.4	30

Table 2 Comparison between control group and experimental group on positive self-evaluation (covariate in pre-condition)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.
Group * pse1	3.55	1	3.55	.60	.43

Bold values indicate statistical non-significance

Table 3 Levene's test of equality of error variances

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
.63	1	58	.29

Table 4 Estimated marginal mean

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	31.27	.44	30.38	32.15
Control group	30.52	.44	29.64	31.41

Table 5 Comparison between control group and experimental group on positive self-evaluation (post)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.	Partial eta-squared
Group	7.99	1	7.99	1.38	.24	.02

Bold values indicate statistical non-significance

Table 6 Mean and SD of experimental and control group for perception of reality

Group	Condition	Mean	SD	<i>N</i>
Experimental	Pre	23.0	4.2	30
	Post	23.6	4.2	30
Control	Pre	25.3	3.4	30
	Post	25.1	3.5	30

Table 7 Comparison between control group and experimental group on perception of reality (covariate in pre-condition)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.
Group * pr1	12.18	1	12.18	3.02	.08

Bold values indicate statistical non-significance

Table 8 Levene's test of equality of error variances

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
3.27	1	58	.08

Table 9 Estimated marginal mean

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	24.61	.38	23.85	25.38
Control group	24.08	.38	23.31	24.84

Table 10 Comparison between control group and experimental group on perception of reality (post)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.	Partial eta-squared
Group	3.98	1	3.98	.95	.33	.01

Bold values indicate statistical non-significance

Table 11 Mean and SD of experimental and control group for integration of personality

Group	Condition	Mean	SD	<i>N</i>
Experimental	Pre	33.0	5.5	30
	Post	36.7	4.5	30
Control	Pre	35.5	4.9	30
	Post	35.6	4.7	30

Table 12 Comparison between control group and experimental group on integration of personality (covariate in pre-condition)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.
Group * ip1	1.96	1	1.96	.81	.36

Bold values indicate statistical non-significance

Table 13 Levene's test of equality of error variances

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
.93	1	58	.34

Table 14 Estimated marginal mean

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	37.56	.57	36.42	38.71
Control group	34.73	.57	33.59	35.87

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 14, which shows that mean of experimental group (37.56) was greater than the control group (34.73).

Table 15 shows that there was a significant difference between the two groups on post-assessment scores on integration of personality ($F = 12.04, p = .001$); as per Table 11, the integration of personality scores of experimental group was higher than the control

Table 15 Comparison between control group and experimental group on integration of personality (post)

Source	Type III sum of squares	<i>df</i>	Mean square	<i>F</i>	Sig.	Partial eta-squared
Group	113.86	1	113.86	12.04	.001	.17

Bold values indicate statistical significance

Table 16 Mean and SD of experimental and control group for autonomy

Group	Condition	Mean	SD	<i>N</i>
Experimental	Pre	16.7	3.0	30
	Post	18.0	2.8	30
Control	Pre	17.7	2.4	30
	Post	17.8	2.4	30

Table 17 Comparison between control group and experimental group on autonomy (covariate in pre-condition)

Source	Type III sum of squares	Df	Mean square	<i>F</i>	Sig.
Group * aut1	2.93	1	2.93	2.04	.15

Bold values indicate statistical non-significance

Table 18 Levene's test of equality of error variance

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
.73	1	58	.39

Table 19 Estimated marginal mean

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	18.43	.22	17.98	18.87
Control group	17.43	.22	16.99	17.88

group which shows that meditation significantly help in enhancing the integration of personality in experimental group. Partial eta-squared was .17, and it showed that dynamic meditation was 17 % effective in improving integration of personality dimensions of mental health. The effect size of the meditation was large (as per the guidelines of Cohen 1988; .01 small, .06 moderate, .14 large) as represented by partial eta-squared (.17).

Table 17 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 17 that there was no significant *F* ratio ($F = 2.04, p = .15$) between variance of experimental and control group on autonomy. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 18 shows that the significance level was .39 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 19, which shows that mean of experimental group (18.43) was greater than the control group (17.43).

Table 20 Comparison between control group and experimental group on autonomy (post)

Source	Type III sum of squares	Df	Mean square	<i>F</i>	Sig.	Partial eta-squared
Group	14.42	1	14.42	9.88	.003	.14

Bold values indicate statistical significance

Table 21 Mean and SD of experimental and control group for group-oriented attitude

Group	Condition	Mean	SD	<i>N</i>
Experimental	Pre	31.0	4.1	30
	Post	31.6	4.8	30
Control	Pre	30.0	4.0	30
	Post	30.1	4.1	30

Table 22 Comparison between control group and experimental group on group-oriented attitude (covariate in pre-condition)

Source	Type III sum of squares	Df	Mean square	<i>F</i>	Sig.
Group * goal	4.67	1	4.67	.73	.39

Bold values indicate statistical non-significance

Table 23 Levene's test of equality of error variances

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
3.19	1	58	.61

Table 20 shows that there was a significant difference between the two groups on post-assessment scores on autonomy ($F = 9.88, p = .003$); as per Table 16, the autonomy score of experimental group was higher than the control group which shows that meditation significantly help in enhancing the autonomy in experimental group. Partial eta-squared was .14; it means dynamic meditation was 14 % effective in improving autonomy of subjects. The effect size of the meditation was large as represented by partial eta-squared (.14).

Table 22 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 22 that there was no significant *F* ratio ($F = .73, p = .39$) between variance of experimental and control group on group-oriented attitude. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 23 shows that the significance level was .61 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 24, which shows that mean of experimental group was greater than the control group.

Table 25 shows that there was no significant difference between the two groups on post-assessment scores on group-oriented attitude ($F = .70, p = .40$).

Table 27 is used to check the assumption of homogeneity of regression slope. It can be observed from Table 27 that there was no significant *F* ratio ($F = .392, p = .05$) between

Table 24 Estimated marginal mean

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	31.15	.46	30.23	32.08
Control group	30.60	.46	29.68	31.53

Table 25 Comparison between control group and experimental group on group-oriented attitude (post)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.	Partial eta-squared
Group	4.47	1	4.47	.70	.40	.01

Bold values indicate statistical non-significance

Table 26 Mean and SD of experimental and control group for environmental mastery

Group	Condition	Mean	SD	<i>N</i>
Experimental	Pre	26.8	3.8	30
	Post	30.4	4.4	30
Control	Pre	27.6	3.9	30
	Post	27.5	3.7	30

Table 27 Comparison between control group and experimental group on environmental mastery (covariate in pre-condition)

Source	Type III sum of squares	<i>Df</i>	Mean square	<i>F</i>	Sig.
Group * em1	31.09	1	31.09	3.92	.05

Bold values indicate statistical non-significance

Table 28 Levene's test of equality of error variance

<i>F</i>	<i>df1</i>	<i>df2</i>	Sig.
2.03	1	58	.14

variance of experimental and control group on environmental mastery. It means that data have not violated the assumption of homogeneity of regression slope. Therefore, we can perform the covariance test.

Table 28 shows that the significance level was .14 which is greater than .05 which shows that the data do not violate the assumption of equality of variance.

The effect of the covariate (pretests assessment) has been statistically removed by calculating adjusted mean given in Table 29, which shows that mean of experimental group (30.72) was greater than the control group (27.17).

Table 30 shows that there was a significant difference between the two groups on post-assessment scores on environmental mastery ($F = 22.36, p = .000$); as per Table 26, the environmental mastery scores of experimental group were higher than the control group which shows that meditation significantly help in enhancing the environmental mastery in experimental group. Partial eta-squared was .28, and it showed that dynamic meditation was 28 % effective in improving environmental mastery dimension of mental health of

Table 29 Estimated marginal means

Group	Mean	SE	95 % Confidence interval	
			Lower bound	Upper bound
Experimental group	30.72	.52	29.66	31.77
Control group	27.17	.52	26.12	28.23

Table 30 Comparison between control group and experimental group on environmental mastery (post)

Source	Type III sum of squares	df	Mean square	F	Sig.	Partial eta-squared
Group	186.22	1	186.22	22.36	.000	.28

Bold values indicate statistical significance

experimental group. The effect size of the meditation was large as represented by partial eta-squared (.28).

Discussions

Table 5 shows that there was no significant difference between the two groups on post-assessment scores of positive self-evaluation ($F = 1.38, p = .24$).

Table 10 reveals that there was no significant difference between the two groups on post-assessment scores of perception of reality ($F = .95, p = .33$).

Table 15 shows that there was a significant difference between the two groups on post-assessment scores on integration of personality ($F = 12.04, p = .001$); as per Table 11, the integration of personality scores of experimental group was higher than the control group which shows that meditation significantly help in enhancing the integration of personality in experimental group. The effect size of the meditation was found to be large (as per the guidelines of Cohen 1988; .01 small, .06 moderate, .14 large) as represented by partial eta-squared (.17). One of the results of our study stated that meditation enhances personality integration. Study done by Haimerl and Valentine (2001) also found meditation helpful in improving and integrating personality.

Table 20 indicates that there was a significant difference between the two groups on post-assessment scores on autonomy ($F = 9.88, p = .003$); as per Table 16, the autonomy score of experimental group was higher than the control group which shows that meditation significantly help in enhancing the autonomy in experimental group. The effect size of the meditation was found to be large as represented by partial eta-squared (.14).

In terms of positive effect of meditation on autonomy and environmental mastery, studies explained that meditation help in improving attention and awareness toward our own self and the environment around us (Baer 2003). These factors do help in enhancing autonomy and environmental mastery by making the person more independent and confident about their self and the environment around them as individuals who are more attentive and aware about their own inner and outer environment would have better control over their environment (environmental mastery) and would develop more independence or freedom toward their will and actions (autonomy). Studies conducted by Pelletier (1974) also report similar findings. He found that the individuals who practice meditation gained greater autonomy than those who did not have any experience of meditation.

Table 25 shows that there was no significant difference between the two groups on post-assessment scores on group-oriented attitude ($F = .70, p = .40$).

Training of dynamic meditation was not found to improve positive self-evaluation, perception of reality and group-oriented attitude of experimental group. These findings were in contrast to the previous studies that found meditation as a useful technique to improve perception of reality (Delmonte 1987) group-oriented attitude (Haimerl and Valentine 2001), and positive self-evaluation (Koole et al. 2009).

Every meditation technique is different, and it works in its own unique manner on certain aspect or dimension of human psyche to targets the basic goal of evolution of human existence and being. Here we have used dynamic meditation which is very different from the traditional kind of meditation techniques. We could not be able to establish the relationship of meditation with improved positive self-evaluation, group-oriented attitude and perception of reality. The reason might be this that these aspects were not targeted by this particular type of meditation.

Table 30 reveals that there was a significant difference between the two groups on post-assessment scores on environmental mastery ($F = 22.36, p = .000$); as per Table 26, the environmental mastery scores of experimental group were higher than the control group which shows that meditation significantly help in enhancing the environmental mastery in experimental group. The effect size of the meditation was found to be large as represented by partial eta-squared (.28). According to Goleman (1976), meditation improves the adequate skills to meet the environmental demands and these skills include clarity regarding situational cues and appropriate response, improved and perceptual sharpening and increased ability to attend to a target environmental stimulus while ignoring irrelevant stimuli (Rubia 2009). In this way, meditation enhances the individual's capacity of environmental control or mastery.

The analysis of mental health dimensions showed mixed results. At one hand, significant improvement was found in integration of personality, autonomy and environmental mastery, and on the other hand, no significant change was noted on the dimension of perception of reality, positive self-evaluation and group-oriented attitude. Overall, it can be concluded that dynamic meditation was effective in improving the mental health of the subjects in experimental group.

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