

CHAPTER - V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 SUMMARY

The purpose of the study was to find out the effect of static and dynamic hatha yoga sadhana on selected socio environmental and pubertal development dimension among preteen girls. In that, socio-environmental and pubertal development dimension were dependent variables and Static hatha yoga sadhana and Dynamic hatha yogic sadhana was taken as independent variables.

To facilitate this, study (30) thirty preteen girls from Chennai city, were randomly selected as subjects. They were divided into three groups, Experimental Group I (n=10) Static hatha yoga and Experimental Group II (n=10) Dynamic hatha yoga sadhana and Group III - Control group (n=10) No practice was provided

The significance of the difference between the experimental groups I, II and control group – III were found out by the pre test and post test. They were determined through analysis of covariance (ANCOVA). The adjusted post test means were also computed by Scheffe's post hoc test. Thus the following results were obtained after the statistical analysis.

5.2 CONCLUSIONS

Within the limitation and delimitations set for the present study and considering the results obtained, the following conclusion were drawn.

1. The socio-environmental dimension namely 'Sedentary behavior' was significantly reduced due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
2. There was no significant difference in the reduction of 'Sedentary behavior' due to Dynamic hatha yoga sadhana practice and Static hatha yoga sadhana practice among preteen girls.

3. The socio-environmental dimension namely 'Physical activity' participation was significantly improved due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
4. There was a better significant difference in the improvement of 'Physical activity' participation due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.
5. The socio-environmental dimension namely 'Family cohesion' was significantly improved due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
6. There was a better significant difference in the improvement of 'Family cohesion' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.
7. The socio-environmental dimension namely 'Eating attitude' was significantly improved due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
8. There was a better significant difference in the improvement of 'Eating attitude' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.
9. The pubertal developmental dimension namely 'Dehydroepiandrosterone (DHEA)' was significantly improved due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
10. There was no significant difference in the improvement of 'Dehydroepiandrosterone (DHEA)' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.
11. The pubertal developmental dimension namely 'Luteinizing hormone (LH)' was significantly reduced due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
12. There was no significant difference in the reduction of 'Luteinizing hormone (LH)' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.

13. The pubertal developmental dimension namely 'Gonadotrophin releasing hormone (GnRH)' was significantly reduced due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
14. There was a better significant difference in the reduction of 'Gonadotrophin releasing hormone (GnRH)' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.
15. The pubertal developmental dimension namely 'Follicle stimulating hormone (FSH)' was significantly reduced due to Static and Dynamic hatha yoga sadhana practices among preteen girls.
16. There was no significant difference in the reduction of 'Follicle stimulating hormone (FSH)' due to Dynamic hatha yoga sadhana practice than the Static hatha yoga sadhana practice among preteen girls.

5.3 RECOMMENTATIONS

The following recommendations have been derived on the basis of the study for practitioners.

1. Hatha yoga sadhana may be recommended for preteen girls for all other diseases for better treatment.
2. Hatha yoga sadhana may be recommended mainly for improvement of self confidence among preteen girls.
3. Hatha yoga sadhana can be recommended for psychological variables like Stress, anxiety, depression etcetera can also be studied
4. The government may be encouraged Hatha yoga sadhana as a part of health centers.
5. Hatha yoga sadhana may be included in academic curriculum.
6. Hatha yoga sadhana may be done by all the people in their daily routine for regular work.
7. The practice of yoga from early age will prevent the occurrence of the studied physiological, hormonal, and psychological disturbances.

5.4 SUGGESTIONS FOR FURTHER RESEARCH

During the course of the research study, the investigator came across a number of ideas, based on which the following suggestions are made for further research in this area.

1. Similar study can be conducted on other, physiological, biochemical and psychological variables also.
2. Similar study may be conducted for the extension period of experimentation by selecting a large sample.
3. Since the research was selected on two experimental groups, more experimental groups can be compared for preteen girls.
4. Similar study can be undertaken on different variables to find out the changes on Hatha yoga sadhana.
5. Similar study can be undertaken for girls of different age groups.
6. Similar study can be undertaken for rural and urban girls as well as women.
7. Similar study may be conducted for other health problems faced by preteen girls.
8. The present study needed to be strengthened or support by more relevant research studies.
9. Similar study can be recommended with ayurveda, naturopathy, homeopathy and siddha drugs