

Impact of Heartfulness Practice on Social Wellbeing

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Abstract

Heartfulness is a meditative practice system rooted in the tradition of Raja Yoga, re-contextualized for contemporary application in diverse cultural, social, and institutional settings. From a psychological and physiological standpoint, Heartfulness practice align with key outcomes associated with mindfulness-based interventions, such as stress reduction, emotional regulation, improved attention, and enhanced well-being. Social well-being refers to individuals' perceptions and experiences within their social environments, including their sense of belonging, integration, and meaningful contribution to society. It is one of the three core components of psychological well-being, alongside emotional and psychological well-being". In this paper, research conducted on Social well-being of students before and after Heartfulness practice in higher secondary school and colleges at Anantapuram, Andhra Pradesh is presented. The study outlines four dimensions; Social Integration, Social Acceptance, Social Contribution, Social Coherence for the assessment of mental wellbeing of students. The statistical tools such as Frequency distribution Cronbach's Alpha, Paired Samples T-Test were applied to arrive at a meaningful interpretation. The analysis demonstrates the efficacy of Heartfulness practice on social well-being.

Key words: Heartfulness practice, social well-being, Social Integration, Social Acceptance, Social Contribution, Social Coherence.

1. INTRODUCTION

In recent years, there has been an increasing recognition of the social challenges faced by the entire world, especially students. This includes heightened levels of *Social Integration*, *Social Acceptance*, *Social Contribution*, *Social Coherence*. Apart from various methods, Yoga, meditation, and mindfulness-based interventions have demonstrated efficacy in alleviating such concerns. The empirical evidence specifically evaluating the impact of Heartfulness Meditation on student social well-being remains limited in this regard. The existing body of research predominantly focuses on general mindfulness practices or combines Heartfulness with other techniques, thereby failing to isolate its unique effects. Furthermore, many of these studies are constrained by methodological limitations, including small sample sizes, lack of control groups, short intervention durations, and inconsistent use of validated psychological assessment tools. Given the growing social wellbeing among student populations, it is imperative to conduct large-scale, and controlled investigations to rigorously assess the effectiveness of Heartfulness practices in enhancing social well-being.

Heartfulness is a meditative practice system rooted in the tradition of Raja Yoga, recontextualized for contemporary application in diverse cultural, social, and institutional settings. Heartfulness emphasizes experiential learning through meditation focused on the heart as a centre of emotional, cognitive, and spiritual consciousness.

Core to the understanding of social well-being is Keyes' (1998) model, which outlines four dimensions: Social Integration, Social Acceptance, Social Contribution and Social Coherence. These elements together provide a comprehensive view of how individuals relate to their social world.

- a) **Social Integration:** Social Integration is the degree to which individuals feel connected to and part of their community or society (Durkheim, 1897; Keyes, 1998).
- b) **Social Acceptance:** Social acceptance refers to holding positive attitudes toward others and recognizing people as trustworthy and capable (Keyes, 1998).
- c) **Social Contribution:** Social contribution involves the belief that one's actions matter to society and that one can

make a meaningful impact (Keyes, 1998)

- d) **Social Actualization:** Social actualization is the belief in the potential of society to evolve positively. It reflects optimism about social progress and collective future (Keyes, 1998).
- e) **Social Coherence:** Social coherence refers to the perception that the social world is meaningful, understandable and predictable (Antonovsky, 1987; Keys, 1998).

2. LITERATURE REVIEW

A study on “A Survey of Social Well-being among employees, retirees, and nursing students: a descriptive-analytical study” was conducted by Reza Nenati et al., (2023). The study aimed to determine social well-being among retired employees and nursing students. Researchers introduced key variables such as social actualization, social coherence, social integration, social acceptance and social contribution. Convenience sampling method was used to collect samples. The questionnaires of demographic characteristic and the Key social well-being questionnaire were used to collect data. Descriptive statistics, independent t-test, 1-way data analysis of variance (ANOVA), and linear regression analysis by the backward elimination method were applied using Statistical Package for Social Science (SPSS) 14.0 version. The results showed that the Social well-being rate of retirees and nursing students was significantly lower than nursing employees. Also, single nurses and nurses with more children had less social well-being.

Georgianne Tiu Hawkins et al., (2023) conducted a systematic review to synthesize the evidence for physical environment and SEC intervention strategies related to nutrition and physical activity among students and school employees. Researchers introduced Key variables such as nutrition, environment changes for students, Physical activity environment changes for students, nutrition and environment changes for employees, Physical activity environment changes for employees, social emotional climate and Yoga or Mindfulness for students and employees. A 2-Phase research included reviews followed by a search for individual articles that targeted school physical environment and SEC to address physical activity and nutrition. Researchers showed that Yoga or Mindfulness interventions aligned with the Key principles of Social- Emotional learning are effective in increasing positive mental health outcomes. The research findings might help schools to identify strategies that are likely to have a population-level impact on students’ mental and physical health. They might also help schools to identify techniques to positively affect employees health particularly with strategies for Physical Activity and Nutrition. Susanne Schwab et al., (2022) conducted a study on “Teacher’s feedback in the context students’ Social acceptance, students’ Well-being in School and student’s emotions”. The study investigated the role of teachers’ feedback on the conduct of students, achievements and behaviour in influencing students’ peer acceptance, academic trait emotions as well as school wellbeing. Researchers introduced key variables such as students’ social acceptance, academic trait emotions and school social well-being. Scales introduced by the Researchers were 4 point and 5 point Likert Scales, using Moreno formulae. Result showed that students perceive an equal amount of feed back on their behaviour and their academic achievement. However more positive than negative feedback was reported. Result indicated that teacher feedback affects students’ Well-being in school as well as social acceptance. Multi level regression analysis conducted on all four feedback variables revealed differences within the examined sub-groups. Significant effects were found for gender and students with migration biography. Correlation patterns between students’ perceptions of teacher feedback and students’ emotional well-being, social acceptance and emotions were investigated for different subgroups.

Maryam Ghasemisarukolai et al., (2021) conducted a study on “A Study on Social Well-Being and Effective Factors in Faculty Members of Payame Noor University, Tehran”. The study aimed to recognize how the dimensions of human health have an essential role in balancing the social life of faculty members and its general coverage in societies can promote social development and how the social well-being of faculty members has a positive influence on the optimal performance of social roles in the academic environment. Researchers introduced key variables such as social actualization, social coherence, social integration, social acceptance and social contribution. The study is based on a survey and documentary methods and also the interpretation of results was related to descriptive and analytical techniques. In the study, authors used key social well-being questionnaire to collect data. The SPSS Software was used to analyse the data. In the study, the collected information was diagnosed with appropriate techniques at 3-levels of description, explanation and analysis. It is found that the Social well-being rate of men is higher than women. According to descriptive data, the average mark of social well-being for

faculty staff has been 105.5, minimum 78, and maximum of 128, which is considered proper and showed that the social well-being of faculty members is high.

Lidon Moliner et al., (2021) presented a study on “Social Well-Being at School: Development and Validation of a Scale for Primary Education Students”. The study presented the development and validation of a scale for Primary Education students that measures social well-being. Researchers addressed the key variables such as achievement, cooperation, cohesion, coexistence, attitude towards school, attitude towards diversity, and solidarity. Researchers used methods like Phase 1 to phase 6 analysis such as scale design, validation, reliability analyses, exploratory factor analysis, Confirmatory factor analysis and descriptive and inferential statistical analysis. The study presents a validated scale that allowed Primary Education students’ social well-being at school to be measured. The promising findings in the study suggested that this scale may be suitable for an international audience.

Elisabeth Kohis et al., (2021) conducted a study on “Mental Health, Social and Emotional Well-Being, and Perceived Burdens of University Students during COVID-19 Pandemic Lockdown in Germany”. The study examined the mental health, social and emotional well-being and perceived burdens of University students during COVID-19 pandemic lockdown in Germany. Researchers introduced key variables such as depressive symptoms, alcohol and drug consumption, eating disorder symptoms, social support, perceived stress, loneliness and self-efficacy. In the study, Researchers have introduced online mode of cross-sectional study. Depressive symptoms are assessed with patient health Questionnaire-9 (PHG-9). The symptoms are rated on a 4-points Likert Scale. Alcohol and drug consumption were assessed using the Alcohol use disorders identification Test (AUDIT-C). The short of evaluation of eating disorders (SEED) is used to investigate key eating disorder symptoms, except for weight and height. Social support was assessed using the “ENRICHED” Social Support Inventory (ESSI) with five items rated on a 5-point Likert Scale. Experienced loneliness is assessed with the UCLA 3-item loneliness scale. Authors found that the levels of depressive symptoms differed significantly for the different self-rated income changes during the pandemic (increase, decrease, no change in income). Further levels of depressive symptoms and suicidal thought differed significantly for students compared to faculty. Multiple regression analyses revealed that not being a parent, having no indirect social contact once or twice a week, higher perceived stress, higher experienced loneliness, lower social support, and lower self-efficacy significantly predicted higher scores of depressive symptoms, also higher self-efficacy significantly predicted higher scores of depressive symptoms.

2.1 Objective

To assess the Impact of Heartfulness practices on social wellbeing (With reference to School/College Students at Anantapuram, Andhra Pradesh)

2.2 Hypothesis

The hypothesis comprises of the following

- a) **Null Hypothesis (H₀):** There is no significant difference in students social well-being before and after Heartfulness practice.
- b) **Alternative Hypothesis (H₁):** There is a significant difference in students social well-being before and after Heartfulness practice.

3. METHODOLOGY

The methodology used to carry out in the current research work consists of the following

- a) **Sampling framework:** Refers to the framework that is fixed for the purpose of predefining and drawing the sample from the sample universe, the framework pre supposes to draw the sample from schools and colleges at Ananthapuram, Andhra Pradesh during the research period.
- b) **Sample Characteristics:** Those that are reflect in the sample respondents, all students irrespective of their Gender, falling under the age group of 15 years to 18 years and above studying in schools and colleges.
- c) **Sample Unit:** A selected male and female respondent from secondary Schools, PU Colleges and Undergraduate colleges at Anantapuram in the age group of 15 – 25 years.
- d) **Sampling Technique:** The process of drawing sample respondents from the sample universe is known as

sampling technique, among many techniques available, Stratified sampling is employed for the purpose since it is more appropriate as the sample respondents are distributed in different strata's across of schools and colleges in Anantapura.

- e) **Sample size:** For the huge population, the sample size determined by Kukeran Formula; Kukeran developed the following formula for calculating the required number of samples in the random sampling method. The sample size calculated is 570 for the study. The sample size is in proportion to the size of the sector.

3.1 Data Collection Method

The data was collected for the present study comprises of both primary and secondary sources.

- a) **Primary data :** The data was collected from respondents through standardized questionnaire. The respondents were interviewed and informed to respond to the questionnaire. The first part deals with respondents' profile in terms of their age, sex, education and place. The second part of the questionnaire contains the questions related to Social wellbeing. The responses were taken before and after three months of Heartfulness practice.
- b) **Statistical Processing :** In the first stage, the data collected through questionnaire was classified in the range of 1 to 5 ratings. Individual weightages awarded by respondents for each element of the model in the questionnaire were tabulated on these five points of the scale against classification of demographic profile, like age, sex, education, designation, income. Further, the weightages were analyzed using statistical tools to arrive at meaningful inferences.

4. DATA ANALYSIS AND INTERPRETATIONS

The data collected from 570 participants were analyzed using SPSS tool and are tabulated.

Table 1: Frequency Distribution test for Age

Age (Years)	Frequency	Percent	Valid Percent	Cumulative Percent
15	178	31.2	31.2	31.2
16-17	207	36.3	36.3	67.5
18 and above	185	32.5	32.5	100.0
Total	570	100.0	100.0	

The table 1 shows the distribution of 570 respondents categorized into three age groups: 15 years, 16–17 years, and 18 years and above. The largest proportion of participants falls within the 16–17 age group, accounting for 36.3% of the sample. This is followed by the 18 and above category at 32.5%, and the 15-year-old group at 31.2%. Referring to table 1, the data mentioned in the percent and valid percent columns are 100 percent identical thus indicating that all data is valid with no missing or excluded entries. This distribution highlights a relatively balanced age representation, with a slightly higher concentration of participants in the mid-teen range.

Table 2: Frequency Distribution test for Gender

Gender	Frequency	Percent	Valid Percent	Cumulative Percent
Male	229	40.2	40.2	40.2
Female	341	59.8	59.8	100.0
Total	570	100.0	100.0	

The table 2 presents the gender composition of a sample consisting of 570 respondents. Out of these, 229 individuals (40.2%) identified as male and 341 individuals (59.8%) identified as female. This indicates a female-majority sample, with nearly 60% of respondents identifying as female.

Table 3: Frequency Distribution test for Education

Education	Frequency	Percent	Valid Percent	Cumulative Percent
SSC	178	31.2	31.2	31.2
PUC/Intermediate	193	33.9	33.9	65.1
Under graduate	199	34.9	34.9	100.0
Total	570	100.0	100.0	

Table 3 presents the Education composition of a sample consisting of 570 respondents. Out of these 178 individuals (31.2%) identified as SSC students, 193 individuals (58.9%) identified as PUC /Intermediate students, and 199 individuals (34.9%) identified as undergraduate students. This indicates the distribution of sample highlights a relatively balanced education representation, with a slightly higher concentration of respondents in undergraduate students.

Table 4: Frequency Distribution test for Place

Place	Frequency	Percent	Valid Percent	Cumulative Percent
Urban	231	40.5	40.5	40.5
Semi Urban	98	17.2	17.2	57.7
Rural	241	42.3	42.3	100.0
Total	570	100.	100	

Table 4 presents the distribution of 570 respondents categorized in to three place groups: Urban, Semi urban and rural. Out of these 231 individuals (40.5%) identified as Urban areas, 98 individuals (17.2%) identified as Semi urban areas and 241 individuals (42.3%) identified as rural areas. This indicates there is a slight difference between Urban and rural respondents. The participants who are semi-urban highlights slightly less concentration of participants in the semi-urban areas.

Table 5: Scale Reliability Test for Social Well being

Scale Reliability Test for Social Well-being	
Cronbach's Alpha	N of Items
.811	33

Table 5 presents the results of a reliability analysis using Cronbach’s Alpha. The Cronbach’s Alpha coefficient is reported as .811, which indicates good **internal consistency** among the 33 items included in the scale. This suggests that the items are highly interrelated and consistently measure the construct of social well being. A value above .8 is generally considered very good, implying that the scale is reliable for assessing social well being in the sample studied. The number of items, reported as 33, indicates a comprehensive scale, and the high alpha value reflects that the scale items likely work well together to assess the intended psychological construct.

4.1 Social Well-Being - Social Integration

Table-6: Paired Samples T-Test for Before and After Heartfulness practice on Social Well-Being – Social Integration

Items		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
I am content with my surrounding	P	-0.63333	1.67708	0.07025	-0.77130	-0.49536	-9.016	569	.000
I have close contact with my direct neighbours		-0.75088	1.75204	0.07338	-0.89502	-0.60674	- 10.232	569	.000
I think it is important to be a member of an association		-0.78246	1.56017	0.06535	-0.91081	-0.65410	- 11.974	569	.000
I am content with the relation to my neighbours		-0.77895	1.62264	0.06796	-0.91244	-0.64545	- 11.461	569	.000

I am glad to participate in activities in my neighbourhood	-0.72982	1.78373	0.07471	-0.87657	-0.58308	-9.768	569	.000
People know each other too less in my surrounding	-0.08421	1.94383	0.08142	-0.24413	0.07571	-1.034	569	.301
I have social contacts who I can trust	-0.45912	1.62447	0.06804	-0.59277	-0.32548	-6.748	569	.000

The paired samples t-test results highlight significant improvements in social integration after Heartfulness practice. All items tested, including contentment with surroundings, closeness with neighbours, importance of associations, and participation in neighbourhood activities, show statistically significant differences with p-values less than .001. For example, “I am content with my surrounding” has a mean difference of -0.6333 with $t = -9.016$, and “I have close contact with my direct neighbours” shows a mean difference of -0.75088 with $t = 10.232$. The consistent significance across measures suggests that Heartfulness practice has a substantial and positive impact on perceived social connectedness and integration.

The null hypothesis (H_0) assumed there would be no significant difference in perceptions of social integration before and after Heartfulness practice. The alternative hypothesis (H_1) predicted that Heartfulness practice would enhance social well-being indicators. Results show p-values = .000 for all seven dimensions, meaning differences are highly significant. For instance, the importance of association ($t = 11.974$, mean diff = -0.78246) and relation to neighbours ($t = -11.461$, mean diff = -0.77895) support the rejection of H_0 . Thus, the hypothesis test confirms that Heartfulness practice significantly improves various aspects of social integration and connectedness.

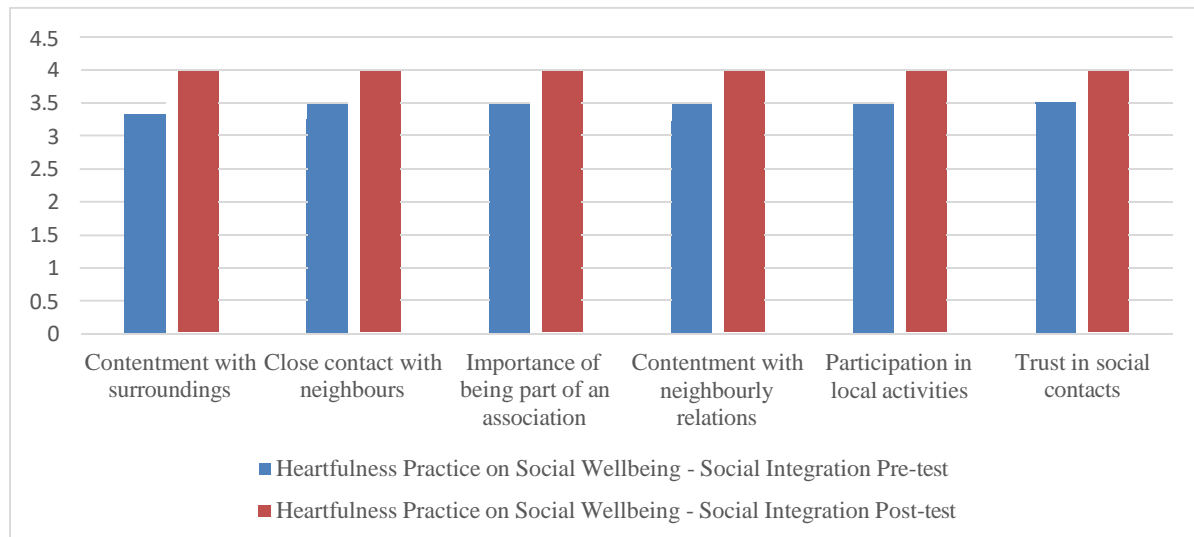


Fig.-1: Heartfulness Practice on Social Wellbeing - Social Integration

Table-7: Paired Samples T-Test for Before and After Heartfulness practice on Social Well-Being – Social Acceptance

Items	Pre and post Heartfulness Practice	Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
I feel voidness (emptiness)		0.78947	1.73597	0.07271	0.64666	0.93229	10.858	569	0.000
I feel pleasant in my home		-0.20877	1.79148	0.07504	-0.35616	-0.06139	-2.782	569	0.006
I miss people around me		0.70351	1.99423	0.08353	0.53945	0.86757	8.422	569	0.000
I can trust in the police if I need them		-0.66842	1.65703	0.06941	-0.80474	-0.53210	-9.631	569	0.000
I trust in the people in my surrounding		-0.58947	1.79823	0.07532	-0.73741	-0.44154	-7.826	569	0.000
I feel accepted in my neighbourhood		-0.67544	1.58694	0.06647	-0.80599	-0.54488	-10.162	569	0.000
Other people accept me like I am		-0.67719	1.70526	0.07143	-0.81748	-0.53690	-9.481	569	0.000
I am content with my current life		-0.87842	1.71157	0.07169	-1.01923	-0.73761	-12.253	569	0.000

The paired samples t-test shows significant improvements in social acceptance after Heartfulness practice. All items demonstrate p-values less than .01, confirming meaningful changes. For example, feelings of voidness reduced significantly (Mean Diff = 0.789, t = 10.858, p = .000), while pleasantness at home improved (Mean Diff = -0.208, t = -2.782, p = .006). Positive social indicators such as acceptance in the neighbourhood (Mean Diff = 0.675, t = 10.162, p = .000) and trust in people (Mean Diff = -0.589, t = -7.826, p = .000) also strengthened. Overall, Heartfulness practice enhances social connectedness, acceptance, and well-being across multiple indicators.

Hypothesis: The null hypothesis (H₀) assumed no difference in perceptions of social acceptance before and after Heartfulness practice, while the alternative hypothesis (H₁) proposed significant improvement.

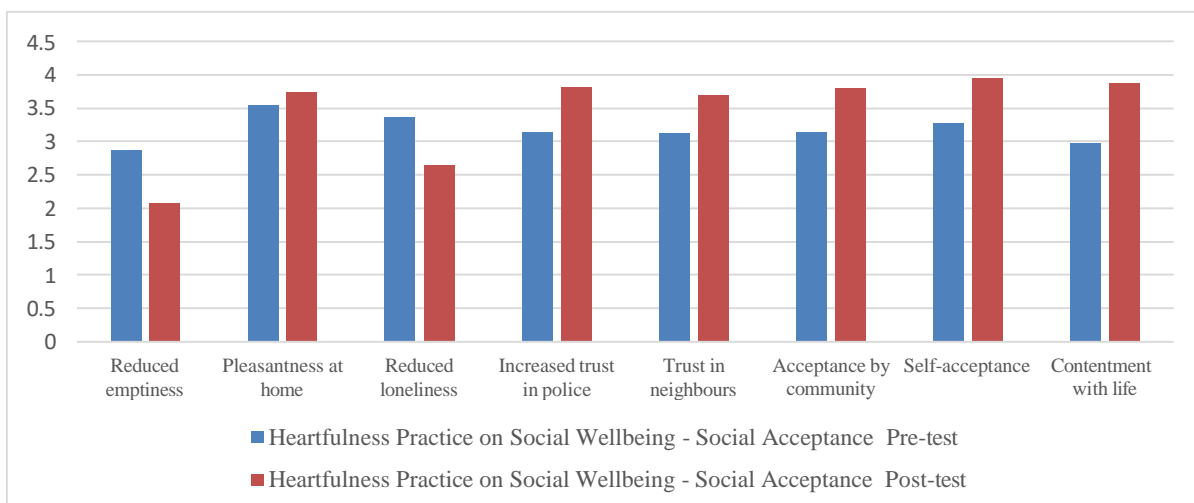


Fig.-2: Heartfulness Practice on Social Wellbeing - Social Acceptance

Social Contribution

Table-8: Paired Samples T-Test for Before and After Heartfulness practice on Social Well-Being – Social Contribution

Items		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
I have sufficient money to visit somebody	Pre and post Heartfulness Practice	0.78947	1.68563	0.07060	0.65080	0.92815	11.182	569	0.000
There are welfare organizations that understand and listen to my needs.		-0.68596	1.54760	0.06482	-0.81328	-0.55865	-10.582	569	0.000
I sufficiently contribute to society		-0.70526	1.57109	0.06581	-0.83452	-0.57601	-10.717	569	0.000
My School/ College environment contributes to my well-being		-0.68947	1.63767	0.06859	-0.82420	-0.55474	-10.051	569	0.000
I am content with the composition of the population in my neighbourhood		-0.62632	1.64269	0.06880	-0.76146	-0.49117	-9.103	569	0.000
I am glad to help other people if they need my help		-0.46316	1.66517	0.06975	-0.60015	-0.32617	-6.641	569	0.000

The paired samples t-test indicates significant differences between pre- and post-Heartfulness practice across all aspects of social contribution. For example, “I have sufficient money to visit somebody” shows a mean difference of 0.789 (t = 11.182, p = .000), while “There are welfare organizations that understand and listen to my needs” shows a mean difference of 0.685 (t = 10.582, p = .000). Similarly, social contribution (mean diff = 0.705, t = 10.717, p = .000), school/college environment support (mean diff = 0.689, t = 10.051, p = .000), and neighbourhood contentment (mean diff = 0.626, t = 9.103, p = .000) all improved significantly.

Hypothesis: The null hypothesis (H₀) proposed no significant difference in social contribution measures before and after Heartfulness practice. The alternative hypothesis (H₁) proposed a significant improvement in social contribution indicators post-practice.

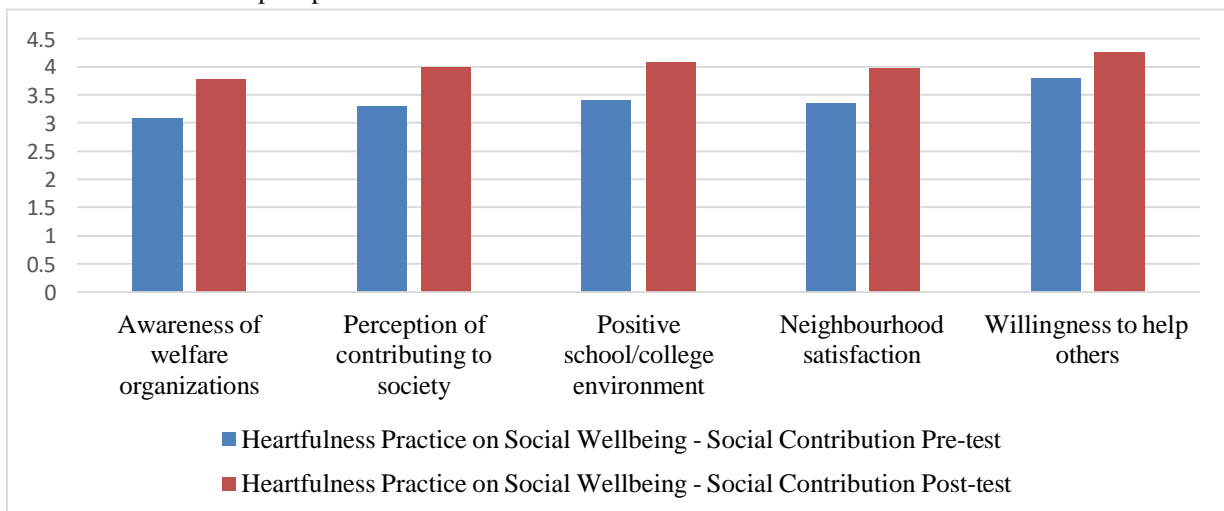


Fig.-3: Heartfulness Practice on Social Wellbeing - Social Contribution

Social Actualization

Table-9: Paired Samples T-Test for Before and After Heartfulness practice on Social Well-Being – Social Actualization

Items	Paired Differences					t	df	Sig. (2-tailed)
	Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
				Lower	Upper			
People in my neighbourhood handle each other in a positive manner	-0.82281	1.56696	0.06563	-0.95172	-0.69389	-12.537	569	0.000
I feel insecure in my own home	0.51228	1.79063	0.07500	0.36497	0.65959	6.830	569	0.000
I see myself as a part of society	-0.62566	1.56506	0.06561	-0.75453	-0.49679	-9.536	568	0.000
I get sufficient help from my friends or family if I need it	-0.48596	2.12624	0.08906	-0.66089	-0.31104	-5.457	569	0.000
I know many people who I can trust entirely	-0.64211	1.60895	0.06739	-0.77447	-0.50974	-9.528	569	0.000
There are enough people with whom I feel strongly connected	-0.43684	1.63670	0.06855	-0.57149	-0.30219	-6.372	569	0.000
I am glad to have contact with other people via social media (Facebook, Instagram etc.,)	-0.24035	2.12693	0.08909	-0.41533	-0.06537	-2.698	569	0.007

The paired samples t-test demonstrates significant differences between pre- and post-Heartfulness practice across all items of social actualization. For example, perceptions that “People in my neighbourhood handle each other positively” improved strongly, with a mean difference of 0.82281, $t = 12.537$, $p = .000$. Feelings of insecurity in the home decreased, with a mean difference of 0.51228, $t = 6.830$, $p = .000$. Similarly, seeing oneself as part of society improved (mean diff = 0.62566, $p = .000$). Even digital socialization increased, with contact through social media showing a smaller but still significant difference (mean diff = 0.24035, $p = .007$).

Hypothesis: The null hypothesis (H_0) stated that there would be no significant difference in social actualization perceptions before and after Heartfulness practice. The alternative hypothesis (H_1) proposed that Heartfulness practice would significantly improve these perceptions.

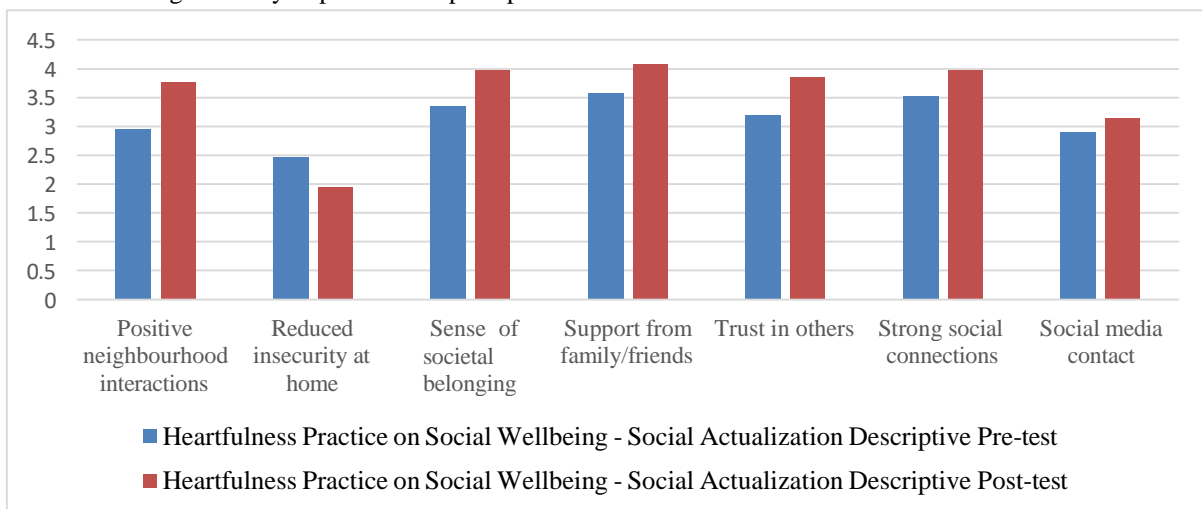


Fig.-4: Heartfulness Practice on Social Wellbeing - Social Actualization

Social Coherence

Table-10: Paired Samples T-Test for before and After Heartfulness practice on Social Well-Being – Social Coherence

Items		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
I know from which organization I can get help if I need it	Pre and post Heartfulness Practice	-0.51930	1.63888	0.06865	-0.65413	-0.38447	-7.565	569	0.000
I live in a sociable neighbourhood with cohesiveness		-0.55614	1.51889	0.06362	-0.68110	-0.43118	-8.742	569	0.000
I feel insecure on the street and in the surrounding of my house		0.35088	1.94106	0.08130	0.19119	0.51057	4.316	569	0.000
There are enough people on who I can count in the case of inconvenience		0.13158	1.69934	0.07118	-0.00822	0.27138	1.849	569	0.065
I get proper help from organizations if I need it		-0.61053	1.71191	0.07170	-0.75136	-0.46969	-8.515	569	0.000

The paired samples t-test highlights significant improvements in social coherence after Heartfulness practice. For example, knowing from which organization to get help improved with a mean difference of 0.519 ($t = 7.565, p = .000$), and living in a sociable neighbourhood increased with a mean difference of 0.556 ($t = 8.742, p = .000$). Feeling insecure on the street reduced significantly with a mean difference of 0.350 ($t = 4.316, p = .000$). Similarly, receiving proper help from organizations improved with a mean difference of 0.610 ($t = 8.515, p = .000$). Only having enough people to count on was non-significant ($p = .065$).

The null hypothesis (H_0) stated that there would be no significant difference in social coherence before and after Heartfulness practice, while the alternative hypothesis (H_1) predicted significant improvement.

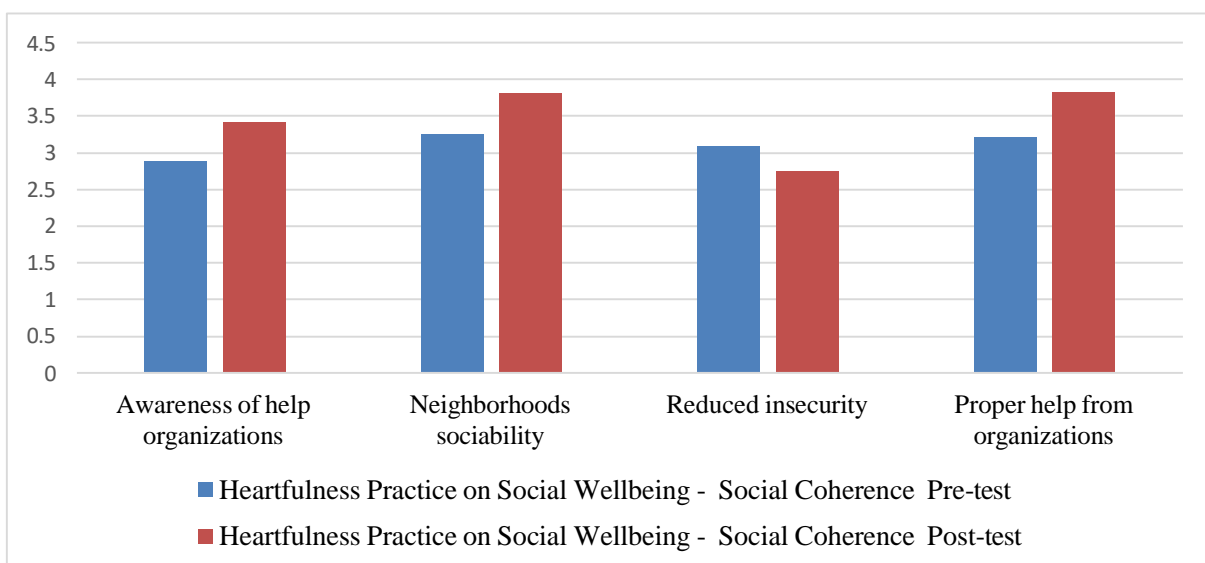


Fig.-5: Heartfulness Practice on Social Wellbeing - Social Coherence

5. FINDINGS

a) Social Integration

The findings show higher satisfaction with one's surroundings, greater closeness with neighbours, and increased trust in social relationships following Heartfulness practice. Participants also demonstrated greater participation in community activities. Overall, the results provide strong evidence of enhanced social connectedness.

b) Social Acceptance

The findings indicate a reduction in loneliness and increased feelings of acceptance among participants following Heartfulness practice. There was also higher trust in others and institutions, such as the police, alongside enhanced life satisfaction and a stronger sense of belongingness. Overall, these results reflect significant improvements in social and personal well-being.

c) Social Contribution

The results show an improved sense of financial sufficiency and a stronger perception of contributing to society following Heartfulness practice. Participants also demonstrated greater faith in welfare organizations and an increased willingness to help others. Overall, these findings indicate that Heartfulness promotes social responsibility and community engagement.

d) Social Actualization

The findings reveal a stronger sense of belonging and increased trust among participants following Heartfulness practice. Feelings of insecurity decreased, while social support from family, friends, and the community improved. Additionally, there was an increase in positive social interactions, including those conducted through digital platforms, reflecting enhanced overall social connectedness.

e) Social Coherence

The findings indicate an improved understanding of social support networks and enhanced trust in organizations following Heartfulness practice, accompanied by a reduction in feelings of insecurity. While reliance on others during moments of inconvenience remained largely unchanged, overall results show strong improvement in social harmony and connectedness.

6. SUGGESTIONS

a) Social Integration

It is suggested to introduce Heartfulness practice in community and organizational wellness programs, with structured sessions designed to strengthen social bonds and encourage active participation. Group reflection and community engagement activities can further foster trust and cooperation among participants. Policymakers are encouraged to explore the incorporation of Heartfulness into long-term initiatives aimed at enhancing community resilience.

b) Social Acceptance

It is recommended to incorporate Heartfulness practice into social and workplace engagement programs, as it helps reduce loneliness and strengthens trust in social structures. Group activities and guided sessions are encouraged to promote sustained cooperation and empathy among participants. Regular practice can further foster social acceptance and enhance psychological resilience.

c) Social Contribution

It is encouraged to integrate Heartfulness practice into community and organizational well-being strategies, with training programs that emphasize empathy, service, and social trust. Policies should be developed to support regular practice, helping maintain neighborhood harmony and promote collective welfare. Future studies are recommended to explore the long-term impacts of Heartfulness at the community level.

d) Social Actualization

It is recommended to adopt Heartfulness practice to enhance social trust, safety, and inclusion. Group sessions are encouraged to strengthen participants' sense of belonging and reduce feelings of insecurity. Heartfulness practices can be integrated into educational, workplace, and community programs to maximize impact. Additionally, policymakers are advised to leverage Heartfulness in social development initiatives to foster holistic well-being.

e) Social Coherence

It is suggested to incorporate Heartfulness practice into community outreach and collaboration programs, with a focus on building trust, reducing insecurity, and improving neighborhood harmony. Educational and workplace

sessions are encouraged to enhance social support and mutual reliability, while addressing weaker areas such as interpersonal reliability during times of inconvenience. Overall, Heartfulness is recommended as an effective approach for strengthening social cohesion and promoting overall well-being.

7. CONCLUSION

A quantitative survey questionnaire was carried out on 570 students of high school, pre-university, and degree students in Anantapuram district in the state of Andhra Pradesh India, after three months of Heartfulness Practice. An analysis of paired t-tests found that Heartfulness practice significantly improved multiple dimensions of social well-being, including Social Integration, Social Acceptance, Social Contribution, Social Actualization, and Social Coherence. Future studies can use longitudinal designs to examine the sustained and long-term effects of Heartfulness practice.

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