

Impact of Yoga on the Mental Health of B.Ed., Trainees

M. Govindaraj and T. Tamizhselvan

Abstract--- *This is a quasi-experimental study to find out the impact of Yogic practices on Mental Health of the B.Ed., Trainees. 44 B.Ed., Trainees were selected and they were given Yoga practices for three months under the supervision of and guidance of Yoga Masters. The impact was found using the Mental Health trait Inventory and it was found that there is significant impact of Yogic Practices on the Mental Health of the B.Ed., Trainees.*

Keywords--- *Yoga, B.Ed., Trainees, Mental Health.*

I. INTRODUCTION

Yoga is one of the six Hindu spiritual traditions orthodox schools. Yoga is a group of exercises or disciplines that are physical, mental and spiritual. All these in ancient India were born. Within Hinduism, Buddhism, and Jainism, there are a wide range of yoga classes, activities, and goals.

In the Western world, the word "yoga" mostly applies to a modern form of Hatha yoga, yoga as exercise, based largely on asanas. The origins of yoga have been speculated to date back to pre-Vedic Indian traditions; it is mentioned in the Rigveda, but most likely developed in the ascetic and śramaa movements of ancient India around the 6th and 5th centuries BCE.

II. MENTAL HEALTH

Mental health is defined as a state of well-being in which individuals realize their own abilities, can cope with normal life stresses, can work productively and fruitfully, and can contribute positively to their community (Ministry of Health and Family Welfare, Government of India, 2014).

Mental health is more than just a shortage of mental disorders. The positive aspect of mental health is illustrated in the description of health of the WHO as stated in its constitution: "Health is a state of complete physical, mental and social well-being and not just the absence of illness or infirmity." Mental health principles include subjective well-being, perceived self-efficacy, autonomy, competence, intergenerational dependency and capacity recognition.

It has also been described as a state of well-being through which people recognize their talents, are able to cope with the usual stresses of life, work productively and fruitfully, and contribute to their communities. Mental health is about strengthening the capabilities of people and societies and helping them achieve their self-determined goals. Mental health should be a problem for all of us, not just mentally disordered individuals.

Problems of mental health are one of the major causes of disease burden worldwide (Vos, 2013). Common mental health issues such as depression and anxiety are distributed across society with the poorer and more

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disadvantaged disproportionately affected by common mental health problems and their adverse consequences (Campion, 2013, Patel, 2010, Patel, 2003, Fryers, 2003).

Mental health issues are a growing concern for public health (Foundation for Mental Health, 2015). A recent index of 301 diseases identified mental health problems as one of the major causes of the global burden of disease worldwide (Vos, 2013). Globally, primary care provides treatment for up to 90 percent of people diagnosed with anxiety and depression. There are, however, many people who are undiagnosed and are therefore not seeking treatment (NICE, 2011).

It is an important part of life to form a family and parenting, with many changes taking place. During this process, mental health of both mothers and fathers may be affected, which may impact the mental health of their child (Mental Health Foundation, 2015).

III. YOGA AND MENTAL HEALTH

Yoga is a psychology-the whole practice helps us to deal with the nature of the brain, the essence of being a human being, how feelings exist in our bodies, how they influence our actions and minds, "says Turner, who admits that yoga has enabled her to understand and cope with her own low self-esteem (Jennifer D'Angelo Friedman 2016).

It is explained by Ashley Turner, (2016) that by 5 ways yoga can benefit our mental health and well-being and even improve our relationships,

- a) It moves us from the sympathetic nervous system to the parasympathetic nervous system, b) it allows us to build your self-confidence.
- b) Our romantic relationship strengthens.
- c) It helps us to be conscious of the characteristics of your "ghost."
- d) It helps us to address issues related to the family of origin.

While the positive effects of yoga practice (increased endurance, mobility, and balance) on the physical body can be more easily identified and tracked, yogis believe that yoga practice often benefits the mind positively by helping yogis manage stress, relaxing their nerves, and relieving depression. Nevertheless, it is more difficult to notice and track the effect of yoga for better mental health. It is of great benefit for yogis who are interested in learning how yoga can help with various types of mental illnesses and general mental wellbeing that researchers take time to conduct peer-reviewed and randomized clinical test trials (Ling Beisecker, 2017)

Researches suggests that Yoga can help to cure three types of disorders, they are

- a) Anxiety Disorders: Yoga can help to slow down neuron firing and balance brain chemistry.
- b) Depressive Disorders: Yoga can help decrease symptoms by cultivating positive thinking to help change brain structure.
- c) Trauma- and Stress-Related Disorders: Yoga can help to regulate stress and improve quality of sleep.

Yoga has many benefits, but it's not a cure-all solution, the growing body of research helps yogis create smarter, evidence-based practices. Yogis can better inform their personal and professional practices by increasing the empirically supported benefits of yoga. Yoga isn't a cure-all, however.

Like everything else, yoga benefits from being part of a healthy lifestyle, like consulting with a trained mental health professional and taking prescribed medications (Ling Beisecker, 2017).

Yoga has always been a mental development activity (and physical development for many in recent years) with the goal of achieving increased consciousness and enlightenment. As mentioned in the first lines of the Yoga Sutras by the ancient sage Patanjali, the object of yoga is to hold the mind's turbulence (Heather Mason, 2017).

Statement of the Problem

Our mental health is needed for our physical, psychological and social well-being. It affects the way we think, experience and act. It also helps to decide how to handle stress, how to respond to others, and how to make choices. Mental health is important at every stage of life, from infancy and adolescence to adulthood. Yoga increases body consciousness, relieves stress, reduces muscle tension, increases anxiety and inflammation, increases concentration and focus, and calms the nervous system and centers. Yoga's positive mental health benefits have made it an effective psychotherapy training method. Therefore, the effect on mental health of yogic activities, of B.Ed., Trainees. In this way, the purpose of this study becomes meaningful and important in deriving a result that will be useful to ordinary people seeking relief.

Definition of Terms

B.Ed., Trainees

Those who are undergoing Two year teacher training course after completion UG/ PG.

Yogic Practices

The structured practices of physical exercises, breath control, relaxation, diet management, and positive thinking and meditation aimed at developing harmony in the body, mind, and environment.

Mental Health

One's emotional, psychological, and social well-being.

Objectives

1. To identify the B.Ed., Trainees for the Experimentation.
To find out
2. The suitable Yoga Asanas related with Mental Health of the individual.
3. The level of Mental Health of the B.Ed., Trainees (Pre- Study).
4. The level of Mental Health Trait, of the B.Ed., Trainees with regard to the selected sub samples.
5. The Status of significance of difference between sub samples of B.Ed., Trainees with regard to the level of Mental Health.
6. To conduct Yogic Practices for the selected B.Ed., Trainees.
7. The level of Mental Health of the B.Ed., Trainees (Post- Study).
8. The whether there is any significant impact of Yogic Practices on the level of Mental Health of the B.Ed., Trainees.
9. The Status of significance of difference between sub samples in the impact of Yogic practices for the B.Ed., Trainees with regard to the Mental Health.

Hypotheses

There is no significant

1. Difference between sub samples of B.Ed., Trainees with regard to the Mental Health.
2. Impact of Yogic Practices on the Mental Health of the B.Ed., Trainees.
3. Difference between sub samples in the impact of Yogic practices for the B.Ed., Trainees with regard to the Mental Health.

IV. METHODOLOGY

Quasi Experimental method was adopted. As the impact of Yogic practices could not measured in a pure experimental method, the Quasi experimental method was adopted.

Selected Yoga asana practices were given to B.Ed., Trainees with supervision and guidance of trained Yoga Masters for three months. To measure the impact survey method implemented with selected tools.

Sampling Design

Convenience sampling design has been used for this study. Sampling convenience is a technique of non-probability sampling in which samples are chosen due to their easy accessibility and proximity to the researcher.

Tools Used

In this study to find out the impact of Yogic practices on the Mental Health the B.Ed., Trainees, The Mental Health Inventory constructed developed by Jagadish and Srivastava. A.K (1988), was used.

Statistical Techniques Used

For this study to arrive at the results, Descriptive analysis and Differential analysis are used, which consists of Mean, Standard Deviation, 't' tests, 'F' tests co-relational analysis and percentage calculations.

Descriptive Analysis

This study has been conducted to analyse the impact of Yogic Practices on Mental Health of B.Ed., Trainees. The data were collected before and after experimentation and the data collected from the selected B.Ed., Trainees were statistically treated.

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Descriptive Analysis

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Analysis of Pre-study Mental Health scores of B.Ed., Trainees the Mean and SD were calculated for the Pre study-Mental Health scores of entire sample and its sub samples.

Table 1: The Mean and SD of Mental Health scores of B.Ed., Trainees (Pre Study)

<i>Demographic Variable</i>	<i>Sub sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>
Entire Sample		44	105.32	20.44
Gender	Male	6	78.67	8.50
	Female	38	109.53	18.50
Marital Status	Married	10	105.20	23.00
	Unmarried	34	105.35	20.00
Age	upto 25	22	101.45	20.85
	26-30	18	110.11	19.82
	Above 30	4	105.00	21.67
Participation in Sports	Yes	4	89.75	6.65
	No	40	106.88	20.73

Entire Sample

From the calculations computed for the Mental Health scores of B.Ed., Trainees, it may be inferred that the B.Ed., Trainees have scored moderate level of Mental Health (M=105.32).

Gender

The mean scores indicate that Female B.Ed., Trainees (M=109.53) have scored high in their Mental Health than Male B.Ed., Trainees (M=78.67).

Marital Status

The mean scores indicate that both Married (M=105.20) and Unmarried B.Ed., Trainees (M=105.35) have scored equal level of score in Mental Health.

Age

The mean scores indicate that 26-30 years old B.Ed., Trainees (M=110.11) have scored high in their Mental Health than B.Ed., Trainees of age above 30 (M=105.00) and age upto 25 (M=101.45).

Participation in Sports

The mean scores indicate that B.Ed., Trainees, who are not participating in Sports and Games (M=106.88) have scored high in their Mental Health than the B.Ed., Trainees who are participating in Sports and Games (M=89.75).

Analysis of Post-study Mental Health scores of B.Ed., Trainees the Mean and SD were calculated for the Post study-Mental Health scores of entire sample and its sub samples.

Table 2: The Mean and SD of Mental Health scores of B.Ed., Trainees (Post Study)

<i>Demographic Variable</i>	<i>Sub sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>
Entire Sample		44	138.55	18.07
Gender	Male	6	118.50	10.11
	Female	38	141.74	17.04
Marital Status	Married	10	141.60	18.59
	Unmarried	34	137.65	18.10
Age	upto 25	22	134.09	19.18
	26-30	18	143.56	16.82
	Above 30	4	140.50	14.15
Participation in Sports	Yes	4	124.25	10.68
	No	40	139.98	18.12

Entire Sample

From the calculations computed for the Mental Health scores of B.Ed., Trainees, it may be inferred that the B.Ed., Trainees have scored high level of Mental Health (M=138.55).

Gender

The mean scores indicate that Female B.Ed., Trainees (M=141.74) have scored high in their Mental Health than Male B.Ed., Trainees (M=118.50).

Marital Status

The mean scores indicate that Married (M=141.60) B.Ed., Trainees have secured higher level of Mental Health than Unmarried B.Ed., Trainees (M=137.65).

Age

The mean scores indicate that 26-30 years old B.Ed., Trainees (M=143.56) have scored high in their Mental Health than B.Ed., Trainees of age above 30 (M=140.50).and age upto 25 (M=134.09).

Participation in Sports

The mean scores indicate that B.Ed., Trainees, who are not participating in Sports and Games (M=139.98) have scored high in their Mental Health than the B.Ed., Trainees who are participating in Sports and Games (M=124.25).

Analysis of the Mean difference in Mental Health scores of B.Ed., Trainees between Pre Study and Post Study.

The Mean difference in Mental Health scores of B.Ed., Trainees between Pre Study and Post Study were calculated for the entire sample and its sub samples.

Table 3: The Mean difference in Mental Health Scores of B.Ed., Trainees between Pre Study and Post Study

Demographic Variable	Sub sample	N	Mean	% of Increase
Entire Sample		44	33.23	31.55
Gender	Male	6	39.83	50.63
	Female	38	32.18	29.38
Marital Status	Married	10	36.40	34.60
	Unmarried	34	32.29	30.65
Age	upto 25	22	32.64	32.17
	26-30	18	33.44	30.37
	Above 30	4	35.50	33.81
Participation in Sports	Yes	4	34.50	38.44
	No	40	33.10	30.97

Entire Sample

From the calculations computed for the Mental Health scores of Pre Study and Post Study of B.Ed., Trainees, it may be inferred that the B.Ed., Trainees have secured 31.55% increase in their Mental Health.

Gender

The mean scores indicate that Male B.Ed., Trainees (50.63%) have secured higher increase in their Mental Health than Female B.Ed., Trainees (M=29.38%).

Marital Status

The mean scores indicate that Married B.Ed., Trainees (34.60%) have secured higher increase in their Mental Health than Unmarried B.Ed., Trainees (M=30.65%).

Age

The mean scores indicate that B.Ed., Trainees of age above 30 (33.81%) have secured higher increase in their Mental Health than 26-30 years old B.Ed., Trainees (M=30.37) and B.Ed., Trainees of age upto 25 (32.17%).

Participation in Sports

The mean scores indicate that B.Ed., Trainees, who are participating in Sports and Games (38.44%) have secured higher increase in the Mental Health than the B.Ed., Trainees who are not participating in Sports and Games (30.97%).

Analysis of Mean scores of Male and Female B.Ed., Trainees with regard to their Mental Health

Ho

There is no significant difference between Male and Female B.Ed., Trainees with regard to their Mental Health.

To test the above Ho ‘t’ value has been calculated.

Table 4: Difference between Male and Female B.Ed., Trainees with regard to their Mental Health

Sub Sample	N	Mean	SD	t-value	Status of significance at 0.05 level
Male	6	78.67	8.50	6.725	Significant
Female	38	109.53	18.50		

Since the ‘t’ value is significant at 0.05 level, the above Ho is rejected and it is came to conclusion that there is significant difference between Male and Female B.Ed., Trainees with regard to their Mental Health. 4.06.06.

Analysis of Mean scores of Married and Unmarried B.Ed., Trainees with regard to their Mental Health

Ho

There is no significant difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health.

To test the above Ho ‘t’ value has been calculated.

Table 5: Difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health

Sub Sample	N	Mean	SD	t-value	Status of significance at 0.05 level
Married	10	105.20	23.00	0.019	Not significant
Unmarried	34	105.35	20.00		

Since the ‘t’ value is not significant at 0.05 level, the above Ho is accepted and it is came to conclusion that there is no significant difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health.

Analysis of Status of significance among the sub-samples of Age of B.Ed., Trainees with regard to their Mental Health.

Ho

There is no significant difference among the sub samples Age of B.Ed., Trainees with regard to their Mental Health.

To test the above Ho 'F' value has been calculated.

Table 6: Status of Significance among the Sub-samples of Age of B.Ed., Trainees with Regard to their Mental Health

<i>Sub Sample</i>	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>Status of significance at 0.05 level</i>
Between Groups	742.313	2	371.157	0.884	Not Significant
Within Groups	17223.232	41	420.079		
Total	17965.545	43			

Since the 'F' value is not significant at 0.05 level, the Ho is accepted and it is came to conclusion that there is no significant difference among the sub samples Age of B.Ed., Trainees with regard to their Mental Health.

Analysis of Mean scores of B.Ed., Trainees, who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

Ho

There is no significant difference between B.Ed., Trainees who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

To test the above Ho't' value has been calculated.

Table 7: Difference between B.Ed., Trainees who are Participating in Sports and Games and who are not Participating in Sports and Games with Regard to their Mental Health

<i>Sub Sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>	<i>t-value</i>	<i>Status of significance at 0.05 level</i>
Participating in Sports and Games	4	89.75	6.65	3.667	Significant
Not Participating in Sports and Games	40	106.88	20.73		

Since the't' value is significant at 0.05 level, the above Ho is rejected and it is came to conclusion that there is significant difference between B.Ed., Trainees who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

Analysis of Mean scores of Male and Female B.Ed., Trainees with regard to their Mental Health

Ho

There is no significant difference between Male and Female B.Ed., Trainees with regard to their Mental Health.

To test the above Ho't' value has been calculated.

Table 8: Difference between Male and Female B.Ed., Trainees with regard to their Mental Health

<i>Sub Sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>	<i>t-value</i>	<i>Status of significance at 0.05 level</i>
Male	6	118.50	10.11	4.671	Significant
Female	38	141.74	17.04		

Since the 't' value is significant at 0.05 level, the above Ho is rejected and it is came to conclusion that there is significant difference between Male and Female B.Ed., Trainees with regard to their Mental Health.

Analysis of Mean scores of Married and Unmarried B.Ed., Trainees with regard to their Mental Health.

Ho

There is no significant difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health.

To test the above Ho 't' value has been calculated.

Table 9: Difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health

<i>Sub Sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>	<i>t-value</i>	<i>Status of significance at 0.05 level</i>
Married	10	141.60	18.59	0.595	Not significant
Unmarried	34	137.65	18.10		

Since the 't' value is not significant at 0.05 level, the above Ho is accepted and it is came to conclusion that there is no significant difference between Married and Unmarried B.Ed., Trainees with regard to their Mental Health.

Analysis of Status of significance among the sub-samples of Age of B.Ed., Trainees with regard to their Mental Health

Ho

There is no significant difference among the sub samples Age of B.Ed., Trainees with regard to their Mental Health.

To test the above Ho 'F' value has been calculated.

Table 10: Status of Significance among the Sub-samples of Age of B.Ed., Trainees with Regard to their Mental Health

<i>Sub Sample</i>	<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>Status of significance at 0.05 level</i>
Between Groups	903.646	2	451.823	1.409	Not Significant
Within Groups	13145.263	41	320.616		
Total	14048.909	43			

Since the 'F' value is not significant at 0.05 level, the Ho is accepted and it is came to conclusion that there is no significant difference among the sub samples Age of B.Ed., Trainees with regard to their Mental Health.

Analysis of Mean scores of B.Ed., Trainees, who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

Ho

There is no significant difference between B.Ed., Trainees who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

To test the above Ho 't' value has been calculated.

Table 11: Difference between B.Ed., Trainees who are Participating in Sports and Games and who are not Participating in Sports and Games with Regard to their Mental Health

<i>Sub Sample</i>	<i>N</i>	<i>Mean</i>	<i>SD</i>	<i>t-value</i>	<i>Status of significance at 0.05 level</i>
Participating in Sports and Games	4	124.25	10.68	2.593	Significant
Not Participating in Sports and Games	40	139.98	18.12		

Since the 't' value is significant at 0.05 level, the above Ho is rejected and it is came to conclusion that there is significant difference between B.Ed., Trainees who are participating in Sports and Games and who are not participating in Sports and Games with regard to their Mental Health.

Calculation of Impact of Yogic Practices on Mental Health, - Paired sample.

– “t”-test and correlation “r” between Pre and Post study scores.

Ho

There is no significant impact of Yogic Practices on the Mental Health, of the B.Ed., Trainees.

To test the above Ho Paired Sample t- test scores and Correlation scores were computed with the Pre and Post Study Mental Health scores of B.Ed., Trainees to find out the Status of significance of increase in Mental Health of B.Ed., Trainees due to the Yogic Practices given.

Table 12: Impact of Yogic Practices on Mental Health, - Paired sample – ‘t’-test and correlation ‘r’ between Pre and Post Study Scores

Demo-Variable	Sub sample	N	Pre-Study		Post-Study		Difference between Pre & Post Study		Paired Samples-t-Value	Correlation ‘r’
			Mean	SD	Mean	SD	Mean	SD		
Entire Sample		44	105.32	20.44	138.55	18.07	33.23	8.23	26.77	0.916
Gender	Male	6	78.67	8.50	118.50	10.11	39.83	12.31	7.920	0.133
	Female	38	109.53	18.50	141.74	17.04	32.18	7.07	28.04	0.924
Marital Status	Married	10	105.20	23.00	141.60	18.59	36.40	7.35	15.65	0.960
	Unmarried	34	105.35	20.00	137.65	18.10	32.29	8.34	22.57	0.909
Age	upto 25	22	101.45	20.85	134.09	19.18	32.64	8.93	17.14	0.904
	26-30	18	110.11	19.82	143.56	16.82	33.44	7.57	18.72	0.927
	Above 30	4	105.00	21.67	140.50	14.15	35.50	8.81	8.05	0.966
Participation in Sports	Yes	4	89.75	6.65	124.25	10.68	34.50	5.00	13.80	0.939
	No	40	106.88	20.73	139.98	18.12	33.10	8.52	24.56	0.912

Since the ‘t’ values and ‘r’ values are significant at 0.05 level, the above Ho is rejected and it is came to conclusion that there is significant impact of Yogic Practices on the Mental Health of the B.Ed., Trainees.

V. CONCLUSION

It is therefore advised that yoga activities can be made independent from the curriculum at all educational levels. From the findings of the quasi-experimental study, it is inferred that the B.Ed., Trainees' mental health characteristics are significantly affected by yogic practices. Appropriate asanas can be trained to practice for the students. A positive attitude and mental health, future generations can be built by yoga. There is a growing body of research to support the mental health benefits of yoga. Yoga increases body awareness, relieves stress, decreases muscle tension, stress and inflammation, increases concentration and focus, and calms and centers the nervous system.

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