PSYCHONEUROBIC PROGRAMMING FOR SUSTAINABILITY OF MENTAL HEALTH DURING LOCKDOWN

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ABSTRACT

Novel Corona virus Disease (COVID-19) is an infectious disease caused by the most recently discovered corona virus. This new virus and disease were unknown before the outbreak began in Wuhan, China in December 2019. On 11th March 2020, WHO declared COVID-19 outbreak as a pandemic and reiterated the call for countries to take immediate actions and scale up response to treat, detect and reduce transmission to save people’s lives. Covid-19 global crisis has given rise to the new normal way of surviving, both personally and professionally. With individuals restricted within the four walls of their homes, mental health has taken a severe hit. Sixty-one per cent Indians are experiencing mental health-related issues because of the uncertainty and looming financial crisis during the lockdown as per the survey conducted by The Mavericks India. Women are struggling more than men as their workload has increased significantly with them carrying multiple responsibilities without any assistance from domestic helpers. It is crucial for the wellbeing of the people to lower down the effect of mental stresses to heal Psychosomatic diseases like mood, anxiety disorders, loss of memory, diabetes, obesity, hypertension, cardiovascular disease, thyroid, chronic back pain, arthritis, migraine, respiratory disorder, hepatitis, sleep disorders, kidney problems, allergies, muscular atrophy etc. are more prevalent and the incidence of schizophrenia has increased. In the present study, it will be shown effectiveness of Psycho Neurobics, an innovative techniques designed by my Guru and guide Dr. Chandrashekhar Tiwari, founder president of SIGFA Institute of Research and Development, Faridabad, Haryana, India, on psychosomatic disorders arising due to lockdown. The results will be statistically analyzed and probability for complete healing will be discussed.
INTRODUCTION

Corona virus disease (COVID-19) is an infectious disease caused by severe acute respiratory syndrome corona virus 2 (SARS-CoV-2). It was first identified in December 2019 in Wuhan, China, and has resulted in an ongoing pandemic. The first case may be traced back to 17th November 2019.

Symptoms of corona virus disease (COVID-19):

- Common symptoms:
  - Fever: 83-99%
  - Loss of Appetite: 40-84%
  - Fatigue: 44-70%
  - Loss of smell: 15 to 30%
  - Shortness of breath: 31-40%
  - Cough: 58-62%
  - Coughing up sputum: 28-33%
  - Muscle aches and pain: 11-35%

- In severe disease:
  - Difficulty breathing
  - Confusion
  - Blueish face or lips
  - Coughing up blood
  - Persistent chest pain
  - Decreased white blood cells
  - Kidney failure
  - High fever

There have been 536 confirmed cases across India and 10 reported deaths on 24th March 2020, according to Indian Council for Medical Research (ICMR), when Hon’ble Prime Minister of India Sri Narendra Modi declared a 21-days lockdown to contain the spread of corona virus in the country from 25th March to 14th April 2020. With a nationwide lockdown, India’s 1.3 billion populations join a growing list of countries that have imposed similar measures like Spain, Italy, New Zealand and others.

India’s public landscape has transformed dramatically over the last couple of months, with the most prolonged lockdown that the present generation can remember. Declared on March 24, 2020, the lockdown ensured that hundreds of millions of people were effectively confined to home. This may be effective in helping to curb the spread of the severity of COVID-19 in India, it has not, perhaps, been conducive to the emotional and mental health of some.

The lockdown applied to three main areas: physical movement out of the home, social distancing when outside the home and restricted availability of most public services while sparing essential services. There was a sudden and drastic alteration in the daily routine with many millions stranded in boarding houses and rental apartments without work and far from home.

Academic work ground to a halt with auxiliary staff like cleaners, security guards and gardeners suddenly being thrown out of their contractual work. Earlier studies have shown that this sudden loss of employment, along with financial stress or even distress, could enhance the psychological impact on the working community, shown by symptoms of increased aggressiveness and post-traumatic stress. However, the impact of the lockdown is likely to be heaviest on those who are alone, poor, already psychologically burdened or out of the mainstream at baseline.

Another needier group is the community of old and sick people, often
without immediate family caregivers in the vicinity. They are known to have a higher risk of acquiring the infection. Those who are exposed to potential sources of infection on a daily basis are even more likely to be stressed about the possibility of not only becoming infected but carrying the virus home to their families and friends. Anticipatory stress and anxiety, along with loneliness, could not only affect mental health but lead to a decline in lifestyle quality and, Ultimately, one’s health choices. Depression is a known risk factor for sleep disorders and eating disorders. However, India also offers, by virtue of its social structure, a variety of personal and social resources that help cope with such crises. Family is a such vital resource, being in close touch with relatives, in real life or virtually via social media or the Internet, alleviates stress considerably.

In fact, the extended time spent with family members, free of the stress of normal working and school days, may well have strengthened family bonds and restored balance to life, leading to an actual improvement in the quality of life during the lockdown. Of course, the opposite situation prevails with those who do not get along well with their families, inducing more conflict and promoting poorer outcomes during this period. In addition, there are many factors which operate at an individual level, such as the kind of job (menial, farming, semi-skilled, skilled, office workers, managers and professional workers), the availability of material resources if required and the psychological make-up of the individual (resilience, coping and optimism). The misinformation extended through WhatsApp, the visualisation of corona virus awareness campaigns and endless news reports are beginning to scare people.

This fear of contracting COVID-19 is now a symptom that many of us struggle with. The fear has now mingled with prejudice, given vast misinformation linking the virus to particular social groups and inaccurate details about the very nature of the virus. The current state of prejudice deeply coded into media messaging has created an atmosphere where even terminologies make the people diagnosed with COVID-19 or “COVID-suspect” sound like criminals. Recalling the HIV era, where blame became the prominent aspect of public health messaging, the work around COVID-19 has gained similar sinister overtones.

Nearly 130 suicides in the first three weeks of lockdown have been reported in prominent English daily. Of these, about 80% were linked to problems ranging from alcohol withdrawal due to the lockdown, to fear of contracting the disease, social ostracism and due to loss of jobs and buying power with further economic recession, about to hit, suicide is likely to be another problem. For students, the loss of their immediate future plans can set them back; for those responsible for households, the potential loss of job and uncertainty can beget further distress. Most of us are beginning to feel in the everyday losses of hopes and dreams that we have to negotiate in a world that is in a great state of duress. This nebulous grief – the loss of an identity, a course of action and even selfhood – is now going to engulf most of society.

**Everyone is Anxious: Sleepless Nights, Worries, Uncertainty**

Experiencing panic attacks, exhaustion, anxiety-induced headaches, difficulty in sleeping and overall a heightened sense of anxiety in the light of COVID-19. A reference can be taken from history in this regard as every time a disaster such as an epidemic or war took place, some people developed toxic symptoms such as irritability, frustration, anger, sleep disorder, anxiety, post-traumatic stress, depression, absenteeism, panic attacks, paranoia and even violence in some cases.

Restriction in the movement and isolation - the very foundations of a lockdown - are likely to make a large percentage of India’s 1.35 billion population experience a secondary public health crisis, experts worry as the
number of mental health cases is already prevalent in the country.

**Anxiety Disorders**

People with anxiety disorders, including panic disorder and agoraphobia, sometimes use alcohol or other substances as a means of coping with fear and anxiety. Some studies show that people with anxiety disorders are up to three times more likely to have an alcohol or other substance abuse disorder than those without an anxiety disorder. Abusing alcohol or other drugs to control stress and anxiety is classified as a maladaptive behaviour because it provides only temporary relief from anxiety and actually may create more long-term problems. Substance abuse does not fix the underlying problem and long-term alcohol or drug abuse can lead to tolerance, dependence and for some, addiction.

Many challenges in life require ongoing action — both behaviourally and mentally. Sometimes we struggle and succeed. Sometimes we struggle and fail. When the latter occurs, we can try again or we can withdraw from the conflict with a resigned acceptance of our situation. When it comes to panic disorder or other anxiety disorders, withdrawing is incompatible with recovery. It is a maladaptive behaviour because it means we submit to the illness and become unable to meet the demands of life. For many people, the recovery process from anxiety disorders is slow and filled with setbacks. Recovery is accomplished with diligence and a strong resolve not to accept the control that panic attacks and other anxiety-related symptoms have over our lives. It’s usual for people who have panic disorder, agoraphobia or another anxiety disorder to experience frustration because of their condition. Sometimes this frustration can develop into anger toward yourself, anger at your situation or anger toward others.

**PSYCHOSOMATIC DISEASES**

Psychosomatic means mind (psyche) and body (soma). A psychosomatic disorder is a disease which involves both mind and body. Some physical diseases are thought to be particularly prone to be made worse by mental factors such as stress and anxiety. The current mental state can affect the physical disease at any particular time.

- There is a mental aspect to every physical disease. How we react to disease and how we cope with disease vary greatly from person to person.
- There can be physical effects from mental illness.

However, the term psychosomatic disorder is mainly used to mean "a physical disease that is thought to be caused or made worse, by mental factors".

Some physical diseases are thought to be particularly prone to be made worse by mental factors such as stress and anxiety. It is thought that the actual physical part of the illness (the extent of a rash, the level of the blood pressure, etc) can be affected by mental factors. This is difficult to prove. However, many people with these and other physical diseases say that their current mental state can affect how bad their physical disease is at any given time. Some people also use the term psychosomatic disorder when mental factors cause physical symptoms but where there is no physical disease.

Each disease has its own treatment options. For physical diseases, physical treatments such as medication or operations are usually the most important. However, healthcare workers will usually try to treat a person as a whole and take into account mental and social factors which may be contributing to a disease. Therefore, treatments to ease stress, anxiety, depression, etc, may help if they are thought to be contributing to physical diseases.

**METHODOLOGY**

The lockdown and COVID-19 have also brought to the fore great levels of community distress, which require psychosocial support that has to do with
meditation, counselling and strategies of self-care. The affect of lockdown such as anxiety, depressive symptoms, lower back pain, constipation, low confidence, phobia, obsessions, financial loss, sinking feeling, symptoms of internet addiction, pornography addiction, experiences of hostility, suicidal tendencies, changes in food and sleep habits, social empathy, fear syndrome, fear of death and relationship quality, to construct the overall picture of social and psychological experience during the lockdown period.

The researchers first did qualitative in-depth telephonic interviews to understand the context better before finally framing their research study. They also conducted qualitative telephonic interviews from 31\textsuperscript{st} March to 31\textsuperscript{st} May 2020. The participants were selected from known professional friends. The study included 25 urban adults of more than 50 years. All are well educated; some of them are post graduate.

Participants have been requested to watch the video of Neurobic Spa daily in the night before going to bed. They have been demonstrated the methods (online) in details to charge a glass of water with 3-D Orange stereographic plate and asked to mix this charged water to 20 liters of drinking water and use this charged water throughout the day. They have also been asked to charge foods with 3-D Yellow stereographic plate.

All participants have been asked to concentrate on 3-D Indigo stereographic plate and to chant “O” sound with Pran Mudra (Enlightening Neurobics) for 10-15 minutes in the morning as shown below:

Figure 1: 3D Orange and Yellow Stereographic Plates

All participants have been asked to concentrate on 3-D Indigo stereographic plate and to chant “O” sound with Pran Mudra (Enlightening Neurobics) for 10-15 minutes in the morning as shown below:
After that all participants have been asked to concentrate on 3D Violet stereographic plate and to chant “Humming” sound with Vayu Mudra (Blissful Neurobics) for 10-15 minutes daily as shown below:

Figure 1: Pran Mudra and Enlightening Neurobics
To enhance the will power and determination during the lockdown to eliminate the fear syndrome and suicidal tendencies, all participants have been asked to do Empowering Neurobics with Mahaveer Mudra as depicted below:
To cleanse metabolic waste from the body, strengthen of digestive system, increase appetite and sugar control in the blood by strengthening the pancreas, they have been asked to do Joyful Neurobics with Agni Mudra and to chant “Humming” sound for 10-15 minutes, 4 times with an interval of 3-4 hours daily as depicted below:

![Figure 4: Agni Mudra and Joyful Neurobics](image)

To control the blood pressure, tiredness and insomnia problems, they have been asked to concentrate on 3D Green stereographic plate and to chant “Humming” sound with Apan Vayu Mudra (Loveful Neurobics) for 10-15 minutes, 4 times with an interval of 3-4 hours daily.

![Figure 5: Apan Vayu Mudra and Loveful Neurobics](image)

The participant’s rights and privacy have been protected throughout the study. The purpose of the study, the research methods and other precautions has been disclosed to the participants and their family members only.

**STATISTICAL ANALYSES OF RESULTS**

The blood pressure in mmHg and blood sugar level has been measured by 25 participants at home during lockdown. The data has been provided by participants on 31st March (initial data) and 30th April and 31st May.
2020. The blood pressure in mmHg and blood sugar level has been depicted in the figures. 26th participant data is mean of 25 participant’s data. The data has been analyzed statistically using Microsoft Excel and the descriptive statistical analysis has been represented as frequency, variance, mean and standard deviation etc.

**Figure 6:** Blood Pressure of Participants on 31st March 2020

**Figure 7:** Blood Pressure of Participants on 31st May 2020 after PNP for two months

**Figure 8:** Blood Sugar level of Participants on 31st March 2020
Figure 9: Blood Sugar Level of Participants on 31st May 2020 after PNP for two months

Figure 10: Histogram for Standard Deviation of Blood Pressure

Figure 11: Histogram for Standard Deviation of Blood Sugar level
Upon normalization, the probability to decrease Blood Pressure and Blood Sugar level is 68% within the range of 2 (+1) of standard deviation, 96% within the range of 4 (+2) of standard deviation, 99.7% within the range of 6 (+3) of standard deviation and 100% within the range of 8 (+4) of standard deviation.

**Figure 13**: Mathematical Model for affect of PNP on BP (Systolic) over two months

**Figure 14**: Mathematical Model for affect of PNP on BP (Diastolic) over two months
CONCLUSIONS

Life tends to be full of challenges. It is the ability of people to face these obstacles that determines how successful they come. Despite the discomfort associated with these challenges they actually provide a useful purpose. They give individual the chance to grow and learn new things. If there were no challenges in life there would be no need to develop as humans. Rather than being a bad thing these challenges in life can be of great service to humanity. There are many people who just do not feel confident in meeting the challenges that come their way in life. They resist and this leads to further discomfort. The individual then attempts to escape this pain by adapting maladaptive behaviours. One way that they might do this is by turning to alcohol or drugs. In the beginning these substances give the individual the impression that they are escaping their problems, but this is only a temporary reprieve. They are actually making things much worse and they risk falling into addiction. In many cases substance abuse may boil down to a failure to deal with life.

As expected, the presence of depressive and anxiety symptoms was linked to a higher chance of self-reported sleep disorder and changes in food patterns. People who called their family members more during the
lockdown than in the same period six months earlier and those who shared their vulnerabilities with their loved ones, were more likely to have social empathy and better social relationships.

The qualitative part of the study reveals that resilience and healthy coping strategies helped even high-risk individuals to stay positive, view the lockdown as a good time to ruminate on their individual and social identity and take steps to improve their relationships with their families.

It is clear that the study sample is extremely limited, non-inclusive and non-representative of the Indian population at large. Rather, this was a group of well-educated young Indians with qualitative interviews. This may be the first study to look at the differential psychological impact of the lockdown and very effective healing through Psychoneurobics.

While many people are experiencing heightened anxiety as they cope with the impact of the COVID-19 pandemic, the challenges of life in lockdown may be particularly complex for people with existing mental health conditions.

Due to high scattering in blood pressure and blood sugar data of participants, may be due to emotional & environmental conditions/effects, mental state etc., the mathematical model developed is not seems to be viable. More studies are required for effective model to predict the blood pressure and blood sugar after psychoneurotic programming. Psychoneurobics is very effective in controlling the blood pressure and blood sugar due to the effect of lockdown.

REFERENCES

- The Hindu, Business Line, Mumbai Published on 17th May 2020 – A survey by The Mavericks India