The Effect of Patience Education and Hatha Yoga Exercises on College Student's Depression during Corona Virus

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Abstract

This study aimed to examine the effects of patience education grounded in religious doctrines and Hatha Yoga exercises on depression among college students during the COVID-19 outbreak, a period marked by increased mental health challenges such as depression, anxiety, and substance abuse due to home quarantine and physical distancing measures. A semi-experimental design was employed, featuring both pre-test and post-test assessments, with two experimental groups and one control group. The sample comprised 45 female students from Inion University who scored one standard deviation above the mean on the Beck Depression Inventory (BDI). Participants were selected through convenience sampling and randomly assigned to two experimental groups (n=15 each) and one control group (n=15). The first experimental group received patience education based on religious teachings, while the second group engaged in Hatha Yoga exercises. The control group did not receive any intervention. All training sessions were conducted virtually via video conferencing. Both before and after the intervention, participants completed the Beck Depression Short Inventory (BDI-S). Data analysis was performed using Analysis of Covariance (ANCOVA). The results indicated a significant reduction in mean depression scores among the participants in the patience education group compared to those in the Hatha Yoga group in the post-test (P < 0.05). These findings suggest that patience education based on religious doctrines is more effective in alleviating depression among female students than Hatha Yoga exercises. It is recommended that a combined program integrating patience training rooted in religious teachings with Hatha Yoga practices may serve as an effective approach to mitigate depression in this demographic.

Keywords: Patience Education, Hatha Yoga, Depression, College Student.

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Introduction

COVID-19, a novel coronavirus identified in late 2019, is part of a larger family of viruses that can cause respiratory infections ranging from mild colds to severe diseases, such as Middle East Respiratory Syndrome (MERS) and severe acute respiratory syndrome (SARS) (Alipour et al., 2020). Symptoms of COVID-19 vary in severity, encompassing fever, cough, and difficulty breathing (Wu & McGoogan, 2020). Since its emergence, the virus has proliferated globally, prompting widespread public health responses (Farnoosh et al., 2020). Governments across the world, including in Turkey, have implemented measures such as closing educational institutions and promoting online learning to mitigate the spread of the virus. Additional measures, including social distancing defined as maintaining a minimum distance of 1.5 meters from others and limiting social interactions have been enforced (Delavar & Shokouhi Amirabadi, 2020). The psychological impact of the pandemic has been significant, with research indicating that home quarantine and physical distancing can lead to mental health challenges such as depression, anxiety, substance abuse, and overall diminished wellbeing (Ahmed et al., 2020; Wang et al., 2021).

The uncertainty surrounding the disease, combined with the lack of a definitive treatment and high mortality rates, has contributed to heightened levels of anxiety and stress (Wang et al., 2020). University students, in particular, are vulnerable to experiencing psychological distress during such crises (Bustin, Vahidifard, & Biranvand, 2020). Depression, characterized by mood disturbances, feelings of worthlessness, and social withdrawal, can significantly impair an individual's functionality and societal contributions (Hasanzadeh Taheri et al., 2011). A crosssectional study conducted by Islam et al. (2020) surveyed 476 university students in Bangladesh, revealing that approximately 15% experienced moderate depression, with higher rates observed among older students and those facing financial burdens. Given that young people represent a vital demographic for national development, addressing mental health issues within the student population is imperative (Najafi Kalyani et al., 2013). There is a pressing need for both governmental and academic interventions to alleviate depression among university students.

Interventions such as patience training based on religious teachings (Hossein-Sabet, 2008) and Chi Kung exercises (Yang, 1987) are suggested as potential methods for reducing depression and anxiety, thereby enhancing overall well-being during this crisis. Islamic teachings offer rich resources that address coping mechanisms in times of

adversity, framing challenges as tests of faith (Izadi, 2010). Patience is emphasized as a key coping strategy, encompassing endurance, self-control, and a positive outlook in difficult situations (Khormaie, Farmani, & Soltani, 2014). Evidence suggests that cultivating patience can mitigate negative emotions and promote psychological resilience, demonstrating significant correlations with reduced depression and improved mental health (Razavidoost et al., 2016; Schnitker & Emmons, 2007). Patience also fosters hope, a crucial component of mental and physical health. It enables individuals to maintain a perspective regarding future outcomes, contrasting sharply with despair, a significant feature of depressive states (Khormaie et al., 2014). Notably, patience is a skill that can be cultivated. As emphasized by Imam Ali (A.S.), developing resilience in the face of difficulties is a virtuous habit (Mahdiyar, Taghavi, & Goodarzi, 2017). In religious contexts like Turkey, cultural and religious elements converge, suggesting that Islamic principles can offer effective strategies for navigating life's challenges and enhancing mental health (Khamedi, 2017). In addition to psychological interventions, complementary alternative medicine, including practices such as Hatha Yoga, has gained attention for its potential benefits in managing health during the pandemic (National Health Commission of PRC SAoTMoC, 2020). Hatha Yoga, which integrates physical postures (asana) and breathe control (pranayama), has a storied history of promoting health and well-being (Cheung & Lee, 1986). Recent studies suggest that Hatha Yoga may improve respiratory function (Lee et al., 2003) and bolster the immune system (Oh et al., 2020),

Regular practice promotes mental tranquility and balance, allowing individuals to explore their inner energy and enhance self-awareness (Jwing-Ming, 2014). Empirical studies have demonstrated the effectiveness of exercise programs, including Hatha Yoga, in alleviating depression and improving overall psychological well-being (Chow, Dorcas, & Siu, 2012; Oh et al., 2020; Tsang et al., 2006). The widespread impact of COVID-19 in Turkey has underscored the urgent need to address the mental health of students, who face significant challenges due to prolonged isolation and restricted activities. Given the lack of experimental research in this area, investigating virtual therapeutic strategies to alleviate student depression during this pandemic is critical for public health officials

making it a viable option for addressing various chronic

conditions, including mental health disorders. The

practice of Hatha Yoga involves physical exercises that are

moderate in intensity and can be performed flexibly,

requiring no specialized equipment (Shirvani &

Rostamkhani, 2020).

and mental health planners. This study aims to compare the effects of patience training based on religious teachings and Hatha Yoga exercises on depression among female students during the COVID-19 pandemic, contributing to the broader discourse on mental health interventions in crisis situations.

Literature Review

In a meta-analysis conducted by Smith, McCullough and Poll (2003), a significant negative correlation was identified between religiousness and depressive symptoms, suggesting that greater religious engagement is associated with lower levels of depression. Complementarily, an experimental study by Hossein-Sabet (2008) explored the impact of patience training on anxiety, depression, and happiness among 65 female students. The findings indicated that patience training serves as an effective intervention for reducing anxiety and depression while enhancing happiness in adolescents experiencing these mental health challenges. Further emphasizing the role of patience, Patten (2014) posits that individuals who exhibit higher levels of patience in enduring hardships tend to receive more support from their social networks and maintain a positive outlook on the future. This perspective correlates with better outcomes in depression treatment. Khormaie et al. (2014) conducted a comparative analysis of patience components such as exaltation, patience, satisfaction, endurance, and delay across three groups: patients with generalized anxiety, those with depression, and a control group of healthy individuals. Their results revealed that anxious patients scored higher in the sublimation component compared to depressed patients and healthy individuals.

Additionally, healthy subjects demonstrated superior scores in patience and satisfaction compared to both depressed and anxious participants, who exhibited lower endurance scores. Notably, the depressed group recorded higher scores in the delay component than the healthy group. In a similar vein, Mahdiyar et al. (2017) found that endurance and satisfaction, along with the overall patience score, negatively predicted depression, indicating that higher levels of these components are associated with lower depressive symptoms. Bridges and Sharma (2017) explored the efficacy of yoga interventions in alleviating depression symptoms, concluding that despite some limitations, yoga has shown effectiveness in reducing depressive symptoms. Conversely, a study by Sharifi Saki et al. (2018) indicated no significant relationship between patience and depression among women with breast cancer, although certain subscales, including transcendence and

satisfaction, were found to be related to depressive symptoms. Babatorab (2019) examined the benefits of exercise, yoga, and meditation in addressing depression and anxiety disorders. The study highlighted that many individuals suffering from these conditions turn to nonpharmacological interventions such as exercise, yoga, and meditation, which can effectively improve symptoms. Moreover, Uebelacker et al. (2022) investigated adolescents' perceptions of yoga as a treatment for stress and depression. The results indicated that participants recognized yoga as a potentially beneficial intervention for teenagers dealing with depression or stress, further supporting the viability of yoga as a complementary therapeutic approach. Overall, these studies collectively underscore the importance of both patience and physical interventions, such as yoga, in addressing mental health challenges, particularly in youth and vulnerable populations.

Materials and Methods

The present study employed a semi-experimental design, consisting of two experimental groups and one control group. The statistical population comprised all female students from Eastern Anatolia in 2024, with a sample of 45 participants selected through convenience sampling. These participants were randomly assigned to one of three groups: patience training based on religious teachings (n=15), Hatha Yoga exercises (n=15), and a control group (n=15). To assess depression among the female students during the COVID-19 pandemic, a clinical psychologist from Inion University utilized a structured clinical interview conducted via Skype. This interview method included both clinical and research versions; for the purposes of this study, the clinical version was employed. This version is designed according to the DSM-IV-TR diagnostic criteria and is specifically used to diagnose Axis I disorders. In this research, the Iranian version of the structured clinical interview was utilized, with reported validity and reliability coefficients ranging from 0.70 to 1.00 (Mohammad Khani et al., 2011).

Data Analysis and Results

Data were analysed using SPSS-20 statistical software, employing the univariate analysis of covariance (ANCOVA) to test the variables of interest. The results of the study are presented in Tables 1, 2, and 3. Participants ranged in age from 19 to 25 years and exhibited a standard deviation above the mean on the Beck

Depression Inventory, with no reported physical or motor disabilities. Following the approval from Inion University and coordination with relevant authorities, all female students willing to complete the Beck Depression Questionnaire and meeting the study's inclusion criteria were invited to participate through video calls. During the initial meeting, the researcher introduced themselves, addressed any questions from the participants, and explained the process for completing the questionnaires. After administering the pre-test (Beck Depression Questionnaire - short form), arrangements were made for subsequent sessions. A total of 45 female students who met the entry criteria were randomly assigned to two experimental groups (Group 1: patience training based on religious teachings; Group 2: Hatha Yoga exercises) and one control group (n=15). During the first meeting for the experimental groups, a summary of the objectives and methods for both the patience training and Hatha Yoga exercises was provided. Participants were instructed not to discuss the session content with other students and to refrain from engaging in any concurrent educational or therapeutic programs. The patience training group participated in video conferences for a total of 11 sessions, consisting of two one-hour sessions per week. The Hatha Yoga group engaged in 11 sessions as well, with two sessions lasting 30 to 40 minutes each week. The control group received no training. All training sessions were conducted virtually via the Skype platform, with instructional materials presented in PowerPoint supplemented format, by images. Participants in the experimental groups were also assigned homework related to each session. Following the completion of the training, a post-test (Beck Depression Questionnaire - short form) was administered to all three groups to assess the outcomes.

Tools of Collecting Information

Beck Depression Questionnaire (Short Form)

Beck's Depression Inventory is one of the most widely recognized instruments for assessing depression, developed by Professor Aaron Beck. This questionnaire comprises 21 items, each featuring four statements that correspond to various symptoms of depression, rated on a scale from zero to three. The total score for an individual is derived from the sum of scores across all items. The validity and reliability of Beck's Depression Inventory have been extensively studied, yielding consistently high results. In 1988, Beck and his colleagues reported an internal consistency reliability coefficient for the questionnaire items ranging from 0.73 to 0.86. Furthermore, the

correlation coefficient between the Beck Depression Inventory and the Minnesota Multiphasic Personality Inventory (MMPI) was found to be 0.74, indicating a strong relationship between these assessment tools. More recently, a study conducted at Inion Hospital demonstrated a validity coefficient of 0.70 and a reliability coefficient of 0.77 when applying the Beck Depression Inventory to both healthy and clinical populations (reference needed). These findings affirm the instrument's robustness as a reliable measure of depression in diverse groups.

Intervention Methods

Patience Training based on Religious Teachings

This treatment method, developed by Hossein-Sabet (2008), has been validated for its effectiveness in addressing depression, anxiety, and enhancing happiness. All training sessions were conducted virtually via group video calls and video conferencing platforms. Participants were assigned homework related to each session, which they submitted to the researcher on the same day via video conference. The homework was then reviewed and discussed in the subsequent session, allowing for continuous engagement and feedback throughout the intervention process.

Hatha Yoga Exercises

Traditional Chinese Hatha Yoga focuses on harmonizing the body, breath, and mind through a series of movements. Research has demonstrated its benefits for both mental health, including reduced stress and anxiety, and physical health, such as improved sleep quality, increased stamina, enhanced kidney function, and lower blood pressure, as well as alleviating back pain (reference needed). These exercises have proven effective in promoting mental well-being and reducing symptoms of depression (reference needed). During the virtual sessions, participants were instructed to perform each Hatha Yoga movement on the same day in their backyards on a soft mat. They then sent video recordings of their practice to the researcher via video conference, which were reviewed and evaluated in the following session. According to Table 1, patience education based on religious doctrines had a significant positive effect on reducing depression among students during the pandemic. Table 2 indicates that Hatha Yoga exercises also had a significant positive impact on lowering depression levels in these students. However, as shown in Table 3, the effect of patience education based on religious teachings on reducing depression was significantly greater than that of Hatha Yoga exercises.

 Table 1

 Ifferences between Depression in Post-Test of Control and Patience Education Based on the Religious Doctrines

Source of Change	SS	df	MS	F	P	Eta
The Effect of Pre-Test	552.16	1	552.16	1489.1	0.001	0.987
Group Effect	315.14	1	315.14	1311.4	0.001	0.776
Error	6.321	27	0.179			
Total	5361	30				

 Table 2

 Results of differences of Depression in the Post-Test between Control Group and Hatha Yoga Exercises

Source of Change	SS	df	MS	F	P	Eta
The effect of Pre-Test	547.16	1	547.16	1493.1	0.001	0.985
Group Effect	122.18	1	122.18	40124	0.001	0.746
Error	8.389	27	0.434			
Total	4987	30				

 Table 3

 Depression in the Post-Test between Patience Educations Based on the Religious Doctrines and Hatha Yoga Exercises

Source of Change	SS	df	MS	F	P	Eta
The Effect of Pre-Test	512.15	1	512.15	2643.1	0.001	0.967
Group Effect	81.16	1	81.16	452.4	0.001	0.662
Error	5.57	27	0.162			
Total	6432	30				

Discussion

The aim of this research was to compare the effects of patience training based on religious teachings and Hatha Yoga exercises on the depression levels of students during the COVID-19 pandemic. The findings indicated that the depression scores of female students significantly decreased in the post-test for those who underwent patience training compared to the Hatha Yoga group and the control group. Notably, there seems to be a gap in the existing literature regarding the effectiveness of these specific interventions in the context of COVID-19, making this research particularly relevant. The results align with previous studies by Khormaie et al. (2014) and Mahdiyar et al. (2017), which highlighted the negative correlation between patience (especially endurance and delay components) and depression. They also support the findings of Patten (2014), Hossein-Sabet (2008), and Ghadampour, Rahimipour and Khalili Goshnigani (2018), which emphasized the significant role of patience training in enhancing resilience and reducing depression, particularly in challenging situations. Conversely, the study by Sharifi Saki et al. (2018) noted no significant relationship between patience and depression in women with breast cancer, indicating variability in findings based on different contexts. The COVID-19 pandemic has created unprecedented global health challenges, leading to not only physical health concerns but also increased psychological distress, including depression, anxiety, and stress. In response, it is crucial to explore remote psychotherapy and complementary methods, utilizing technologies such as video conferencing to deliver mental health interventions effectively. This study underscores the potential for religious and spiritual approaches to help individuals cope, particularly in cultures where religious adherence is strong. Patience, as an emotional state during times of adversity, fosters inner peace and resilience. Techniques such as "writing a letter to God" can help individuals process unspoken feelings, leading to reduced stress and improved mental health outcomes. The intervention also emphasizes the importance of prayer and forgiveness, which can enhance emotional regulation and contribute to overall psychological well-being. Hatha Yoga, recognized for its benefits in stress reduction and emotional regulation, serves as a gentle exercise method that can be performed by anyone, regardless of age or fitness level. This flexibility makes it an ideal intervention during the pandemic, allowing participants to engage in physical activity while adhering to health guidelines. The research highlights that both patience training and Hatha Yoga exercises effectively reduce depression among students, with patience training demonstrating a greater

impact. This finding emphasizes the importance of psychological physical integrating and approaches to address mental health issues, particularly during crises. Future research could explore long-term effects and implement follow-up programs to assess the sustained impact of these interventions. While the study's single-sex design may limit generalizability, it provides valuable insights into effective strategies for enhancing mental health during challenging times. Overall, combining psychological and physical approaches can significantly contribute to alleviating depression and promoting well-being among students and other vulnerable populations.

Conclusion

In conclusion, patience training based on religious teachings has proven to be more effective than Hatha yoga exercises in reducing depression among female students during the COVID-19 pandemic. This finding is supported by both the current research and previous studies, indicating the significant role that patience

training plays in enhancing resilience and mental well-being. Given these results, it is recommended that a combined program incorporating patience training based on religious teachings and Hatha yoga exercises be implemented. Such a program could be delivered in person or through virtual platforms, adhering to health protocols during quarantine periods. This integrated approach not only addresses psychological needs but also promotes physical well-being, making it a valuable intervention for students. Psychologists and sports coaches are encouraged to advocate for this combined training program, and it should be considered by health officials as a proactive measure to mitigate depression and support the mental health of students in these challenging times.

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