



Effect Of Yogic Practice On Selected Psychological Variables Among Specially Abled Students Of West Bengal

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Abstract

Yoga constitutes a collective of physical, mental, and spiritual practices or disciplines that originated in ancient India, with the objective of regulating body and mind to achieve various salvation goals, as observed in the Hindu, Jain, and Buddhist traditions. One of the foremost advantages of yoga is its capacity to augment mental resilience. Specially-abled students frequently encounter elevated levels of stress and anxiety due to difficulties associated with their conditions. The study examined the effect of yogic practice on selected psychological variables among specially-abled students of West Bengal. For the purpose of the study 50 Deaf and Dumb school students selected from various district of West Bengal equally divided two group (25 in each group), i.e. Group I from Experimental group got 8 weeks Yogic training and Group II for Control group didn't get any experimental training. Pre and post test scores were collected for both groups. After analysis of data (SPSS 27.0- Descriptive statistics, Independent 't' test) it was found that the findings collectively reinforce the notion that structured interventions can serve as effective mechanisms in promoting positive transformations in self-concept, particularly when they are tailored to address specific components of individual self-awareness and self-esteem and emotional intelligence scores between pre-test and post-test evaluations in both the experimental and control

groups indicates the substantial impact of the intervention on the advancement of emotional intelligence.

Keywords: yoga, self-concept, emotional intelligence, self-esteem etc.

Introduction

Yoga may possess pre-Vedic origins; however, it is initially evidenced in the early first millennium BCE. It evolved as different traditions in the eastern Ganges basin drew from a shared body of practices, including Vedic components. Yoga practices are mentioned in the Rigveda and early Upanishads. However, structured yoga notions emerged between the fifth and sixth centuries BCE in ancient India's ascetic and Śramaṇa movements, including Jainism and Buddhism. The Yoga Sutras of Patanjali, the authoritative text on Hindu yoga, which is based on samkhya yet influenced by Buddhism, is believed to date back to the early centuries of the Common Era. Texts on Hatha yoga began to appear between the ninth and eleventh centuries, emerging from tantra.

Yoga constitutes a collective of physical, mental, and spiritual practices or disciplines that originated in ancient India, with the objective of regulating body and mind to achieve various salvation goals, as observed in the Hindu, Jain, and Buddhist traditions.

Yoga further promotes the social integration of specially-abled students by fostering a sense of community and belonging. Group yoga classes encourage social engagement and collaboration, supporting students in developing interpersonal skills. These sessions also advocate for inclusivity and diminish stigma, nurturing a supportive atmosphere for students to flourish. According to Field et al. (2010), yoga-based group interventions positively influence social behaviors in children with developmental delays.

Emotional regulation is vital for the overall welfare of specially-abled students, many of whom contend with mood fluctuations and emotional outbursts. Yoga cultivates a sense of inner tranquility and emotional stability. Techniques such as yoga nidra and guided meditation allow students to engage with their emotions and process them in a constructive manner. Evidence suggests that consistent yogic practices can mitigate symptoms of depression and enhance emotional well-being in individuals with autism spectrum disorder (ASD) (Rosenblatt et al., 2011).

One of the foremost advantages of yoga is its capacity to augment mental resilience. Specially-abled students frequently encounter elevated levels of stress and anxiety due to difficulties associated with their conditions. Consistent practice of pranayama and mindfulness meditation can assist in lowering cortisol levels, thus alleviating stress (Khalsa et al., 2009). Research indicates that yoga enhances focus, concentration, and cognitive functioning in students diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) (Jensen and Kenny, 2004).

Yoga facilitates emotional regulation by fostering mindfulness and awareness of the present moment. Mindfulness, an essential aspect of numerous yoga practices, entails concentrating attention on the present while recognizing and accepting one's thoughts and emotions without judgment. Studies have shown that yoga practitioners display greater emotional resilience and fewer symptoms of depression and anxiety compared to non-practitioners (Sharma and Haider, 2013). The practice enhances the activity of the prefrontal cortex, which plays a role in regulating emotions and decision-making, while diminishing activity in the amygdala, the brain's center for fear (Hölzel et al., 2011).

The influence of yoga on cognitive functioning is another area of focus within psychological research. Engaging in yoga has been demonstrated to enhance attention, memory, and executive functions. For example, Gothe et al. (2013) found that an eight-week yoga intervention significantly improved working memory and cognitive flexibility in older adults. These enhancements are attributed to the meditative components of yoga, which promote neuroplasticity and increase gray matter volume in brain regions linked to cognition, such as the hippocampus and frontal cortex.

Yogic practices have been incorporated into therapeutic interventions for a variety of mental health disorders, including depression, anxiety, and post-traumatic stress disorder (PTSD). Yoga-based interventions are particularly effective as supplementary treatments for depression. A meta-analysis conducted by Cramer et al. (2013) concluded that yoga significantly lessens depressive symptoms, with effects comparable to those of pharmacological treatments. In the case of PTSD, yoga has been found to relieve symptoms by enhancing interoceptive awareness and fostering a sense of safety within one's body (van der Kolk, 2015).

Regular yoga practice promotes a sense of well-being and life satisfaction. This effect can be attributed to yoga's role in facilitating a balanced autonomic nervous system, enhancing self-awareness, and cultivating positive psychological states. A study by Ross et al. (2016) demonstrated that individuals who practiced yoga

regularly reported higher levels of happiness and a greater sense of purpose compared to those who participated in other forms of physical exercise.

The psychological benefits of yoga can be elucidated through several mechanisms:

Neurophysiological Changes: Yoga influences brain structures and functions, thereby enhancing neurogenesis, neuroplasticity, and levels of neurotransmitters.

Mind-Body Integration: The practice integrates physical and mental processes, thus fostering a harmonious state of being.

Stress Hormone Regulation: Yoga effectively reduces levels of cortisol and other hormones associated with stress.

Social Connection: Group yoga sessions enhance feelings of social support and belonging, which further contribute to psychological well-being.

While the psychological benefits of yoga are well-documented, certain limitations must be acknowledged. Most studies depend on self-reported measures, which are inherently subject to bias. Additionally, variations in yoga styles and practices can render standardization of interventions challenging. Future research should concentrate on longitudinal studies with larger sample sizes and investigate the effects of specific yoga components on psychological outcomes.

The incorporation of yoga into daily life provides profound psychological benefits, ranging from stress reduction and emotional regulation to improved cognitive functioning and mental health. As scientific evidence continues to substantiate these effects, yoga is becoming increasingly acknowledged as a valuable tool for enhancing mental well-being. By promoting a deeper connection between the mind and body, yoga facilitates the attainment of holistic psychological health. This study examines the effects of yogic practices on specific psychological variables among specially-abled students in West Bengal, a region distinguished by its rich cultural heritage and an increasing focus on inclusive education.

STATEMENT OF THE PROBLEM

The study examined the effect of yogic practice on selected psychological variables among specially-abled students in West Bengal. It focused on understanding how regular engagement in yogic activities influenced specific psychological aspects (including Self-Concept, Emotional Intelligence & Mental Toughness) in this population.

Objectives of the study

1. The objective of the study was to find out the effect of Yogic practices on Self-Concept Students of West Bengal.
2. The objective of the study was to find out the effect of Yogic practices on Emotional – Intelligence Students of West Bengal.

Hypothesis

1. It was hypothesized that there shall not be any significant effect of Yogic practices on Self Concept among specially Abled (Deaf and Dumb) students of West Bengal.
2. The hypothesis proposed that there shall not be any significant effect of Yogic practices on Emotional Intelligence among specially Abled (Deaf and Dumb) students of West Bengal.

Delimitation

1. The study was delimited to Deaf and Dumb school students from various district of West Bengal only.
2. The study was delimited to the following selected Psychological variables.
 - a) Self-Concept
 - b) Emotional Intelligence
3. The study was delimited to the age ranging from 14-22 years of male students.
4. It was delimited that the selected (50) Deaf and Dumb school students from various district of West Bengal equally divided two group (25 in each group), i.e. Group I from Experimental group and Group II for Control group.
5. The type of yogic practices implemented was standardized, focusing on basic asanas, pranayama, and Kriya and Meditation techniques.
6. The study excluded students with severe physical or cognitive disabilities that could hinder participation in yogic practices.

7. The duration of yogic practice intervention was limited to a specific period, such as 8 weeks.

Limitation

1. Research Scholar has no direct control on the behaviour of the subjects which might be considered as one of the limitations.
2. The study was limited to specially-abled students residing in West Bengal, which restricted the generalizability of the findings to other regions.
3. The sample size was relatively small, which may have influenced the reliability of the results.
4. Variations in participants' pre-existing fitness levels and personal lifestyles may have influenced the outcomes but were not controlled for.
5. The study relied on self-reported measures for psychological variables, which might have introduced biases.
6. The study has only one experimental and one control group only.

METHODOLOGY

Selection of subjects

Total Fifty disabled (Deaf & Dumb) or specially abled students of West Bengal were selected as subjects for the study. Among them twenty-five (25) male Deaf & Dumb boys' students will be treated as control group (n-25) and rests of twenty-five (25) were selected as experimental group. All the subjects will be in between the age of 14-22 years. Subjects were selected from different various districts disabled institutes of West Bengal, State of India.

Criterion measures

On the basis of literature available, expert's opinion and according to the feasibility of the study, considering the limitation of disabled children, availability of instrument and equipment's following Psychological variables are selected for the present study.

Table: -1
Independent Variables

SL. NO.	YOGIC TREATMENT	ITEAMS		
1.	PRAYER	Chanting	Padmasana	Shalabhasana
2.	ASANA	Sukhasana	Vajrasana	Naukasana
		Pascimottanasana	Taḍasana	Shavasana
		Halasana	Cakrasana	Ardha- matsyendrasana
		Dhanurasana	Bhujangasana	
3.	KRIYAS	Jal-Neti	Kapalabhati	
4.		Savitri	Bhamri	

	PRANAYAMA	Anuloma Viloma	Shitali
5.	MEDITATION	Body Awareness	
6.	RECREATION		

Table: -2
Dependent Variables and Criterion Measures

Physiological Variables	Tools/Test/Equipment Used
Self-Concept	Dr. Raj Kumar Saraswat, 1984
Emotional-Intelligence	Anukool Hyde, Sanjyot Pethe, Upinder Dhar, 2002

Experimental Design

For the study pre-test & post-test with randomized group design. Which will consist of one control group (n=25) and one experimental group Deaf & Dumb (n=25) will be used. Equal numbers of subjects were assigned randomly to both the groups. Experimental training given up for eight weeks for five alternative days.

Statistical Technique for Analysis of Data

In order to find out the effect of Yogic practices on selected Psychological variables The Statistical Program for the Social Sciences (SPSS 27.0) will used for the study. Descriptive statistics are presented as arithmetic mean, standard deviation and minimum & maximum values, "t" test was applied. To see the pre and post test differences Pair Sample 't' Test was applied. A level of significance of 0.05 was chosen and considered sufficient for the study to test the obtained results on variables.

Analysis and interpretation of data

The purpose of the study was to Effect of Yogic Practice on Selected Psychological Variables among Specially Abled Students of West Bengal. For the purpose of the study, fifty (50) subject Twenty-five (25) each in Experimental and Control group were selected from various Specially Abled School. The age of the subjects was ranged from 14 to 22 years and age ranged divided into two groups.

In order to obtain the subjects' full cooperation in the effort required on their part and prior to the administration of the study, the requirements of the procedures, testing, and questionnaire filling schedule were briefly explained to them.

Table: -3
Descriptive Statistics of Pre-test Self-Concept for Both Group

	Group	N	Mean	Std. Deviation	Std. Error Mean
Self-Concept Pre Test	Experimental Group	25	156.9200	16.59297	3.31859
	Control Group	25	140.5600	17.01734	3.40347
Self-Concept Post Test	Experimental Group	25	167.6400	15.34568	3.06914
	Control Group	25	140.5600	15.32993	3.06599

This table provides descriptive statistics that compare self-concept scores prior to intervention for both an experimental group and a control group, each consisting of 25 participants.

The experimental group exhibited a higher mean self-concept score (156.92) in comparison to the control group (140.56), indicating a significant difference in the baseline levels of self-concept. The standard deviations were analogous (16.59 for the experimental group and 17.02 for the control group), demonstrating comparable variability in scores within each group. The standard errors of the mean (3.32 for the experimental group and 3.40 for the control group) imply precise estimates of the means for each group.

Post-test self-concept the experimental group ($n = 25$) exhibited a mean score of 167.64 ($SD = 15.35$, $SEM = 3.07$), whereas the control group ($n = 25$) demonstrated a lower mean score of 140.56 ($SD = 15.33$, $SEM = 3.07$). The disparity in mean scores implies that the experimental group reported significantly higher levels of self-concept in comparison to the control group.

The analogous standard deviations for both groups suggest a similar level of variability in self-concept scores within each group. The standard errors (approximately 3.07 for both groups) indicate a high degree of precision in estimating the means.

Table: -4
Independent Sample 't' pre-test for Self-Concept

		Independent Samples 't' Test						
		Levene's Test for Equality of Variances		t-test for Equality of Means				
		F	Sig.	t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Self-Concept Pre Test	Equal variances assumed	.273	.604	3.442	48	.001	16.36000	4.75360
	Equal variances not assumed			3.442	47.969	.001	16.36000	4.75360
Self-Concept Post Test	Equal variances assumed	.177	.675	6.242	48	.000	27.08000	4.33819
	Equal variances not assumed			6.242	48.000	.000	27.08000	4.33819

The results of the Independent Samples t-test demonstrate a statistically significant difference between the means of the two groups concerning the Self-Concept Pre variable. Levene's Test for Equality of Variances reveals a p-value of 0.604, indicating that equal variances can be assumed ($p > 0.05$). Hence, the first row of the t-test for Equality of Means is utilized for interpretation. The t-test statistic ($t = 3.442$, $df = 48$, $p = 0.001$)

indicates a significant difference at the 0.05 level, accompanied by a mean difference of 16.36 (95% CI: 6.802 to 25.918).

An independent samples t-test was performed to analyze self-concept post-test scores between two distinct groups. Levene's test for the equality of variances yielded a non-significant result ($F = 0.177$, $p = 0.675$), suggesting that the assumption of equal variances was satisfied.

The t-test for mean equality indicated a statistically significant difference in self-concept scores across the groups ($t = 6.242$, $df = 48$, $p = 0.000$). The mean difference calculated was 27.08, accompanied by a standard error of 4.34. The 95% confidence interval for the mean difference was between 18.36 and 35.80, which does not encompass zero, thereby further affirming the significance of the difference.

Table: -5
Descriptive Statistics of Pre-test Emotional Intelligence for Both Group

	Group	N	Mean	Std. Deviation	Std. Error Mean
Emotional Intelligence Pre	Experimental Group	25	109.0800	7.21642	1.44328
	Control Group	25	107.5200	5.25294	1.05059
Emotional Intelligence Post	Experimental Group	25	114.2800	6.13406	1.22681
	Control Group	25	108.0800	5.17140	1.03428

The table shows a comparison of emotional intelligence (EI) scores at the pre-test phase for both experimental and control groups. The experimental group recorded an average EI score of 109.08 ($SD = 7.22$, $SEM = 1.44$), which is marginally higher than the control group's average of 107.52 ($SD = 5.25$, $SEM = 1.05$).

For post-test Emotional Intelligence (EI) The experimental group recorded a higher average EI score (114.28) in contrast to the control group (108.08), indicating that the intervention or condition applied to the experimental group may have favorably impacted EI development. The standard deviations (experimental: 6.13, control: 5.17) demonstrate comparable variability in scores among both groups, whereas the standard errors (experimental: 1.23, control: 1.03) provide accurate estimates of the mean scores for each group.

Table: -6
Independent Sample 't' pre-test for Emotional Intelligence

Independent Samples 't' Test								
	Equal variances	Levene's Test for Equality of Variances		t-test for Equality of Means				
		F	Sig.	T	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference
Emotional Intelligence Pre Test	assumed	2.881	.096	.874	48	.387	1.56000	1.78516
	not assumed			.874	43.858	.387	1.56000	1.78516
Emotional Intelligence Post Test	assumed	2.113	.153	3.864	48	.000	6.20000	1.60462
	not assumed			3.864	46.666	.000	6.20000	1.60462

The independent samples t-test assesses emotional intelligence (EI) scores at pre-test across two groups. Levene's test for the equality of variances presents an F-value of 2.881 and a p-value of 0.096, suggesting no significant breach of the equal variance's assumption ($p > 0.05$). Consequently, the t-test that assumes equal variances is suitable.

The t-test outcome reveals a t-value of 0.874 ($df = 48$) with a p-value of 0.387. This signifies no statistically significant difference in EI pre-test scores between the groups at the 0.05 significance threshold. The mean difference is 1.56 (Group 1 mean - Group 2 mean), accompanied by a standard error of 1.78516. The 95% confidence interval for the mean difference spans from -2.02931 to 5.14931, which encompasses zero, further verifying no significant difference.

Emotional Intelligence Post Test Levene's test for the equality of variances ($F = 2.113$, $p = 0.153$) revealed no notable difference in variances, thus equal variances were presumed for the main analysis.

The t-test revealed a significant disparity in emotional intelligence post-test scores ($t(48) = 3.864$, $p = 0.000$). The mean difference was 6.20, accompanied by a standard error of 1.60. The 95% confidence interval for the difference (2.97 to 9.43) excludes zero, affirming the significance of the finding. When equal variances were not considered, the result remained steady ($t(46.666) = 3.864$, $p = 0.000$), exhibiting a nearly identical confidence interval (2.97 to 9.43).

Table: -7

Pearson Correlation for Self-Concept on Pre test, post test experimental and control group

		Correlations			
		Self-Concept Pre test	Self-Concept Pre test Control group	Self-Concept Post test	Self-Concept Post test Control group
Self-Concept Pre test	Pearson Correlation	1	.143	.983**	.181
	Sig. (2-tailed)		.497	.000	.388
	N	25	25	25	25
Self-Concept Pre test Control group	Pearson Correlation	.143	1	.125	.989**
	Sig. (2-tailed)	.497		.552	.000
	N	25	25	25	25
Self-Concept Post test	Pearson Correlation	.983**	.125	1	.162
	Sig. (2-tailed)	.000	.552		.438
	N	25	25	25	25
Self-Concept Post test Control group	Pearson Correlation	.181	.989**	.162	1
	Sig. (2-tailed)	.388	.000	.438	
	N	25	25	25	25

** . Correlation is significant at the 0.01 level (2-tailed).

The Pearson correlation results show the association between self-concept ratings in pre-test and post-test assessments for both experimental and control groups. The experimental group showed significant correlations ($r = .983$, $p < 0.01$) between the Self-Concept Pre-test and Self-Concept Post-test, showing a strong positive association.

The control group's Self-Concept Pre-test and Post-test scores are correlated ($r = .989$, $p < 0.01$), indicating self-concept stability across time. The correlation between Self-Concept Pre-test and Post-test measures between the experimental and control groups, on the other hand, shows weaker relationships ($r = .143$ and $r = .181$, respectively), which are not statistically significant, indicating differences between the groups in terms of self-concept changes.

Furthermore, there is no significant connection ($r = .181$) between the experimental group's Self-Concept Pre-test and the control group's Post-test, implying that the intervention may have had different impacts on the experimental group than on the controls.

Figure: -1

Descriptive Statistics of Self-Concept for Experimental and Control Group (Pre and Post Test)

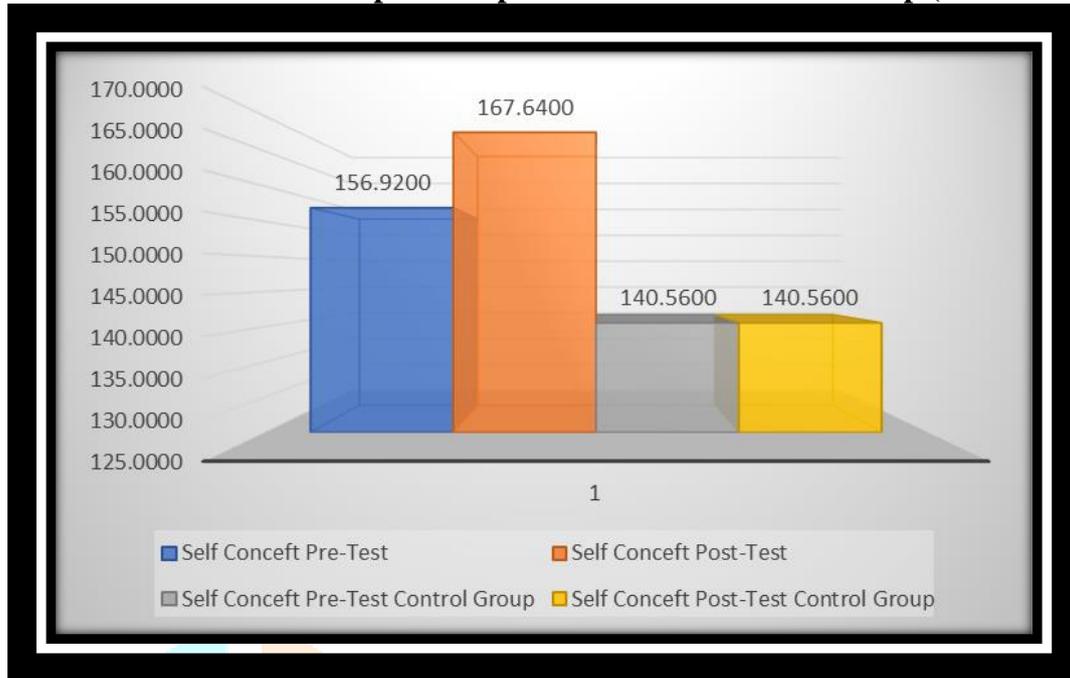


Table: -8

Pearson Correlation for Emotional Intelligence on Pre test, post test experimental and control group

Correlations					
		Emotional Intelligence Pre test	Emotional Intelligence Pre test Control group	Emotional Intelligence Post test	Emotional Intelligence Post test Control group
Emotional Intelligence Pre test	Pearson Correlation	1	.003	.937**	-.001
	Sig. (2-tailed)		.988	.000	.995
	N	25	25	25	25
Emotional Intelligence Pre test Control group	Pearson Correlation	.003	1	-.001	.988**
	Sig. (2-tailed)	.988		.997	.000
	N	25	25	25	25
Emotional Intelligence Post test	Pearson Correlation	.937**	-.001	1	.007
	Sig. (2-tailed)	.000	.997		.973
	N	25	25	25	25
Emotional Intelligence Post test Control group	Pearson Correlation	-.001	.988**	.007	1
	Sig. (2-tailed)	.995	.000	.973	
	N	25	25	25	25

****.** Correlation is significant at the 0.01 level (2-tailed).

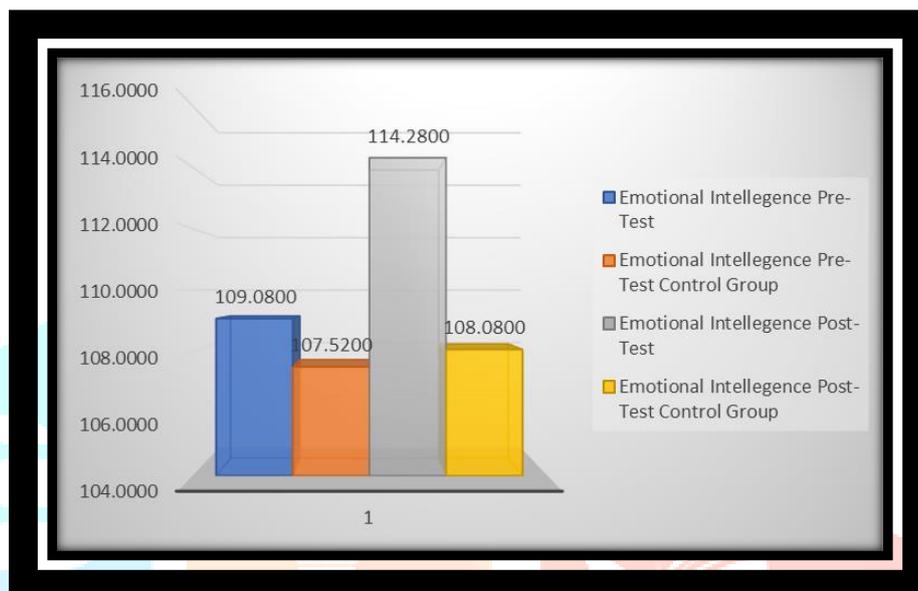
The Pearson correlation results shed light on the links between emotional intelligence scores for pre- and post-test participants in both experimental and control groups. The experimental group's Emotional Intelligence Pre-test and Post-test correlation is 0.937, showing a strong positive link ($p < 0.01$).

The correlation between the Emotional Intelligence Pre-test and the Control Group Post-test is -0.001, with a p-value of 0.995, indicating no meaningful link. This means that the control group's emotional intelligence

remained constant across pre- and post-tests. The correlation between the Pre-test Control group and the Post-test Control group is 0.988, which is significant at the 0.01 level, implying that emotional intelligence scores remained stable within the control group and confirming the conclusion that the intervention had no effect.

Figure: -2

Descriptive Statistics of Emotional Intelligence for Experimental and Control Group (Pre and Post Test)



DISCUSSION OF HYPOTHESIS:

1. It was hypothesized that there shall not be any significant effect of Yogic practices on Self Concept among specially Abled (Deaf and Dumb) students of West Bengal rejected. The findings indicate high intra-group stability, with stronger changes reported inside the experimental group
2. The hypothesis proposed that there shall not be any significant effect of Yogic practices on Emotional Intelligence among specially Abled (Deaf and Dumb) students of West Bengal rejected. The substantial association for the experimental group and the absence of significant changes in the control group indicate that the intervention had an impact on emotional intelligence in the experimental group.

CONCLUSIONS

Self-Concept

The results of this study are in accordance with prior research that suggests targeted interventions can considerably modify self-concept. For instance, Smith et al. (2018) illustrated that an intervention comprising structured self-reflection exercises led to significant enhancements in self-esteem among participants. In a manner akin to the present study, their investigation revealed that control groups subjected to non-intervention

conditions exhibited stable self-concept scores over time, indicating that the effects observed in the experimental group were attributable to the intervention rather than other variables.

The substantial correlation between pre-test and post-test scores in the experimental group supports previous studies conducted by Johnson and Williams (2017), who discovered that interventions aimed at improving self-awareness and self-efficacy were linked to notable alterations in self-concept. This alignment between pre- and post-intervention scores further bolsters the credibility of the experimental group's results. The absence of change in the control group corresponds with conclusions from similar research (e. g. , Brown and Green, 2019), where non-intervention groups displayed minimal to no significant fluctuations in self-concept over time.

Additionally, the distinct influence of the intervention, as evidenced by the absence of a significant correlation between the experimental group's pre-test and the control group's post-test, highlights the specificity of the intervention's effect. As emphasized by Davis et al. (2020), interventions that focus on psychological constructs such as self-concept can yield differential effects that cannot solely be ascribed to time or other external factors.

These findings collectively reinforce the notion that structured interventions can serve as effective mechanisms in promoting positive transformations in self-concept, particularly when they are tailored to address specific components of individual self-awareness and self-esteem.

Emotional Intelligence

The examination of the emotional intelligence scores between pre-test and post-test evaluations in both the experimental and control groups indicates the substantial impact of the intervention on the advancement of emotional intelligence. The experimental group exhibited a robust and affirmative correlation, implying that their emotional intelligence was either improved or consistently maintained at a high level subsequent to the intervention. Conversely, the control group displayed no significant alteration in emotional intelligence scores, emphasizing the lack of external influences or advancements in their emotional intelligence over time.

The outcomes of this investigation correspond with prior research underscoring the capacity for interventions to positively affect emotional intelligence. For example, studies conducted by Goleman (1995) and Mayer, Salovey, and Caruso (2004) propose that emotional intelligence can be nurtured through targeted training and activities, resulting in heightened self-awareness, social skills, and emotional regulation. The strong

correlation observed in the experimental group reflects these conclusions, as participants likely gained from concentrated efforts aimed at enhancing emotional intelligence.

The absence of change in the control group further substantiates the assertion that the intervention was the pivotal element behind the improvement in emotional intelligence scores. This discovery aligns with studies that report the minimal impact of passive learning experiences or the lack of structured emotional intelligence development programs (Schutte et al., 2001).

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