



## Yoga and Meditation Program (YMP) for the care of mental distress among university students

### *Programa de Yoga e Meditação (PYM) no cuidado do sofrimento mental de universitárias(os)*

### *Programa de Yoga y Meditación (PYM) en el cuidado del sufrimiento mental de estudiantes universitarias(os)*

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#### ABSTRACT

**Objective:** To report and discuss the implementation of the Yoga and Meditation Program (YMP) as a care strategy aimed at addressing mental distress among university students in the health sciences. **Data synthesis:** The YMP was developed in 2020 at a university in the state of São Paulo, Brazil, during the COVID-19 pandemic, a period marked by increased psychological distress among university students. The program was grounded in health promotion principles, valuing participants' singularities and fostering skills for conscious self-care choices. It was structured into two cycles, each consisting of 13 weeks of classes organized according to the theoretical and practical framework of yoga, in dialogue with the Klauss Vianna Technique (KVT), with the aim of expanding body awareness. Practices included breathing exercises, psychophysical postures, concentration, relaxation, meditation, mudrās, mantras, and the ethical principles of the yāmas and nyāmas. To assess the effects of the YMP, the following instruments were applied: the Measure Yourself Medical Outcome Profile (MYMOP) for self-reported symptoms, the Self-Reporting Questionnaire (SRQ-20) for mental distress, the Epworth Sleepiness Scale, and the Perceived Stress Scale (PSS). In addition, flexible semi-structured interviews were conducted to explore the meanings and representations attributed to the practice by participants. **Conclusion:** The assessment instruments and participants' reports indicated reductions in physical and emotional symptoms, mental distress, and perceived stress, as well as improvements in sleep quality. During the period of social isolation, the YMP promoted presence, self-care, and calmness, while strengthening self-awareness, tension management, and care-related skills. Therefore, the YMP proved to be an effective mental health care strategy, with potential for replication in universities to promote the well-being of future health professionals and contribute to healthier and more supportive academic environments.

**Descriptors:** Yoga; Meditation; Mental health; Higher education; Health promotion.

#### RESUMO

**Objetivo:** Relatar e discutir a implementação do Programa de Yoga e Meditação (PYM) como estratégia de cuidado voltada ao sofrimento mental de estudantes universitárias(os) da área da saúde. **Síntese dos dados:** O PYM foi desenvolvido em 2020, em uma universidade do Estado de São Paulo, durante a pandemia de covid-19, período marcado pelo aumento do sofrimento mental estudantil. Esse programa seguiu princípios de promoção da saúde, ao valorizar as singularidades das(os) participantes e promover habilidades para escolhas conscientes de cuidado. Estruturou-se em dois ciclos, cada um com 13 semanas de aulas, organizadas a partir do referencial teórico-prático do yoga, em diálogo com a Técnica Klauss Vianna (TKV), ampliando a consciência corporal. As práticas incluíram respiração, posturas psicofísicas, concentração, relaxamento, meditação, mudrās, mantras e princípios éticos dos yāmas e nyāmas. Para avaliação dos efeitos do PYM, utilizaram-se instrumentos como: MYMOP (sintomas autorrelatados), Self-Reporting Questionnaire (SRQ-20) (sofrimento mental), Escala de Sonolência de Epworth e Escala de Estresse Percebido (PSS). Complementarmente, foram realizadas entrevistas com roteiro flexível, visando compreender sentidos e representações atribuídos à prática. **Conclusão:** Instrumentos e relatos indicaram redução de sintomas físicos e emocionais, sofrimento mental e estresse percebido, além de melhora da qualidade do sono. Durante o confinamento, o PYM promoveu presença, tempo para si e calma, fortalecendo autopercepção, manejo de tensões e habilidades de cuidado. Portanto, o PYM mostrou-se eficaz como estratégia de cuidado em saúde mental, com potencial de replicação em universidades, para beneficiar o bem-estar das(os) futuras(os) profissionais da saúde e contribuir para ambientes acadêmicos saudáveis e solidários.

**Descritores:** Yoga; Meditação; Saúde mental; Ensino superior; Promoção da saúde.



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## RESUMEN

**Objetivo:** Describir y discutir la implementación del Programa de Yoga y Meditación (PYM) como estrategia de cuidado orientada al sufrimiento mental de estudiantes universitarias(os) del área de la salud. **Síntesis de los datos:** El PYM fue desarrollado en 2020, en una universidad del estado de São Paulo, durante la pandemia de COVID-19, período marcado por el aumento del sufrimiento mental estudiantil. Este programa siguió principios de promoción de la salud, al valorar las singularidades de las(os) participantes y promover habilidades para elecciones conscientes de cuidado. Se estructuró en dos ciclos, cada uno con 13 semanas de clases, organizadas a partir del marco teórico-práctico del yoga, en diálogo con la Técnica Klauss Vianna (TKV), ampliando la conciencia corporal. Las prácticas incluyeron respiración, posturas psicofísicas, concentración, relajación, meditación, mudrās, mantras y principios éticos de los yāmas y nyāmas. Para la evaluación de los efectos del PYM, se utilizaron instrumentos como: MYMOP (síntomas autorreportados), Self-Reporting Questionnaire (SRQ-20) (sufrimiento mental), Escala de Somnolencia de Epworth y Escala de Estrés Percibido (PSS). De manera complementaria, se realizaron entrevistas con guion flexible, con el fin de comprender los sentidos y representaciones atribuidos a la práctica. **Conclusión:** Los instrumentos y los relatos indicaron reducción de síntomas físicos y emocionales, del sufrimiento mental y del estrés percibido, además de mejora en la calidad del sueño. Durante el confinamiento, el PYM promovió la presencia, el tiempo para sí y la calma, fortaleciendo la autopercepción, el manejo de tensiones y las habilidades de cuidado. Por lo tanto, el PYM se mostró eficaz como estrategia de cuidado en salud mental, con potencial de replicación en universidades, para beneficiar el bienestar de las(os) futuras(os) profesionales de la salud y contribuir a entornos académicos saludables y solidarios.

**Descriptores:** Yoga; Meditación; Salud mental; Educación superior; Promoción de la salud.

## INTRODUCTION

Mental distress in higher education is intensified by an academic model driven by performance and competitiveness, which transforms universities into environments marked by stress and anxiety<sup>(1)</sup>. Pressure for excellence, combined with social expectations and accelerated routines, contributes to the normalization of this type of suffering among students<sup>(2)</sup>.

Among university students, those in the health sciences, particularly medical students, present high levels of psychological distress associated with difficulties in interpersonal relationships, family expectations, and poor academic performance<sup>(3)</sup>. The heavy workload and demands for academic productivity, together with frequent exposure to patients' suffering and death, limited leisure time, and deficits in self-care, contribute to psychological imbalance, anxiety, sleep disturbances, and suicidal ideation<sup>(1)</sup>.

In this context, mental distress among higher education students has stimulated research on care approaches, with increasing attention to non-pharmacological practices within academic settings, such as yoga, meditation, and other integrative and complementary health practices (ICHPs)<sup>(4,5)</sup>. Grounded in nonhegemonic forms of knowledge, ICHPs value subjectivities and autonomy in the choice of care practices, encouraging self-referenced care, self-knowledge, and individual agency<sup>(6,7)</sup>.

As ICHPs, yoga and meditation encourage active experimentation and collective practice, promoting both intra- and interpersonal transformation<sup>(8)</sup>. Yoga addresses the physical, psychological, social, and spiritual dimensions of the individual, constituting a philosophical system composed of psychophysical practices such as prāṇāyāmas (breathing techniques), āsanās (psychophysical postures), dhāraṇā (concentration), yoga nidrā (relaxation), dhyāna (meditation), mudrās (gestures), and mantras (sound vibration), in addition to ethical principles that guide external conduct (yāmas) and internal conduct (nyāmas) of practitioners<sup>(9,12)</sup>.

In Brazil, an increasing number of universities have begun offering yoga and meditation classes on campus to promote self-awareness, consciousness, discovery of personal potentialities, and well-being within academic communities. These programs provide support to students through welcoming listening spaces and shared reflection, thereby strengthening a culture of care within university environments<sup>(10,11)</sup>. Notable initiatives include "Connection and Well-Being Through Yoga" at the Federal University of Mato Grosso do Sul; "Yoga for Everyone" at the Federal University of Ouro Preto; "Pé de loga" at the Federal University of Sergipe; "Yoga at UENF" at the State University of Northern Rio de Janeiro; and "Yoga and Meditation: Ways of Reconnecting With Life" at the Federal University of Pará.

Considering the successful experiences involving ICHPs, yoga, and meditation in universities, as well as the positive outcomes of these practices in promoting emotional self-regulation and expanded body awareness — dimensions that strengthen autonomy and self-care beyond prescriptive or behavior-normalizing approaches, in line with a broader conception of health promotion<sup>(13-16)</sup> — we developed the Yoga and Meditation Program (YMP) for university students in the health sciences. The program was offered during the period of social isolation caused by the COVID-19 pandemic.

The pandemic exacerbated mental distress among university students and affected health-disease processes due to social isolation, fear of infection, frustration, loss of income, and stigma, within a context marked by social, economic, and health inequalities as well as denialist governmental responses<sup>(17,18)</sup>. Consequently, rates of depression, anxiety, and stress increased, highlighting the need for care strategies capable of mitigating mental distress in higher education settings<sup>(18,19)</sup>.

Therefore, the aim of this article is to report and discuss the implementation of YMP as a care strategy for addressing mental distress among health sciences university students.

## DATA SYNTHESIS

### YMP for university students

YMP, developed as part of a doctoral research project, was designed as a mental health care strategy for undergraduate and graduate students in the health sciences, a group characterized by high levels of psychological distress in academic settings<sup>(1,3)</sup>. YMP adopts a critical health promotion perspective, valuing autonomy, recognition of individual singularities, and the development of care strategies, while avoiding prescriptive approaches or those focused exclusively on behavior change<sup>(8,10)</sup>.

Initially planned as an in-person program at a public university in the state of São Paulo, Brazil, the YMP was adapted to a remote format due to the COVID-19 pandemic and social isolation measures, facing challenges such as limited physical space, unstable internet connections, emotional distress, and resistance to online learning<sup>(18,19)</sup>. Activities were conducted synchronously, fostering interaction and maintenance of interpersonal bonds in real time.

The program was structured into two academic cycles corresponding to the semesters of 2020, each lasting 13 weeks with weekly 1-hour and 15-minute sessions. I served both as the yoga instructor responsible for implementing the program and as an engaged researcher in the field, grounded in Freirean and collective health perspectives, which recognize pedagogical practice as part of knowledge production and value critical engagement with the investigated reality<sup>(20)</sup>.

Virtual classes were conducted through the Zoom platform, requiring technical adaptation by both the instructor and participants. To facilitate practice, detailed verbal instructions and posture demonstrations were provided, with planning adapted to the home environment, considering space limitations, internet quality, and the presence of family members. Students were instructed to organize a comfortable, well-lit, and interruption-free space for practice. Participation in the program was voluntary, open, and unrestricted, including undergraduate and graduate students from the health sciences. Participants completed a registration form, and dissemination of the YMP was supported by student services, coordinators, faculty members, and academic organizations, ensuring broad communication.

The study was approved by the research ethics committee (CAAE: 28638718.0.0000.5404), under protocol number 3.893.189, in accordance with Resolutions No. 466 and No. 510.

### Space for data collection

Across the two cycles, 23 students participated, ranging in age from 20 to 32 years, among whom two identified as male. Of the total participants, 16 were medical students distributed across different stages of undergraduate training, from the first to the final semester. Additional participants included one 5th-semester pharmacy student, one 3rd-semester physical education student, two professional master's students, two medical residents, and one doctoral student in collective health.

All 23 participants completed data collection instruments before and after the 13-week intervention in each cycle to assess the effects of the practices on body-mind integration. The following instruments were used: the Measure Yourself Medical Outcome Profile (MYMOP) for self-reported symptoms; the Self-Reporting Questionnaire (SRQ-20) for mental distress; the Epworth Sleepiness Scale for daytime sleepiness; and the Perceived Stress Scale (PSS) for perceived stress levels. All participants signed an informed consent form, and at the end of each cycle they anonymously recorded observations regarding the program's strengths and limitations.

At baseline, students reported symptoms such as mental exhaustion, difficulty concentrating, insomnia, anxiety, back pain, muscle pain, intrusive thoughts, tension headaches, procrastination, insecurity, sleepiness, wrist pain, gastric reflux, and low self-esteem. By the end of the cycles, at least a 1-level reduction in symptom intensity was observed for most self-reported symptoms, with no cases of worsening. The most expressive reductions, identified in both cycles, involved anxiety, tension headaches, mental exhaustion, insecurity, back pain, and wrist pain. These findings may be associated with the integration of psychophysical postures (*āsanas*), breathing exercises (*prāṇāyāma*),

and meditative practices, which promote relaxation, enhanced body awareness, and reduced mental hyperactivity, as demonstrated in previous studies<sup>(4,8,11,14,15)</sup>.

Analysis of the remaining instruments indicated that the proposed practices had favorable effects on mental distress, perceived stress, and sleep quality, even amid the adversities imposed by pandemic-related confinement. Comparison of pre- and post-intervention scores revealed reductions in mental distress and a trend toward individual improvement, particularly among participants who initially presented higher levels of distress.

These findings corroborate studies recognizing yoga and meditation as ICHPs capable of stimulating the parasympathetic nervous system, promoting neuroendocrine balance, and enhancing attention and focus. In this way, these practices contribute to reductions in anxiety, insomnia, and stress, favoring emotional self-regulation and self-awareness<sup>(21,25)</sup>.

In addition to the instruments, flexible semi-structured interviews were conducted after completion of the program to explore the meanings and representations attributed to the practices. Interviews were fully transcribed and analyzed through thematic coding, category organization, and interpretation of themes in light of the study objectives. This approach enabled the identification of norms, tensions, and possibilities for subversion within academic dynamics.

“Presence,” “Time for Myself,” and “Calmness” emerged as the main categories of meaning attributed by participants to yoga and meditation practices and should not be understood as privileges, but rather as dimensions of care that should be guaranteed as rights. The recovery of presence, time, and calmness represents a political act and an expression of autonomy within academic spaces and everyday life. From this perspective, the cultural representations mobilized by students shifted yoga and meditation from individual practices toward a collective space of care and resistance, evoking images such as embrace, forest, sea, wind, and bird, symbolizing pauses, welcoming, and lightness. These metaphors structured ways of confronting and resignifying mental distress while strengthening autonomy and protagonism.

Therefore, the receptiveness of the students and the field experience supported the systematization of an implementation model for the YMP as a mental health care strategy within university settings.

## Structure of YMP

The content of the classes was grounded in the philosophical and practical principles of Haṭha Yoga, which guided the development of all practices. Accordingly, the pedagogical planning was inspired by the eight aṅgas (limbs) of Aṣṭāṅga Yoga, as described in Patañjali's Yoga Sūtras (13): yāmas (ethical conduct toward others); nyāmas (internal discipline); āsanās (psychophysical postures); prāṇāyāma (breathing techniques and circulation of prāṇa); pratyāhāra (withdrawal of the senses); dhāraṇā (concentration); dhyāna (meditation); and samādhi (a contemplative state characterized by non-identification with the ego)<sup>(9,10)</sup>. In addition, hastas mudrās (hand gestures) were used to facilitate states of presence during the practices, and mantras were chanted to develop attention and concentration<sup>(16)</sup>.

The foundations of yoga were approached in a contemporary format, sensitive to the experiences, needs, and limits of participants, while articulated with the Klauss Vianna Technique (KVT). KVT is a somatic education technique that similarly to yoga recognizes body-mind unity and integrated bodily systems, fostering states of presence and bodily awareness. Through a playful process, the body is awakened and released, expanding movement through bone vectors that activate muscular chains and sensory perception, promoting a body that feels in presence<sup>(26)</sup>.

Within the program, KVT-based work included elements such as presence; recognition of and space within the joints; weight, support, and resistance to enhance perception of bodily amplitude and movement; bony oppositions; a global axis; and bone directions mapped into eight force vectors for bodily (re)alignment, always in a conscious manner respectful of individual limits. These vectors extend from the feet to the skull and include, among others, the metatarsals and calcanei (base), the pubis and sacrum (pelvic fitting and spinal mobility), the scapulae (expansion of the shoulder girdle and rib cage), the elbows and metacarpals (support and hand range of motion), and the seventh cervical vertebra (head alignment)<sup>(26)</sup>.

These elements were incorporated as methodological devices for bodily preparation and perceptual refinement during yoga practices, expanding bodily attention, postural adjustments, and spatial relations. Thus, the aṅgas of yoga and the vectors of KVT, working in harmony, stimulated a network of sensory perceptions, enabling deeper awareness of oneself and others.

## Structure of classes

YMP classes aimed to present the yoga repertoire as a self-sustaining “care advisory” practice. Adequate time was reserved for exchanging reports, experiences, impressions, and questions, with openness to revisiting values and differences<sup>(24,25)</sup>.

Each class followed the structure below:

**1. Arrival and settling into practice:** foot massage, stretching, and dynamic movements to promote joint mobility (pawanmuktasana) and energy circulation.

**2. Introduction to the class theme:** each class began with one of the ethical values of yoga (yāmas and nyāmas), facilitating interpersonal bonding and fostering participants' states of presence.

**3. Mantra chanting:** mantras, understood as sounds, phrases, or words, contribute to mental quietness and concentration. At the beginning of the classes, the verse dedicated to Śrī Gaṇeśa was chanted with the intention of reducing mental fluctuations while promoting calmness and confidence. Within the yoga tradition, Gaṇeśa is understood as the remover of suffering and obstacles, while the vibrational frequency of the mantra may help dissolve tension and mental projections<sup>(12,13)</sup>.

**4. Prāṇāyāma:** extension of prāṇa (vital energy) through conscious breathing. Since mental states are closely related to the quality of internal prāṇa and, consequently, to breathing patterns, breathing exercises may mobilize and enhance energetic vibration and expansion, promoting self-awareness and presence<sup>(11,13,16)</sup>.

**5. Āsanās:** psychophysical postures associated with breathing, acting on the body-mind relationship. Stability and attention were explored to promote comfort and lightness<sup>(9,12,20)</sup>. The āsanās included standing, seated, supine, and inverted positions, incorporating flexions, extensions, balance, strength, twists, pelvic opening, quadriceps stretching, and inversions. The āsanās were practiced in dialogue with KVT principles.

**6. Relaxation (yoga nidrā):** performed in śavāsana (supine posture), with reinforcement of the saṅkalpa (mental intention). In this posture, participants could exercise surrender and mentally cultivate intentions that had not yet entered the realm of trust<sup>(18)</sup>.

**7. Meditação:** during weekly meditation practices, prīthvī mudrā was used to facilitate the flow of prāṇa (energy) through the spine, relieve mental fatigue and exhaustion, and promote grounding and mental quietness<sup>(21,22)</sup>.

**8. Hastas mudrās:** hand gestures considered effective in stimulating the flow of prāṇa through the different nāḍīs (energy channels), acting on specific bodily dimensions<sup>(16,27,28)</sup>. Mudrās facilitate states of sensory withdrawal, improve perception and mental patterns, and support concentration, meditation, and expanded consciousness<sup>(28)</sup>.

**9. Final mantra and reflection:** together, participants chanted the bīja mantra OM, followed by three repetitions of the mantra śantiḥ at the end of the classes. One of the benefits attributed to chanting OM is liberation from fear<sup>(13,16)</sup>. In addition, participants reflected on the class theme and the experiences lived during practice.

Throughout the experience, six of the ten yāmas and nyāmas were selected and revisited every two classes, favoring continuous engagement, gradual assimilation, and incorporation of these principles into participants' daily lives. Similarly, some prāṇāyāmas, sequences of āsanās, and meditative practices were repeated to deepen experiential learning and support their integration into daily practice. Box 1 presents the themes, prāṇāyāmas, sequences of āsanās, and meditative practices used in an integrated manner throughout the 13 classes of each cycle.

**Box 1.** Themes, prāṇāyāmas, sequences of āsanās, and meditative practices used in the YMP classes.

| Themes                                                    |                                                                                                                     |
|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Yāma - Ahimsā                                             | Nonviolence and respect for differences                                                                             |
| Yāma - Aparigraha                                         | Non-attachment and dissolution of limiting beliefs                                                                  |
| Nyāma - Sātya                                             | Reflection on a life committed to truth                                                                             |
| Nyāma - Śauca                                             | Cleansing of negative thoughts                                                                                      |
| Nyāma - Tapas                                             | Exercising willpower and commitment to action                                                                       |
| Nyāma - Santoṣa                                           | Cultivating a state of contentment                                                                                  |
| Prāṇāyāmas                                                |                                                                                                                     |
| Abdominal breathing associated with mukula mudrā          | Reduces anxiety and stress, promotes digestion, relieves tension, and strengthens the immune system <sup>(28)</sup> |
| Solar breathing (sūrya bheda prāṇāyāma using viṣṇu mudrā) | Warms the body and helps reduce stress, fatigue, and depressive symptoms <sup>(12,27,28)</sup>                      |
| Seated breathing practice                                 | Inhalation in three phases and exhalation in six phases using mukula mudrā                                          |
| Bhastrikā with Apāna Vāyu Mudrā                           | Promotes vitality and digestion <sup>(12,28)</sup>                                                                  |
| Sāma Vṛtti prāṇāyāma with Ākāśa Vardhak Mudrā             | Enhances the space element within the body <sup>(27,28)</sup>                                                       |
| Nāḍī Śodhana prāṇāyāma with mukula mudrā                  |                                                                                                                     |

|                                                 |                                                                                                                                                                                                                                                                            |
|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Kapāla Bhāti with Mahāśirṣa mudrā               | Relieves worries and headaches <sup>(27,28)</sup>                                                                                                                                                                                                                          |
| Complete yogic breathing in the supine position |                                                                                                                                                                                                                                                                            |
| <b>Āsanās</b>                                   |                                                                                                                                                                                                                                                                            |
| Relaxation sequence                             | hasta-uttānāsana, uttānāsana, repeated mārjārīyāsana with deep inhalations and exhalations, balāsana for withdrawal, paścimottānāsana, apānāsana, jaṭhara parivartanāsana, setu-bandhāsana, rolling movements, and śavāsana                                                |
| Spine-toning sequence                           | hasta-uttānāsana with lateral variation and uttānāsana; mārjārīyāsana with alternating arms and legs; ūrdhva mukha śvānāsana; adho mukha śvānāsana; balāsana; paścimottānāsana, apānāsana, jaṭhara parivartanāsana, rolling movements, viparītā-karini, and śavāsana       |
| Spinal flexibility sequence                     | hasta, ardha and parivṛtta-uttānāsana, prasārita pādottānāsana, virabhadraśana I; adho mukha śvānāsana; ūrdhva mukha śvānāsana; balāsana; jānu śīrṣāsana, paścimottānāsana, leg stretching, halāsana, and śavāsana                                                         |
| Concentration-enhancing sequence                | garudāsana, vṛkṣāsana, bhujangāsana, adho mukha śvānāsana, virabhadraśana I, II, and III; natarājāsana, apānāsana, nāvāsana, sarvāṅgāsana, halāsana, matsyāsana, and śavāsana                                                                                              |
| Sūrya namaskāra                                 | Associated with mūla, udḍīyāna, and jalāmdhara bandha                                                                                                                                                                                                                      |
| Grounding and stability sequence                | hasta-uttānāsana, uttānāsana, adho mukha śvānāsana; ūrdhva mukha śvānāsana; vṛkṣāsana, garudāsana, bhujangāsana, adho mukha śvānāsana, virabhadraśana I, natarājāsana, prasārita-pādottānāsana, balāsana, jānu śīrṣāsana, sarvāṅgāsana, halāsana, matsyāsana, and śavāsana |
| Circulation-enhancing sequence                  | hasta uttānāsana, prasārita pādottānāsana, adho mukha śvānāsana; bhujangāsana, balāsana; mārjārīyāsana with knees-to-forehead variation, leg stretching, rolling movements, halāsana, and śavāsana                                                                         |
| <b>Meditation</b>                               |                                                                                                                                                                                                                                                                            |
| Niṣpanda bhāva                                  | Concentration on the sound environment through scanning surrounding noises                                                                                                                                                                                                 |
| Breath-focused meditation                       | Awareness of the air entering and leaving the nostrils                                                                                                                                                                                                                     |
| Ajapa japa                                      | SO'HAM                                                                                                                                                                                                                                                                     |
| Vipassanā                                       |                                                                                                                                                                                                                                                                            |
| Mental repetition of the mantra OM              |                                                                                                                                                                                                                                                                            |
| Ātmā vicāra                                     | Self-inquiry                                                                                                                                                                                                                                                               |

Source: Prepared by the authors (2025).

### Adaptation to participants' needs

Although each class within the YMP included a specific proposed activity, flexibility was maintained to accommodate participants' demands and needs, promoting a collective process of self-reflection and inclusion. Some āsanās were adapted so that participants could perform them either within limited physical spaces or in the presence of physical-emotional restrictions that affected their execution. In this way, care repertoires could be encouraged according to the individual needs of participants throughout the weeks.

## CONCLUSION

The structure of YMP, including its content, guidelines, evaluation methods, and work dynamics, proved effective for mental health care programs for university students based on ICHPs. Accordingly, YMP generated positive impacts for each participant and demonstrated potential for replication in future university-based care initiatives.

Assessment instruments and participants' reports indicated reductions in physical and emotional symptoms, mental distress, and perceived stress, as well as improvements in sleep quality. YMP promoted presence through expanded bodily and emotional awareness; time, by providing opportunities for pause and self-care; and calmness, reflected in participants' daily lives. Thus, the findings demonstrated that the program fostered self-awareness, tension management, and the development of care-related skills during the confinement imposed by the COVID-19 pandemic.

Mental health care programs involving yoga and meditation require flexible structures that allow adaptation of practices to different contexts, populations, needs, interests, and participants' physical conditions. Therefore, welcoming approaches grounded in active listening are particularly important for self-education and comprehensive health care<sup>(29)</sup>. Furthermore, systematic evaluation of program outcomes is essential to measure the effects of yoga and meditation interventions on participants' mental health.

In conclusion, investing in the implementation of effective mental health intervention programs within universities not only benefits the well-being of future health professionals but also contributes to the creation of healthier, more supportive learning and working environments<sup>(29)</sup>.

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## APPENDIX – EDITORIAL GUIDELINES

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### Submission History

**Received on:** 04/28/2025.

**Accepted on:** 12/15/2025.

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### How to Cite

Vaccarelli VN, Raimondi GA, Barros NF. Yoga and Meditation Program for the care of mental distress among university students. Rev Bras Promoç Saúde. 2025;38:e16913. <https://doi.org/10.5020/18061230.2025.16913>

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### Acknowledgments and Conflicts of Interest

The authors declare no conflicts of interest.

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### Funding Sources

No funding was received for this study.

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### Author Contributions

**Veridiana Noronha Vaccarelli** contributed to the study conception and design; data acquisition, analysis, and interpretation; and manuscript writing and revision. **Gustavo Antonio Raimondi** and **Nelson Filice de Barros** contributed to manuscript writing and revision.

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### Use of Artificial Intelligence

The authors declare that they did not use any artificial intelligence tools in the preparation or writing of this paper.

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### Peer Review Process

Double-blind peer review.

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### Reviewers

This article was evaluated by two reviewers who did not authorize the disclosure of their identities.

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