CHAPTER-V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 SUMMARY:

This experiment was an attempt to examine the improvement of the condition of the diabetic patient teachers that could be affected through the administration of selected yoga exercises. In other words it was a study to find out to what extent functional improvement could be achieved through yoga exercises in order to rehabilitate the diabetic patient teachers so as to restore them to normal condition of health as that as their fellow teachers.

STATEMENT OF THE PROBLEM:

At the time of observation the practice teaching of our students in the secondary schools of Amravati district, Maharashtra it was observed that some of the secondary school teachers of the locality were not participating in any other co-curricular activity of their school except their allotted classes, even they were less interested in their assignment for teaching. They preferred to remain inactive in the staff room and some time they used to go back to their residence with the plea that they are not feeling well with the permission of headmaster/headmistress before school ours completed. After discussion with them it was revealed that they were suffering from diabetes and they themselves had got an idea that they were to stay away from any type of physical activities because of their maladies. Sometimes they were being exempted by their Headmaster/Headmistress in taking part in co-curricular activities of the institutions and even from taking classes.

This situation compelled the physical education teacher to think as to what could be done for them in order to ensure their fruitful participation in effective teaching and in taking part in co-curricular activities this led him to investigate and to find out the case history of such teachers suffering from Type II diabetes (Mellitus). It was found that some of them have acquired it from heredity, food habits, environmental conditions etc. Ayurveda holds that the sole causes of diseases are improper food habits and improper conduct due to which the diseases take hold of the body and mind. Thus the main causes of pain are the various vikaras of the body. Since all the diseases cause pain and thus have similar effect that is pain they have been addressed by one
name disease. Broadly speaking, diseases can be sago to be of two types- physical and mental. Both are inter dependent. Pain in one brings pain in the other too.

After consultation with the patient's doctor, the patients were selected for an experiment, because the physical education teacher was o opinion that if such patient teachers would be subjected to selected yoga exercises, they might be relieved of the disease and in course of time they might take part in all sorts of co-curricular activities of the institution as an effective teacher like other normal teachers without customary therapeutic treatment with medicine. With this view in mind, the present researcher stated the problem for present study as under: “Effect of Selected Yogic Exercises on Teaching Effectiveness of Diabetic Teachers Working in the Secondary School of Amravati.”

**PURPOSES OF THE STUDY:**

1. The study was conducted to find out what extent functional improvement could be achieved through yoga exercises in order to rehabilitate the Mellitus Type II diabetic patient teachers.

2. The study was also conducted to examine any improvement of teaching effectiveness through the practices of yoga exercises.

3. The study was also conducted to estimate the effect of yoga exercise on organic disorders of the Mellitus Type II diabetic patient teachers.

**OBJECTIVES OF THE STUDY:**

The following objectives were laid down for the study.

1. To select the Mellitus Type II diabetic patients teachers of the Secondary Schools.

2. To categorize the diabetic Mellitus patient teachers into two specific groups.

3. To estimate their organic disorders.

4. To compare the organic disorders of the patient teachers with the normal teachers.

5. To compare the organic disorders of Experimental and Control group.

6. To estimate the quality of Teaching Effectiveness of the patient teachers with the normal teachers.
7. To find out the effectiveness of Yoga Exercises on the organic disorders.
8. To find out the effects of yoga exercises an effective teaching.

DELIMITATIONS OF THE STUDY:

Area:

The Experiment was confined to the Secondary School Teacher of Urban area of Amravati District, in Maharashtra.

Age:

The age range of the subjects varied from 35-58 Years.

Sex:

The subjects were both male and female teachers.

Residence:

The subjects were sorted out from nearest residential urban area teachers of Amravati district of Maharashtra.

Selection of Subjects:

Among the diabetic teachers only the teachers those who were suffering from diabetes Mellitus Type II and residing nearby place, were selected for the experiment.

Selection of Yoga Exercises:

Selection of yoga exercises were made with an eye to those which have, according to the yoga authorities, beneficial effects on Type II diabetes.

Test Parameters:

The Test Parameters were as under-A

(a) Amount of Sugar in Blood.
(b) Amount of Sugar in Urine.
The Test Parameters were as under-B

(a) Regularity.
(b) Interest in Teaching.
(c) Participation in co-curricular activities.
(d) Cooperative Attitude.
(e) Professional Attitude.
(f) Teacher Pupil relationship.

LIMITATIONS OF THE STUDY:

There was no control of food habits and lifestyle of the subjects.

1. No motivational techniques were used to collect data which might have affected the results.

2. The subjects were belonging to different environment and religion of Amravati district.

3. The authenticity of data depended upon the laboratory test by the doctors in case of organic disorders.

4. The authenticity of data depended upon the honesty of the Headmasters/Headmistress and students in case of Teaching Effectiveness.

5. The subjects of the experiment were free and the experimenter's only tool was his persuasive capacity to motivate them to undergo the prescribed yoga exercises as desired. Under the circumstances it goes without saying that the result of tests for evaluating the prescribed yoga exercises were to some extents depend upon the seriousness, sincerity and devotion to their own words of honor for co-operation in all matters involved in this experiment. The reliability of the test had to be viewed within the limitation.

HYPOTHESES OF THE STUDY:

The following Null hypotheses were laid down for the study.

HO.1: The selected yoga exercises would have no positive therapeutic effect on sugar in blood,

**HO.2:** The selected yoga exercises would have no positive therapeutic effect on regularity, interest in teaching, participation in co-curricular activity, co-operative attitude, Professional attitude and teacher-pupil relationship.

**INTERPRETATIONS:**

To find out the effect of prescribed yoga exercise (Asanas) on organic disorders of the subjects, ‘t’ test were employed to determined the significant mean differences between the initial and final scores and X2 (Che-Square) were employed to compare the percentage of urine sugar for three groups and to compare the teaching effectiveness X2 as well as percentage statistical techniques were employed independently. The level of significance was set at .05 levels.

**Organic disorders:**

**Blood Sugar (Fasting):**

In case of male subjects the differences between the initial and final means of yoga exercise group was significant at .05 level (reference table no.04), as the calculated 't' value of 3.99 was higher than the tabulated 't' .05 (21) value of 2.08, but no significant improvements were found of control group and non-diabetic group in case of blood sugar (Fasting), as the calculated 't' value of 0.61 and 0.04 respectively were less than the tabulated 't' .05 (21) level. Then, it might be concluded that the yoga exercise group shown significant improvement on blood sugar (fasting) over the control group and non diabetic group.

In case of female subjects the differences between the initial and final means of yoga exercise group was significant at .05 level (reference table no.20), as the calculated 't' value of 3.91 was higher than the tabulated 't' .05 (9) value of 2.26, but no significant improvements were found of control group and non-diabetic group in case of blood sugar (fasting), as the calculated 't' value of 0.33 and 0.13 respectively were less than the tabulated 't' .05 (9) level. Then, it might be concluded that the yoga exercise group shown significant improvement on blood sugar (fasting) over the control group and non diabetic group.
**Blood Sugar (Postprandial):**

In case of male subjects the differences between the initial and final means of yoga exercise group was significant at .05 level (reference table no.02), as the calculated ‘t’ value of 4.19 was higher than the tabulated ‘t’ .05 (21) value of 2.08, but no significant improvements were found of control group and non-diabetic group in case of blood sugar (Postprandial) as the calculated ‘t’ value of 1.27 and 0.87 respectively were less than the tabulated ‘t’ .05 level. Then it might be concluded that the yoga exercise group shown significant improvement on blood sugar (Postprandial) over the control group and non diabetic group.

In case of female subjects the differences between the initial and final means of yoga exercise group was significant at .05 level (reference table no.21), as the calculated 't' value of 3.09 was higher than the tabulated 't' .05 (9) value of 2.26, but no significant improvements were found of control group and non diabetic group in case of blood sugar (Postprandial), as the calculated 't' value of 0.74 and 0.48 respectively were less than the tabulated 't' .05 (9) level. Then it might be concluded that yoga exercise group shown significant improvement on blood sugar (Postprandial) over the control group and non diabetic group.

**Urine Sugar (Fasting):**

In case of male subjects the difference between initial and final scores of yoga exercise group was significant at .05 level (reference table no.03), as the calculated value of X2 13.96 was higher than the tabulated X2 value at .05 (2) was 5.99, but no significant improvements were found of control group and non diabetic group in case of urine sugar (fasting), as the calculated X2 values of 0.5 and 0.00 respectively were less than the tabulated X2 .05 (2) level. Then, it might be concluded that the yoga exercise group shown significant improvement on urine sugar fasting over the control group and non diabetic group.

In case of female subjects the difference between initial and final scores of yoga exercise group was significant at .05 level (reference table no.22), as the calculated value of X2 23.58 was higher than the tabulated X2 value at .05(2) was 5.99, but no significant improvements were found of control group and non diabetic group in case of urine sugar (fasting), as the calculated X2 values of 0.0 and 0.00 respectively were less than the tabulated X2 .05 (2) level. Then, it might be concluded that the yoga exercise group shown significant improvement on urine sugar
(fasting) over the control group and non diabetic group.

**Urine Sugar (Postprandial):**

In case of male subjects the difference between initial and final scores of yoga exercise group was significant at .05 level (reference table no 04), as the calculated value of $X^2$ 19.98 was higher than the tabulated $X^2$ value at .05(3) was 7.82, but no significant improvement were found of control group and non diabetic group in case of urine sugar (postprandial), as the calculated $X^2$ values of 6.84 and 0.00 respectively were less than the tabulated $X^2$ .05 (3) level. Then, it might be concluded from the results that the yoga exercise group shown significant improvement on urine sugar(postprandial) over the control group and non diabetic group.

In case of female subjects the difference between initial and final scores of yoga exercise group was significant at .05 level (reference table no.23), as the calculated value of $X^2$ 23.66 was higher than the tabulated $X^2$ value at .05(3) was 7.82, but no significant improvements were found of control group and non diabetic group in case of urine sugar (Postprandial), as the calculated $X^2$ values of 5.32 and 0.00 respectively were less than the tabulated $X^2$ .05 (2) level. Then, it might be concluded that the yoga exercise group shown significant improvement on urine sugar (postprandial) over the control group and non diabetic group.

**W.B.C. or Leukocytes Count:**

In case of male subjects the differences between the initial and final means of three groups (Y.E.G, C.G. and N.D.G.) were not significant at .05 levels (reference table no.08). Then, it might be concluded that the effect of yoga exercises were insignificant on W.B.C. or Leukocyte count in case of three groups for male subjects.

In case of female subjects the differences between the initial and final means of three groups (Y.E.G., C.G. And N.D.G.) were not significant at .05 level (reference table no. 24 ), as the calculated 't' values were less than the tabulated 't' .05 (9) value of 2.26. Then, it might be concluded that the effect of yoga exercises were insignificant on W.B.C or Leukocyte count in case of three groups for female subjects.

**R.B.C. or Erythrocyte Count:**

In case of male subjects the differences between the initial and final means of three
groups (Y.E.G., C.G. and N.D.G.) were not significant at .05 level (reference table no. 06), as the calculated ‘t’ values were less than the tabulated ‘t’ .05(21) value of 2.08. Then, it might be concluded that the effect of yoga exercises were insignificant on R.B.C. or erythrocyte count in case of three groups for male subjects.

In case of female subjects the differences between the initial and final means of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05 level (reference table no. 25), as the calculated 't' values were less than the tabulated 't' 05(9) value of 2.26. Then, it might be concluded that the effect of yoga exercises were insignificant on R.B.C. or erythrocyte count in case of three groups for female subjects.

**Body Weight:**

In case of male subjects the differences between the initial and final means of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05 level (reference table no 07), as the calculated ‘t’ values were less than the tabulated ‘t’ .05 (21) value of 2.08. Then, it might be concluded that the effect of yoga exercises were insignificant on body weight in case of three groups for male subjects.

In case of female subjects the differences between the initial and final means of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05 level (reference table no.26), as the calculated 't' values were less than the tabulated 't’ .05 (9) value of 2.26. Then, it might be concluded that the effect of yoga exercises insignificant on body weight in case of three groups for female subjects.

**TEACHING EFFECTIVENESS (Experts Rating):**

**Regularity:**

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.08), as the calculated value of X2 14.97 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of regularity, as the calculated value of X2 0.01 and 0.29 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement in regularity over the control group and non
In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.27), as the calculated value of X2 9.84 was higher than the tabulated X2 value of 3.84, however no significant improvements were found of control group and non diabetic group in case of regularity, as the calculated values of X2 0.30 and 0.07 respectively were less than the tabulated X2 values of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement in regularity over the control group and non diabetic group.

**Interest in Teaching:**

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.09), as the calculated value of X2 6.89 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of an interest in teaching, as the calculated values of X2 0.13 and 0.10 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement on interest in teaching over the control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.28), as the calculated value of X2 5.71 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of an interest in teaching, as the calculated values of X2 0.57 and 0.08 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that yoga exercise group shown significant improvement on interest in teaching over the control group and non diabetic group.

**Participation in Co-curricular Activities:**

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.10), as the calculated value of X2 4.48 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of participation in co-curricular activities, as the calculated values of X2 0.01 and 0.13 respectively were less than the tabulated X2 value of 3.84. Then, it
might be concluded that the yoga exercise group shown significant improvement about participation in co-curricular activities over the control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no. 29), as the calculated value of X2 5.82 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of participation in co-curricular activities, as the calculated values of X2 0.15 and 0.30 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement about participation in co-curricular activities over the control group and non diabetic group.

Co-operative Attitude:

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (references table no.11), as the calculated value of X2 4.34 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of co-operation attitude, as the calculated values of X2 0.01 and 0.02 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement about co-operative attitude over the control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.30), as the calculated X2 values were less than the tabulated X2 value .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of co-operative attitude.

Professional Attitude:

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at.05 (2) level (reference table no.12), as the calculated value of X2 9.75 was higher than the tabulated X2 value of 5.99, but no significant improvements were found of control group and non diabetic group in case of professional attitude, as the calculated values of X2 0.06 and 0.06 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement about professional attitude over the
control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(2) level (reference table no.31), as the calculated X2 values were less than the tabulated X2 value .05(2) of 5.99. Then, it might be concluded that the effect of yoga exercise were insignificant all the three groups in case of professional attitude.

Teacher pupil Relationship:

In case of male subjects the difference between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.13), as the calculated X2 value were less than the tabulated X2 value .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of teacher pupil relationship.

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.32), as the calculated value of X2 4.71 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of teacher pupil relationship, as the calculated values of X2 0.13 and 0.51 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement about teacher pupil relationship over the control group and non diabetic group.

TEACHING EFFECTIVENESS (Students Rating):

Regularity:

In case of male subjects the difference between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table 14), as the calculated value of X2 7.75 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of regularity, as the calculated values of X2 0.04 and 0.06 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement in regularity over the control group and non diabetic group.
In case of female subjects the difference between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.33), as the calculated value of X2 6.52 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of regularity, as the calculated values of X2 0.09 and 0.07 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement in regularity over the control group and non diabetic group.

**Interest in Teaching:**

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.15), as the calculated value of X2 4.54 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of interest in teaching, as the calculated values of X2 0.06 and 0.01 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement on interest in teaching over the control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.34), as the calculated value of X2 5.28 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of interest in teaching, as the calculated values of X2 0.21 and 0.07 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement on interest in teaching over the control group and non diabetic group.

**Participation in Co-curricular Activities:**

In case of male subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.16), as the calculated value of X2 4.82 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of interest in teaching, as the calculated values of X2 0.04 and 0.02 respectively were less than the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement on interest in teaching over the control group and non diabetic group.
activities over the control group and non diabetic group.

In case of female subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.35), as the calculated X2 values were less than the tabulated X2 values .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of participation in co-curricular activities.

**Co-operative Attitude:**

In case of male subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.17), as the calculated X2 values were less than the tabulated X2 values .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of co-operative attitude.

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(1) level (reference table no.36), as the calculated value of X2 4.36 was higher than the tabulated X2 value of 3.84, but no significant improvements were found of control group and non diabetic group in case of co-operative attitude, as the calculated values of X2 0.08 and 0.10 respectively were less that the tabulated X2 value of 3.84. Then, it might be concluded that the yoga exercise group shown significant improvement about co-operative attitude over the control group and non diabetic group.

**Professional Attitude:**

In case of female subjects the differences between the initial and final scores of Y.E.G. was significant at .05(2) level (reference table no.18), as the calculated value of X2 7.56 was higher than the tabulated X2 value of 5.99, but no significant improvements were found of control group and non diabetic group in case of Professional attitude, as the calculated values of X2 0.34 and 0.06 respectively were less that the tabulated X2 value of 5.99. Then, it might be concluded that the yoga exercise group shown significant improvement about professional attitude over the control group and non diabetic group.

In case of male subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(2) level (reference table no.37), as
the calculated $X^2$ values were less than the tabulated $X^2$ values .05(2) of 5.99. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of professional attitude.

**Teacher pupil Relationship:**

In case of male subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.19), as the calculated $X^2$ values were less than the tabulated $X^2$ values .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of teacher pupil relationship.

In case of female subjects the differences between the initial and final scores of three groups (Y.E.G., C.G. and N.D.G.) were not significant at .05(1) level (reference table no.38), as the calculated $X^2$ values were less than the tabulated $X^2$ values .05(1) of 3.84. Then, it might be concluded that the effect of yoga exercises were insignificant all the three groups in case of teacher pupil relationship.
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<td>Participation in co-curricular activities (Experts opinion)</td>
<td>Significant</td>
<td>Rejected</td>
</tr>
<tr>
<td>Ho2 for Female</td>
<td>Participation in co-curricular activities (Students opinion)</td>
<td>Insignificant</td>
<td>Accepted</td>
</tr>
<tr>
<td>Ho2 for Male</td>
<td>Co-operative Attitude (Experts opinion)</td>
<td>Insignificant</td>
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</tr>
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<td>Ho2 for Male</td>
<td>Co-operative Attitude (Students opinion)</td>
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</tr>
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<tr>
<td>Ho2 for Female</td>
<td>Co-operative Attitude (Experts opinion)</td>
<td>Insignificant</td>
<td>Accepted</td>
</tr>
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<td>Ho2 for Female</td>
<td>Co-operative Attitude (Students opinion)</td>
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</tr>
<tr>
<td>Ho2 for Male</td>
<td>Professional Attitude (Experts opinion)</td>
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</tr>
<tr>
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</tr>
<tr>
<td>Ho2 for Female</td>
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<td>Ho2 for Female</td>
<td>Professional Attitude (Students opinion)</td>
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<td>Accepted</td>
</tr>
<tr>
<td>Ho2 for Male</td>
<td>Teacher pupil Relationship(Experts opinion)</td>
<td>Insignificant</td>
<td>Accepted</td>
</tr>
<tr>
<td>Ho2 for Male</td>
<td>Teacher pupil Relationship(Students opinion)</td>
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<td>Teacher pupil Relationship(Students opinion)</td>
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</tr>
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</table>
5.2 CONCLUSIONS:

Administration of the prescribed yoga exercises was limited to 24 (twenty four) weeks only. This period seemed to be very limited for such experiment. For good and satisfactory results experiment for longer period would have been necessary. In spite of the limitations it could be said that 24 (twenty four) weeks of yoga exercises for the diabetic patients, showed more than marginal improvement of various parameters of organic disorder and teaching effectiveness. In this connection it should be admitted that the changes in all the parameters of organic disorder and teaching effectiveness were not significant in case of both male and female subjects. It is obvious that there is a need of well controlled and longer study of the effects of yoga exercises in respect of diabetic patients. In short, all factors involving the experiment, as well as the subjects under experiment should be under the complete control of the experimenter order to have a result oriented experiment like this one.

It was also hoped that more fortunate physical education teachers bent on under taking such a project would be able to show results which would help in days to come in removing apathetic attitude of the general people even the doctors toward these groups of patient teachers.

5.3 RECOMMENDATIONS

In general opinion it was seen that patients suffering from diabetes should not be involved any type of physical activity. Sometimes it was seen that the doctors also subscribed to this view. Even they suggested bed-rest for such patients to be followed by prescription of some conventional medicines. In case of Insulin Dependent Diabetes Mellitus (Type-II), the doctors might be correct, but when it was Non-Insulin Dependent Diabetes Mellitus (Type-II), the experimenter thought differently. To prove their contention an experiment with patients having diabetes Mellitus Type-II was conducted by the present experimenter. The experiment was through yoga exercises administered on diabetic patients who were secondary school teachers of age varying from 35 (thirty five) to 58 (fifty eight) years. The findings were encouraging and could be recommended to the teacher of physical education who take undertake such project in a condition where satisfactory and accurate result could be obtained. It might be said that a
successful experiment would require an isolated place with good atmosphere, selection of subjects of same age and sex and close control of the frequency, intensity and duration of the prescribed yoga exercises. Moreover the results of such investigation would invariably throw favorable light on the role of physical education in the country.

5.4 RECOMANDATION FOR FURTHER STUDY RESEARCH WORK

The Following recommendations are made on the basics of the results from the study which may be useful for the future research work.

1. The same study may be repeated with other yogic exercises on the same subject.
2. The same study may be repeated with other yogic exercises on different case separately.
3. The same study may be repeated with other yogic exercises on the same subject of different profession.
4. The same study can be carried on other state and university.
5. The funding of the study may serve as reference material for the future studies.