

SPECIMEN FORMAT FOR THESES OF MONTH

Faculty : Dr. S. Gayatri Devi

Department : Psychology

Branch/ Area: : Psychology

Sub Subject Heading: : -

Candidate's Name : M. Sathya

Candidate's Address with email : 175 MG Nagar,
KNP Road,
Karamadai-641104.
21phcpp001@avinuty.ac.in

Title of the thesis : Effectiveness of Reiki and Existential Therapy in
Managing Body Pain Intensity and Insomnia Among
Women

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(ii) In roman Script =

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Name of Supervisor : Dr. S. Gayatri Devi

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University's Name & Address : Avinashilingam Institute for Home Science and Higher
Education
for Women, Coimbatore - 641 043

Abstract within 300 words:

Women play a vital role in every culture and are multifaceted. They face problems or challenges in their day to day life either socially or physically. Body pain and Insomnia are the remnants of this age of high demand and stress. Reiki and Existential Therapy is an integrated model of noninvasive alternative therapy and psychotherapy that has the potential to reduce symptoms of insomnia, pain and improve holistic well-being. A total of 124 participants aged 36-64 were selected by purposive sampling, with 30 participants in the Reiki intervention group, 31 in the Existential therapy group, 32 in the integrated therapy group and 31 in waitlist control group who were randomly assigned. The research design is Before, After and Follow-up with Waitlist Control Group Design (Randomized Control Trial method). A mixed method approach was used for pain and insomnia assessment among the participants. Assessments were done using the Brief Pain Inventory (Cleeland, 1994) and Regensburg Insomnia Scale (RIS) (Croenlein 2013). Intervention to the three experimental groups was given over a period of three months with 18 sessions. Pain and insomnia were reassessed after the intervention, and a follow-up was also done after 3 months using the same tools. The data was analyzed using the Design Expert Software version 13 for Response Surface Methodology (RSM) for process optimization, SPSS 29 for repeated measures MANOVA and Atlas ti 25 for qualitative analysis. Results revealed that Reiki and Existential therapy (integrated intervention model) is more effective in reducing the levels of Pain and insomnia among women. Interventions to overcome pain and insomnia can significantly improve the well-being and overall mental health of women.

Keywords: *Pain, Insomnia, Middle Adulthood Women, Reiki, Existential Therapy*

i) Major objectives :

To find out the effectiveness of Reiki and Existential Therapy in managing Body Pain Intensity and Insomnia among Women

To identify the relationship between Body Pain Intensity and Insomnia among Women

ii) Hypothesis:

- There is a significant relationship between Body Pain and Insomnia among Women

- There is a significant difference between the before, after and follow-up phases in managing body pain through Reiki among women
- There is a significant difference between before, after and follow-up phases in managing body pain through Existential Therapy among women
- There is a significant difference between before, after and follow-up phases in managing body pain through Reiki and Existential Therapy among women
- There is a significant difference between before, after and follow-up phases in managing Insomnia through Reiki among women
- There is a significant difference between before, after and follow-up phases in managing insomnia through Existential Therapy among women
- There is a significant difference between before, after and follow-up phases in managing insomnia through Reiki and Existential Therapy among women

iii) Methodology :

A methodical approach to addressing the research topic is known as research methodology. 'Effectiveness of Reiki and Existential Therapy in Managing Body Pain Intensity and Insomnia Among Women' is a study that describes the methodological approaches in detail in this chapter.

Aim

The aim of this study is “ *To assess the effectiveness of Reiki and Existential therapy in managing Body Pain and Insomnia among Women* ”

Research problem(questions)

After detailed analysis of the literature collected for the study, we arrived at these research problems

- What are the psychological perspectives of pain and insomnia?
- Will a Complementary alternative healing technique(Reiki) be effective in managing pain and insomnia?
- Will psychotherapy (Existential Therapy) be effective in managing pain and insomnia?
- Will an integrated psychological therapy (Reiki and Existential therapy) be effective in managing pain and insomnia?

Objectives

To find out the effectiveness of Reiki and Existential Therapy in managing Body Pain Intensity and Insomnia among Women

To identify the relationship between Body Pain Intensity and Insomnia among Women

To assess the level of Insomnia and Body Pain Intensity among Women

Hypotheses

- There is a significant relationship between Body Pain and Insomnia among Women.
- There is a significant differences between the before, after, and follow-up phases in managing body pain through Reiki among women.
- There is a significant difference between before, after and follow-up phases in managing body pain through Existential Therapy among women.
- There is a significant difference between before, after and follow-up phases in managing body pain through Reiki and Existential Therapy among women.
- There is a significant difference between before, after and follow-up phases in managing Insomnia through Reiki among women.
- There is a significant difference between before, after and follow-up phases in managing insomnia through Existential Therapy among women.
- There is a significant difference between before, after and follow-up phases in managing insomnia through Reiki and Existential Therapy among women.

Sampling Technique

For the present study purposive sampling is used. Purposive sampling is also known as judgement sampling. There is no minimum number of study participants required for this technique. Convenient sampling can be employed in both qualitative and quantitative research. Participants in this study were chosen for the intervention using the purposive

sampling technique. When using purposive sampling, the following points are taken into account: whether the participants are available and willing to participate in the study and to express their opinions and experiences in an expressive and introspective way (Patton, M. Q., 2002). This indicates that a wide range of characteristics and qualities from a variety of age groups (36–64 years) were included in the sample that was chosen for the intervention. The participants aged 36-64 are selected by Purposive sampling and they are allotted into two groups by simple random sampling method.

Area

Participants were selected from hospitals in and around Coimbatore (Instructed by the authority not to disclose the identity), the data was collected and the intervention was administered for the selected women. The reasons for selecting this area are as follows:

Willingness of authorities to grant permission to conduct the action research Consent from the women to participate in the study

Inclusion criteria

- Age range from 36-64 years
- Only female participants were included
- Participants who gave consent to participate in this study

Exclusion criteria

- The participants who are not willing to participate
- The participants without Insomnia and pain were not included
- The participants who had chronic disease were not included
- The participants who were not regular for the intervention

Description of the Variables

- Independent Variable-Reiki and existential therapy
- Dependent Variable-Pain and Insomnia

Research design

Before, After and Follow-up with Waitlist Control Group Design (Randomised Control Trial method). The current study was carried out using a mixed-method research

methodology. The act of collecting, evaluating, and ultimately "mixing" qualitative and quantitative data and methodologies in a single study to comprehend the research problem is known as a mixed method research design.

Tools

The Brief Pain Inventory (BPI) was developed from the Wisconsin Brief Pain Questionnaire by Cleeland (1994).

Regensburg Insomnia Scale (RIS): a rating scale for the assessment of psychological symptoms and sleep in insomnia by Croenlein (2013) .

Procedure

Need survey for the research using interview

A survey on pain and insomnia experience was done with 347. Semi-Structured interviews were conducted with 253 participants. The participants expressed their opinions, experiences, and feelings about Pain and Insomnia. The interview lasted for about 5-10 minutes and, was transcribed verbatim. The Semi structured interview information was used for the qualitative analysis of pain and insomnia, codes were assigned in Atlas ti 25 for the network analysis of biopsychological causes and effects of pain.

RESULTS

The findings of the study are divided into three main areas. The Analysis of Data Response Surface Methodology (RSM) which is a statistical tool used in Design of Experiments (DoE) is shown in section one. The descriptive statistics of the results of the tests used to collect the data (the Body Pain Intensity and Insomnia scale) during the before intervention and after intervention phases are shown in Section two. Inferential statistics are presented in the third section of the results . It examined the Analysis of Variance of each set of scores obtained before and after the intervention to draw conclusions about participant score differences within the group.

As the insomnia levels increase, the pain levels also increase and vice versa. Hence, the hypothesis, “**There is a significant relationship between insomnia and pain among the participants**” is accepted. The independent variable for the research, is the intervention that had four groups, the experimental group 1 which received the reiki intervention, the

experimental group 2 which received the existential therapy intervention, the experimental group 3 which received the reiki and existential therapy combined intervention and the waitlist control group that did not receive any intervention. The insomnia and pain (the dependent variables) levels were measured three times namely, prior to the intervention, henceforth called before intervention scores, after the intervention and also a follow-up. As there were three-time scores for two dependent variables and four groups in the independent variable, it was decided to use Two Way Repeated MANOVA (also referred to as doubly multivariate MANOVA) to statistically compute the results.

A Two Way MANOVA of repeated measures 4 {(experimental 1, experimental 2, experimental 3, and waitlist control groups) x 3 (before, after and follow-up scores of both the dependent variables, insomnia and pain)} was computed. Post hoc paired comparisons were performed to understand the effect of the interventions in the before, during and after intervention phases on poor sleep depth and poor sleep quantity. So the hypothesis '**There is a significant difference between before, after and follow-up phases in managing insomnia through Reiki and Existential Therapy among women**' is accepted.

iv) Findings:

Conclusions

After analyzing the data and interpretation of the scores obtained through the Psychological Assessments before, after and follow-up phases of the intervention the following conclusion were drawn

- There was a significant positive correlation between pain intensity and insomnia among women
- There was significant difference in the levels of pain and insomnia during before, after and follow-up phases of the Reiki group
- There was a significant difference in the levels of Pain and insomnia in the Before, After and follow-up phases of the Existential therapy intervention.
- Reiki and Existential therapy is more effective in reducing the levels of Pain and insomnia among women.
- Interventions to overcome pain and insomnia can significantly improve the well- being and overall mental health of women.

- The integrated intervention was very helpful in dealing with various dimensions of pain and insomnia.

Examiners

Internal Examiner : Dr. B. Rangaiah,
Professor, Dept of Applied Psychology,
Pondicherry University,
Puducherry-605014

External Examiner : Mary Rachelle R. Wapano
Professor, Xavier University – Ateneo de Cagayan
Philippines