Effectofthe BONYAN-method experiential marathon group on the quality of life of non-clinical populations during the Covid-19 pandemic

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Abstract: BONYAN theory and method indicate being committed, accepted, and responsible as effective and constructive for "how to be with what is," and is presented in the form of the experiential marathon group. This study investigates the effect of online participation in the BONYAN-method experiential marathon group (BMEMG) on the quality of life of the non-clinical populations. This study was a quasi-experimental design of two heterogeneous groups, the experimental group (N=50) and the control group (N=98), with pre-test and post-test. The program was held over three days with three weekly follow-up sessions. Before the start and after the third follow-up session, WHOQOL-100 was provided to the two groups. The physical, psychological, level of independence, social relationships, environment, personal beliefs, generality, and overall score in the experimental group's post-test significantly differed from the experimental group's pre-test and the control group's post-test. The effect size was significant for all indices, among which spirituality and independence showed the highest effect size. The BMEMG, by providing opportunities for awareness of "how to be with what is," confronts people with their internal and dynamic psychological patterns and improves their quality of life by increasing their capacity for

Keywords: Quality of life, BONYAN theory, mental health, ontological approach, existential approach,

1. Introduction

acceptance and flexibility.

Covid-19 was first identified in December 2019 in Wuhan, China, and the WHO declared the disease a pandemic on March 11, 2020(WHO, 2020). This epidemic greatly affected global health and the mental health and quality of life of people in different countries (Wilder-Smith, Chiew, & Lee, 2020). Over the past decades, quality of life has been investigated mainly in studies focused on non-contagious and chronic diseases and defined as "the patient's subjective perception of the effect of the disease or medical condition on various fields including physical, mental, social and occupational functioning. Assessing the quality of life in different fields helps identify many problems affecting people's daily lives. Existing studies have found quality of life to be an important predictor of continued health and well-being (Haraldstad, et al., 2019). The outbreak of infectious diseases such as Covid-19 significantly negatively impacts individuals' and societies' physical, mental, and social functioning (Qiu, et al., 2020). Studies conducted after the pandemic have reported significant impairment in health-related quality of life in public health, physical condition, and social functioning (Mucci, Mucci, & Diolaiuti, 2020). Mental health experts have expressed concerns about the consequences of the Covid-19 pandemic on society's mental functioning and well-being (Asmundson & Taylor, 2020). Recent studies have warned about the widespread psychological consequences of the Covid-19 pandemic and quarantine conditions on quality of life, including the environmental, social, and spiritual/religious aspects of people's life (Rubin & Wessely, 2020). The WHO defines the quality of life as "a person's perception of his position in life in the context of the culture in which he lives and about his goals, expectations, standards, and concerns" (WHO, WHOQOL: Measuring Quality of Life, 2022). Quality of life generally refers to a person's satisfaction with different aspects of his life, including happiness, pride, well-being, health, and success (Kaplan RM, 2007).

Ventegodt et al. (2004) showed that being present in existential holistic group therapy improved people's quality of life, mental health, and performance. The main goal of such a group is to help the personal transformation of the

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participants by changing their attitude toward life and their philosophy of life. Quality of life seems to improve because the participants in these courses know themselves better and discover their hidden potential (Søren Ventegodt, 2004). Also, studies have shown that existential, cognitive therapy has effectively reduced vulnerability and increased the cognitive, psychological-emotional, and interpersonal capabilities of those with various physical and psychological problems. In addition, interventions based on the existential approach have improved the quality of life of non-clinical populations and those suffering from emotional disturbances (Jalili, 2015) (Rezaie R, 2013)(Ghamari Givi H, 2014) (Bahmani B, 2015) (Nazari A, 2012). A more positive attitude, increasing awareness of other aspects of life and responsibility, and accepting conflict and existential crises are some factors related to these therapies' effectiveness. In existential group therapy, members can express their illogical beliefs and replace them with logical inferences leading to cognitive and psychological flexibility (Kissane DW, 2003).

BONYAN theory is one of the oldest movements of applied psychology in Iran, which was registered in 1989 by Mirhashemi in the state of California, USA, and started working in Iran in 1992. Popular movements are formed through the abstraction of effective methods of human interaction with the environment and others, which was affected by the existential and humanist activities in psychology and the form of the experiential marathon structured group. Over 30 years, it became a growing theory and method, including concepts such as consciousness, observation, acceptance, values, presence, choice, commitment, body-mind interaction, emotion regulation, and working with reaction with a central role. For cognition, BONYAN theory is of the same family of existentialist psychological theories, especially Heidegger's Ways, as Dasein's analysis. This theory centered on "being with what is" explains existence based on the triangle of "being-doing-having" and offers an open view of existence based on integrity and intentionality. BONYAN theory and method that operationalizes BONYAN theory in the life scene is a combined model that is affected by the techniques of approaches such as psychodrama, transactional analysis (TA), and experiential approaches such as Gestalt. Emphasizing the present choice and being an observer here and now, this method proposes commitment, acceptance, and responsibility as an effective and productive type of being for "how to be with what is." BONYAN theory and method-based training programs are entirely experiential, delivered in the form of multiple individual and group activities in structured marathon groups. The marathon group is a continuous and intensive long-term encounter group, held for 18, 24, 36, and 72 hours, depending on the group's goals. Based on the structure, Marathon groups are divided into two types, unstructured and structured. In a marathon, structured groups, activities, and processes are predetermined for each day and part of the program, and people create their own and the group's experiences within the framework of this structure. In these activities, which are called plays, participants discover how they relate to themselves, others, and the universe.

Weigel et al. (1971), in their study on marathon group: a review of practice and research according to Mintz (1971), Bach (1967), Demos (1970), Rachman (1969-1970), Rogers (1967, 1967), Yalom (1970) and other organizers of therapy groups have stated that marathon groups are one of the most direct, efficient, and economical methods to prevent mental health damage such as fragmentation and meaninglessness (Weigel R. G., 2002) (Pothier P. C., 1970) (Dinges N. G., The marathon group: A review of practice and research., 1971). Nejatian et al. (2021) studied the participants in the BONYAN-method experiential marathon group, and their results showed that participation has had a significant positive effect on all personality indicators in the 5-factor model of personality, especially "extroversion," "responsibility," and "openness to experience." Also, all the indicators of ego function in the participants of the BONYAN-method experiential marathon group had significant growth. The most remarkable change was in adaptive regression in the service of the ego (creativity) and the stimulus barrier, which is related to the capacity to let go, and suspend the controls (Weigel R. G., 2002) (Pothier P. C., 1970) (Dinges N. G., The marathon group: A review of practice and research., 1971). Nejatian et al. (2021) studied the participants in the BONYAN-method experiential marathon group, and their results showed that participants had had a significant positive effect on all personality indicators in the 5-factor model of personality, especially "extroversion," "responsibility," and "openness to experience." Also, all the indicators of ego function in the participants of the BONYAN-method experiential marathon group had significant growth. The most remarkable change was in adaptive regression in the service of the ego (creativity) and the stimulus barrier, which is related to the capacity to let go, and suspend the controls (Nejatian A. K., 2021) (Nejatian, Khaksar, & Azimi, 2021).

According to the study results, we attempted to investigate the effect of participating in the BONYAN-method experiential marathon group on quality of life during the Covid-19 pandemic in non-clinical populations.

2. Method

Participants

There are 148 participants (n=50 in the experimental group and n=98 in the control group). To meet the criteria of the non-clinical population, all applicants to participate in the group were first subjected to a screening interview. Also, standards such as age over 20, at least a bachelor's degree, employment, and informed consent to participate in the group were considered to match the samples. The experimental and control groups were evaluated simultaneously before and after the group meetings.

Tools

This study used the WHO Quality of life 100 questionnaires (WHOQOL-100) to measure the quality of life. The WHO defines the quality of life as a person's perception of his position within the framework of the culture and value system in which he lives and his goals, expectations, standards, and concerns (WHO, WHOQOL: Measuring Quality of Life, 2022). To quantify and measure the quality of life, this questionnaire measures four dimensions of physical health, mental health, social relations, and environmental health, along with the variables of independence and spirituality.

This questionnaire was translated into Farsi and standardized in Iran. The results of a study conducted by Nejat et al. in Tehran confirmed the validity, reliability, and acceptability of the structural factors of this tool in Iran in healthy and sick groups (Nejat, Montazeri, H. Naeeni, Kazem, & Majdzadeh, 2007)

Procedure

This study was a quasi-experimental design of two heterogeneous groups with pre-test and post-test. This model is the most common quasi-experimental design, including two experimental and control groups. Since subjects are not randomly assigned to groups in this design, researchers should ensure that the groups are equal before starting the test and homogenous in terms of the studied parameters (Sarmad, Bazargan, & Hejjazi, 2007).

For matching, all the participants in this study first read and completed a comprehensive demographic form online (including personal traits, educational and professional level, marital status, goals of participating in the group, history of physical and mental-psychological problems, and possibly traumatic experiences in childhood, and the reactive factors and severity and reaction) along with the information letter of the group's regulations and the consent form to participate. After that, they were subjected to in-person screening interviews. Fifty participants were selected to participate in the group, and the remaining 98 were chosen as the control group.

The group was held online on the last three days of the week (three 12-hour days and a total of 36 hours), and then three weekly follow-up sessions were held to monitor the participants' experience in the group. The duration was utterly consistent with the standards of marathon groups. The meetings were held online using the ZOOM application. Participants must follow the group's principal regulations, including attendance for the entire duration of the group, non-use of drugs, stimulants, and alcoholic beverages for the whole of the three days, and no smoking at the time of the program. The group's experiences and the words of others remained confidential. The group stopped every day for an hour and a half, two breathing hours, and an hour for lunch. Before the start and after the third follow-up session, WHOQOL-100 was presented to the experimental and control groups online as a google form.

Statistical analysis

Shapiro-Wilk test (P<0.05) was used for the normality of data distribution of research variables. Covariance analysis was used for the results (Table 1). The study results showed that in research designs with pre-test and post-test, and control groups, data analysis by analysis of covariance (ANCOVA) is the most reliable method (O'Connell , Dai, & Jiang, 2017). In cases where the hypothesis of normality was not established for each of the two groups, the nonparametric Kruskal-Wallis H test was used. To investigate the effect size of participating in the marathon group on each correlation statistic, r was used for non-parametric tests, and Cohen's d was used for parametric tests (Mayers, 2013).

3. Results

The Shapiro-Wilk test was used for the normality of the data distribution of research variables. The data relating to physical dimensions, social relations, spirituality, and the general and total scores showed no normal distribution. A summary of the test results is given in Table 2. The Physical, Psychological, Level of independence, social relationships, environment, Spirituality/personal beliefs, generality, and overall score in the experimental group's post-test had a significant difference with the experimental group's pre-test and both post-test and pre-test of the control group. Meanwhile, in the pairwise comparison, no significant difference was observed between the pre-test of the experimental group and the pre-test and the post-test of the control group. This indicates the appropriate matching of the two experimental and control groups before starting the study and intervention.

Table 1- Test for normal distribution of research data

	Variables	Groups	Shapiro-Wilk Test		
			statistic	df	Sig.
Pre-test	DI:1	experimental group	.945	50	.022
	Physical	control group	.981	98	.181
	Dh -1 :1	experimental group	.983	50	.706
	Psychological	control group	.978	98	.106
	I1 - Ci- d d	experimental group	.968	50	.195
	Level of independence	control group	.987	98	.438
	C : 1 1 4: 1:	experimental group	.967	50	.177
	Social relationships	control group	.963	98	.007
		experimental group	.963	50	.120
	environment	control group	.984	98	.271
		experimental group	.969	50	.202
	Spirituality/religion/personal beliefs	control group	.967	98	.014
	C-n-m1	experimental group	.979	50	.495
	General	control group	.942	98	.000
	,,	experimental group	.977	50	.416
	overall	control group	.943	98	.000
Post-test	DI : 1	experimental group	.970	50	.236
	Physical	control group	.991	98	.771
	D111	experimental group	.956	50	.063
	Psychological	control group	.985	98	.357
	I 1 C: 1 1	experimental group	.984	50	.721
	Level of independence	control group	.993	98	.920
	Conial valetie making	experimental group	.961	50	.095
	Social relationships	control group	.977	98	.081
	. ,	experimental group	.976	50	.383
	environment	control group	.988	98	.503
	California de la compania del compania de la compania del compania de la compania del compania de la compania de la compania de la compania del compania de la compania del compania de la compania del compania	experimental group	.870	50	.000
	Spirituality/religion/personal beliefs	control group	.972	98	.034
	General	experimental group	.971	50	.257
	General	control group	.964	98	.008
	avrous 11	experimental group	.987	50	.871
	overall	control group	.981	98	.159

Table 2- Summary of statistical analysis

Domains	Experime	ntal	Control	group	Statistical	P-	Effect
	group		Average :	mark	test	values	size
	Average mark						
	Post-test	Pretest	Post	Pretest			
			test				

Physical	a14.97	b13.44	b13.40	b13.45	Kruskal-Wallis H	*0.008	r=0.58
D 1 1 : 1	01.4.01	b12.05	b10.77	h12.70		*0.000	1-0.2
Psychological	a14.01	ь13.05	ь12.77	b12.79	ANCOVA	*0.000	d=0.2
							8
Level of independence	a14.07	b12.92	ь12.56	ь12.55	ANCOVA	*0.000	d=0.7
							1
Social relationships	a14.15	ь12.61	ь12.45	ь12.36	Kruskal-Wallis	*0.008	d=0.6
					Н		1
Environment	a14.54	b13.16	ь12.97	b13.05	ANCOVA	*0.000	d=0.6
							6
Spirituality/religion/personal	a17.28	b14.50	b13.81	b13.83	Kruskal-Wallis	*0.000	r=0.70
beliefs					Н		
General	a14.70	b12.68	ь12.85	b12.83	Kruskal-Wallis	*0.004	d=0.6
					Н		9
overall	a103.72	ь92.37	ь90.81	ь90.75	Kruskal-Wallis	*0.000	d=0.9
					Н		4

An essential point of conducting these analyzes is that these tests indicate the presence or absence of significant differences between groups. Still, they need to indicate something about the size of the difference. Hence, a concept called effect size, which expresses the size of the difference between groups, is essential. In this study, to measure the effect size between the pre-test and the post-test of the experimental group, for the criteria with a parametric explanation, which were mentality, independence, social relations, environment, generality, and the total score, Cohens d was used. R was used for the non-parametric criteria of physicality and spirituality. The Table below shows different ranges of the estimated number for the absolute magnitude of the effect size of Cohen's d and r (GraphPad Statistic, 2022) (Cohen, 1992).

Table 3- Different ranges of the estimated number for the absolute magnitude of the effect size

	Cohen's d values	Pearson's r values
A small and non-significant effect size	<0.2	0.1-0.3
Medium effect size	0.2-0.5	0.3-0.5
Significant and robust effect size	0.5-0.8	0.5-1.0
A firm effect size	>0.8	0.5-1.0

According to the results of Table 2 and their comparison with the ranges of the effect size in Table 3, it seems that except for the psychological domain with a medium effect size, all others have a significant and robust effect size, among which spirituality and independence are the most significant effect size. It should be noted that the total score, which is a set of criteria, shows a firm effect size, i.e., the mean total score of the criteria in more than 80% of the people in the pre-test group was lower than that of the post-test group. This value is valid for all criteria with a large effect size. In other words, participating in the group has significantly increased these factors in more than 80% of the participants (McLeod, 2022). This value is between 69% and 79% in the aspects related to the group with the moderate effect size, which here only includes the mentality. None of this study's criteria are within the small effect size range.

4. Discussion

No similar study was found on the effectiveness of marathon groups in improving quality of life-indicators. Still, the study results can be considered indirectly consistent with other studies that have shown the improvement of the psychological functions of participants in marathon groups (Fisher, 2012) (Kilmann, 1976). Also, few studies have been conducted on the effect of ontological groups on mental health. However, studies have shown the effectiveness of these groups in promoting mental health and improving quality of life (Alexander, 2004) (Mumurdere, 2006) (Lundqvist, 2006) (Nazari A, 2012) (Khodadadi Sangdeh, 2015) (Gagnon, 2015). Our results were also consistent with the current developments in the effectiveness of ontological methods. They indicated the improvement in the quality of life of the non-clinical populations during the Covid-19 pandemic.

BONYAN theory and method focus on gaining awareness based on the practical experience of the concept of "being with what is" about oneself and others. Since what we have experienced in the past affects our "type of being," becoming aware of it allows us to select the being we are. From the point of view of BONYAN theory and method, human has seven basic "types of being" through which the experience of being effective in existence becomes possible:

Being present means not engaging with "what is." By being in the presence, the mind and body are freed from the past meanings.

- Being faithful includes trust and gratitude.
- Accepting is experiencing existence through "being with all that is and is not."
- Being one is experienced in the harmony of existence and simultaneously includes the plurality of reality as
- Being origin evokes birth and perpetuates the existence of being alive.
- Being transparent clarifies the inner space and opens a space for recognition without mental conflict.
- Being in integrity means the integrity of human existence and a platform for commitment, originality, and value of one's existence.

The BONYAN-method experiential marathon group makes people face their inner and dynamic psychological patterns by providing opportunities to become aware of "how to be with what is." Krug (2009) believed that this type of presence, in the sense of revealing the moment, helps people integrate with everyday conflicts and increases their capacity for acceptance and flexibility (Krug, 2009). On the other hand, the BONYAN theory and method emphasize "acceptance" and "transparency" as the fundamental constructs. In the BONYAN theory and practice, the stages of acceptance include being present, open, and welcoming. When faced with a stressful factor, a person with a high sense of coherence behaves more welcomingly and flexibly, acts consistently with a better understanding of the existing conditions, and has a higher ability to manage challenges and opportunities and adapt to the current conditions. This adaptation seems to be a unique cognitive, behavioral and emotional combination that comes from a sense of self-coherence. Antonovsky introduces it as a sense of belonging and deep inner satisfaction with oneself and others. Its three main components are establishing the relationship between life events, facing life challenges, and accepting life events (Antonovsky, 1996). In BONYAN theory and method, taking the pious nature of any unpleasant issue or case frees the mind from conflict. It provides an atmosphere of presence and awareness for unlimited options. As mentioned in the definition of the sense of coherence, one of the compelling cases of the BONYAN method is to improve the sense of coherence in the participants. Our results in this field are also consistent with the opinion of Ventegodt et al. (2007). They showed that the improvement of the sense of coherence in people was accompanied by the transformation of their personality and the improvement of their quality of life (Ventegodt S. T., 2007).

Also, the BONYAN theory and method introduce being responsible in the sense of being in question as the context of discovery and recognition and as a process for transparency. By selecting to be responsible for what is, a person questions his own experience, creating a space of awareness in which a person is freed from past experiences and judging the current situation. Being responsible leads to movement, dynamism, and results. This makes the participants in the BONYAN-method experiential marathon group more capable of accepting cases and making new choices. This experience seems essential in improving different aspects of quality of life, especially independence, in the participants of the BONYAN-method experiential marathon group.

On the other hand, positive philosophy toward life has also been proposed as one of the most important factors affecting the quality of life (Ventegodt S. T., 2007). Since the negative view toward life is rooted in the emotional damage experienced in the past, studies have shown that solving old emotional problems has constantly improved mental health (Anderson, 1995). Completing past experiences can affect the criteria that define a person's attitude to life and improve all aspects of a person's life, including quality of life (Ventegodt S. T., 2007). Also, people's level of awareness has been one of the main factors determining their health, ability, and quality of life (Ventegodt S. F.-M., 2005). In the BONYAN-method experiential marathon group, the participants become aware of the possibility of different mental perceptions and meanings for an event or phenomenon. From the point of view of BONYAN theory, we define it by giving importance to "what is," and these meanings translate for us as a form of the world and everything in it. Participants in the BONYAN-method experiential marathon group, being aware of the concept

of being present and an observer, and experiencing it, become aware of their mental forms and share the ownership of their feelings and thoughts when facing the events and phenomena of life. In this way, the participants can take constructive steps to upgrade and improve their quality of life by gaining insight into themselves and their communication world.

Also, in this group, people are faced with their defenses (reaction), and in this way, they gain insight into themselves. The marathon group facilitates the abandonment of reasons. Due to the continuity of the group, the possibility of re-establishing common defenses is reduced, which in turn leads to more spontaneous and intimate expression of people in interpersonal relationships and improvement of different dimensions of indicators of mental health and social relations in their quality of life (Dinges & Weigel, 1971). The results of previous studies in this regard have shown the growth of ego functions in the group participants (Nejatian A. K., 2021). High levels of ego functions help people to experience more relaxation in their social interactions (Kernberg, 2019), which is one of the essential factors in improving the internal satisfaction of people participating in the group.

On the other hand, processes related to emotional regulation have predicted changes in the quality of life during quarantine, and strategies to empower people to regulate their emotions have been proposed as essential factors for preventing the reduction in quality of life (Cengiz, 2020). According to the study results, training constructive strategies for managing emotions and improving a person's awareness of his feelings facing challenges such as the Covid-19 pandemic helps him better understand the conditions and well-being during and after the epidemic (Panayiotou, 2021). In BONYAN theory, it is the being that includes everything. When the type of being is effective and productive, even negative thoughts and feelings are placed in the presence and container of being effective and productive. Being present means experiencing being with what you see and hear. As a result, in presence meditation, one is detached from experience and is an observer. The observer is aware that the body has the five senses but is not conscious; he is aware, he has feelings and can express them but not his feelings, and he has thoughts but not his ideas. When the being with experience is in the present tense and the observer is present and observes his expertise. In this way, the participants in the BONYAN-method experiential marathon group have learned in an experiential way how to be freed from clinging to different emotions and face emotional challenges more constructively.

5. Conclusion

Our study results showed an improvement in participants' quality of life in the BONYAN-method experiential marathon group. The BONYAN-method experiential marathon group, by providing opportunities for awareness of "how to be with what is," confronts people with their internal and dynamic psychological patterns and improves their quality of life by increasing their acceptance and flexibility capacity.

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