

Expertise and insight for the future

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Promoting Immigrant Well-being Through Breathwork

Workshop Sessions and a Breathwork Manual Metropolia University of Applied Sciences

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The aim of this thesis was to conduct workshops to educate the clients of Iraqi Women's Association (INY ry) about the benefits of breathwork in supporting and improving their holistic well-being, and to create a self-help resource in the form of a breathwork manual. Through educating immigrant participants about how breathwork counteracts effects related to stress, anxiety, and depression, and by teaching them the techniques themselves, we aimed to promote empowerment by providing participants with the necessary competencies to positively impact their own well-being and emotional status.

The participants consisted of eight female immigrant clients, who attended four sessions over the course of three weeks, whilst also practicing breathwork independently daily throughout the whole duration. Questionnaires and group discussions were used to collect information on the participants' levels of stress and other negative emotions, and to determine any positive changes upon practicing breathwork. The workshop sessions were carried out via the online platform Google Meet. Each session followed the same format, starting with a presentation on breathwork theory, followed by guided participation in breathwork practice, and finalized with a group discussion.

From results gathered from the questionnaires, which showed a general improvement in the participants' mood and a reduction in feelings of stress, as well as from received feedback, it was determined that the majority of the participants experienced an improvement in their perceived well-being through the use of breathwork practices. Participants stated a reduction in their stress levels and an increase in their feelings of relaxation. The majority of the participants viewed the workshops as positive and beneficial, and expressed interest in continuing to use breathwork in their daily lives.

The breathwork workshops sufficiently empowered participants to improve their own well-being and to manage stress and other unwanted emotions more efficiently than before the workshops.

				stress,	diaphragmatic
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Opinnäytetyön tarkoituksena oli järjestää työpajoja kouluttaakseen Irakin Naisten Yhdistys ry:n asiakkaita hengitystyöskentelyn eduista heidän kokonaisvaltaisen hyvinvoinnin tukemiseksi ja parantamiseksi, sekä luomaan itsehoitomenetelmäopaskirjan. Valistamalla maahanmuuttajaosallistujia siitä, miten hengitystyöskentely torjuu stressiin, ahdistukseen ja masennukseen liittyviä vaikutuksia ja opettamalla heille hengitystekniikoita, pyrimme edistämään voimaannuttamista tarjoamalla osallistujille tarvittavat taidot vaikuttamaan positiivisesti heidän omaan hyvinvointiinsa ja emotionaaliseen tilaansa.

Ryhmä koostui kahdeksasta naispuolisista maahanmuuttaja-asiakkaista, jotka osallistuivat neljään istuntoon kolmen viikon aikana, ja samalla harjoittivat hengitystyöskentelyä itsenäisesti päivittäin koko kurssin keston ajan. Kyselylomakkeita ja ryhmäkeskusteluja käytettiin keräämään tietoa osallistujien stressitasosta ja muista negatiivisista tunteista, sekä määrittää mahdolliset positiiviset muutokset harjoitellessaan hengitystyöskentelyä. Työpajatilaisuudet toteutettiin Google Meet verkkoalustan kautta. Jokainen istunto noudatti samaa muotoa, aloittaen hengitysteoriaa koskevasta esityksestä, jota seurasi ohjattu osallistuminen hengitystyöskentelyn ja päättyi ryhmäkeskusteluun.

Kyselylomakkeista kerättyjen tulosten perusteella, jotka osoittivat osallistujien mielialan yleisen paranemisen ja stressin vähenemisen, sekä saadusta suullisesta palautteesta, todettiin, että suurin osa osallistujista koki parannuksen havaitussa hyvinvoinnissa hengitystoimintojen avulla. Osallistujat totesivat stressitason vähenemisen ja rentoutumisen tunteen lisääntymisen. Suurin osa osallistujista piti työpajoja positiivisina ja hyödyllisinä ja ilmaisi kiinnostuksensa jatkaa hengitystyöskentelyn käyttämistä jokapäiväisessä elämässään.

Hengitystyöpajat voimaannuttivat osallistujia parantamaan omaa hyvinvointia sekä hallitsemaan stressiä ja muita haitallisia tunteita tehokkaammin kuin ennen työpajoja.

Avainsanat	hengitystyöskentely,	maahanmuutto,	hyvinvointi,	stressi,
	palleahengitys, mindfu			



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1 Introduction

The following is a functional thesis covering the basic theory behind breathwork and its practical applications within social services, namely with multicultural and immigrant client groups. By analyzing previous studies utilizing breathwork and the social pedagogical methods behind them, we were able to plan and facilitate four sample online breathwork workshop sessions over the course of three weeks. These workshops aimed to use breathwork techniques to tackle the psychologically negative aspects that the majority of immigrants often suffer from during their integration process, namely anxiety, stress, and depression. The purpose of our thesis was to create breathwork sample sessions and a manual that could be used in the future in social services as a complementary tool to support the well-being and empowerment of immigrant clients, who can then simultaneously use it as a self-help tool.

Through background research into the subject, a number of scientific studies have shown that breathwork has the ability to alleviate many of the psychological and physiological symptoms brought about by the likes of long-term stress, anxiety, and depression. These emotional ailments are very common among migrants and greatly hinder their ability to integrate into a new society. Immigrants often need additional support and services from social service providers for successful integration due to their marginalized societal position, part of which includes their mental well-being, which this thesis' breathwork techniques aimed to alleviate.

This thesis' workshops and manual aimed to educate the involved participants on various breathwork methods and thus determine if breathwork can successfully empower immigrant clients by offering a means to tackle the effects of negative emotions. We will also look at the growing levels of stress in society and justify our reasons for choosing breathwork practice as a means to handle these fast-growing societal stresses. Furthermore, we will additionally highlight various social pedagogical methods relevant to our practice, as well as provide results and analysis from our findings.

The breathwork workshops were carried out as online sessions through the Google Meet platform, due to restrictions following the ongoing COVID-19 pandemic. Instruction videos were created and presented to the participants during the workshop



sessions, which highlighted the key points of the techniques and provided demonstrations. During the workshops themselves, participants were guided throughout the chosen breathwork methods, which they later practiced independently. Extensive feedback and ongoing group discussions were utilized to gather data about the effectiveness of the workshops.

This functional thesis can be implemented by social service providers to improve client well-being and support their empowerment by teaching them effective coping strategies against tackling the unwanted ailments brought on by stress, anxiety, and depression. This in turn enhances clients' independence and self-reliance, which enables them to become more active citizens. We hope to bring about more awareness on using breathwork as a form of effective embedded counseling with immigrant clients, so that it may become a more common practice in social services in the future.

2 Justification for the thesis

2.1 Need

Breathwork is currently a very underutilized tool in the social work field; however, we feel that it has the potential of being a very simple yet beneficial embedded counseling method. Social services are a fast-growing field of work that consistently need new innovative ideas and methods. Breathwork is a cost-effective, easy-to-use, relaxing, and fun way for social service providers to assist their clients with mental health issues such as stress, anxiety, worry, and depression, and this ultimately betters their holistic well-being through teaching them a self-sufficient coping mechanism for stressful situations.

We chose to emphasize the role of breathwork in embedded counselling within social services. Social service providers' primary work goal is enhancing people's capability to be active and functioning members of the society, and a large part of this involves supporting their emotional stability (Järvenpää 2009, p. 20). Embedded counselling occurs when a client is seeking help for their issues and difficulties in life from a care provider who offers counselling and guidance embedded within their main work responsibilities (McLeod and McLeod 2011, pp. 1-2). Breathwork offers social service providers the option to teach clients, who have complained about mental health issues



such as stress, anxiety, or depression, how to independently handle those negative feelings through simple and quick breathing patterns, alongside performing their other professional duties.

The main target group for this thesis are immigrants residing in Finland, because people with foreign backgrounds experience significantly higher levels of mental health issues than the native Finn population, especially during their initial integration process years. This is evident from the following research. The 2012 research about immigrants' health and well-being by the Finnish institute for health and welfare found that 36% of Kurdish immigrants and every fourth Russian woman living in Finland experienced severe depression and anxiety symptoms; immigrants also complained about sleep problems, general dejection, and nervousness (Castaneda, et al., 2012, pp. 145-148). Sleep pattern problems, namely troubles falling asleep, were a common problem reported by immigrants in earlier research of 2003 by Pohjanpää, et al. (Pohjanpää, et al., 2003 cited in Kerkkänen and Säävälä, 2015, pp. 19-21). A 2002 study about refugees and immigrants residing in Finland discovered that 48% of those interviewed struggled with at least one mental health problem, with the most commonly reported issues being depression and anxiety (Koehn and Sainola-Rodriguez 2006, pp. 51-53). However, the amount of research that has been conducted about immigrants' mental health statuses in Finland is very limited and needs to be further explored.

The aforementioned statistics clearly show that a very high amount of Finland's immigrants struggle with various mental health problems, specifically depression, anxiety, and sleep problems. Thus additional attention needs to be paid to their emotional and mental welfare, as this directly influences their integration success and societal position. From this, our thesis idea rose to create simple and quick breathwork sessions and a breathwork manual to tackle the specific mental health issues reported by immigrants and to promote their subjective well-being.

Breathwork is utilized in other fields that social services are directly linked to through multidisciplinary practices, such as psychiatry, therapy, and meditative practices. Breathwork has been used in various professions since the 1980's, however it is not yet common enough in the social services profession. We hope to motivate social service providers to familiarize themselves with breathwork techniques and feasibly use them as an embedded counseling form when working with client groups that

experience higher levels of emotional instability, such as asylum seekers, refugees, and other immigrants.

2.2 Aim

The aim of our thesis is to provide a method for social service providers to educate immigrant clients about breathwork practices that combat frequently reported mental health problems (stress, anxiety, depression, and sleep issues); in the hope of bettering their holistic well-being, and thus empowering them to better handle their emotions while going through the stressful transition of integration. In order to do this, we chose the method of facilitating brief workshop sessions that describe the benefits of correct breathing patterns to the clients, and then taught and demonstrated these chosen breathwork techniques to them; after which, we provided them with a self-help breathwork manual that they could continue using independently. This instructional booklet was made available in a simple pdf format and it detailed the techniques taught in the sessions.

We aimed to uncover the resulting benefits of the breathwork sessions via comparing questionnaires taken before the first session and after the final session, and through gathering feedback from both group discussions during the sessions and a feedback form. We used Mental Hub's publicly available anxiety survey (which we converted into a google forms questionnaire for the purposes of the thesis), which helped gain a general overview of the stress levels of the participants. We also created our own questionnaire to gain information about their pre-existing knowledge of breathwork and their general emotional state. The last questionnaire, which the partakers filled after all of the breathwork sessions, assembled the participants' feedback and their thoughts on the effectiveness of the methods taught.

We aimed to educate and guide the participants who took part in our breathwork sessions through a number of short classes, each of which focused on a different breathwork technique. We decided to use multiple short workshop sessions instead of one time-consuming meeting, as deeper retention of knowledge occurs during our optimal attention span of 20 minutes (Rehn, 2016). Therefore, we dedicated around 10-15 minutes to explaining theory before utilizing the final five minutes for functional practice. These sessions were both theoretical and practical, meaning that we began by discussing the techniques themselves, explaining their effects and evidence of these



effects in order to expand their knowledge of the subject and gain their confidence in the techniques, and followed with guided breathwork practices. The sessions concluded with practicing the methods and discussing as a group about the participants' thoughts and feelings of the sessions.

3 Breathwork

3.1 Defining breathwork

Throughout history, beginning from the era of ancient languages and spanning through multiple cultures, the words breath and life were often synonymous. Evidence of this is presented in the translation of the word breath in various languages. For instance, the Chinese symbol 氣 (pronounced qi) translates to both the natural air we breathe and our life source (Grof, 2013). Another example comes from Ancient Greece, where the literal translation of the word 'pneuma' means breath, however, in the original Greek New Testament the same word is frequently mentioned when discussing the soul, spirit, and non-physical being (Grof, 2013). The Latin word 'anima' and 'spiro' also share the meaning of both breath and soul, as does the Arabic word 'nafs' (Grof, 2013). This suggests that the relation of the breath to the soul has been made in various cultures throughout history, referring to breathing as an obvious lifeforce for the soul.

Therefore, Dan Brule (a world-renowned pioneer of breathwork) defined breathwork as follows: "Breathwork is the use of Breath Awareness and Conscious Breathing for healing and growth, personal awakening, and transformation in spirit, mind, and body" (Brule 2017, p. 3). Brule (2017, pp. 3-6) further explains that as we start to become conscious of our breathing and learn how to control it to our benefit, it can be used as a therapeutic tool for healing.

Breathwork can, however, also refer to any type of practice that uses controlled breathing techniques to improve well-being. Thus, breathwork, when referred to in this thesis, will apply to strategic breathing patterns that bring about beneficial properties not only for the body and mind, but also help an individual's holistic well-being. Although breathwork has both physical and psychological benefits, our thesis will not be focusing on only these aspects, but rather on the effects it has on an individual's life management.



3.2 The origins of breathwork

One of the first writings referring to breathing practices originate from approximately 700 BCE by the name of pranayama (Magone, 2016). Pranayama practices consist of two distinct factors, which are referred to in Sanskrit as 'prana' and 'yana'. The former prana translates to 'vital life force', while yana translates to 'control' (Magone, 2016). Therefore, when combined, the word pranayama refers to control over our life force, and this control is achieved via using breathing techniques. Early practitioners of pranayama believed that our life force 'prana' manifests itself through our breath.

All pranayama techniques consist of the same three components: inhaling through your nose (purak), holding your breath (kumbhak), and finally exhaling (reckhak) (Barron, 2020). The purpose of pranayama breathing is to bring about various desired effects. According to Nunez (2020), the primary benefits include stress reduction, improved sleep quality, increased mindfulness and cognitive performance, better respiratory and blood pressure functioning, and even positive impacts on digestion. Pranayama accomplishes this by simultaneously exercising the mind, posture, respiratory system, and abdominal muscles. Breathwork and all of its subsequent breathing styles originate from pranayama itself.

3.3 Breathwork emerges in the west

Although using controlled breathing patterns to improve well-being has been used for over thousands of years, the modern concept of breathwork therapies did not develop until the 1960's by the likes of psychotherapy pioneers Wilhelm Reich and Stanislaw Grof.

Stanislaw Grof and his wife Christina Grof introduced a method known as holotropic breathing to psychiatric institutions as a therapeutic tool, which strove to enter an altered state of human consciousness to assist with self-exploration and mental healing (Metcalf, 1995). Music and fast breathing through the mouth are a vital part of holotropic breathing, and it is generally conducted in group sessions. However, holotropic breathing has remained in a somewhat state of controversy, as it involves breathing at a very fast rate for long periods of time, which can present risks to people with more severe illnesses, such as cardiovascular diseases or heart problems, and is not advised for pregnant women (Keogh, 2020).



Concurrently, Wilhelm Reich developed a breathwork practice called the Reichian therapy, which he used in psychotherapy with the belief that our inner turmoil restricts our breath and that by addressing these issues and using breathing exercises one could treat this turmoil (Young, 2008, pp. 8-10). Reichian therapy starts by first exploring your areas of turmoil and distress, then searching for any tense spots in your muscles, and ends by combining breathing in deep inhales with slow and relaxed exhales to diminish your turmoils and bodily tensions.

At around the same time, Leonard Orr became a focal figure with his own method known as rebirthing breathwork (also referred to as conscious energy breathing), which concentrated on self-healing and spiritual growth (Cronkleton, 2019). Orr was particularly interested in curing physiological issues through conscious energy breathing. He defined the rebirthing breathwork as the ability to breathe energy simultaneously with air, as it is the art of learning to breathe from breath itself. Orr believed his method to be extremely valuable in terms of self-healing because correct breathing patterns induce relaxation, which he considered to be the ultimate natural healer of many illnesses. In a broader sense, rebirthing breathwork uses nasal breathing in a soft and relaxed way without any exterior distractions such as music or humming.

Presently breathwork has made extensive advancements and gained further recognition as a successful treatment method for various mental and physical ailments. All three original breathwork branches - pranayama, holotropic breathing, and rebirthing breathwork - have developed into numerous further practices (some of which were utilized in our thesis' workshops and manual). Breathwork is now taught as a professional field in many countries worldwide, such as a master's degree programme at Lesley University in Cambridge called 'The Breath as a Tool for Health, Growth, and Change', which was founded by Dan Brule; and a Master of Science degree in Applied Breathing Sciences at the Graduate School of Breathing Sciences in the USA.

International awareness of the benefits of breathwork arose when Wim Hof became popular as the 'Iceman' when he finally proved through scientific and controlled testing his ability to influence his own autonomic nervous system – a feat thought to be impossible by most. Hof is known for withstanding extremely cold temperatures using



his Wim Hof Method, which uses specific breathing techniques to manipulate one's body's physical abilities (Cronkleton, 2018). This was demonstrated in an experiment at Radboud University Nijmegen Medical Centre, where Hof and 23 other participants received an endotoxin injection (dead bacteria), and the ones who had practiced the Wim Hof Method were able to control their sympathetic nervous system and immune response to the bacteria (Kox, et al., 2014, p. 7379). Hof has also amassed over 20 Guinness World Records for extraordinary feats in extreme temperatures, which he contributes to his breathwork practice. Hof now teaches his techniques as a world-renowned breath coach. His Wim Hof Method consists of breathing techniques, meditation, and cold exposure.

3.4 Benefits of breathwork

In order to better understand the benefits of breathwork, we must also discuss the physiological responses that the human body has to stress. From there we can better acknowledge the need for the breathwork techniques and their relevance to tackling the responses related to stress and other mental issues such as depression and anxiety.

The autonomic nervous system is the main regulator of stress responses in our bodies. It consists of two nervous systems, named the sympathetic nervous system and the parasympathetic nervous system. When the autonomic nervous system receives a response from an external source that is deemed a threat - be it either environmental or perceived - it reacts to this information by activating the sympathetic nervous system, which turns on what is commonly known as the 'fight or flight' response by flooding the body with epinephrine, also known as adrenaline (Harvard Health Publishing, 2020). Subsequent symptoms of the sympathetic nervous system being activated are an increase in blood pressure and heart rate, sweaty palms, and dilated pupils (Harvard Health Publishing, 2020). In easier terms, it prepares the body to react to a dangerous situation by releasing adrenaline and cortisol into the body. The parasympathetic nervous system, however, is described as the nervous system that counteracts the effects of the sympathetic nervous system by slowing down the heart rate and lowering blood pressure (Low, 2020). Its function described in scientific literature is that of restoring and conserving energy sources.

In today's society, whether it be via increasing work demands, upcoming exams and deadlines, bills, competition with others, the demand for perfection brought forth by social media, and a plethora of other factors, most people find themselves in a heightened state of stress for long periods of time. This causes frequent tension in our bodies, which makes us breathe in a shallow or irregular manner, or even often hold our breath without realizing it. Through continuously breathing in this incorrect way, we unconsciously condition ourselves to breathe like this as a norm, thus forming bad breathing habits (Desai, 2020). This, in turn, makes the sympathetic nervous system become overly activated and the aforementioned adrenaline and cortisol levels become overproduced in the body. Prolonged periods in this anxious state can bring about chronic stress which has many other negative side-effects; these effects can manifest in ways such as issues with sleep, depression, anxiety, headaches, muscle pain, fatigue, and burnout (Harvard Health Publishing, 2020). These symptoms have an impact on our personal lives and affect how we interact with those close to us, as we find ourselves easily agitated and irritated due to fatigue, and this can hinder how well we perform in our academic and work life. Prolonged stress can also lead to alterations in the brain which could potentially make us more susceptible to depression and addiction (Harvard Health Publishing, 2020).

When long-term stress is left unaddressed, these combined symptoms start to take their toll on our well-being and ability to cope with societal and personal demands. Research has shown that chronic stress is also a factor in life-threatening illnesses such as heart attacks and strokes (Tawakol, et al., 2017, pp. 834-835). Stress contributes to these diseases, because when stressed an area of the brain known as the amygdala signals the creation of additional white blood cells in the bloodstream, which causes inflammation; inflammation is a well-known contributor to many life-threatening ailments (Tawakol, et al., 2017, pp. 834-835).

Luckily, certain breathing methods - including the ones presented in our thesis work - counteract these stress responses in the body by using different breathing patterns depending on what state of emotion we are in, because how we breathe when we are happy and relaxed differs greatly from how we breathe when we are stressed or angry. The way we breathe sends a message to our brain to activate our parasympathetic nervous system, thus breathing deeply and slowly will put us in a state of rest. Stress

and other negative emotional responses affect our breathing unconsciously, but by consciously taking control over our breathing we can use it to our benefit.

Studies have also uncovered that breathwork has a significant impact on depression, anxiety, and sleep problems alike. A study by Kjaer, et al. (2002, p. 255) on meditation's capacity to increase dopamine - a neurotransmitter known to be inhibited in depression sufferers - showed significant results in reducing depression through conscious breathing and mindfulness. A study by Seppälä, et al. (2014, p. 397) on the impacts of breathing based meditation on PTSD (post-traumatic stress disorder) symptoms exhibited in US military veterans showed significant reduction of anxiety and respiration rates in participants. Lastly, a study by Shree, Prashanth, and Girija (2019, p. 111) researched pranayama breathing for reducing stress, improving sleep quality, and reducing blood pressure and heart rates, which concluded that after twenty days of pranayama breathing exercises participants exhibited improved results in all areas.

3.5 Breathwork in social services

Social work is globally defined as a profession that promotes people's well-being, equality, and social inclusion; with the goal of enabling everyone to be a functioning part of their community regardless of their individual characteristics or societal position. Social services are encompassed within social work to provide a wide range of essential services that promote inclusion, ensure welfare, and tackle everyday problems for all members of the society (Ministry of Social Affairs and Health, 2019). To ensure a successful and safe community, everyone must have an opportunity to become functioning and contributing members of the society; however, many individuals (especially those who belong to more marginalized groups, such as immigrants) need additional support and services to do so.

As is apparent from the defining features and aims of social work, promoting clients' subjective well-being is a crucial part of social services, as it ensures that a person feels healthy, happy, and safe enough to have a contributing and operative role in the rest of the society. In order to feel well, an individual must feel that their basic needs, sense of worth, and desire for personal relationships are fully met (Gamble, 2012, pp. 671-673). An integral part of this includes having a sound state of mental health and emotional security. If an individual frequently experiences feelings of mental despair,

such as stress, anxiety, and depression, their general well-being is hindered, and this reduces their everyday productivity and autonomous performance.

Holistic well-being can be viewed through Seligman's PERMA+ model, which states that there are five components that contribute to well-being: positive emotions, engagement, relationships, meaning, and accomplishment (Seligman 2013, p. 5).

The first component, positive emotions, involves fighting back against negative feelings with positive emotional responses such as happiness, amusement, hope, interest, and joy (Seligman 2013, pp. 10-11). This is where breathwork comes into play - it helps to ease (and often even eradicate) negative emotions such as stress, anxiousness, and sadness with breathing exercises aimed at bringing about feelings of relaxation and calmness. This is a powerful tool for building self-resilience against harmful emotional responses.

The second component, engagement, is about fully engaging in an activity until a state of 'flow' is achieved - focusing very intensely on an enjoyed activity in order to feel one with your emotions and surroundings (Seligman 2013, p. 13). This creates happiness and relaxation as a byproduct. However, it is important that the activity does not exceed the partaker's current skill level (i.e. does not feel too difficult for the participant), and that the goal or benefits of the activity are understood (Seligman 2013, p. 13). This is clearly connected to the breathwork exercises utilized within this thesis, because they are relatively simple and fun activities that require full concentration, and their aim is to bring about happiness and stress-reduction.

The third component, relationships, state that as humans are social beings, we need meaningful and positive interactions with others to feel supported and valued (Seligman 2013, pp. 17-19). When social service providers take an interest in their clients' well-being and demonstrate genuine care by teaching them breathwork to meet their emotional needs, this creates a bond of positive connection between the worker and client. As a result, feelings of trust, understanding, and continuous engagement arise in the professional relationship.

The fourth component, meaning, refers to finding a purpose in life by exploring your own self-value and interests from various fields of life, which ultimately leads to greater



life satisfaction and a sense of happiness (Seligman 2013, pp. 23-24). When an individual feels overwhelmed by a constant state of anxiety and dejection, they are likely unable to focus on activities that help them find joy and meaning in life, thus decreasing their self-growth and improvement skills. Breathwork helps tackle those negative feelings, which in turn opens up more space for self-actualization. As breathwork is defined as a self-care method in this thesis, it also brings clients' focus on bettering themselves and taking care of their own well-being.

The fifth and last component of the PERMA+ model is accomplishment. Having the motivation to work towards and reach a set goal or achievement helps people find a purpose in their everyday life and creates concrete instructions on what actions to take; this works because of the satisfying feelings achieved upon finally accomplishing one's goals (Seligman 2013, pp. 25-27). Similarly, to the fourth 'meaning' component, breathwork aids this by alleviating mental health issues that otherwise hinder a person's capability for achieving their life-goals. Mental health problems stand in the way of an otherwise healthy individual being able to fulfill their academic, work, and personal relationship roles.

Breathwork can thus be used as a complementary tool by social service providers for tackling many problems that otherwise hinder a client's psychological well-being. By applying breathwork techniques as a complimentary service during embedded counselling and other various forms of social services, the client will be equipped with a simple yet effective self-help tool that they can later independently use when experiencing emotional ailments such as stress, sadness, or difficulties relaxing. It is a valuable coping skill that also increases the client's self-confidence and autonomy, as it enables them to independently recognize and relieve stressful emotions. What also makes breathwork such a unique skill is that it can be used in any setting at any time, as it does not require any props or tools - it simply uses the innate power of the human body and mind.

4 Mindfulness

Mindfulness is consciously maintaining awareness of your present experience with a receptive attitude, in order to relieve stress and work toward the greatest happiness for yourself and others. Mindfulness helps you relieve stress because it allows you to perceive things more clearly. You get more in touch



with the truth of your life, and of life in general, and consequently make more beneficial choices. (Burk, 2014).

The above-provided definition focuses on the benefits received from mindfulness, however, to better understand this complicated concept we need to first understand why we need it. Modern-day humans often lose touch with reality and suppress the majority of their thoughts and feelings on a daily basis by distracting themselves with electronics and whatever other easy diversions they may find, which ultimately results in added worry, stress, and anxiety. Mindfulness brings us back into the present moment so that we can recognize, accept and influence our behavior. By accepting our surrounding reality, we may stop fixating on negative past experiences and worries about our future, which allows us to fully concentrate on our present being.

Bishop, et al. (2006, p. 232) propose a two-component model of mindfulness. The first component, self-regulation of attention, encompasses paying complete attention to your current psychological and physical sensations; in practice, this means fully concentrating on your thoughts, emotions, feelings, bodily movements, and breathing (Bishop, et al., 2006, pp. 232-233). The second component, orientation to experience, requires us to adopt an attitude of openness and curiosity to each thought, feeling, and sensation we experience; by doing this, we make ourselves experience and analyse also the more negative aspects of ourselves that we would usually otherwise suppress, ultimately teaching us to confront rather than avoid our own emotions (Bishop, et al., 2006, pp. 233-234).

Breathwork and mindfulness are closely connected, as breathwork is often used as a tool for teaching mindfulness. Following and concentrating on your breath by using specific breathing patterns acts as a sort of anchor for our thoughts and sensations, as it helps us to focus on our immediate experience of breathing. This type of conscious breathing - which centres around deliberately controlling our breathing rather than letting it occur automatically - helps calm our body and mind.

5 Immigration

5.1 Recent migration in Finland

According to Statistics Finland (n.d. a), Finland hosted around 423,494 foreigners in 2019, which is roughly 8% of the whole Finnish population; and the majority of them, namely 14,2% reside in the Uusimaa region. People with foreign backgrounds are referred to as immigrants - citizens born in foreign countries or who do not speak Finnish as a native language, and are residing in Finland. Finland has immigrants from over 180 different countries; and most of them originated from Estonia, Russia, and Iraq (Statistics Finland, n.d. b). As is visible in figure 1, Finland's immigration levels have grown substantially and steadily over the past decade, which suggests continuous growth also in the future. This makes migration a very prevailing and essential topic.

Ulkom. kansalaiset, ulkomaalaistaustaiset, vieraskieliset ja ulkom. syntyneet 1990-2019

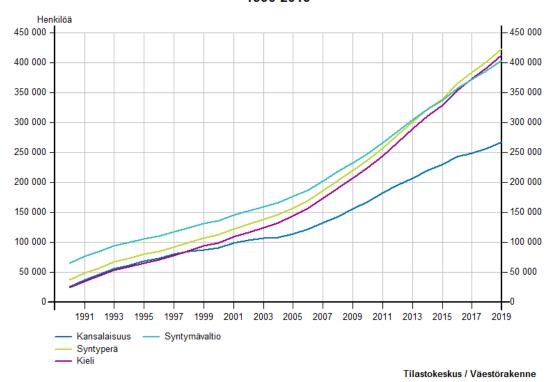


Figure 1. Finland's foreign nationals, foreigners, foreign language speakers, and born abroad 1990-2019 (Statistics Finland, n.d. a).



Following the 2015 refugee crisis, Finland received approximately 32,476 asylum seekers, which is significantly larger than its usual quantity of 1,500-6,000 a year (Ministry of the Interior, n.d.). However, this amount is still relatively small compared to other Nordic and European countries. Asylum seekers are individuals fleeing persecution and danger from their own country of origin, but have not yet received said asylum. Refugees are asylum seekers who have officially received international protection via a residence permit in a foreign country. However, both groups often require additional services for successful integration due to their vulnerable societal position. Most asylum seekers and refugees originate from developing countries, which differ greatly from their new residing nation's culture and societal norms, and they have often experienced various forms of trauma in their homelands. In 2020, Finland got 4,721 international protection applications of which only 2,066 were granted and 1,799 people were deported (Finnish Immigration Service, 2021). Both asylum seekers and refugees fall under the immigration category. Other causes for immigration include, for example, family reunification, work, and studies.

All immigrant groups are an integral part of the Finnish society. Finland has an ageing population with a considerable labour shortage, to which an influx of working-age immigrants could offer a solution to (Organisation for Economic Co-operation and Development, 2018, pp. 55-56). Migration also boosts a nation's economy through other means such as by paying taxes, starting their own businesses (which creates more job opportunities), developing innovations, filling in professions demanding higher education, and increasing consumerism (Furman and Gray, 2012). Additionally, immigrants enhance the diversity of any society and increase multiculturalism. However, for foreigners to truly prosper and reach successful employment in a new country, they need to first go through an efficient and supportive integration process.

5.2 Immigration challenges

Although Finland's quota of immigrants still remains small by international standards, it's inexperience with migration has resulted in many integration challenges for both foreigners and foreign-born children alike (Organisation for Economic Co-operation and Development, 2017, pp. 4-5). Also, Finland is still facing reverberations of the 2015 refugee crisis, as it struggles to meet asylum seekers' immediate needs (such as housing and food) and long-term integration (Organisation for Economic Co-operation



and Development, 2017, pp. 4-5). Unsuccessful integration results in societal exclusion, welfare dependency, higher crime rates, and declined well-being.

Despite Finland being in dire need of more workers due to its ageing population, most immigrants still either struggle to find employment or work in jobs well below their educational skill levels, because their foreign qualifications are not recognized. This is mainly due to individual challenges - difficulties learning Finnish language (the majority of employers require good Finnish language skills), lacking contacts in the labour market, and low levels of education and working experiences - and societal issues, such as discrimination and an insufficient integration system (Organisation for Economic Co-operation and Development, 2017, pp. 6-7). Long-term unemployment does not just affect a person's income levels and living conditions but also causes psychological harm through stress and depression.

Language barriers are another factor slowing down successful integration, as communicating in the host country's native language is often key for finding employment and creating new networks. Many foreigners struggle with learning the Finnish language, often for many years, and especially those of whom were illiterate in their own native language. Indeed, Finnish has proven to be a very difficult language to learn. According to the Foreign Service Institution (Foreign Service Institute cited in Yang, 2017), Finnish is a category 4 language, which means it takes 44 weeks or 1100 hours of studies before reaching a generally proficient enough level. Language barriers also affect service provision - many immigrants struggle with communicating their needs to, for example, health care and social services providers - and educational settings, as the majority of vocations and degree programmes are provided only in Finnish. This often results in many immigrants having hindered access to various public and private sector services.

Although Finland is popularly viewed as a safe and happy welfare state, discrimination against minority groups is still concurring. Many immigrants, especially those from ethnic minorities or with different skin color, face racist slants and hate speech in everyday public settings (TRT World, 2019). Since the 2015 refugee crisis, during which Finland received an all-time-high influx of asylum seekers, discrimination and harassment have turned mainly towards Muslims. "In 2017, the Finnish authorities recorded around 1,165 hate crimes, which included death threats, anti-Semitism, and

cases of racism against Muslims" (TRT World, 2019). Discrimination has severe impacts on people, as it hampers both mental and physical health due to its traumatic nature activating a stress response system in individuals; additionally, the accompanying stress-levels further cause strains on people's personal relationships (Wofford, Defever and Chopik, 2019).

5.3 Migration and mental health

A positive and strong mental health capacity is vital for integrating into any society, as it directly affects an individual's quality of life, well-being, self-actualization and independent life-management. Mental health does not only influence how successfully a person contributes to the general society but also how happy and content they feel in their everyday life and their ability to cope with stress factors.

As mentioned above, immigrants face many challenges when integrating into a new society, mainly with critical needs such as finding employment and housing, and long-term integration challenges such as learning about the new language and culture and handling daily discrimination. These challenges combined with the major life change of moving away from one's home country and trying to fit into a new culture (especially if it differs greatly from their past daily life and experiences) often cause mental health struggles such as stress, anxiety, and depression. Stress is a natural and commonly occurring reaction to any major life changes, which undoubtedly includes migration, as it involves significant changes in a person's immediate environment, personal relationships, and socio-economic and cultural systems (Kirmayer, et al., 2011, pp. E960-E962). Not only does the individual's whole social network system collapse, but they also have to adapt to a new societal role as an immigrant and foreigner.

The cause of migration has also shown to influence immigrants' mental health state. A systematic review and meta-analysis by Lindert, et al. (2009) found that 20% of labor migrants and 44% of asylum seekers had depression, and 21% of labor migrants and 40% of asylum seekers had symptoms of an anxiety disorder. Asylum seekers and refugees are more susceptible to mental health issues as they have often gone through multiple traumatic experiences in both their home countries and during their travels to find asylum, and because of the complexity and uncertainty of the asylum process (in Finland it often takes several years to wait for a residence permit decision and asylum



seekers often go through multiple negative decisions) (Suomen Mielenterveysseura, 2015).

6 Social pedagogical concepts within breathwork

Social services utilize numerous social pedagogical concepts and methods for practicing, analyzing, and justifying its various forms of work. This helps service providers base their actions on theoretical grounds because it is crucial for all professionals to work in a non-arbitrary way by choosing their working methods based on theory and practical experiences. Social pedagogy itself refers to a framework that uses pedagogical 'lenses' to address societal issues and needs, with the goal of successfully integrating people into the society (Hämäläinen, 2003, pp. 76-77). The following subchapters will further describe the social pedagogical concepts we identified within breathwork, namely empowerment, haltung, empathy and compassion, and the Common Third.

6.1 Empowerment

In social pedagogy, empowerment is used to encourage clients to feel more in control over their own decisions and living conditions by inviting clients to take part in decision-making and to take initiative in making changes in their own lives. Through empowerment, people learn to take personal responsibility for their own well-being, relationships, and learning (Eichsteller and Holthoff 2012, pp. 40-42). Empowerment also encompasses recognizing and utilizing your own resources and skills. Most individuals, especially ones struggling with their everyday lives, tend to pass blame over their living conditions to higher societal powers (such as their workplace, service providers, and government) in order to subconsciously feel less responsibility; however, by doing this, they focus only on their weaknesses and wait motionlessly for someone else to appear and change their lives. By becoming more empowered, people take control into their own hands and become more autonomous and self-sufficient.

According to the CESESMA model, which is visible in figure 2, empowerment consists of three components - attitude, capability, and conditions and opportunities (Shier, 2019, p. 1). The attitude component refers to not only how one feels about a given task and their general willingness to participate and learn, but also their view of themselves

and confidence in their abilities (Shier, 2019, p. 4). Capability points to one's capacity to learn and pick up new skills and use this later independently; while conditions and opportunities refer to being part of a larger group and accessing relationships, materials, and services that may bring about empowerment (Shier, 2019, p. 4).

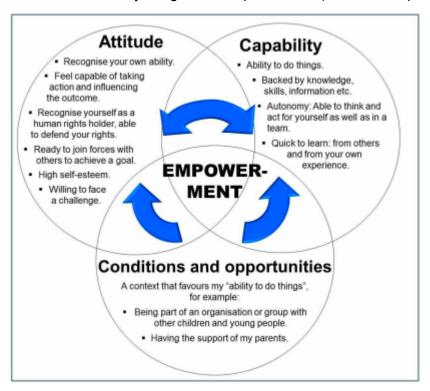


Figure 2. The CESESMA model of Empowerment (Shier, 2019, p. 4).

Breathwork can be used as an invaluable empowerment tool by social service providers - it enables clients to take control over unwanted emotions by using the simple art of breathing. Much like any other form of therapy, breathwork can not completely eradicate mental ailments, but it teaches us how to behave when these negative emotions appear and control how we react to them. This creates a strong sense of empowerment for the clients, as it enables them to independently recognise and handle different stressors. Learning breathwork is unique in the fact that its techniques can be used anywhere at any time. This is really useful, because the effects of stress can take effect at any time and skills in breathwork give the client an opportunity to fight off these effects in any environment.

In order to ensure a positive attitude towards the workshops and provide a learning opportunity, we felt it important to discuss not only the breathing techniques and methods themselves, but to also inform participants about how and why breathwork works. Therefore, the first workshop session started off with a brief description of how



our breath changes depending on our mood, and how, through conscious breathing, we can affect our physiology and fight off the effects of stress and depression alike. Learning about the concept of breathwork provided an educational opportunity for the participants, which ensured a deeper understanding and hopefully stronger commitment.

Through demonstrations and guided participation of the breathing techniques, participants quickly learnt of their capabilities to carry out breathwork, along with an assurance that the breathing techniques can be further practiced independently at a pace that suited them personally, as well as the malleability of the techniques themselves. This boosted their self-confidence, as the participants gained belief in their own abilities and felt more autonomous by being able to help their own emotional state.

6.2 Haltung

Charfe and Gardner (2020, pp. 3-5) describe haltung as a type of mindset that guides our actions as professionals by strongly focusing on human value and dignity. Haltung therefore can be simplified to the embodiment of one's values and beliefs in all actions. In the context of client interaction in social pedagogy, it is through exhibiting genuine care for the client through the decisions made while working with them, done so by implementing the best-perceived actions for them based on their personal circumstance and needs. A social service provider's core beliefs and values constitute an important part of their job, as these influence their actions during work and the services they provide (Charfe and Gardner, 2020, pp. 3-5).

The concept of haltung is exhibited strongly in our functional thesis, as the workshop sessions themselves were centered around care for the betterment of the participants' well-being. We empathize with the more marginal position that the participants are in and decided to create workshops that would serve their holistic well-being and coping skills for life in the long-term. We feel that this type of practice implemented into social services organizations can strongly enhance a client's faith in the organization itself, as well as the services it provides because this practice is an example of genuine intent of caring for the client's needs. Therefore, through providing services that meet the client's needs, whilst also caring for their welfare by teaching stress coping mechanisms, the client will feel a more personalized and genuine effort from the professional.



6.3 Empathy and compassion

Gerdes and Segal (2009, pp. 120-121) designed a social work model of empathy which consists of three components: affective response, cognitive processing, and conscious decision-making. Affective response refers to our unconditioned responses to other humans' emotional state and behavior; cognitive processing refers to how we interpret and understand other people's feelings; and conscious decision-making refers to the actions we take to address others' experiences (Gerdes and Segal, 2009, pp. 120-121). This model emphasizes the importance of not just identifying and relating to the clients' feelings, but also taking appropriate empathic action towards it (Gerdes and Segal, 2009, pp. 121-122). Thus, it can be said that empathy differs from sympathy precisely due to its nature of taking actions, making empathy a vital part of social pedagogy.

The latter part of the social work model of empathy (conscious decision-making) can be viewed as synonymous with compassion. Similarly, compassion involves first feeling sympathetic or empathetic concern to others' distress and is then followed by a desire to help lessen this distress (Stickle, 2016, pp. 122-124). However, the two terms empathy and compassion are often viewed as different from each other, as empathy traditionally refers to understanding and relating to other people's emotions, whereas compassion encompasses taking action towards improving the feelings or conditions of others.

The core theme of our thesis is to educate others by providing them with tools necessary to fight the effects of everyday stress and therefore easing their own emotional state. Social service providers, who have previously worked with immigrant client groups, can empathize on a deeper level with their struggles due to having more experience on the subject. Service providers also see and observe the impacts of the chronic stress and general unhappiness that follows migration has on both individuals and families alike. Through showing compassion towards specifically the emotional distress part of the migration process, we can take initiative to better the daily lives of immigrants by teaching them breathwork techniques as a stress-relief tool.



6.4 The Common Third

In social services, the Common Third refers to using any type of activity that simultaneously strengthens the relationship between the client and service provider, and develops the client's competencies in the given task (Hadi, 2019). The idea behind it is that everyone has a certain degree of knowledge on any given subject or a relevant skill, and by taking part in and contributing during an activity, their knowledge and skills have an opportunity to arise.

Based on this concept, we decided to finish the workshops with a group discussion about the contents of the workshops, so that the participants had a chance to bring forth their own pre-knowledge and ideas, and even suggestions for further techniques that can help with maintaining their well-being. It also gave an opportunity for them to help shape both their own and other members' experiences, whilst learning about the benefits of breathwork. This helped create a sense of community within the group through sharing mutual experiences and contributing to one another's betterment. This type of open discussion also reinforced our relationship with the participants, as we were able to express agreement, understanding, and personal opinions.

7 Chosen breathwork techniques

This chapter describes the particular breathwork techniques that we chose to teach to our participants through the breathwork sessions and the manual. We conducted four sessions over the course of three weeks, each session lasting around 15-20 minutes. We also gathered preliminary data and feedback through the form of questionnaires and group discussions. We also informed the participants on the reasoning behind the breathing methods, for instance, why they are effective and how they have been proven to work, as opposed to just teaching the technique itself, as this helped ensure their confidence in the effectiveness of breathwork.

We chose two main styles of breathwork - diaphragmatic breathing, which included box breathing and the 4-7-8 method, and also the Wim Hof Method. The diaphragmatic breathing styles aimed to cut back stress and bring about feelings of calmness, whilst the Wim Hof method aimed to energize. These two elements are important as various techniques can be used to tackle different issues depending on an individual's personal



circumstances; depending whether one is feeling the consequences of stress and anxiety (such as continuous over-worrying), or wishes to tackle lethargy and symptoms of sadness and depression.

7.1 Diaphragmatic breathing

We chose diaphragmatic breathing as the first breathing method to be taught, because it is the hallmark of efficient breathing. It involves learning to breathe via the diaphragm, which is incredibly important as this fully utilizes the oxygen intake capacity of the lungs through breathing in a correctly deep and slow manner instead of in a shallow and fast way, and the longer exhaling breaths used in it help release more carbon dioxide (Morse, 2018).

Shallow breathing is a common mishap in today's society, and it has many adverse effects connected to reduced cognitive function, negative emotions such as depression, lowered levels of alertness, and reduced energy levels among many other ailments; as well as the impact it has on our mood which in turn impacts our daily lives. Shallow breathing also has adverse effects on the body such as increased blood pressure and heart rate, sleep issues, muscle tension, and headaches (Morse, 2018). The muscle tensions and headaches are caused by insufficient oxygen intake and from over-working the neck and shoulder muscles, which are put to hard work when the diaphragm is not used (Rifkin, 2017). Shallow breaths (which often develop into hyperventilation) are usually caused by upper chest breathing, which our body often switches to unknowingly, faultily thinking that it will increase our oxygen intake; however, this frequently triggers an inert stress response in which more cortisol is released and this brings forth feelings of anxiety (Ankrom, 2020).

Studies utilizing diaphragmatic breathing have shown that this breathing method counteracts many of the previously mentioned physiological issues. Results from a study published by Ma, et al. (2017, p. 1) showed significantly better cortisol levels in participants performing diaphragmatic breathing when compared to the control group, as well as a respiratory rate of four breaths per minute compared to the control group that averaged 17 breaths per minute. In a second study in 2010, involving survivors of the 2004 tsunami in South-East Asia, results from a one-week breathwork course showed significant decreases in PTSD related symptoms, the results of which persisted for 24 weeks after the conclusion of the study (Descilo, et al., 2010).



7.2 Box breathing

Box breathing is a tool for relaxation that also goes by the name of four-square breathing and breath resetting (Stinson, 2018). This technique is particularly good for returning one's body to a state of rest by slowing down the sympathetic nervous system and the subsequent symptoms created by the fight or flight response that also activates a stress response in our body (Stinson, 2018).

Box breathing itself is simple and consists of the following steps:

- 1. A four-second inhale through the nose.
- 2. A four-second breath-hold.
- 3. A four-second exhale through either the nose or mouth.
- 4. Repeating the cycle until a state of calm is achieved.

The technique can also be varied in duration such as three seconds, six seconds, or any other preference, however, the key factor here is the steadiness of one's breathing and the relaxation that follows. Keep in mind that struggling with the breath-hold duration causes additional stress and this must be avoided through adapting the breathing durations.

Former Navy SEAL (Sea, Air, and Land) commander Mark Divine commends box breathing and credits it for assisting him through his SEAL training. He taught the technique in seal training from the 1980's until his retirement, and he also used it in his training programs SEALFIT and Unbeatable mind (Stinson, 2018).

7.3 The 4-7-8 breathing method

The 4-7-8 breathing is another technique known for its calming and stress-reducing effect. As the name implies, the technique starts with a four-second inhale through the nose, followed by a seven-second breath-hold, and finishes with an eight-second exhale through either the nose or mouth. This breathwork method is also nicknamed 'insomnia breath' as it is particularly useful for putting the body in a state of rest and assisting with sleep problems; and as was mentioned previously, sleeping difficulties were another issue reported by a large number of immigrant groups. Dr. Andrew Weil (2010) at the Arizona center for integrative medicine utilizes this technique, and



describes it as a 'natural tranquilizer for the nervous system'. He recommends doing it twice a day for four times during the first month, and afterward you can extend it to eight times if wanted (Weil, 2010).

7.4 The Wim Hof Method

We chose to include the Wim Hof method due to extensive new scientific evidence that showed significant production of norepinephrine when being practiced (Pelagotti, 2019). Norepinephrine (adrenaline) is one of the neurotransmitters inhibited in those with depression, therefore the method can be used to help bring about a change in mood and tackle the effects of depression and unhappiness (MentalHelp.net, 2020). As the previous three breathwork methods were aimed at reducing stress, we found it important to also include a technique for tackling feelings of melancholy, because it is another emotional ailment that threatens the immigration clientele.

The Wim Hof method includes the following steps:

- 1. Inhale quickly and deeply through the mouth.
- 2. Exhale in a relaxed manner through the mouth.
- 3. Repeat this until a sensation of light-headedness is achieved.
- 4. After this, exhale all the air from your lungs.
- 5. Hold the breath for an extended period of time (as long as it feels comfortable).

The latter fifth action tricks the body by signaling that oxygen has been cut off and triggers the release of norepinephrine as a response (Pelagotti, 2019).

Wim Hof's belief is that all diseases and ailments in the body originate from inflammation – a symptom previously mentioned in the subchapter named 'benefits of breathwork" in the thesis. A second study with Hof showed positive changes in inflammation levels in the body, as shown in the 2014 Radboud University Nijmegen Medical Centre experiment, where Hof was able to produce two times the normal amount of anti-inflammatory mediators in the body, through the power of his breathing and meditation exercises, successfully fighting off the effects of an injected endotoxin (Kox, et al., 2014). Hof is also currently working with the University of California, San Francisco researching the effects of his breathwork on depression and anxiety.

Together with all these breathing techniques combined we aimed to complement the participants' knowledge of breathwork and demonstrate to them that these simple adjustments to one's breathing can have profound effects on their mood and well-being; and to teach them methods for controlling their own emotions and therefore promote their empowerment.

8 Implementation of the thesis

8.1 Working life partner and the participants - Iraqi Women's Association

Our functional thesis' working life partner was Iraqi Women's Association (Irakin Naisten Yhdistys ry), which we will refer to here on out by their abbreviation INY ry. We conducted our breathwork sessions with a group of their long-time clients. There were altogether seven participants, all of whom were female immigrants and who all spoke Finnish as a foreign language. The participants' Finnish language skills were medium (in a rough estimate between the levels of A2.2 and B1.1), but the majority of them also understood English, so simple Finnish and English was used when guiding the workshop sessions. There were also Arabic and Farsi-speaking translators present (student interns provided by INY ry), who assisted when participants needed further translating.

INY ry is a non-governmental organization founded in the year 2000 and it is funded by the Funding Centre for Social Welfare and Health Organizations (STEA). It provides activities for all immigrant status women with the aim of improving women's position in the society, as they view holistic integration as the cornerstone for preventing the exclusion of immigrant women. The activities are targeted towards supporting their studies and working life, for example, Finnish language studies (for both beginners and more advanced speakers), peer support groups, computer skill groups, homework help groups, and wellness groups. They also provide continuous individual guidance in Finnish, English, Arabic, Kurdish, and Turkish. They also specialize in helping women who have fallen victim to domestic violence. A very important part of INY ry is providing child care mainly for mothers with children from the age of 1-3 years, so that they have a chance to fully participate in the group activities, and the children themselves simultaneously learn Finnish language and social skills.

INY ry was an invaluable part of this thesis' process. The organization provided valuable information about immigrant women's needs, as well as instructions and guidance for working with multicultural clients. INY ry provided the opportunity to facilitate the workshops with their client group, and to gather data from them for evaluation through questionnaires and group discussions.

8.2 Gathering data

For the purposes of gathering collectible data and information to enhance the results of our thesis, we chose to utilize qualitative data. Qualitative data was gathered from three different Google Form questionnaires and group discussions. The first questionnaire was only in Finnish, but the other two were in Finnish, English, and Arabic. Qualitative data was collected from group discussions after each session.

The first questionnaire was named the preliminary questionnaire (alustava kyselylomake) and its aim was to gather information about the participants' preliminary knowledge of breathwork techniques and their feelings and symptoms of stress and depression. We used this questionnaire in our first session before starting to discuss anything about breathwork, so that we could get a clear image of how much they already know about different breathing methods, and to ensure that questions about their emotional state would not be affected by the topic itself. We began by first explaining all the questions to the group, and then everyone had enough time to answer the questions privately and anonymously through Google Forms. We formed all the questions ourselves. The questions are summed up as the following:

- 1. Have you heard of breathwork before?
- 2. Have you practiced breathwork before?
- 3. Do you know any of the following terms:

The Wim Hof Method.

Diaphragmatic breathing.

Nasal breathing.

Box breathing.

None of these.

Something else.

- 4. On a scale of 1-5, how satisfied are you with your current life situation?
- 5. On a scale of 1-5, how happy are you?



- 6. On a scale of 1-5, how stressed do you feel in your current life situation?
- 7. How often do you have stress?
- 8. Do you suffer from any of the following symptoms: sleep problems, tiredness, headaches, low energy, digestion problems, muscle pains, chest pain or fast heartbeats, nervousness, dry mouth, constant worrying, forgetfulness, lack of concentration, constant negative thoughts, changes in appetite, depression and general unhappiness, anxiety and worrying, irritability and anger, feelings of life being too difficult, or loneliness?
- 9. Do any of the following life factors cause you stress: work, unemployment, studying Finnish language, school, trying to apply for education, finances, children, relationships, racism, discrimination, health, something else?
- 10. On a scale of 1-4, do feelings of stress affect your personal relationships?
- 11. How do you deal with stress when you feel it?

The second questionnaire was the Mental Hub's anxiety survey (mielenterveystalon ahdistuneisuuskysely), which is publicly available on their website, but we decided to convert it into a Google Forms questionnaire, so it would be easier to access, and we could add English and Arabic translations. This questionnaire helped us gain a general overview of the stress levels of the participants. We used this questionnaire also during the first session by first explaining all the question statements, and then the participants answered them independently and anonymously after the session ended. The questions all had the same answer options - you could choose either never, some days, most days, or almost every day; and the question statements were the following:

- 1. Feeling nervous, anxious, or tense.
- 2. I can not stop or control feeling worried.
- 3. I am too worried about things.
- 4. Difficulties relaxing.
- 5. I feel so restless, that I can not stay still.
- 6. I get upset or angry easily.
- 7. I am scared that something terrible will happen.

The final questionnaire was a feedback form to analyze how effective the breathwork sessions were, what type of changes did they initiate, and how did the participants view the sessions themselves. It was again conducted via Google Forms and offered in



Finnish, English, and Arabic. We formed all the questions ourselves. We used this questionnaire during the last session - we again first explained all the questions to the participants (with the help of Arabic and Farsi translators) and they then answered them privately and anonymously by themselves. The questions were the following:

- 1. Did the breathwork exercises improve your general mood?
- 2. Did the breathwork exercises reduce your stress?
- 3. Did the breathwork exercises relax you?
- 4. Did the breathwork exercises give you more energy?
- 5. Were the breathwork exercises useful?
- 6. Were the breathwork exercises fun?
- 7. Were the breathwork exercises easy?
- 8. What changes occurred in your mood or body when you used these breathing exercises?
- 9. How would you describe the breathing exercises?
- 10. What could have been better or different?
- 11. Do you plan to continue using the breathing exercises?

We also utilized group discussions to gather qualitative data. After each workshop session, we conducted a group discussion, where everyone had a chance to speak their mind. Much like interviews, surveys, and other qualitative data methods, group discussions are an excellent way to gather observational and non-numerical data. It motivates participants to share their opinions and experiences in a safe and comfortable environment. Group discussions also help build relationships between the participants and the facilitator and encourage critical thinking. However, with group discussions, there is also a danger of people modifying their answers to match the opinions of other members, which is why it is important for participants to feel that the group environment is without prejudice and accepts everyone's different opinions.

The results of all three of the questionnaires and comments from group discussions are presented in the subchapter named results. The questionnaires themselves are also added to the appendix.

8.3 Breathwork workshop sessions

8.3.1 First session

The breathwork workshop's first session began with a short introduction to what the sessions were going to be about - we explained that we are creating a thesis on the topic of breathwork, and we will facilitate four sessions about breathing techniques; and that all participation will be anonymous and voluntary. We also explained that the workshops would be both theoretical and practical in nature, with each session following the same format – we would start off with a presentation on a given topic, followed by guided practice of a breathing exercise, and finished with a group discussion. We then continued onto explaining the preliminary questionnaire, and the participants were given time to fill out the questionnaire independently.

The first session then continued with a self-made video, which was made in English, but we translated it vocally during the session into simple Finnish, and the participants had a chance to ask for Arabic and Farsi translations if parts of the explanations were still unclear. The video briefly discussed breath, how it changes depending on our mood, and how our breath and mind are thus directly linked. We felt it necessary to explain why correct breathing patterns are important and how they benefit our health in order to gain the participants' faith in the techniques themselves. The intention of the workshops was described as improving one's emotional state and overall well-being by utilizing your breath to better handle stress, as well as learning about specific breathing techniques for bringing about certain emotional states, such as a relaxed state and an energized state.

The video then continued onto the theme of the first session, which was the basics of efficient and correct breathing through learning diaphragmatic breathing with particular emphasis on breathing through your nose into the lower lungs whilst relaxing the shoulders when exhaling either through the nose or mouth. This is important because with upper chest breathing we compensate for the lack of diaphragm activation by using the neck and shoulder muscles, which builds up tension in our body. The diaphragm itself is a thin but powerful muscle located in the middle of our chest, separating the lungs and heart from the other organs below, and its primary function is respiration (Santos-Longhurst, 2018). We also showed a picture of the diaphragm provided in figure 3 for better understanding through visualization. The participants

then tried diaphragmatic breathing through guided practice for two minutes. For a more sensory understanding of how the diaphragm works, we advised the participants to place one hand on their chest and the other on their stomach, in order to feel how the chest stays still, whilst the stomach contracts when inhaling and expands when exhaling.

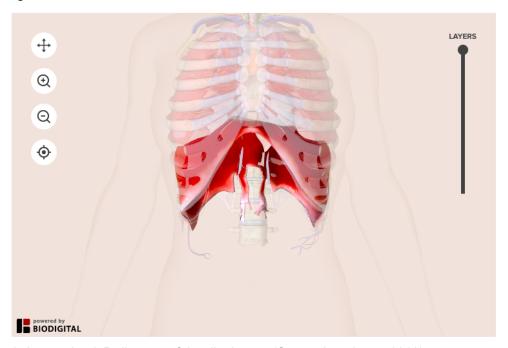


Figure 3. Interactive 3-D diagram of the diaphragm (Santos-Longhurst, 2018).

With this technique, relaxation is the intention and the focus. As such, the guiding was gentle and participants were asked to focus on sensations throughout their bodies, particularly the stress areas, and to imagine their muscles relaxing. As mindfulness and breathwork go hand in hand, participants were also suggested that if they so chose, they could combine diaphragmatic breathing with meditation or praying. Upon closing the first session, participants were also instructed to practice diaphragmatic breathing for 15 minutes daily (this could be divided into three five-minute sessions). We explained that breathwork is useful when practiced consistently. We then concluded the session by having a group discussion where each participant could describe their thoughts and experience related to the topic.

8.3.2 Second session

The second session started with a quick recap of the diaphragmatic breathing method that was learned during the first session. We then continued onto the second self-made video, which explained that the following two breathing methods - the 4-7-8 breathing



method and box breathing - were derived from diaphragmatic breathing and as such require using the same technique as previously learned. Similarly, the theme of the session was breathing for relaxation and as such the practical use of the techniques and the benefits received through their practice were explained.

We demonstrated how to use the 4-7-8 breathing method, exercised it together with the participants four times, and also informed them of its ability to help with sleep problems and that as such it is especially useful when practiced before going to sleep. Additionally, because the 4-7-8 breathing method requires one to hold their breath for seven seconds, which is often too long for some individuals, they were advised to tailor the duration according to their own comfort.

The next breathing method we explained and practiced together was box breathing. Just like the 4-7-8 breathing method, box breathing aims to bring relaxation and uses diaphragmatic breathing by following a steady rhythm of nasal inhaling, holding your breath, and exhaling either nasally or orally all for the same amount of time. Participants tried this through guided practice four times and the session was then finished with a group discussion.

8.3.3 Third session

Session three was focused on breathwork related to energizing the body with the aim to overcome fatigue, lethargy, and depression. With this session, we gave participants the option to participate passively, because it involved the Wim Hof Method, which can cause dizziness and, in some instances, if done excessively, one can even faint. Therefore, ethically we prioritized participant safety over active participation. We also emphasized that the technique can not be used if you have a chronic ailment such as heart or blood pressure problems, or if you are pregnant.

As explained in the previous subchapter named the Wim Hof Method, this technique involves fast and deep oral inhaling with relaxed exhaling, and this is repeated until a state of light-headedness is achieved, and finished with holding your breath for an extended period of time. All participants decided to try this method - we practiced for only one minute - and succeeded without any major problems. However, the feedback for this was more negative, as the participants did not enjoy it as much as the other methods due to it causing dizziness. Again, the session concluded with a group

discussion. Participants were advised to continue using this method independently only if they felt it necessary, for example, when feeling low on energy or in an unhappy mood, and in a careful manner without overloading themselves.

8.3.4 Fourth session

The final session of the breathwork workshops was aimed at going over all the information learned in the previous sessions and gathering feedback from the participants. No videos were used during this session, instead, we discussed verbally about all the four breathwork methods, as repetition is important for ensuring successful learning. Participants were encouraged to participate in a group discussion about their experiences, thoughts, and emotions related to the workshops.

A feedback questionnaire was used to gather information about the effectiveness of the workshops and also to give the participants a chance to share their opinions anonymously and privately. We also asked them about their intentions to keep using these techniques independently in the future, and the answers were very optimistic, as six out of seven participants said they plan to keep practicing the first three breathwork methods and described them as being very useful.

8.4 Breathwork manual

We decided to create a manual to complement the workshops, which contains a brief description of the origins of breathwork and its function, followed by detailed step-by-step instructions of the four chosen breathwork techniques. The manual also has self-made illustrations for a better demonstration of the breathing methods and was made in simple and short Finnish to ensure that it will be easy to use by foreign clients who have low Finnish language skills.

The manual serves a number of purposes. Firstly, it reiterates what was taught in the online sessions, giving participants a chance to also practice these methods independently by themselves. This is important, because the benefits of these breathwork practices come about via consistent practice. Secondly, the manual will be used by our working life partner INY ry (Iraqi Women's Association) as a long-term work tool for utilizing breathwork with their clients during service provision. Lastly, as one of our goals is to educate other social service providers about using breathwork to

support client well-being, we hope that the manual benefits them and that they can utilize it in their work. It is in pdf format so that it can be shared and printed freely.

9 Ethical reflection

9.1 Participant briefing and handling data

At the start of the first breathwork workshop session, the participants were informed that all participation is voluntary and anonymous. We explained that full confidentiality will be practiced throughout the whole process and that their personal information shall not be provided to any outside sources.

Handling of the data was done in accordance with the General Data Protection Regulation (2016) as all gathered information was used solely for the purposes of this thesis, only information necessary for this thesis was obtained, all information gathered will be destroyed when no longer needed, and the data is used with the (verbal) consent of the individual participants. It is also important to note that no personal data was collected that could be directly used to identify the participants; as such, written consent forms were not required and a verbal agreement from the participants and working life partner sufficed (Rectors' Conference of Finnish Universities of Applied Sciences Arene, 2020, p. 20).

9.2 Health and safety

Participant health and safety was taken into account throughout the workshops by ensuring that no ill effect would come to the participants involved and that all of the activities had the partakers' wellbeing and integrity at heart. Participants were advised to only partake in the guided practices if they felt comfortable enough to do so.

As there are some possible adverse effects linked to the Wim Hof method - namely the possibility of feeling lightheaded or even losing consciousness through breath-holding - participants were informed of this and given the option to opt-out of performing the technique and advised to instead just learn about the theory of it from the materials presented. We also stressed the importance of refraining from the Wim Hof method training if they were either pregnant or suffered from any heart or blood pressure



related health issues. These notices are also mentioned and highlighted in the breathwork booklet itself.

10 Evaluation

10.1 Questionnaire outcomes

The following is a thematic analysis of the results obtained from three different questionnaires used during the breathwork workshop sessions. The questionnaires were the preliminary questionnaire, the Mental Hub's anxiety survey, and the feedback form.

The participants' preliminary knowledge of breathwork was quite considerable - four out of eight (50%) participants had heard of the concept of breathwork before, and three of them had practiced breathing exercises before. Three participants knew of nasal breathing in general and one was familiar with the Wim Hof method.

The participants affirmed feeling quite satisfied and happy with their current life situation, as 50% of them stated feeling medium satisfaction in their lives, and 75% of them felt medium to average happiness. However, stress results were quite high - one felt very stressed, one stressed, and four felt medium levels of stress. Two out of seven (28,6%) experienced stress once a day and another two out of seven once a week. The most commonly reported stress-related symptoms were tiredness, low energy, and headaches; whereas none of the participants reported having digestion issues or chest pain. The most common factors for stress were children (50%), unemployment (37,5%), learning Finnish language (25%), and discrimination (25%). When asked whether or not their feelings of stress affect their personal relationships, the answers were quite ambiguous, as three answered yes (a lot), and another three answered no (rarely).

We also asked the participants how they usually handle feelings of stress when it arises, and they answered the following: I go outside or listen to music; I drink coffee, tea or water; I clean my home; and I try to relax, breathe, and eat some food.

Stress-related worries became more clear through the Mental Hub's anxiety survey. Feelings of nervousness, anxiety, and tension during some days were reported by 62,5%; and the same percentage felt that they can not stop or control their worrying during some days. However, 37,5% stated that their worrying is never a cause for concern. A staggering 50% of them complained about difficulties relaxing and feeling very restless during some days. Three out of eight participants (37,5%) got upset or angry easily during some days. Again, a worrying 50% reported feeling scared about something terrible happening. All of these factors are considered symptoms of chronic stress.

The answers from these two questionnaires clearly reinforce the need for the thesis subject, which is using breathwork techniques to alleviate feelings of stress, anxiety, and depression. This is evident from the high amount of stress and anxiety-related feelings and symptoms reported by the participants.

The results from the feedback form were very positive and optimistic. Three out of seven participants (42,9%) said that breathwork had indeed improved their general mood, and four of them (57,1%) said it had somewhat improved. Only one person said it had reduced their stress, and five said it had somewhat helped with their stress-level. However, four out of seven participants (57,1%) felt more relaxed thanks to the breathing exercises, and three out of seven (42,9%) felt somewhat more relaxed. Five participants stated that breathwork gave them somewhat more energy, and two stated that it definitely gave them more energy. A confident 71,4% (five out of seven) found the breathwork sessions useful, whereas one found them somewhat useful, and one did not view them as useful. All of the participants rated the workshops as either fun or somewhat fun, and easy or somewhat easy. When asked whether or not they plan to continue using the taught breathwork methods, five answered yes, and two answered maybe.

We also asked about what type of changes (if any) happened within their mind and bodies after practicing the breathing styles, and the comments were as follows: a few changes, my stress went away; it makes me feel more relaxed; I felt relaxed and rested; they helped me both sleep and wake up, and reduced my nervousness; and I felt calm. We then requested them to describe the breathing exercises in their own words and the following opinions arose: they are good for the body and give energy;

they are an important part of your personal lifestyle; very good; very important; very useful; and good.

These feedbacks from the clients were very positive in terms of effectiveness, as it was clearly evident that the clients felt that they had at least somewhat benefited from the techniques and found the sessions enjoyable.

10.2 Feedback from group discussions

As we previously mentioned, constant group discussions took place after each session to promote active sharing and reflection, and to gather further qualitative data. Group discussions create a supportive environment for interaction and developing further ideas by the participants themselves.

When learning about and practicing diaphragmatic breathing during the first session, the feedback from the participants was very excited, motivated, and positive. They all described it as good and some even as very good. They expressed that it made their mind and body feel good, it relaxed them, and made their stress decrease. They described it as filling their head and lungs with oxygen, and felt that clean air was entering them. One participant also believed that it can help with training your abdominal muscles. When asked if they were planning to continue practicing the diaphragmatic breathing method, all but one answered yes. One participant, however, complained that it made her head hurt, because she has minor heart rhythm problems.

After guiding the participants through box breathing and the 4-7-8 breathing method during the second session, they all described both of the methods as good and relaxing. One participant was particularly excited about box breathing and declared that she plans to use it every day. Four of the participants felt that box breathing was easier than the 4-7-8 breathing method, whereas one found them exactly the same. Two participants felt that during the latter breathing exercise seven seconds was too long for them to hold their breath, so they decreased the timeframe to around five seconds.

Responses to the third session's Wim Hof method were much more critical. Many of the partakers said it made their head hurt and caused dizziness. One participant was not able to finish the exercise, because she felt it made her head spin. Another participant stated that she did not like this method, because she prefers to breathe



through the nose. However, two of the participants still described the exercise as good and found it interesting, and one said it gave her more energy. Derived from these comments, we feel that the Wim Hof method was the least favorable among the clients, as they valued relaxation over energizing.

During the last session, we asked the participants for verbal feedback on all of the previous sessions. All of the partakers said that they enjoyed the sessions fully, and the following adjectives were used to describe them: good, fun, easy, important, and energizing. One participant said that she used (and plans to continue using) the 4-7-8 breathing method when waking up and before going to sleep; and another said she likes using diaphragmatic breathing. Two participants said they practiced box breathing independently on their own time. However, one client stated that she was too tired to practice any of the breathwork methods and felt that she was not very motivated to try it during her free time.

The last session's group discussion also gave space for the women to share their own ideas on the subject. One of the participants reflected that she had learned breathing methods previously from her sports instructor, who taught her that correct breathing is very important for women who exercise.; and another woman liked doing the breathwork exercises together with her everyday yoga. One of the young moms in the group felt it physically very challenging to move around with the stroller during the winter, and found that it helps her to take small five-minute breathing breaks. Another participant complained that she suffers from headaches due to having to wear a face mask because of the ongoing coronavirus pandemic, and found that practicing breathing exercises before wearing the mask helped reduce the headaches. As a large portion of the women were also mothers of small children, they had a wonderful idea to teach it to their kids as well.

A very interesting and empowering moment arose from the group when two of the women also shared a commonly known breathing technique from their own culture - they taught us that when experiencing symptoms of the flu, such as a runny nose or a headache, it helps to first close one side of the nose, breathe slowly, and then close the other side of the nose, and repeat. This showed that the workshops were successful in providing the participants with a chance to share their own knowledge, and showed

that the group dynamics were strong, and made everyone feel comfortable enough to express their own ideas.

10.3 Meeting our aims

From assessing feedback received through both our questionnaires and group discussions, it can be said to a reasonable degree that we met our main aims. Particular questionnaire feedback related to the usefulness of breathwork was received to be unanimously positive with such responses as 'tosi hyvä' (very good), 'todella hyödyllinen' (very useful), and 'tosi tärkeä' (very important); as well as explicit statements from participants about improvements relating to mood, energy, and relaxation. Therefore, we feel that the created workshops successfully served their purposes in bettering the well-being of the participants. Participants were also enthusiastic about continuing to use the methods taught, as all but one participant showed interest in practicing breathwork in the future. This showed that the participants felt confident in breathwork's ability to improve their well-being.

We also created sufficient content in the breathwork manual itself and the instructional videos to which participants have access to refer to in the future if needed. As we feel that breathwork should be further utilized in the social services sector, distribution of the manual is encouraged.

10.4 Limitations

One main limitation to the thesis was due to language proficiency. As participants were not giving feedback in their mother tongue and instead provided the answers in Finnish, feedback was potentially more limited than it would have been in their native language since their Finnish language skill is at a basic level. However, to avoid any large-scale language limitations, both Arabic and Farsi-speaking translators were provided during the workshops, which assisted in gathering accurate data from the participants.

Another factoring limitation of the thesis was that of gender. As the participants were provided through INY ry, all of them were female. Results and feedback could potentially vary fastly between male and female participants. We also had altogether

only eight partakers and such a small number of participants can be argued to not be generalizable to the whole population.

Ideally, the workshops would be facilitated in a face-to-face setting, because it ensures more active participation and better guidance, however, due to the currently ongoing corona-virus pandemic restrictions, we had to carry out the sessions online. The dynamics of discussions generally work better in direct meetings and the capacity for dialogue is greater there, as they provide more opportunities for ensuring that the participants pay active attention and physical communication, such as eye contact and smiling, help communicate better.

10.5 Discussion

In Finland, the immigration population is fast growing on a yearly basis, however, immigrants and foreign-born children alike are left facing harsh integration challenges due to Finland's inexperience with migration (Organisation for Economic Co-operation and Development, 2017, pp. 4-5). This results in the migrant population being more susceptible to various mental health ailments due to the already stressful nature of moving to a new country and their marginalized societal position. Immigrants face many daily struggles that further threaten their mental well-being and life quality, such as higher rates of unemployment, discrimination, and difficulties learning about their residing country's new culture and language (Organisation for Economic Co-operation and Development, 2017, pp. 6-7). Koehn and Sainola-Rodriquez's (2006, pp. 51-53) study about refugees and immigrants residing in Finland found that a staggering 48% of them struggled with mental health problems, most commonly depression and anxiety.

Breathwork offers a simple and effective method for promoting immigrants' well-being through addressing their emotional state. Numerous studies have proved that breathwork helps tackle unwanted negative emotions. A study by Kjaer, et al. (2002, p. 255) showed a reduction in depression levels when using conscious breathing and mindfulness. A study by Seppälä, et al. (2014, p. 397) showed a significant reduction of anxiety in veteran participants who used breathing practices. Also, a study by Shree, Prashanth, and Girija (2019, p. 111) showed that pranayama breathing helped reduce participants' stress and improved their sleep quality.

We propose that breathwork can be used by social service providers during embedded counselling to teach clients how to better handle their emotional reactions in difficult and stressful situations, because it enables them to independently recognize and mitigate negative feelings. Breathwork thus helps promote well-being through its capacity for empowerment via providing knowledge and techniques to counteract various symptoms related to mental health issues.

This thesis thus aimed to design and facilitate breathwork workshop sessions and a breathwork manual to promote immigrant's well-being through tackling their most commonly reported mental health issues, namely stress, anxiety, depression, and sleeping problems, via the use of chosen breathwork techniques. We organized four breathwork workshop sessions using instructional videos and guided practice, which centred around four main breathing methods: diaphragmatic breathing, box breathing, the 4-7-8 breathing method, and the Wim Hof method. The sessions included brief theory explanations and guided practice of the methods in simple Finnish and English (Arabic and Farsi-speaking translators were also present). All of the presented information was then summarized and gathered into a breathwork manual in simple Finnish language, which was later presented to the participants so that they could reflect and continue using the methods independently as a self-help tool. The manual also has potential for future use by clients and professionals who wish to implement the chosen breathwork methods.

The sessions involved altogether seven participants, all of whom were female and from a migrant background. The participants were provided by our working life partner Iraqi Women's Association (Irakin Naisten Yhdistys ry).

In addition, qualitative data was gathered in the form of three questionnaires - a preliminary questionnaire, MentalHub's Anxiety Survey, and a feedback form - and continuous group discussions. This helped gather information about the participants' pre-knowledge and experiences on the subject, their emotional well-being statuses before and after the workshops, and their subjective feelings and thoughts about the sessions. The gathered data was then used to evaluate the overall effectiveness of the breathwork workshop sessions.

Based on results obtained from the questionnaires and participant feedback, we were able to determine with reasonable certainty that breathwork made a positive impact on the participants' well-being. While the personal preference of the techniques varied, all but one out of seven participants reported the techniques as useful and reacted enthusiastically towards the practice. The usefulness of the sessions can also be derived from the fact that five of the participants said they plan to continue using the breathing exercises and two answered that they will maybe keep using the techniques. All participants eagerly shared their own knowledge of breathing techniques, which in turn facilitated interpersonal relationships among the group.

However, it became evident during the course of our thesis writing that further research needs to be conducted in the following two subjects: immigrants' mental health statuses in Finland and what are the most common mental ailments that immigrants struggle with currently; and breathwork techniques being used specifically in social services and social work. Direct links between breathwork and social work were not found in any previous studies, neither in Finland nor internationally. Thus more attention needs to be paid to the overall concept of breathwork being used as a social services tool, and to the current situation regarding immigrants' mental health.

Breathwork can be used as a complementary tool alongside other service provisions in the social service sector; however, it is currently underutilized, because it's status as an effective therapeutic tool is relatively new. It is our hope that breathwork will in the future become a more common practice in social services, in order to support the holistic mental and physical well-being of clients.

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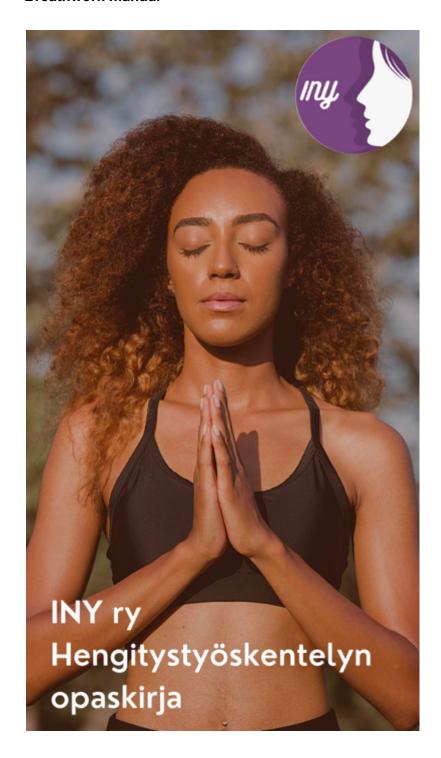
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Breathwork manual



HENGITYSTYÖSKENTELY

Hengitystyöskentely on ollut olemassa vuosisatojen ajan.

Hengitystyöskentelyssä käytettiin ennen joogassa ja se tunnettiin nimeltä pranayama.

Tällä hetkellä sitä käytetään useissa ammateissa terapiamuotona.

Hengitystyöskentelyssä on tekniikoita sekä rentoutumiseen että virkistämiseen.

Tässä käsikirjassa annamme sinulle menetelmiä molempiin.



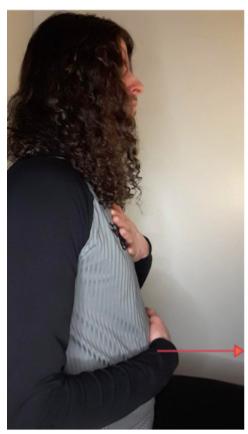
PALLEAHENGITYS

Pallea on lihas, joka sijaitsee keskivartalossa keuhkojen alla.

Pallean kautta hengittäminen auttaa poistamaan kehon kipuja, päänkipua ja huimausta.

Palleahengitys vähentää stressihormoonin määrää kehossa, eli tekniikkalla voi lievittää ahdistusta.







Palleahengitystä voidaan tehdä istuen tai makuulla.

- 1) Aseta yksi käsi vatsallesi ja toinen rintaan.
- Hengitä alempiin keuhkoihin nenän kautta hitaasti ja syvästi. Vatsasi tulisi laajentua, mutta rintasi ei pitäisi liikkua.
 - 3) Hengitä ulos rennosti joko nenän tai suun kautta.

Harjoitusta tulisi tehdä vähintään 15 minuuttia päivässä. Esimerkiksi 3 kertaa 5 minuuttia.

LAATIKKOHENGITYS

Laatikkohengitys on tekniikka, jota käytetään rentoutumiseen.

Tekniikka rauhoittaa hermostoa ja torjuu ahdistuksen vaikutuksia, kuten korkeaa verenpaineetta, nopeaa sykettä ja paniikin tunnetta.

> Tekniikkaa voidaan muokata mieltymystesi mukaan.





Laatikkohengitystä voidaan tehdä istuen tai makuulla.

- 1)Hengitä sisään nenän kautta 4 sekuntia.
 - 2) Pidä hengitystäsi 4 sekuntia.
- 3) Hengitä ulos nenän tai suun kautta 4 sekuntia.
 - 4) Pidä hengitystäsi 4 sekuntia.

Toista sykliä kahden minuutin ajan tai kunnes sinusta tuntuu rennolta.





WIM HOF METHOD

Wim Hof menetelmä antaa energia kehoon ja mieleen.

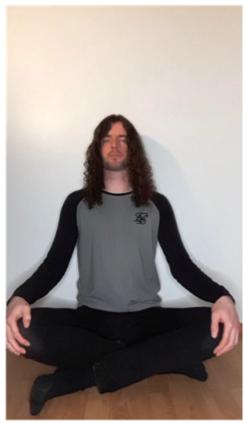
Menetelmä lisää immuunijärjestelmää, torjuu sairauksia, vähentää tulehdusta kehossa ja laukaisee adrenaliinin vapautumisen.

Lisätietoja:

https://www.wimhofmethod.com/science







- Hengitä suun kautta syvästi ja voimakkaasti ala- ja yläkeuhkoihin.
 Hengitä ulos rennosti.
- 3) Toista nopeasti noin kolmekymmentä kertaa tai kunnes tunnet itseäsi kevyeksi.
 - 4) Hengitä ulos, kunnes keuhkot ovat tyhjät.
 - Pidä hengitystä niin kauan kun pystyt. Toista sykliä enintään 4 kertaa.

Huomio!

Koska menetelmä sisältää hyperventilaatiota, se voi aiheuttaa huimausta. Harjoittele sitä vain jos olet makuulla tai istut mukavasti. Jos suoritat sitä liian monta kertaa, voit menettää tajunnan.

Älä käyttää tätä menetelmä jos olet raskaana tai sinulla on vakavia sydämen tai verenpaineen ongelmia.



Tämä opaskirja on luotu osana opinnäytetyötä nimeltä 'Maahanmuuttajien hyvinvoinnin tukeminen hengitystyöskentelyn avulla: Työpajaistunnot ja hengitystyöskentelyn käsikirja' (Supporting immigrant Well-being Through Breathwork:Workshop Sessions and a Breathwork Manual).

Opinnäytetyö julkaistiin osana Bachelor's of Social Services tutkintoa Metropolian ammattikorkeakoulussa.

Luonut Helina Heinsaar ja Richard Reilly.







Implementation plan

Session plans

Prior to workshop

Objective

Learning about participants current feelings of stress and other negative emotions.

Learning about participants pre-knowledge of breathwork.

<u>Implementation</u>

Information gathering on how stressed participants currently feel and their symptoms via questionnaire.

Information gathering on their level of understanding regarding breathwork via questionnaire.

Session 1

Theme – introduction

- Basics of breathwork.
- Discussing breathwork, its benefits and its uses.
- Breathwork practice diaphragmatic breathing.

Delivery Method – online (Google Meet)

C	1
Objectives	Implementation
Students Ensure that participants understand what breathwork is. Ensure that participants understand how breathwork works (theory). Ensure that participants understand the benefits. Ensure that participants understand the required duration of breathwork practice (daily/15 minutes). Introducing diaphragmatic breathing.	Students Explaining the purpose of the workshop. Determining participants understanding of and preexisting knowledge of breathwork. Gaining participants trust and confidence in breathwork. Explaining about the connection between the breath and emotions (how stress impacts breathing and the body). Present breathwork theory. Explain the mechanics of efficient breathing. Demonstrate the technique.
 Participants Understand the purpose of the workshop. Describe their prior knowledge of breathwork. Gain an understanding of what breathwork is and its benefits. Follow along to the guided breathing technique. Understand how often to practice and for what duration. 	Participants Explain what they know about breathwork. Learn about why breathwork is effective and what it affects. Learn about the breath and mind connection. Learn about the benefits of breathwork. Understand how often to practice. Participate in breathwork practice.

Session 2

Theme - breathwork for relaxation.

- Recap of session 1.
- Discussing thoughts on techniques from session 1.
- Further understanding of breaths impact on the mind and body (theory).
- Teaching breathwork techniques box breathing and the 4-7-8 breathing method.



Breathwork practice – box breathing and the 4-7-8 breathing method.	
Delivery method – online (Google Meet)	

Objectives	implementation
Students Receive feedback on participants thoughts of prior technique. Introduce breathwork techniques (2) related to relaxation. Breathwork demonstration and practice with participants.	Students Discussing thoughts on diaphragmatic breathing. Introducing relaxation breathwork techniques. Present theory on relaxation breathing techniques. Demonstration and practice of breathwork technique with participants.
 Participants Express their thoughts and feelings on diaphragmatic breathing. Gain an understanding of breathwork for relaxation. Gain further understanding on breath and mood relation. Participate in breathwork practice. 	 Participants Discuss thoughts and feelings. Learn about breathwork for relaxation. Learn about breathwork theory. Follow along to guided breathwork technique.

Session 3

Theme – breathwork for energizing.

- Recap of session 2.
- Discussing thoughts on breathwork technique from session 2.
- Theory of energizing breath.
- Breathwork practice (Wim Hof method).

Delivery method – online (Google Meet)

Objectives	Implementation
Define differences between relaxation and energizing breathwork techniques. Provide theory of breathwork for energizing the body and mind. Explanation health and safety guidelines. Breathwork demonstration and practice with participants.	Compare and contrast breathwork techniques (relaxation & energizing)and explain their differences. Discuss effects of the technique before demonstrating. Demonstration and practice of breathwork technique with participants.
Participants Learn to differentiate between breathwork for relaxation & energizing. Learn about breathwork theory for energizing the body.	Participants • Participate in the breathwork technique (optional).

Session 4

Theme - Feedback Questionnaire & open discussion

• Reflecting on the workshop as a whole.



- Gathering feedback via questionnaire.
- Allow participants to learn from one another's experiences through dialogue.

Facilitate interpersonal relationships.
 Delivery method – Online (Google Meet)

Objectives	Implementation
Students Carry out a course overview. Gather feedback on participants thoughts and feelings. Facilitate an open discussion on how the workshop progressed. Information gathering.	Distribute the questionnaire. Guide participants through discussion of their thoughts and feelings of the workshop and ask them to share their own ideas.
Self-reflection on learning and development through breathwork. Participate in an open discussion on the topic of breathwork.	Participants



Questionnaires

Preliminary Questionnaire:

- 1. Oletko kuullut hengitystyöskentelystä (breathwork) aiemmin? Kyllä/Ei
- 2. Oletko aiemmin osallistunut hengitystyöskentelyssä? Kyllä/Ei
- 3. Tiedätkö jonkin seuraavista käsitteistä?
 - a. Wim Hof Method (Wim Hof menetelmä)
 - b. Diaphragmatic breathing (palleahengitys)
 - c. Nasal breathing (nenän hengitys)
 - d. Box breathing (laatikko hengitys)
 - e. Ei mikään niistä
 - f. Muu
- 4. Kuinka tyytyväinen olet nykyiseen elämäntilanteeseen? 1-5 scale
- 5. Kuinka onnellinen olet elämässäsi? 1-5 scale
- 6. Kuinka stressaantunut sinusta tuntuu nykyisessä elämässäsi? 1-5 scale
- 7. Kuinka usein sinulla on stressiä?

Answer options: Koko ajan/Monta kertaa päivässä/Kerran päivässä/Monta kertaa viikossa/Kerran viikossa/Monta kertaa kuukaudessa/Kerran kuukaudessa/Monta kertaa vuodessa/Kerran vuodessa/Ei yhtään.

- 8. Onko sinulla usein seuraavia oireita:
 - a. Nukkumisongelmat
 - b. Väsymys
 - c. Päänsärkyt
 - d. Matala energia
 - e. Ärtynyt vatsa
 - f. Lihaskivut
 - g. Rintakipu tai nopea sydämenlyönti
 - h. Hermostuneisuus
 - i. Kuiva suu
 - j. Aina huolissani
 - k. Usein unohtuminen
 - I. Kyvyttömyys keskittyä
 - m. Ajattelen aina negatiivisesti
 - n. Muutokset ruokahalussa
 - o. Masennus ja yleinen onnettomuus
 - p. Ahdistus ja huoli
 - q. Ärtyneisyys ja suuttumuus
 - r. Tunne, että elämä on tosi vaikea
 - s. Yksinäisyys
- 9. Aiheuttaako jokin seuraavista tekijöistä sinulle stressiä?
 - a. Työ
 - b. Työttömyys
 - c. Suomen kielen oppiminen
 - d. Koulu
 - e. Koulutuksen etsiminen
 - f. Talous
 - g. Lapset
 - h. Parisuhde
 - i. Rasismi

- j. Syrjintä
- k. Terveys
- I. Muu
- 10. Vaikuttavatko stressin tunteet henkilökohtaisiin suhteisiin?
- 11. Miten käsittelet stressiä, kun tunnet sen?

Mental Hub's Anxiety Survey:

- 1. Hermostuneisuuden, ahdistuneisuuden tai kireyden tunne / Feeling nervous, anxious or tense / أشعر بالتوتر أو القلق /
- 3. Liiallinen huolestuneisuus erilaisista asioista / l am too worried about things / اشعر بقلق بخصوص اشیاء عدة
- 4. Vaikeus rentoutua / Difficulties relaxing / صعب الاسترخاء
- Niin levoton olo, että on vaikea pysyä aloillaan / I feel so restless, that I can not stay still / الشعر بإضطراب لهذا السبب لم استطع ان ابقى ساكناً /
- 6. Taipumus harmistua tai ärsyyntyä helposti / I get upset or angry easily / انا منزعج /
- 7. Pelko siitä, että jotakin kauheaa saattaisi tapahtua / I am scared that something terrible will happen / انا خائف /من شيء سيء جداً قد يحدث/

Each question statement had the following answering options: never, some days, most days, or almost every day.

Feedback Form:

- 1. Paransiko hengitystoiminta sinun yleistä mielialaasi?/Did the breathwork exercises improve your general mood?/ الهل تحسن تمارين التنفس من مزاجك العام?/
- 2. Vähensivätkö hengitystoiminnot sinun stressiäsi?/Did the breathwork exercises reduce your stress?/?هل تمارين التنفس تقلل من إجهادك
- 3. Rentoutuivatko hengitystoiminnot sinua?/Did the breathwork exercises relax you?/أهل تمارين التنفس تجعلك تشعر بالاسترخاء؟//إيا
- 4. Antoivatko hengitystoiminnot sinulle enemmän energiaa?/Did the breathwork exercises give you more energy?/﴿اللهُ اللهُ الل
- 5. Olivatko hengitysharjoitukset sinulle hyödyllisiä?/ Were the breathwork exercises useful?/{هل تمارين التنفس مفيدة
- 6. Olivatko hengitystoiminnot hauskoja?/Were the breathwork exercises fun?/هك!
- 7. Olivatko hengitystoiminnot helppoja?/Were the breathwork exercises easy?/هال التنفس سهلة؟
- 8. Mitä muutoksia tapahtui mielialassasi tai kehossasi, kun käytit näitä hengitysharjoituksia?/What changes occurred in your mood or body when you used these breathing exercises?/ما التغييرات التي طرأت على مزاجك وجسمك عند استخدام//نتفس هذه؟
- 9. Kuinka kuvailisit hengitysharjoituksia?/How would you describe the breathing exercises?/خیف تصف تمارین التنفس؟/
- 10. Mikä olisi voinut olla parempi tai erilainen?/What could have been better or different?/الله مختلفًا؟//الما الذي كان يمكن أن يكون أفضل أو مختلفًا؟//الما الذي كان يمكن أن يكون أفضل أو مختلفًا؟/
- 11. Aiotko jatkaa hengitysharjoitusten käyttöä?/Do you plan to continue using the breathing exercises?/ اهل تخطط لمواصلة استخدام تمارين التنفس؟/

