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Improving Mental Health through Physical Activity and Meditation in the Community of Tulangan District

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Abstract:
This community service program aimed to improve mental health among adults in Tulangan District through psychoeducation, light physical activity, and guided meditation. A total of 30 participants aged 35–45 took part in the intervention, which was designed to introduce accessible strategies for stress reduction and emotional regulation. The program integrated three components: (1) mental-health awareness education, (2) low-intensity movement exercises, and (3) simple mindfulness-based practices. The results indicated a notable increase in participants' understanding of everyday mental-health issues, including the recognition of stress symptoms and the importance of emotional balance. Physical activity generated immediate physiological benefits such as reduced tension and improved mood. Meditation further enhanced these effects, enabling participants many of whom had no prior experience to achieve rapid calmness and mental clarity through techniques like paced breathing and body scanning. The combination of movement and meditation produced a synergistic impact, making relaxation easier and more sustainable. Participants showed high engagement throughout the session and expressed strong motivation to continue applying the practices independently. Several even proposed forming community-based practice groups, suggesting potential for long-term behavioral change. Overall, the findings demonstrate that simple and low-cost mind–body interventions can effectively support mental well-being in community settings. The program underscores the value of accessible mental-health strategies and highlights the role of universities in promoting public health through practical, culturally relevant initiatives.
Keywords: mental health, physical activity, meditation, community service

1. Introduction

Mental health is a crucial component of overall well-being and a determining factor in improving the quality of life within communities (Nascimento & Dos Santos, 2025). Amid increasing social, economic, and cultural complexity, individuals are exposed to daily pressures that often go unnoticed. Workload demands, social expectations, family responsibilities, and excessive exposure to digital media all contribute to rising levels of stress, anxiety, and emotional fatigue across various segments of society. This situation is also evident in the community of Tulangan District, a region characterized by diverse social backgrounds and dynamic economic activities.

In recent years, research has shown that the prevalence of stress and mental health challenges is no longer confined to major urban areas; it has also become a growing issue in semi-urban and rural regions. The people of Tulangan, comprising service workers, farmers,

homemakers, adolescents, and older adults face different types of life pressures yet share a common lack of awareness regarding mental health. Many still perceive mental health issues as something related only to severe disorders, overlooking early signs such as sleep disturbance, irritability, chronic fatigue, or loss of motivation. In reality, these symptoms are indicators of prolonged stress that require early intervention.

Physical activity and meditation have been widely recognized as effective approaches for managing stress and improving psychological well-being. Physical activity enhances blood flow to the brain, stimulates the release of endorphins, and reduces muscle tension associated with stress. Meanwhile, meditation provides the mind with a structured opportunity to rest, regain focus, and improve self-awareness. Together, these two practices form a powerful combination that strengthens mental resilience and supports individuals in leading calmer and more productive lives (Jamil et al., 2023).

The Community Service Program (PkM) themed "Improving Mental Health through Physical Activity and Meditation" in Tulangan District was designed as a practical response to these community needs. This program aims to provide mental health education, offer hands-on experience in performing simple yet beneficial physical exercises, and guide participants through easy-to-follow breathing meditation techniques suitable for various age groups (Sasikumar, 2022). With an interactive and accessible approach, the activity is expected to enhance community awareness on the importance of integrating physical and mental well-being into daily living (Küfeoğlu, 2022).

This approach is particularly appropriate for the residents of Tulangan, who require accessible, low-cost, and easy-to-implement mental health strategies. Light physical exercises and meditation require no special equipment, can be practiced at home or in public spaces, and can be tailored to individual fitness levels. This makes the intervention highly relevant for busy individuals, elderly residents, and community members with limited time.

Beyond education and hands-on training, the program also aims to foster a culture of healthy living within the community. By enhancing knowledge and encouraging the practical application of movement-based and relaxation-based mental health strategies, the program hopes to nurture a community that values emotional well-being and long-term mental resilience. This initiative aligns with the university's commitment to contributing to societal development through meaningful and sustainable community engagement (Ismail et al., 2015).

In conclusion, this PkM activity not only provides theoretical understanding but also promotes a transformative experience for the people of Tulangan District. The program serves as an essential step in cultivating a community that is physically healthier, mentally stronger, and more balanced in facing the challenges of everyday life.

2. Materials and Methods

The implementation of the Community Service Program (PkM) on "Improving Mental Health through Physical Activity and Meditation in the Community of Tulangan District" was carried out through a series of structured and well-planned stages. Each stage was designed to ensure that the intervention delivered meaningful impact and long-term benefits for the participants. The process embodied the core principles of participation, education, and practical application, enabling the community not only to understand the material but also to practice it directly in their daily lives (Rachman et al., 2024).

The implementation method of this Community Service Program (PkM), themed "Improving Mental Health through Physical Activity and Meditation in the Community of Tulangan District," was systematically designed to ensure that the program runs effectively, is easy to understand, and can be followed by all participants regardless of age or educational background. This method includes the stages of planning, implementation, facilitation, and evaluation (Sparby & Sacchet, 2025). Each stage is developed based on participatory,

educational, and applicative principles, allowing the community to directly experience the benefits of every activity conducted.

A. Planning Stage

This stage includes:

a) needs assessment,
b) curriculum design,
c) preparation of teaching materials,
d) coordination with local authorities.

Figure 1. Planning Stage
(Source: Official Doc.)

The team identified dominant stressors such as long working hours, financial pressure, and lack of mental health awareness. Based on this, physical activity and meditation were selected as the core interventions.

The planning stage served as the foundation for the entire program. Before deciding on the structure of the activities, the team conducted an informal assessment by engaging with community leaders, neighborhood coordinators, and several local residents. This initial assessment revealed that many individuals in Tulangan experienced stress related to work, financial pressure, family dynamics, and a lack of physical activity. Although the community was diverse in age and occupation, the majority shared common symptoms such as fatigue, irritability, poor sleep quality, and frequent headaches signs that pointed toward chronic stress and a lack of coping strategies.

Based on these findings, the team determined that the most effective and accessible interventions would be low-intensity physical activity combined with simple meditation techniques. These approaches were chosen because they align well with the daily routines and lifestyle patterns of the community. Moreover, both methods can be practiced without specialized equipment or financial burden, making them sustainable beyond the scope of the program.

The planning stage also included the development of learning materials, which consisted of slides, printed leaflets, demonstration videos, and guided meditation scripts. All materials were designed with user-friendly language and visuals to accommodate participants of varying educational backgrounds. Coordination with local government

officials ensured that the venue, schedule, and necessary logistical arrangements were prepared in advance.

B. Implementation Stage

Divided into four main sessions:

1) Psychoeducation Session

Participants learn about:

a) understanding stress,
b) early symptoms,
c) impacts on physical and mental health,
d) benefits of physical activity and meditation on the nervous system.

2) Physical Activity Training

Participants perform:

a) stretching,
b) light aerobic movements,
c) balance and flexibility training,
d) guided breathing exercises.

3) Meditation and Relaxation

Meditation techniques include:

a) 4–7–8 breathing,
b) body scan,
c) mindfulness sitting meditation,
d) grounding exercises.

4) Group Discussion and Reflection

Participants share their experiences, feelings, and changes after the exercises. The implementation stage consisted of three core components: psychoeducation, physical activity practice, and meditation training. These components were strategically sequenced to help participants first understand the concept of mental health, then experience the benefits of bodily movement, and finally achieve calmness and focus through guided meditation.

During the psychoeducation session, the facilitator introduced the concept of mental health using relatable examples. Participants were encouraged to openly discuss their daily routines, sources of stress, and emotional challenges. This approach created a safe and supportive environment, helping participants recognize that their experiences were shared by others and were entirely normal. The facilitator then explained how stress affects the nervous system, how it manifests physically and emotionally, and why interventions such as movement and mindfulness are effective.

The physical activity session served as a practical introduction to achievable exercises that could be performed at home. The movements included stretching, light aerobic routines, balance practice, and basic breathing exercises. Despite the simplicity, many participants reported immediate improvements in mood and body comfort, demonstrating the direct effects of increased blood flow and muscle relaxation.

Figure 2. Group Discussion (Source: Official Doc)

The meditation session became the highlight of the program. Participants followed a guided breathing meditation designed to help regulate heart rate, release mental tension, and cultivate awareness of the present moment. Even participants who had never meditated before were able to follow the instructions easily. Many described feeling lighter, calmer, and more emotionally grounded by the end of the session.

C. Follow-up Activities

1) WhatsApp monitoring groups,
2) digital handouts for home practice,
3) weekly reminders,
4) short-term impact observation.

To ensure that the benefits of the program extended beyond the event, the team established a follow-up system through a community messaging group. Participants received reminders, short audio clips for meditation, and weekly suggestions for physical activity. This step proved crucial in maintaining participant engagement and encouraging long-term practice.

D. Evaluation

Evaluations included:

1) participant satisfaction forms,
2) observation during sessions,
3) verbal feedback,
4) short self-report questionnaires.

Results showed improved relaxation, increased awareness, and interest in continuing the practices independently. The evaluation involved both direct observation and participant feedback. Most participants expressed satisfaction with the clarity of the material, the simplicity of the exercises, and the immediate sense of relief they experienced. The evaluation highlighted that programs like this fill a crucial gap in community well-being initiatives, especially in areas where mental health education is limited (Basso et al., 2019).

Figure 3. Evaluation
(Source: Official Doc.)

3. Results

The Community Service Program themed "Improving Mental Health through Physical Activity and Meditation in the Community of Tulangan District" was attended by thirty participants aged between 35 and 45 years. This age group represents a productive stage of life often associated with heavy responsibilities, demanding work rhythms, and a higher susceptibility to stress-related symptoms. Most participants were homemakers, informal workers, small-scale industry laborers, and employees in the service sector. Based on informal conversations and preliminary observations, many of them reported experiencing symptoms commonly associated with chronic stress, such as persistent fatigue, muscle tension, emotional instability, sleep disturbances, and irritability.

The program produced several important outcomes related to participants' understanding of mental health, their response to physical activity, the perceived benefits of meditation, and the combined impact of both interventions. These results provide valuable insight into how simple wellness practices can significantly influence psychological well-being in a community setting.

One of the most notable outcomes of the activity was the increase in participants' understanding of mental health concepts. Prior to the session, mental health was generally perceived as something associated only with severe psychological disorders. Everyday psychological strain such as stress, emotional exhaustion, or difficulty concentrating—was rarely recognized as part of mental health concerns. After receiving clear and contextual explanations during the psychoeducation session, participants demonstrated greater awareness of how stress manifests in daily life, how it affects the body, and why managing emotional balance is essential for overall well-being. The use of relatable examples and simple language made the material accessible to all participants, regardless of educational background (Clinic, 2020).

In addition to increased awareness, the physical activity session generated a strong positive response. The exercises were intentionally simple, consisting of stretching, rhythmic movements, breathing patterns, and light balance exercises. Despite their simplicity, the activities elicited visible changes in posture, body relaxation, and facial expression among participants. Many reported feeling lighter, warmer, and more energized after only a short period of movement. The experience underscored the physiological benefits of physical activity, particularly the release of endorphins and improved blood circulation that contribute to stress reduction and enhanced mood.

The meditation session became one of the most impactful parts of the program. For many participants, this was their first time experiencing structured mindfulness and guided breathing. Techniques such as 4–7–8 breathing, body scanning, and grounding helped them quickly reach a state of calm and mental clarity (Tangkudung, 2019). Several participants described the session as soothing and surprisingly eye-opening, noting how even ten to fifteen minutes of practice made them feel more centered and emotionally steady. These immediate effects mirror scientific evidence showing that mindfulness reduces stress by calming the amygdala and supporting nervous system regulation.

When combined with physical activity, meditation created a stronger overall effect. Gentle movement beforehand made it easier for participants to enter a relaxed meditative state, while meditation helped extend the sense of calm produced by exercise. This synergy highlighted the holistic nature of mind–body approaches and reinforced how closely physical and mental well-being are connected (Prasetiyo et al., 2022).

Another important outcome was the high level of community engagement. Participants stayed involved throughout the session, actively asking questions, sharing personal experiences, and reflecting on their emotional changes. The supportive environment encouraged collective understanding and helped normalize discussions about stress.

Post-program evaluations showed very positive responses. Participants reported feeling more relaxed, gaining clearer insight into mental health, and becoming more motivated to adopt healthier daily habits. Many expressed interest in continuing physical and mindfulness practices independently, and some even proposed forming small weekly practice groups an encouraging sign of potential long-term behavior change.

Overall, the findings demonstrate a clear need for accessible mental-health strategies among adults in Tulangan. Both movement and meditation proved effective, offering immediate benefits without cost or complex requirements (Singh et al., 2022). These results support existing research showing that physical activity boosts physiological resilience while mindfulness strengthens emotional regulation making their combination particularly powerful.

If continued regularly, these practices may help reduce long-term stress, improve sleep and mood, enhance productivity, and strengthen social connections within the community. The program also highlights how simple, low-barrier interventions can create meaningful change and how university-led initiatives can contribute significantly to community well-being. The enthusiasm shown by participants suggests a strong foundation for future wellness programs and a growing movement toward a more mentally resilient and physically active community.

4. Discussion

This community-based program set out to improve mental health among adults in Tulangan District through low-intensity physical activity and brief, guided meditation. Thirty participants aged 35–45 completed psychoeducation, movement practice, and mindfulness breathing in a single on-site session with short follow-up support. The results point to three core outcomes: (1) increased awareness of everyday mental health and stress processes, (2) immediate physiological and affective benefits from light movement, and (3) rapid calming and emotional regulation following brief meditation. Below, we interpret each finding, situate it in the prior literature, and consider limitations and directions for future work.

Increased mental health awareness

Participants shifted from viewing mental health solely as severe pathology to recognizing everyday stress, sleep disturbance, irritability, and fatigue as mental-health concerns that can be managed proactively. This matters because awareness is a gateway outcome: without it, communities are unlikely to adopt self-care practices or seek support. The change we observed aligns with health-education models showing that simple, contextualized psychoeducation increases perceived relevance and self-efficacy. In the introduction we noted that daily stressors in semi-urban settings are often under-recognized; our result directly addresses that gap by demonstrating that brief, plain-language sessions can recalibrate community mental-health literacy.

Immediate effects of light physical activity

Participants reported feeling “lighter,” “warmer,” and “more energized,” with visible relaxation of posture and breathing. These responses are consistent with a large body of research indicating that even short bouts (10–20 minutes) of low-to-moderate activity can elevate mood through increased circulation, reduced muscular tension, and acute endorphin and catecholamine changes. Prior work in adult populations similar to our age range has found comparable benefits for tension reduction and affect. Our observations converge with those findings and extend them to a community setting that required no specialized equipment, suggesting that accessibility—not intensity—may be the crucial lever for adoption (Ma et al., 2023).

Rapid calming after brief meditation

Guided breathing (e.g., 4–7–8), body-scan, and grounding exercises yielded fast, subjectively salient reductions in mental noise, with several participants reporting a sense of clarity and emotional steadiness within minutes. This is aligned with evidence that focused breathing and mindfulness practices downregulate sympathetic arousal and reduce amygdala reactivity, thereby improving moment-to-moment emotion regulation. Notably, most participants were first-time meditators; the immediacy of the effect highlights the suitability of very simple protocols for beginners in community contexts.

Synergy of movement and mindfulness

An important practical observation was the sequencing effect: light movement appeared to prime participants for easier entry into meditation (relaxed musculature, steadier respiration), while meditation seemed to prolong the post-exercise calm (Nazleen Abdul Rabu et al., 2022). Prior literature increasingly recommends combined or "mind-body" interventions for stress management; our findings reinforce that recommendation and illustrate a simple, time-efficient sequence that communities can adopt.

Comparison with previous research

The pattern we observed mirrors three well-established strands of evidence:

1. **Physical activity and mood:** Meta-analytic work shows small-to-moderate acute improvements in positive affect and reductions in tension after short activity bouts across adult samples. Our community participants reported comparable immediate benefits despite heterogeneity in fitness levels, suggesting that dose flexibility (gentle stretching, rhythmic movement, balance) is sufficient to realize affective gains (Chen et al., 2021).
2. **Mindfulness-based strategies:** Brief mindfulness and paced breathing are associated with reductions in perceived stress and improvements in emotional regulation. The strong first-exposure effect among our participants is consistent with studies showing that even single-session mindfulness can shift state anxiety and calm autonomic arousal (Broa & Abellanosa, 2023).
3. **Psychoeducation and mental-health literacy:** Community programs that translate clinical concepts into everyday language typically improve recognition of stress symptoms and increase willingness to use coping skills. Our shift in participants' beliefs fits this pattern and underscores the importance of culturally attuned examples (Wu et al., 2023).

Where our findings add nuance is the sequencing insight (movement → meditation) and the social ripple we observed (participants proposing weekly practice groups). While group-based effects have been noted elsewhere, seeing spontaneous organization in a semi-urban Indonesian district strengthens the case for community-led continuity rather than purely program-led follow-up.

Practical implications

Several actionable implications follow:

a) Keep it simple and sequence it. A 20–30 minute gentle movement block followed by 10–15 minutes of breathing-based mindfulness is enough to produce salient benefits for beginners.
b) Use plain language and local examples. Reframing mental health as daily balance (sleep, mood, irritability, fatigue) invites participation and reduces stigma.
c) Leverage group dynamics. Facilitated sharing and light social accountability (e.g., WhatsApp reminders, neighborhood practice circles) appear to support continued use.

d) Train local facilitators. Given the low complexity of the protocol, community health workers or motivated residents can be trained quickly to sustain practice without heavy external resources.

Research Limitations

This was a single-arm, single-session community program with self-reported outcomes and no control group. Effects were assessed immediately post-session; we did not collect validated pre–post psychometrics (e.g., PSS, GAD-7), physiological markers (e.g., HRV), or behavioral follow-ups beyond short reflections. The sample was small (N=30) and age-restricted (35–45), limiting generalizability to younger adults or older seniors. Selection bias is possible: attendees may have been more motivated or health-oriented than non-attendees. Finally, facilitator enthusiasm and group cohesion could have contributed to placebo or Hawthorne effects; without a comparison condition, causal attribution should be cautious.

Explain the limitations, strengths, and weaknesses of the research conducted. Clearly outline the challenges faced in the research and the study's strengths. Briefly describe any major limitations that may affect the interpretation or generalization of the results.

Directions for Future Research

Future work can address these limitations and extend the contribution in several ways:

1) Use a pre–post controlled design with validated scales of perceived stress, sleep quality, mood, and emotion regulation, and—where feasible—physiological indices (resting HRV, resting blood pressure).
2) Test maintenance and adherence with multi-week follow-ups (e.g., 4–8 weeks) to track habit formation, frequency of home practice, and functional outcomes (sleep, productivity, social connection).
3) Compare formats and sequences, e.g., movement-only, meditation-only, and combined; seated versus walking meditation; morning versus evening sessions.
4) Tailor for subgroups, including participants with chronic pain, high baseline anxiety, or shift-work schedules; evaluate accessibility adaptations (chair-based movement, shorter bouts).
5) Train community facilitators and assess scalability: evaluate whether lay-led groups retain effectiveness relative to expert-led sessions and what minimal training ensures fidelity.
6) Economic evaluation to estimate cost per participant and potential savings (e.g., reduced primary-care visits for stress-related complaints).

5. Conclusions

The community program “Improving Mental Health through Physical Activity and Meditation in Tulangan District” demonstrated that simple, accessible interventions can produce meaningful improvements in emotional well-being among adults aged 35–45. Through psychoeducation, guided movement, and meditation, participants gained new understanding of mental health and experienced immediate physical and psychological benefits.

The program successfully broadened participants’ perceptions of mental health, helping them recognize that daily stress, fatigue, irritability, and emotional tension are important indicators of psychological well-being—not just severe disorders. This shift in awareness is a key outcome, as it increases openness to self-care and reduces stigma surrounding mental-health discussions.

Light physical activity provided quick physiological benefits, including reduced muscle tension and improved mood. Similarly, meditation offered a calming and clarifying experience even for first-time practitioners. Techniques such as paced breathing, body scanning, and grounding helped participants regulate their emotions and achieve a sense of centeredness within minutes. These outcomes are consistent with existing research showing the effectiveness of movement and mindfulness in reducing stress.

The combination of physical activity and meditation created a powerful integrated effect, enhancing relaxation and making mindfulness easier to access. Participants remained highly engaged throughout the session, showing curiosity, openness, and a strong willingness to adopt the strategies introduced. Several even proposed forming small community practice groups, indicating the potential for long-term habit formation.

Overall, the program highlights the need for practical, low-barrier mental-health strategies within the Tulangan community. The success of this intervention demonstrates that universities can play an impactful role in supporting community well-being through evidence-based, culturally appropriate approaches. With continued practice, the methods introduced here have the potential to strengthen mental resilience, improve daily functioning, and support healthier community living.

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Conflict of Interest

The authors declare no conflict of interest.

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