

# Features

## Missing the Forest for the Trees? Yoga Therapy's Promise as a Transformational Practice

By Michael Lee

Yoga professionals today are fortunate to be entering an era of greater acceptance of the practices as valid contributors to healthcare. Our profession is enjoying an upsurge of interest from many quarters, with yoga being recognized as good for just about everything. In fact, a Google search on “yoga for \_\_\_\_\_” will pull up hundreds of articles, research studies, opinions, and blogs—yoga for anxiety, yoga for depression, yoga for stress relief, yoga for cancer, yoga for arthritis, yoga for core strength, and yoga for trauma, to name just a few. Some of these links send us to scholarly research papers and some lead to anecdotal opinions on blogs or to experiential observations. Some stand up to careful scrutiny and some do not. Regardless of the depth or validity, they all serve to help advance the popularization of yoga.

As wonderful as all this may seem, some distinct long-term effects may not be in the best interests of the profession, given its origin and traditional purpose. The more careful studies are clearly making a great contribution to our body of knowledge, but this article seeks a balanced understanding of the benefits of “yoga for” and the potential downside impact on our profession.

### Research Needs, Unintended Consequences

The “yoga for” phenomenon in the research world is generally geared toward determining whether there is any significant benefit to the application of fairly *specific yoga practices for a specific condition*. Research is easier when the variables are limited. Partly as a result, we often find just one or two generic techniques being applied to a condition. Measurement in research studies is also often limited to a few outcomes. Some studies include sequential follow-up measurements over time, but a lack of funding means that many do not. The long-term effects of an intervention are therefore often unknown. Of more relevance from a yoga perspective, this exclusive focus on discrete effects ignores the reality of the yoga of Patanjali, clearly defined as a transformational process based on a different paradigm.

This limited view gives rise to the second, and perhaps more significant, impact. The focus on the evaluation of yoga using a cause-and-effect model tends to discount the potential of yoga to address the complex issues underlying the condition being studied. This matrix of variables is unique to each individual included in any study, and yoga has the potential to work with all or most of the variables by engaging the client in an approach that can create a unique transformational outcome.

### A (Much) Bigger Picture

In their 2015 book, *The Eight Limbs of Yoga: A Handbook for Living Yoga Philosophy*, Stuart Ray Sarbacker and Kevin Kimple point to the “great potential for self-transformation through yoga” and its capacity “to transform one’s relationship with the world in profound

ways.” This kind of outcome is not unique to yoga and is widely referenced, for example, in contemporary psychotherapy practices, such as the memory reconsolidation process in coherence therapy as expounded on in *Unlocking the Emotional Brain: Eliminating Symptoms at Their Roots Using Memory Reconsolidation* by Bruce Ecker, Robin Ticic, and Laurel Hulley. Interestingly, this approach is also described as “pro symptom,” meaning that the client’s symptoms are not seen as something to be fixed but rather as something to be embraced as the key to transformation.

Considering an example study is useful for illustrating the above distinctions. This study was not chosen because of its solid approach to research or for any lack of rigor. It was chosen mostly because it provides a fairly typical approach that best serves to illustrate the conversation.

Published by Azadeh Nemati in the *International Journal of Yoga* in 2013, “The Effect of Pranayama on Test Anxiety and Test Performance” examined the results of participants in an experimental group who were given a relatively simple three-part breath technique varying from 3 minutes at the beginning to 10 minutes at the end of a semester-long study. This was administered at the beginning of each class. The outcome showed that only 33% of the experimental group experienced test anxiety symptoms compared to 66% in the control group. Nemati concluded: “Pranayama seems to have a significant positive effect on test anxiety and test performance. It could be used as an important technique by students prior to their examinations, to reduce their test anxiety and increase their test performance.”

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There are a few ways one might interpret the results, and the above conclusion is one of them. This interpretation suggests a desirable and valuable result, and certainly anyone with test performance anxiety would be wise to try the technique. On the other hand, some 33% of the experimental group still showed symptoms of anxiety and were not helped significantly but a different percentage of the entire number of people in the study clearly were. This would be a satisfying batting average but a terrifying percentage for a brain surgeon. For the yoga therapist or psychotherapist working with anxiety, although the technique might be worth inclusion in one’s repertoire of practices, it does not seem to offer a lot of promise for at least a third of clients—at least for clients similar to those studied. On the other hand, a more comprehensive, multifaceted, and multidimensional transformational approach might result in better outcomes if it were part of a skillfully led process.

Interestingly, the pranayama study described discusses the different kinds of anxiety and how test anxiety fits the category of situation-specific anxiety. Although broadly classifying condition

states can be useful, from the point of view of a transformational therapist it simply puts a label on a box full of many different colored objects of various shapes. In conventional medicine and therapies, it is symptoms that are most generally used to label a condition. This outlook conflicts with the transformational paradigm. Rather than work with defined and labeled conditions or diagnoses, the transformational therapist sees each symptom as unique to an individual. There are no two conditions exactly the same. Each “anxiety,” or rather “manifestation of what is happening,” remains unique and fueled by different “conditions arising,” as described in the ancient Vedic and Buddhist theories of dependent origination and discussed in Rupert Gethin’s 1998 book *The Foundations of Buddhism*.

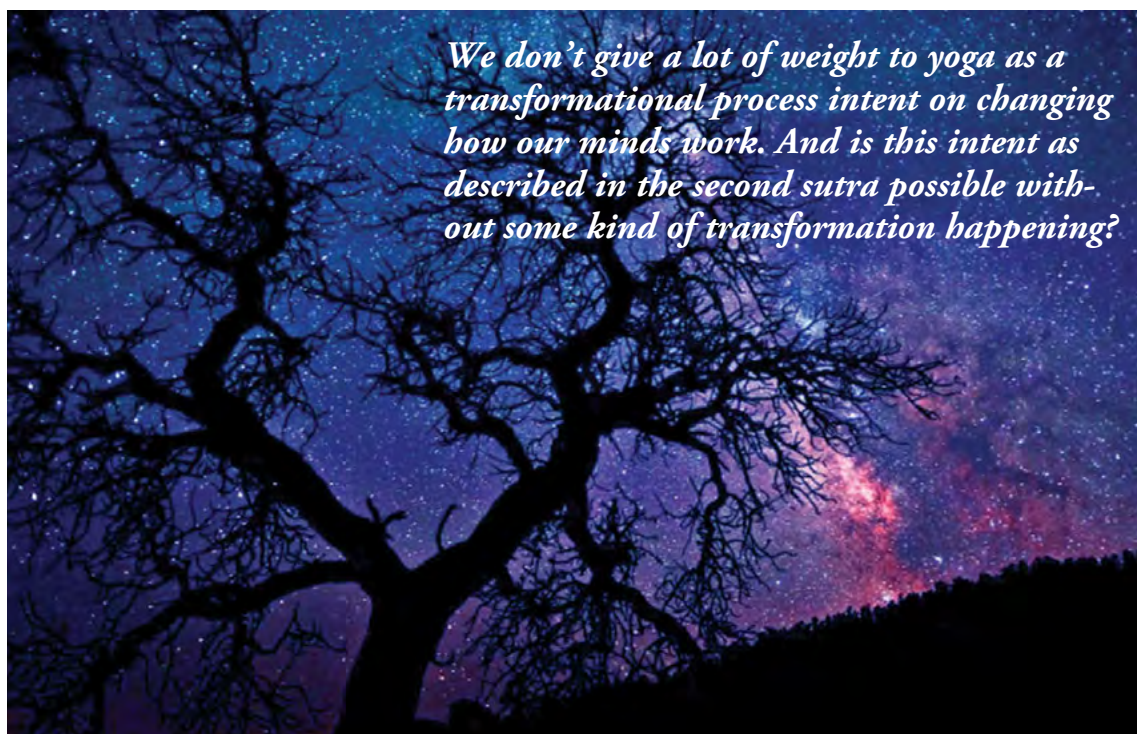
Although the study demonstrates that a significant number of subjects in the experimental group were able to ameliorate symptoms of anxiety (at least in the short run), there was little evidence to suggest lasting change. This is not surprising, given that the study did not include long-term follow-ups, but perhaps more importantly, we also have no evidence to suggest a fundamental shift in the belief system underlying the anxiety for any of the participants.

Such limitations do not diminish an understanding of the potential benefit to be gained by overcoming test anxiety and even scoring better on a test as a result. In essence, though, it does raise the question for the yoga therapist in relation to role. Is our job to create lasting and profound change (transformation) or to alleviate the negative effects of symptoms in at least the short run? Or is it perhaps both?

Let’s go to Patanjali as a backdrop for yoga in the modern world and along with it the practice of yoga therapy. His second sutra offers a fairly clear and unambiguous definition and intent of yoga: *Yogas citta vrtti nirodha*. (Yoga is the ceasing of the modifications of mind.)

If this is so, then yoga is very much a psychoemotional practice. Patanjali seems to give a lot of emphasis to this in the rest of the sutras, where we find the condition and workings of the mind as the main focus. Contemporary yoga therapy (as evidenced by the focus of research) seems to be fairly selective in its adoption of Patanjali’s wisdom. We love to focus on practices and proving what certain practices will do to alleviate the symptoms of certain conditions. We don’t give a lot of weight to yoga as a transformational process intent on changing how our minds work. And is this intent as described in the second sutra possible without some kind of transformation happening?

To really cease our mental gymnastics, we must surely need to see things differently. This state certainly can’t be achieved purely through the exercise of will, and perhaps it is also not easily achieved through practices alone. Along with the practices, some kind of major shift in one’s way of being is required. Through practice alone, this generally takes most of a lifetime and possibly a monastic setting. It can also be catalyzed—sometimes quickly—through a life-changing or belief-shifting experience, and not only through yoga alone. Edgar Mitchell was reported as having a *sankalpa samadhi* experience on his way back from the moon in 1971. Previously referenced coherence therapist Bruce Ecker believes that one can reshape and reframe past experience through a transformational memory reconsolidation process. Following the experience of this kind of process, symptoms virtually disappear. Cognitive behavioral therapy rests on the idea that beliefs can be changed and that, as a result, behavior can be changed.



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If we take Patanjali’s intent and overlay upon it the understanding of how behavior changes and source certain elements and processes from contemporary psychotherapy, we may in fact end up with a form of contemporary yoga therapy that is even more effective in supporting the intent of Patanjali than a lot of ancient practices that are usually found to be most effective in an ashram setting and that show limited success at bringing about life-changing and lasting improvement for people in our modern world. If, because of our preferred focus on research-based cause-and-effect outcomes, we limit our practice to alleviating symptoms, we may be missing the potential of yoga therapy to bring about the kind of transformation resulting in the disappearance of symptoms altogether.

Ananda Balayogi Bhavanani in his keynote at the 2018 SYTAR asked, “Are we practicing yoga therapy or ‘yogopathy?’” He defined yogopathy as the kind of medical-model approach to yoga therapy that focuses mainly on alleviating symptoms. We might ask whether our own research and practice support yogopathy at the expense of transformational yoga therapy.

## Questions for the Field

One might well say that any doorway to the path of yoga is a good one and that sooner or later many will be drawn toward the more transformational aspects of the practice. This is a reasonable argument, as all of us who have been involved for any length of time know our own journey began in a different place than where we are now. However, once the transformational interest arrives for yoga students, do we have sufficiently aware, knowledgeable, and skilled yoga therapists to safely and effectively support clients in engaging open-ended transformational processes? The traditional guru-disciple ashram-based method of transmission is increasingly uncommon, and many who are now awakening seek to apply the therapeutic transformational pursuit of yoga in everyday life.

Becoming trained to facilitate a transformational process-based form of yoga therapy requires a lengthy, comprehensive, and personal—as well as professional—training perhaps not found in many of our current yoga therapy programs. The application of techniques to manage symptoms is not only easier to teach but also very appealing to someone looking for a quick and simple solution.

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Yet the signs pointing out the need for a transformational approach are becoming more evident as our world falls further into separateness, divisiveness, and more disturbing “modifications of the mind.” The alarming increase of school shootings and the rise in the suicide rate among teens, not to mention the state of tension in the United States and the world, suggest that we are badly in need of some lasting transformation at a personal, societal, and global level, and it may explain the huge upsurge of interest in mindfulness and dharma centers throughout the world. In those places, transformation is clearly the focus, whereas our yoga studios usually still focus on fitness and in most of our yoga therapy practices we focus on symptom management. And so the gold nugget of yoga therapy—its capacity to be a catalyst for meaningful and lasting transformational change—remains largely hidden. Perhaps it is time for our researchers to look at this possibility and develop creative ways of demonstrating this effectiveness that can accommodate more open-ended and multifaceted processes instead of linear applications for prescribed and relatively simple practices.

One of the benefits of relatively straightforward yoga-for-\_\_\_\_\_ protocols is that they can be generally administered by a technician and are therefore easier to take to the masses. This in turn makes it possible to serve many with the benefits of yoga and to take a lot of the mystery out of the practice. At the same time, this limited approach tends to *lead* to more technicians—and fewer artful and skilled therapists who can craft individual experiences suited to the unique nature of each client.

When IAYT and other yoga institutions seek to further the reach of yoga therapy, the field of research has been seen as one of the key vehicles. Here we can showcase yoga therapy to the world and point to its effectiveness to contribute to mainstream healthcare as a legitimate player. And although this appears to only elevate the

professional standing of the practice, it may also diminish it. Professions with limited skills that require the delivery of relatively simple protocols, like learning a breathing technique, are generally not elevated to the same status as doctor or therapist, to which many yoga therapists aspire. The yoga therapist who can help catalyze transformational change, for example, would argue that their work is just as complex and perhaps even more holistic and all-encompassing than that of general practitioners, nurse practitioners, or counselors. Patanjali didn't break down aspects of yoga to be allocated to different professions and perhaps never intended it to be delivered as simple protocols, either. Yoga was one all-encompassing practice—for mind, body, spirit, emotions, and life in general. And those of us who have experienced its depth know that yoga still is this and will remain that way if engaged as a transformational process.

There is little argument regarding how wonderful it is that some yoga techniques, like a short pranayama practice, are relatively easy to apply and are gaining support through research and becoming more widely used and accepted. At the same time, showing a single face of yoga therapy—as symptom management primarily—could not only limit the deeper understanding and acceptance of the work that is possible but could also make it impossible to envisage yoga therapy's practices as they were intended. This potential for yoga to transform lives, as seen by the sages like Patanjali, may very well be more in alignment with what our world needs right now. For that reason alone, this life-changing and potentially world-changing aspect of yoga therapy needs greater study, consideration, and focus as we take yoga therapy into our modern world. **YTT**



Michael Lee, MA, DipSocSci, C-IAYT, E-RYT ([michaellieyoga.com](http://michaellieyoga.com)), founded Phoenix Rising Yoga Therapy (<http://pryt.com>) in 1986 based on his own experiential learning and the integration of traditional yoga practice and philosophy with elements of contemporary psychology. He is the author of Phoenix Rising Yoga Therapy—

Bridge from Body to Soul and Turn Stress Into Bliss.

### Additional Resources

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