

## Research Summary

Schrader, J. *The Use of Yoga Therapy as a Complementary/Alternative Therapeutic Practice in Patient Care, 2008*

The aim of this pilot study was to gain insight into the referral patterns of selected health professionals to yoga teachers/therapists; to gain an understanding of their opinions and attitudes toward the use of Yoga and Yoga Therapy as a CAM therapeutic practice; and their opinions regarding professional qualifications and standards for yoga therapists.

The research comprised a questionnaire which was sent to chiropractors, general medical practitioners, naturopaths, osteopaths and physiotherapists within the Eltham and Greensborough districts in Melbourne, Australia.

Overall the results show a favourable view of yoga therapy as a useful CAM therapy, particularly for a range of physical and psychological conditions, and the preference for yoga therapists to be appropriately trained and accredited.

### Referral Patterns and Methods

The majority of respondents (83%) had recommended yoga to their patients indicating a high level of general acceptance of yoga within healthcare practice.

However in relation to the 83% of respondents who had recommended yoga to their patients these recommendations were generalised and non-specific in relation to both teacher and/or style.

Generally yoga was seen to be of most benefit for a range of physical and psychological conditions rather than for spiritual or self development, reflecting a common perception of yoga being mostly asana and relaxation/meditation.

The most common conditions for which yoga was referred were anxiety disorders, musculo-skeletal degenerative disorders, other general muscular disorders, mood disorders and sleep disorders.

## Yoga Therapy and General Yoga Teaching

Whilst it is generally accepted that all yoga is therapeutic, this study aimed to look at yoga therapy as distinct from general yoga teaching. Therefore, an explanation of yoga therapy was provided to respondents to explain the differences between the two areas.

83% of respondents felt that they understood differences between yoga therapy and general yoga teaching, and when asked about the validity and usefulness of both areas as complementary therapeutic practices to their own modality there was no huge difference in their positive responses – 88% for yoga therapy and 80% for general yoga teaching. This suggests that practitioners realise the therapeutic benefits of yoga therapy in a personalised one-on-one situation for some people, and the benefits in a more general group setting for others.

## Yoga Therapy Practices

Assessment and treatment through asana and pranayama were selected as the yoga therapy practices considered to be of most benefit to patients.

The practices seen to be of less benefit were yogic psychological support and counselling, and yogic diet and lifestyle.

Spiritual/self development and wholistic assessment and care were also areas seen to be of less benefit. This suggests a lack of understanding about the range of practices and principles of yoga, yoga's basis as a spiritual practice and the relationship between health and spiritual wellbeing. This was also an interesting finding given that other research has shown that use of complementary therapies is increasing, and that a perceived lack of 'holism' in western medicine has been a central reason why people increasingly look outside the bi-medical model for their healthcare (Penman 2008, pg 231).<sup>1</sup>

## Professional Considerations

Most respondents had strong views about a high level of professionalism, training and knowledge needed by yoga therapists.

- **Qualifications**

86% of respondents felt that post graduate yoga therapy training with a government accredited training facility was the preferred method of gaining qualifications. Only 13% felt that a personal apprenticeship and/or overseas training was desirable, even when deemed appropriate by a yoga therapy industry body. Only 2% felt that no training over and above that of a yoga teacher was required, and no respondents felt that non-accredited short courses for specific conditions were acceptable as a form of qualification.

- **Knowledge, Skills and Experience**

A minimum of 3 years accredited experience was selected by 75% of respondents, followed by a range of skills: basic knowledge of psycho pathologists and patho-physiologies (69%), health assessment skills (63%), basic bio medical language (55%) and therapeutic relationship skills (50%).

Counselling and research skills did not appear to be as highly desirable (47% and 16% respectively).

- **Professional Standards**

80% of respondents felt that certification by a yoga therapy industry association was required, and 63% felt that certification should be subject to ongoing professional development.

63% also felt that yoga therapists need to subscribe to an industry Code of Ethical Practice.

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1. Penman S, et al, *Yoga in Australia: Results of a National Survey*, <http://www.yogainaustralia.com/mentalhealth.pdf>, cited June 2008