

Perspectives and Issues in Yoga Therapy

Why Ayurvedic Yoga Therapists and Why Now?

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Abstract

IAYT has paved the way for yoga therapy as a healing profession to grow and develop its mission to deliver optimal therapeutics via individual sessions and tailored group classes. For the past five years, the National Ayurvedic Medical Association (NAMA) has been working behind the scenes to consider the value and definition of an ayurvedic yoga therapist (AYT) professional designation within the yoga therapy discipline. The AYT designation would complement the current standards for yoga therapists that have been published by IAYT. The purpose of this paper is to discuss (1) why the AYT designation is important; (2) how it supports and expands on IAYT's mission; and (3) why now is the appropriate time to develop competencies, standards, and a scope of practice for ayurvedic yoga therapy.

The field of yoga therapy is developing quickly as a profession. Though we are now celebrating 25 years of IAYT, it is in the last 10 years that there has been strong momentum to develop the discipline—complete with standards, competencies, and accreditation of schools. This last decade of work has been a clarifying force, allowing yoga therapists to differentiate themselves from the yoga teaching profession and to carve out a professional identity that is both distinct from and complementary to what has come before.

IAYT has paved the way for yoga therapy as a healing profession to grow and develop its mission to deliver optimal therapeutics via individual sessions and tailored group classes. For the past five years, the National Ayurvedic Medical Association (NAMA) has been working behind the scenes to consider the value and definition of an ayurvedic yoga therapist (AYT) professional designation within the yoga therapy discipline (NAMA, 2015). The AYT designation would be separate and distinct from but complementary to the current standards for yoga therapists that have been published by IAYT (IAYT, 2012). As a member of the NAMA subcommittee that has been doing this work, I would like to offer my perspective on: (1) why the AYT designation is important; (2) how it supports and expands on IAYT's mission; and (3) why now is the appropriate time to develop competencies, standards, and a scope of practice for

ayurvedic yoga therapy. The following comments reflect 16 years of experience as a yoga therapist integrating the disciplines of ayurveda and yoga; I have seen firsthand what becomes possible for patients when the two knowledge streams are combined to inform diagnosis and treatment.

Science is not a monolithic entity and biomedicine is one among many scientific perspectives that has merit. When considering the fit between a system of healing and its medical theory and philosophy, we should consider the historical relationship between the healing discipline and the causal theories being used to explain its outcomes. There should be parity between ideas about the important aspects of diagnosis and treatment and how patient outcomes, both subjective and clinical, are considered and addressed. Ayurveda is a comprehensive medical science that developed historically alongside yogic approaches to health; their trajectories have remained intertwined. Ayurvedic theories of anatomy, physiology, psychology, and spiritual causality are woven into yogic science and its therapeutic modalities—implicitly and often explicitly. The evidence base for yoga therapy and ayurveda generated by Western researchers is growing, but biomedical outcomes are not sufficient to capture the wide-reaching, multifaceted effects of yoga therapy. Integration of ayurvedic medicine into the explanatory models of yoga therapy infuses diagnosis and treatment with a comprehensive theoretical and applied scientific framework for interpreting and improving patient outcomes—physical, emotional, and psychospiritual.

While it would be appropriate to consider an ayurvedic yoga therapist to be a type of yoga therapist and it would be correct to consider an ayurvedic yoga therapist a type of ayurvedic health provider, it would nevertheless be incorrect to assume that ayurvedic yoga therapy could be delivered by either of these professionals without additional training. The knowledge of both ayurveda and yoga therapy required for ayurvedic yoga therapists to perform their professional duties involves a breadth and depth of knowledge that assumes but does not duplicate the core competencies of both the yoga therapist and the ayurvedic health counselor. The integration of these two bodies of knowledge is opti-

mized when they are learned together to form a powerful diagnostic rubric and synergistic therapeutic approach.

The uniqueness of this combined skill set does not currently exist as a defined set of professional abilities. Yet this professional skill set provides an integrated mechanism for yoga therapy to be delivered within its original medico-therapeutic context and according to indigenous scientific principles that are consistent with ancient yogic texts. In this scenario, relevant biomedical information would be utilized to assess and inform the treatment of musculoskeletal disorders, while ayurveda would be used as the primary medical paradigm to classify the nature of imbalance and disorder and identify optimal treatment. Whether ayurvedic medicine or biomedicine provides the context for the application of yogic healing methods, the methods remain the same—*asana*, *pranayama*, meditation, *yoga nidra*, *mantra*, *mudra*, etc.—but the lens through which the methods are selected, applied, and evaluated focuses on different qualities and a different scope of patient experience and feedback. Through either lens, the objective continues to be whole-person healing initiated through the application of traditional yogic tools. Biomedicine can help to inform the musculoskeletal diagnosis and treatment model, an important part of the equation for any yoga therapist but a limited part of the equation in terms of the multi-faceted causes that yoga recognizes as contributing to imbalance or as catalysts for the healing process.

An ayurvedic yoga therapist would use ayurvedic medical science as the entry point to understand and contextualize the patient's condition. This knowledge base cannot be viewed as an add-on to yoga therapy but should be delivered as an integrated curriculum that emphasizes proficiency in assessing the patient and diagnosing the condition through the scientific medical theory of ayurveda. The comprehensive assessment paradigm offered by ayurveda accounts for physiological symptoms as well as their psychospiritual and energetic precursors; it provides the broadest spectrum of causal links to yogic treatment approaches. Ayurvedic science also provides pivotal information about the patient's constitution/imbalance profile that offers a sophisticated context for tailoring yoga therapy to the individual patient and selecting the yogic treatment methods that will provide maximum therapeutic impact. Of course, the physical and mental capacity of the patient and their familiarity with yoga are critical in any yoga therapy paradigm, but understanding the patient's constitution allows the therapist to quickly ascertain information about the depth and trajectory of the current disorder and associated conditions, all emanating from a shared root cause. An AYT would collect these data through conventional assessment techniques learned by all yoga therapists, which would then be enhanced by diagnosing features of the pulse, tongue, face,

lips, nails, and eyes. An AYT would inquire into features of urine, stool, sputum, sweat, and speech, and would also consider season, climate, time of day, and direction when developing a yoga therapy regimen. Through an understanding of the patient's constitution/imbalance profile, ayurvedic phenotyping provides enhanced opportunities for tailoring yogic treatment, thereby increasing compliance with the therapeutic regimen, as well as the patient's multi-layered understanding of their condition. An Ayurvedic understanding of the illness trajectory informs optimal collaborations with healthcare providers, and promotes quality of life contextualized by family, community, and environmental influences.

The goals of yoga therapy include eliminating, reducing, or managing symptoms that cause suffering; improving function; helping to prevent the occurrence or re-occurrence of underlying causes of illness; and moving toward improved health and wellbeing. Yoga therapy also helps clients/students change their relationship to and identification with their condition. An IAYT article from 2007 on legal and policy issues related to yoga therapy quoted an interview with Brownstein: “Yoga Therapy consists of the application of Yogic principles, methods and techniques to specific human ailments. In its ideal application, Yoga Therapy is preventive in nature, as is Yoga itself. But it is also restorative in many instances, palliative in others, and curative in many others” (Cohen, 2007; p. 47). This acknowledgement of the scope of yoga's therapeutic potential calls out for an approach that includes a comprehensive assessment paradigm grounded in sound medico-scientific logic that is innately consistent with yogic principles and practices. Ayurveda provides this paradigm. Adopting the causal theories of Western allopathic medicine as explanatory frameworks for the outcomes of yoga therapy has proved to be an awkward fit—one impoverished in its explanatory potential given the wide-ranging effects of yoga as a healing discipline and its impact on all aspects of body, mind, and spirit.

There are many indicators within the yoga therapy community that the time is ripe for an ayurvedic yoga therapist designation. In IAYT's 25th anniversary issue of *Yoga Therapy Today*, Richard Miller acknowledged the desirability of specialization within yoga therapy. The recent publication of *Yoga Therapy & Integrative Medicine* includes dozens of discussions of the relevance of ayurvedic science for yogic treatment approaches, heralding an acceptance of the need for integrating this profound indigenous medical context as the profession moves forward. *Yoga Therapy & Integrative Medicine* promotes the perspective that yoga therapy includes ayurveda and an understanding of the individual constitution of the patient, a feat that cannot be achieved through minimal training. The NAMA standards for the

ayurvedic yoga therapist professional designation currently under development endorse and expand on this perspective.

What if the reason an individual is not progressing with their yoga therapy regimen is because their tissues are not properly nourished and therefore the healing process is difficult to catalyze? What if the level of toxicity in their body and mind are impeding the flow of energy and fluids through the channels of the body, to the point that awareness is compromised, the nervous system is on high alert, and the pain cycle cannot be interrupted under these conditions? What if the metabolic fire in the digestive tract, organs, and tissues is sluggish or excessive, thereby creating stagnation or depletion of immunity? The individual may get poor results from yoga therapy unless these other conditions are addressed. An ayurvedic yoga therapist will be trained to assess these underlying conditions and circumstances and create diet and lifestyle guidelines and recommendations for the use of culinary herbs and oils that will promote quicker and more sustainable progress along the therapeutic trajectory. The ayurvedic yoga therapist will not include the entire scope of practice of an ayurvedic practitioner or ayurvedic doctor. There will be limitations on the scope of practice recognizing the centrality of yogic approaches that are patient-centered, less invasive, economical, and focused on establishment of sustainable self-care routines. The clinical encounter will be more supportive than directive.

In *Yoga Therapy & Integrative Medicine*, there are many references to the centrality of ayurveda for the optimal application of yoga therapy. The introduction asserts that “Yoga Therapy takes into consideration the complete state of one’s health in terms of physical conditioning, emotional state, energetic balance, attitude, dietary and behavioral patterns, personal associations and relationships, and the environment” (Payne, Gold, & Goldman, 2015; p. 2). The diagnostic practices and treatment protocols of ayurveda, when combined with yoga therapy, comprise a powerful—and powerfully relevant—approach to this comprehensive and synergistic definition of health. The first chapter of the book states, “Ayurveda concerns itself with the health of the body while Yoga’s essential focus is ultimately transcendental... physical illness impedes the practice of *samadhi* and must be assessed within the context of the practice (ibid).” According to Tara Gold, the *Hatha Yoga Pradipika* concerns itself with establishing and maintaining healthy digestive fire, addressing doshic imbalances, and curing physiological disorders in the organs and tissues of the body (ibid). Reference to the ayurvedic *doshas*, *agni*, *ama*, and their foundational therapeutic importance demonstrates the need for a branch of yoga therapy that integrates ayurvedic education at a level beyond the introductory standards established by IAYT in 2012 (IAYT, 2012).

In the effort to secure insurance reimbursement for yoga therapy, the ayurvedic yoga therapist can be a key contributor to the dialogue. When asked what a yoga therapist can offer that a physical therapist cannot, we can answer this question definitively and with confidence, demonstrating a comprehensive therapeutic approach, internally consistent in its principles of cause and effect. The ability to diagnose and treat on multiple layers, determine the essence of imbalance, and focus on eradicating root cause—addressing physiological, psychoemotional, and spiritual precursors of disease—confers an unmatched therapeutic relevance and power. The fact that ayurvedic medicine offers an internally consistent diagnostic paradigm in accordance with the therapeutic principles of yoga therapy—while expanding their depth and breadth—is something no other medical system can offer the discipline of yoga therapy. As yoga and ayurveda have developed symbiotically over the millennia, they have likewise increased each other’s healing potential and offer the patient a perspective that increases the chances of success in addressing their conditions at the levels of prevention, risk reduction, management, and cure.

I have been asked whether this new designation would confuse the public, who may only now be increasing their awareness of yoga and yoga therapy. This is like asking the average person to distinguish between an occupational versus a physical therapist. Most would not know where to start. This is because it is not the responsibility of the individual patient to know what type of practitioner they need. It is the responsibility of the healthcare provider community to provide appropriate referrals for patients. As trained professionals, yoga therapists should know what type of provider could enhance a patient’s healing and with whom it would be best for them to collaborate. A key activity of any health professional is referral, particularly primary care providers. For this reason, the yoga therapy community should increase its interaction and dialogue with primary care providers of all types—not just physicians, physician assistants, and nurse practitioners, but also naturopathic physicians, chiropractors, midwives, Chinese medicine doctors, and ayurvedic practitioners. It will not confuse the public to have the opportunity to work with more than one kind of yoga therapist. On the contrary, it will advance the profile of yoga therapy and highlight the breadth of its knowledge base and the potential to improve patient outcomes. It will help build awareness of the availability of well-qualified yoga therapists and increase the demand for and integration of yoga therapy in health care. When my mother had a stroke, she received care from both an occupational therapist and a physical therapist. She was not confused by this but trusted that they would work together to support her recovery. The occupational and physical therapists saw their roles as collaborative and complementary

and, by virtue of this, patient care was optimal. Likewise, ayurvedic yoga therapists and the rest of the yoga therapy community will work together in a collaborative spirit to enhance the care and recovery of their patients and the public would benefit immeasurably as a result.

The NAMA ayurvedic yoga therapist professional curriculum is currently slated to include 1,000-1,200 hours of training. NAMA would like to work together with IAYT so that completion of the curriculum includes certification as a yoga therapist as well as certification at the 750-hour level of an ayurvedic wellness counselor. This dual certification will comprise a comprehensive professional training program that will produce well-integrated professionals capable of addressing the complete spectrum of healing objectives: health promotion; prevention of disorders; risk reduction for individuals with predisposition to an illness; disease treatment; and management of chronic conditions. Gold stated that yoga is intended to be used for healthcare, not sick care. It is the integration of ayurvedic theory and practice that expands the scope of practice of yoga therapy into the realm of “sick care” (Payne, Gold, & Dolman, 2015). As a comprehensive system of medicine, ayurveda extends yoga therapy into the realm of disorder, disease, and management of chronic conditions. The ayurvedic yoga therapist will be an ally and colleague of all other yoga therapists working towards shared goals, a shared mission, and enhancing the profile of yoga therapy with other mainstream and holistic healthcare providers. Ayurveda has an excellent safety profile as a medical system that is focused on providing the foundation for catalyzing self-healing mechanisms in the body and mediating the positive or negative impact of environmental influences and self-awareness. What medical science could be more consistent with the yogic therapeutic approach in terms of both theoretical and clinically applied ideas about cause and effect?

Western medical science has acknowledged the critical impact of the mind-body-environment connection in health and wellness via discussions of neuroplasticity and epigenetics. Ayurveda and yoga have long recognized the centrality of positive mental habits, stress reduction, good relationships, and self-awareness in promoting health and alleviating suffering. As much of yoga therapy focuses on behavior change and sustainable lifestyle modification along with physical activity, yoga therapists are critical collaborators in the campaign to improve public health. Behavior change can be viewed via a contagion model in which individuals who engage in behavior change influence families, friends, and other community members to adopt healthy behaviors and establish new lifestyle regimens that maintain health over time. Even the most physically compromised patient may benefit from undertaking meditation, mantra, mudra, yoga nidra, or ritual practices. Ayurvedic medicine

contextualizes all of the subtle and energetic aspects of yogic practice through a comprehensive scientific medical paradigm that has stood the test of time. Awareness of ayurveda and yoga in the West will continue to expand—as will the evidence base—and the time is ripe for these two healthcare disciplines to reestablish their historical alliance as therapeutic allies for optimal health and healing. My hope is that IAYT and NAMA will come together to advocate for both disciplines as they are practiced separately and as they may be practiced in an integrated fashion in the ayurvedic yoga therapist training and certification. The ayurvedic yoga therapist (AYT) professional designation is the natural outgrowth of a robust and developing profession, allowing for specialized knowledge that will optimally address the concerns of health seekers and communities, focused on sustainable and integrated mind/body/spirit wellness.

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