NURTURING THE WHOLE SELF THROUGH YOGA: YOGA, THE 12 STEPS & ADDICTION RECOVERY

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A MANTRA FOR PROFESSIONAL HELPERS
THE MEDICINE BUDDHA MANTRA

TADYATHA OM BEKANZIE
BEKANZIE MAHA BEKANZIE
RANDSA SAMUNGATE SOHA

May I live to heal myself, heal others, and to help all living beings find freedom from suffering
OVERVIEW

INTRO & FILM
YOGA & YOGIC PHILOSOPHY
ADDICTION & 12 STEP PHILOSOPHY
PARALLELS OF YOGIC & 12 STEP PHILOSOPHY
EVIDENCE BASE FOR YOGA, ADDICTION TX & RELAPSE PREVENTION
LET’S PRACTICE!
YOGA IN AMERICA STUDY

Highlights from a national survey of more than 3,700 people.
© 2016 Yoga in America Study conducted by Yoga Journal and Yoga Alliance

36.7 million
The number of yoga practitioners in 2016
(Up from 26.4 million in 2011)

80 million
The number of Americans likely to try yoga in 2016
*1 PERSON EQUALS 10 MILLION AMERICANS

Americans believe that yoga...
- Is good for you
- Increases flexibility and strength
- Enhances athletic performance
- Relieves stress

79 percent of yogis engage in other forms of exercise such as running, cycling, and weight lifting

74 percent of yoga practitioners have been practicing for 5 years or less

TOP 5 PLACES YOGIS PRACTICE
1. Home
2. Gym or health club
3. Yoga studio
4. Community center
5. Park

$16.8 billion
Amount yogis spend on classes, yoga clothing, equipment, and accessories (an increase of $6.1 billion since 2011)

The 2016 Yoga in America Study was fielded by IPSOS Public Affairs. #YogaInAmerica
yogajournal.com/yogainamerica2016 • yogaalliance.org/2016yogainamerica2016
THE NEW SCIENCE BEHIND YOGA

HTTP://UPLIFTCONNECT.COM/WATCH-NEW-SCIENCE-BEHIND-YOGA/
YOGA 101

• YOGA: TO JOIN, UNITE, TO YOKE, TO COME TOGETHER

• YOGA SUTRAS OF PATANJALI
  • 3000+ YEARS OLD, ~5,000 B.C. TO 300 A.D.
  • COMES FROM OLDEST TEXTS OF INDIAN CULTURE, THE VEDAS

• VEHICLE TO PREPARE BODY FOR MEDITATION
  • PRANAYAMA: LIFE FORCE (BREATH)
  • ASANA: PHYSICAL POSTURES
  • MEDITATION – CHITTA VRITTI NIRODAH
YOGA 101 CONT.

• MANY FORMS OF YOGA
  • RAJA, KRYA, JNANA, HATHA, TANTRA, ETC.

• HATHA YOGA IS PRACTICED IN THE WEST
  • ASANA – PHYSICAL POSTURES
  • PRANAYAMA – BREATHE
  • MEDITATION

• MANY STYLES OF HATHA YOGA
  • ASHTANGA
  • IYENGAR
  • ANUSARA
  • JIVAMUKTI
  • BIKRAM
  • PURNA
  • YIN
  • KUNDALINI
  • BAPTISTE
  • RESTORATIVE
  • VINYASA
  • VINAYOGA
GOAL OF YOGA

- Yoga Sutra, 1.1
  - *Atha Yoga Anushasanam*,
  - Now, the practice of yoga begins
    - (recovery begins when we leave the meeting or treatment)

- Yoga Sutra, 1.2
  - *Chitta Vritti Nirodah*
    - Calm the fluctuations of the mind
    - Equanimity
      - (Goal of RP = quieting the craving/obsession)
IS YOGA A RELIGION?

• “TRUTH IS ONE, PATHS ARE MANY” (SRI GURUDEV AS CITED IN SATCHIDANANDA, 2014, P. XIII).
  • UNIVERSAL PRINCIPLES
  • RESPECT FOR, AND INCLUSION OF, ALL THE MANY PATHS TO SAMADHI, SALVATION, ENLIGHTENMENT, NIRVANA, SPIRITUAL AWAKENINGS, ETC.
    • TRADITIONALLY, YOGA IS THE SCIENCE OF THE SELF.
    • YOGA SEeks TO HELP US UNDERSTAND OUR INNER WORLD THROUGH VARIOUS TECHNIQUES: MEDITATION, ASANA, BREATHING, FOCUSED AWARENESS, AND CERTAIN PRINCIPLES OF BEHAVIOR AND CONDUCT.
  • IF BY RELIGION WE MEAN TRANSCENDENCE, LOSS OF FEAR OF DEATH, THE EMERGENCE OF PLATONIC QUALITIES SUCH AS TRUTH, BEAUTY, GOODNESS, HARMONY, AND EVOLUTION, THEN YES, YOGA CAN GIVE US A RELIGIOUS EXPERIENCE.
  • NOT RELIGION IN THE FORM OF RIGID IDEOLOGIES, DOGMA, BELIEF SYSTEMS, OR COMPLIANCE; IT’S A SPIRITUAL EXPERIENCE THAT GIVES US ACCESS TO A UNIVERSAL DOMAIN OF REALITY (CHOPRAH, 2014, PARA 1).
YOGIC PHILOSOPHY
THE EIGHTFOLD PATH
ASHTANGA (8 LIMBS)

1. YAMA
2. NIYAMA
3. ASANA
4. PRANAYAMA
5. PRATYAHARA
6. DHARANA
7. DHYANA
8. SAMADHI
1. **AHIMSA**: NONVIOLENCE (WORDS, THOUGHTS, & ACTIONS)

2. **SATYA**: TRUTHFULNESS (HONESTY & INTEGRITY)

3. **ASTEYA**: NON–STEALING
   - NOT TAKING MORE THAN WE NEED
   - NOT STEALING FROM OURSELVES

4. **BRAHMACHARYA**: CONTINENCE

5. **APARIGRAHA**: NON–COVETOUSNESS (NON–GREED)
2. NIYAMA

1. **SAUCHA:** CLEANLINESS OF BODY & MIND
2. **SAMTOSA:** CONTENTMENT
3. **TAPAS:** HEAT; SPIRITUAL AUSTERITIES; FOCUSING W/DISCIPLINE
4. **SVADHYAYA:** STUDY OF THE SACRED SCRIPTURES AND OF ONE’S SELF
5. **ISVARA PRANIDHANA:** SURRENDER TO GOD; MERGING ALL PARTS OF YOUR LIFE
3. PRANAYAMA

- BREATH CONTROL
  - PRANA = LIFE FORCE, AYAMA = STRETCH OR EXTEND (DESIKACHAR, 1999)
- TECHNIQUES DESIGNED TO GAIN MASTERY OVER RESPIRATORY PROCESS
- RECOGNIZING CONNECTION BETWEEN BREATH, BODY, MIND, EMOTIONS, & SPIRIT
- LITERAL TRANSLATION: LIFE FORCE

(Carrico, 2007)
4. ASANA

- THE POSTURES PRACTICED IN YOGA
- YOGIC PERSPECTIVE: BODY IS A TEMPLE OF SPIRIT
  - CARING FOR BODY IS IMPORTANT STAGE OF SPIRITUAL GROWTH
- THROUGH ASANA PRACTICE
  - WE DEVELOP HABIT OF DISCIPLINE AND
  - ABILITY TO CONCENTRATE
  - BOTH NECESSARY FOR MEDITATION (CARRICO, 2007)
- THE ISSUES LIVE IN OUR TISSUES (TOMMY ROSEN, RECOVERY 2.0; NIKKI MYERS, Y12SR)
SECOND HALF OF 8 LIMBS

- **1\(^{st}\) HALF:**
  - concentrates on refining our personalities, gaining mastery over the body, and developing an energetic awareness of ourselves

- **2\(^{nd}\) HALF**
  - deals with the senses, the mind, and attaining a higher state of consciousness.

(Carrico, 2007)
5. PRATYAHARA

- **MEANS** WITHDRAWAL OR SENSORY TRANSCENDENCE.

- **WE MAKE CONSCIOUS EFFORT TO** DRAW OUR AWARENESS AWAY FROM THE EXTERNAL WORLD AND OUTSIDE STIMULI. KEENLY AWARE OF, YET CULTIVATING A DETACHMENT FROM, OUR SENSES, WE DIRECT OUR ATTENTION INTERNALLY.

- **PRATYAHARA PROVIDES OPPORTUNITY TO** STEP BACK AND TAKE A LOOK AT OURSELVES. **THIS WITHDRAWAL ALLOWS** US TO OBJECTIVELY OBSERVE OUR CRAVINGS: HABITS THAT ARE PERHAPS DETRIMENTAL TO OUR HEALTH AND MAY INTERFERE WITH OUR INNER GROWTH.

- **WORKING TO ELIMINATE** MENTAL DISTRACTIONS (Carrico, 2007)
6. DHARANA

- PRatyahara sets stage for Dharana, or Concentration.
  - Having calmed outside distractions, we now deal with distractions of mind itself.
- In practice of Concentration, which precedes meditation, we learn how to slow down the thinking process by concentrating on a single mental object:
  - A specific energetic center in the body
  - An image of a deity
  - Silent repetition of a sound (mantra)
- We have begun to develop powers of concentration in previous 3 stages: posture, breath, and withdrawal of senses. In Asana and Pranayama, although we pay attention to our actions, our attention travels. Our focus constantly shifts as we fine-tune the many nuances of any particular posture or breathing technique.
  - In Pratyahara we become self-observant;
  - In Dharana, we focus our attention on a single point. Extended periods of concentration naturally lead to meditation.

(Carrico, 2007)
7. DHYANA

- MEDITATION OR CONTEMPLATION
  - UNINTERRUPTED FLOW OF CONCENTRATION.
  - CONCENTRATION (DHARANA) AND MEDITATION (DHYANA) APPEAR TO BE ONE AND THE SAME
  - FINE LINE OF DISTINCTION EXISTS BETWEEN THE TWO.
    - DHARANA PRACTICES ONE-POINTED ATTENTION,
    - DHYANA IS ULTIMATELY A STATE OF BEING KEENLY AWARE WITHOUT FOCUS. AT THIS STAGE, THE MIND HAS BEEN QUIETED, AND IN THE STILLNESS IT PRODUCES FEW OR NO THOUGHTS AT ALL.

(Carrico, 2007)
8. SAMADHI

• PATANJALI DESCRIBES *SAMADHI*, AS A STATE OF ECSTASY
• THE MEDITATOR MERGES WITH HIS/HER POINT OF FOCUS AND TRANSCENDS THE SELF ALTOGETHER.
• PROFOUND CONNECTION TO THE DIVINE
• INTERCONNECTEDNESS WITH *ALL* LIVING THINGS
• WITH THIS REALIZATION COMES THE “PEACE THAT PASSETH ALL UNDERSTANDING”
  • EXPERIENCE OF BLISS AND BEING AT ONE WITH THE UNIVERSE
• ON THE SURFACE, THIS MAY SEEM TO BE A RATHER LOFTY, “HOLIER THAN THOU” KIND OF GOAL. HOWEVER, IF WE PAUSE TO EXAMINE WHAT WE REALLY WANT TO GET OUT OF LIFE, WOULD NOT JOY, FULFILLMENT, AND FREEDOM SOMEHOW FIND THEIR WAY ONTO OUR LIST OF HOPES, WISHES, AND DESIRES?

• HAPPY JOYOUS & FREE!
• THE COMPLETION OF THE YOGIC PATH IS WHAT, DEEP DOWN, ALL HUMAN BEINGS ASPIRE TO: PEACE.

(Carrico, 2007)
THE PROMISES OF YOGA PRACTICE

• WE BEGIN TO RE–EXPERIENCE A VISCERAL RECONNECTION WITH THE NEEDS OF OUR BODIES

• THERE IS A BRAND NEW CAPACITY TO WARMLY LOVE THE SELF

• WE EXPERIENCE A NEW QUALITY OF AUTHENTICITY IN OUR CARING, WHICH REDIRECTS OUR ATTENTION TO OUR HEALTH, OUR DIETS, OUR ENERGY, OUR TIME MANAGEMENT

• THIS ENHANCED CARE FOR THE SELF ARISES SPONTANEOUSLY AND NATURALLY, NOT AS A RESPONSE TO A “SHOULD.”

• WE ARE ABLE TO EXPERIENCE AN IMMEDIATE AND INTRINSIC PLEASURE IN SELF–CARE.

(COPE AS CITED IN VAN DER KOLK, 2014, P. 265)
12 STEP PROGRAMS
Much to our relief, we discovered we did not need to consider another’s conception of god. Our own conception was sufficient.

The realm of the spirit is broad, roomy, all inclusive; never exclusive or forbidding.

When we speak of god, we mean your own conception of god.

And, this applies to other spiritual expressions in the book.

Don’t let any prejudice you may have against spiritual terms deter you from asking yourself *what they mean to you?*
ARE 12 STEP PROGRAMS A RELIGION?

NARCOTICS ANONYMOUS, BASIC TEXT (1988), P.9

• WE ARE NOT A RELIGIOUS ORGANIZATION. OUR PROGRAM IS A SET OF SPIRITUAL PRINCIPLES THROUGH WHICH WE ARE RECOVERING FORM A SEEMINGLY HOPELESS STATE OF MIND AND BODY (NA, 1988, P. XVI)

• WE ARE NOT CONNECTED WITH ANY POLITICAL, RELIGIOUS OR LAW ENFORCEMENT GROUPS (NA, 1988)
The purpose of the 12-Steps in a nutshell

1. We admitted we were powerless over our addiction and that our lives had become unmanageable.
2. We came to believe that a power greater than ourselves could restore us to sanity.
3. We made a decision to turn our will and our lives over to the care of God as we understood God.
4. We made a searching and fearless moral inventory of ourselves.
5. We admitted to God to ourselves and to another human being the exact nature of our wrongs.
6. We became entirely willing to have God remove these defects of character.
7. We humbly asked God to remove our shortcomings.
8. We made a list of all persons we had harmed and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. We continued to take personal inventory and when we were wrong promptly admitted it.
11. We sought through prayer and meditation to improve our conscious contact with God, praying only for knowledge of God’s will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps we tried carry this message to addicts and to practice these principle in all our affairs.

Develop & explore
relationship w God/HP

Heal & nurture
relationship w/self

Heal & support
relationships w/others

Spiritual principles of 12 steps

1. Honesty, surrender
2. Open-mindedness, hope, belief, sanity
3. Willingness, faith, trust
4. Courage, honesty, self-examination
5. Courage, confession, acceptance, trust
6. Willingness
7. Humility, faith
8. Willingness, forgiveness
9. Humility
10. Honesty, perseverance
11. Humility, surrender, wisdom
12. Selflessness, service
THE PROMISES OF AA

IF WE ARE PAINSTAKING ABOUT THIS PHASE OF OUR DEVELOPMENT, WE WILL BE AMAZED BEFORE WE ARE HALF WAY THROUGH . . .

1. WE ARE GOING TO KNOW A NEW FREEDOM AND A NEW HAPPINESS.
2. WE WILL NOT REGRET THE PAST NOR WISH TO SHUT THE DOOR ON IT.
3. WE WILL COMPREHEND THE WORD SERENITY AND WE WILL KNOW PEACE.
4. NO MATTER HOW FAR DOWN THE SCALE WE HAVE GONE, WE WILL SEE HOW OUR EXPERIENCE CAN BENEFIT OTHERS.
5. THAT FEELING OF USELESSNESS AND SELF–PITY WILL DISAPPEAR.
6. WE WILL LOSE INTEREST IN SELFISH THINGS AND GAIN INTEREST IN OUR FELLOWS.
7. SELF–SEEKING WILL SLIP AWAY.
8. OUR WHOLE ATTITUDE AND OUTLOOK UPON LIFE WILL CHANGE.
9. FEAR OF PEOPLE AND OF ECONOMIC INSECURITY WILL LEAVE US.
10. WE WILL INTUITIVELY KNOW HOW TO HANDLE SITUATIONS WHICH USED TO BAFLE US.
11. WE WILL SUDDENLY REALIZE THAT GOD IS DOING FOR US WHAT WE COULD NOT DO FOR OURSELVES.

ARE THESE EXTRAVAGANT PROMISES? WE THINK NOT. THEY ARE BEING FULFILLED AMONG US – SOMETIMES QUICKLY, SOMETIMES SLOWLY. THEY WILL ALWAYS MATERIALIZE IF WE WORK FOR THEM.

PARALLELS BETWEEN YOGA AND 12-STEP RECOVERY

- ADDICTION – PHYSICAL, MENTAL & SPIRITUAL ILLNESS
- YOGA – BODY–MIND–SPIRIT CONNECTION
- 12 STEPS = 8 LIMBS
- GURU = TEACHER = SPONSOR
- SVADYAHYA – SELF-STUDY & STUDY OF YOGIC TEXTS
- STEPS 4 THRU 10 – SELF-EXAMINATION/INVENTORY & STUDY OF RECOVERY LITERATURE (BIG BOOK, BASIC TEXT)
- ISHVARDA PRANIDAHNA – SURRENDER TO GOD; MERGING ALL PARTS OF YOUR LIFE
- STEPS 3 & 12
- STEP 11 = PRATYAHRA, DHARANA, DHYANA
- SPIRITUAL AWAKENING = SAMADHI
- SERVICE & COMPASSION = STEP 12
- ONE DAY AT A TIME = BEING FULL PRESENT IN THE MOMENT
  - ETC.
EVIDENCE BASE
PRIMARY RELAPSE TRIGGERS

- NEGATIVE MOOD
- CRAVING
- DRUG CUES
- SOCIAL PRESSURE
- LOW SELF-EFFICACY
EVIDENCE BASE FOR YOGA AND SUDS

• SHARMA & SHUKLA (1988)
  • NAV–CHETNA CENTER, INDIA, N = 1700, BETWEEN 1986–1988
  • NOONE TURNED AWAY
  • PLACED INTO TX LEVEL BASED ON THEIR LEVEL OF MOTIVATION
  • YOGA AT PRE & POST CLINICAL STAGES

• PRE–DETOX
  • REDUCTION IN DRUG ABUSE, AND INCREASE IN MOTIVATION
  • MORE RELAXED & INCREASED ENERGY
  • DAILY PRACTICE INCREASED SENSE OF WELL–BEING
  • YOGA AND SUBSTANCE USE INCONGRUENT & PRODUCED INTERNAL VALUE CONFLICT

• POST–DETOX
  • PRE–DETOX GAINS MAINTAINED & INCREASED
  • MOTIVATION TRANSFORMED INTO GREATER SELF–CONFIDENCE AND INITIATIVE
  • NEW, SAFE SOCIAL CONNECTIONS
  • INSPIRING ENGAGEMENT IN WORK, SCHOOL, DEAL W/PROBLEMS, INCREASE SOCIAL CONNECTIONS & HELPING OTHERS
Role of **yoga** in substance use

**Short term / Detoxification**
- Stress reduction
- Decrease in sympathetic discharge

**Long term / Relapse prevention**
- Reduction of stress
- Improvement in mood
- Social support by affiliation

**Positive effects on health**
- Helps coping with cues to craving
- "Dhyanas" help to control desire to use substance
- E.g. "Asanas" reduces weight gain while quitting Tobacco
- Overall improvement in health
<table>
<thead>
<tr>
<th>Study</th>
<th>Design Type</th>
<th>Intervention Details</th>
<th>Substance(s)</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shaffer et al., 1997</td>
<td>RCT</td>
<td>Yoga, 75 min for 22 weeks</td>
<td>Methadone maintenance</td>
<td>No difference between add–on Yoga and dynamic group psychotherapy. Both treatments reduced drug use and criminal activities</td>
</tr>
<tr>
<td>Raina et al., 2001</td>
<td>RCT</td>
<td>Yoga, 40 min, 6 days a week for 8 weeks</td>
<td>Alcohol</td>
<td>Yoga group improved more significantly as compared to physical exercise at 8 weeks</td>
</tr>
<tr>
<td>McIver et al., 2004</td>
<td>Single Group</td>
<td>Yoga, 60 min, once a week for 5 weeks</td>
<td>Tobacco in a residential therapeutic community</td>
<td>Improvement in the motivation for change stage. Post test motivation scores better than pre–test ones.</td>
</tr>
<tr>
<td>Kochupillai et al., 2005</td>
<td>Single Group</td>
<td>Sudarshan Kriya Yoga</td>
<td>Tobacco</td>
<td>Seventeen of the 34 tobacco users followed up at 6 months were abstinent</td>
</tr>
<tr>
<td>Sharma and Corbin, 2006</td>
<td>RCT</td>
<td>Yoga scheduled at convenience of participants</td>
<td>Tobacco</td>
<td>Yoga group had significant increase in mean total self control for quitting as compared to controls who were just given reading materials</td>
</tr>
<tr>
<td>Vedamurthachar et al., 2006</td>
<td>RCT</td>
<td>Sudarshan Kriya Yoga hourly for 2 weeks</td>
<td>Alcohol</td>
<td>Depressive symptoms decrease more significantly in the Sudarshan Kriya Yoga group</td>
</tr>
<tr>
<td>Sareen et al., 2007</td>
<td>RCT</td>
<td>Yoga, 1 h sessions thrice a week for 12 weeks</td>
<td>Alcohol</td>
<td>Improvement in mood profile and stress symptoms in yoga group as compared to controls</td>
</tr>
<tr>
<td>Khalsa et al., 2008</td>
<td>Single Group</td>
<td>Kundalini yoga residential program of 90 days</td>
<td>Mixed (alcohol, opiates, barbiturates)</td>
<td>Improvement in psychological symptoms over the course of yoga intervention</td>
</tr>
<tr>
<td>Elbero et al., 2011</td>
<td>RCT</td>
<td>Hatha yoga for 30 min on 1 occasion</td>
<td>Tobacco</td>
<td>Hatha yoga and physical exercise had significant decrease in craving to smoke compared to controls</td>
</tr>
<tr>
<td>Marefat et al., 2011</td>
<td>RCT</td>
<td>Yoga, three times a week for 5 weeks</td>
<td>Clients in therapeutic community</td>
<td>Yoga resulted in significant reduction in anxiety and depression as compared to wait–list control</td>
</tr>
<tr>
<td>Rawat et al., 2011</td>
<td>Controlled design</td>
<td>Yoga compared to Yoga with Sudarshan Kriya</td>
<td>Tobacco</td>
<td>Additional Sudarshan Kriya with yoga helps better to quit smoking</td>
</tr>
<tr>
<td>Bock et al., 2012</td>
<td>RCT</td>
<td>Vinyasa yoga twice weekly of 60 min duration for 8 weeks, as an add–on to CBT</td>
<td>Tobacco</td>
<td>Yoga add–on group had greater abstinence rates at 8 weeks, but difference was not significant at 6 months follow–up</td>
</tr>
<tr>
<td>Shahab et al., 2013</td>
<td>RCT</td>
<td>Yogic breathing exercises for 10 min</td>
<td>Tobacco</td>
<td>In the immediate intervention period, yogic breathing exercises group had lower craving as compared to video control group</td>
</tr>
<tr>
<td>Zhuang et al., 2013</td>
<td>RCT</td>
<td>Yoga, 6 days a week for 6 months</td>
<td>Heroin</td>
<td>Mood state and quality of life improved in the intervention group as compared to control</td>
</tr>
<tr>
<td>Devi et al., 2014</td>
<td>RCT</td>
<td>Yoga for 70 min daily for 4 weeks</td>
<td>Multiple (Heroin, alcohol, spasmaproxyvon)</td>
<td>Improvement in the yoga group in terms of depressive symptoms and quality of life (physical, psychological and social domains)</td>
</tr>
<tr>
<td>Hallgren et al., 2014</td>
<td>RCT</td>
<td>Weekly group session for 10 weeks</td>
<td>Alcohol</td>
<td>Non–significant difference in add–on yoga group in terms of alcohol consumption</td>
</tr>
<tr>
<td>Dhawan et al., 2015</td>
<td>RCT</td>
<td>Sudarshan Kriya Yoga 3 h (12 h program)</td>
<td>Opiate</td>
<td>Intervention group had better outcomes in physical, psychological and environmental quality of life than controls.</td>
</tr>
</tbody>
</table>
EVIDENCE BASE FOR YOGA AND SUDS

• YOGA FOR ADDICTIONS: A SYSTEMATIC REVIEW (POSADZKI ET AL., 2013)
  • 8 RCTS
  • ALCOHOL, DRUG, NICOTINE ADDICTIONS
  • 7 RCTS SUGGESTED THAT YOGA LED TO SIGNIFICANTLY MORE FAVORABLE OUTCOMES FOR ADDICTIONS COMPARED TO CONTROLS
    • SMOKING CESSATION
    • CRAVING REDUCTION
    • REDUCTION IN DEPRESSION & ANXIETY
    • IMPROVEMENT IN QOL IN PANCREATIC PATIENTS
EVIDENCE BASE FOR YOGA AND SUDS, CONT.

- RCT – YOGA VS PE AS USUAL, PREVENTION OF SUBSTANCE USE RISK FACTORS IN ADOLESCENTS (BUTZER ET A., 2017)
  - YOGA MAY HAVE BENEFICIAL EFFECTS W/REGARD TO PREVENTING ADOLESCENTS WILLINGNESS TO SMOKE AS WELL AS IMPROVING EMOTIONAL SELF-CONTROL IN FEMALES
EVIDENCE BASE CONT.

• MINDFULNESS-BASED STRESS REDUCTION (MBSR)
  DEVELOPED BY JON KABAT ZIN, UMASS, IN 1979
  • THREE CORE COMPONENTS
    • MEDITATION
    • BODY SCAN
    • YOGA

• SHOWN TO IMPROVE SXS ASSOCIATED WITH FOLLOWING DISORDERS:
  • HEART DISEASE
  • GASTROINTESTINAL DISTRESS
  • CHRONIC PAIN
  • CANCER
  • HIGH BLOOD PRESSURE
  • ANXIETY AND PANIC
  • HEADACHES
  • SLEEP DISTURBANCES
  • CHRONIC FATIGUE
  • DEPRESSION
  • SKIN DISORDERS
  • ADDICTIONS
  • FIBROMYALGIA
  • IRRITABLE BOWEL SYNDROME
  • PSORIASIS
  • MULTIPLE SCLEROSIS
  • CORONARY HEART DISEASE
  • ASTHMA/RESPIRATORY CONDITIONS
  • ETC.
EVIDENCE BASE, CONT.

MINDFULNESS BASED RELAPSE PREVENTION (BOWEN, CHAWLA, AND MARLATT, 2010)

1. DEVELOP AWARENESS OF PERSONAL TRIGGERS AND HABITUAL REACTIONS, AND LEARN WAYS TO CREATE A PAUSE IN THIS SEEMINGLY AUTOMATIC PROCESS.

2. CHANGE OUR RELATIONSHIP TO DISCOMFORT, LEARNING TO RECOGNIZE CHALLENGING EMOTIONAL AND PHYSICAL EXPERIENCES AND RESPONDING TO THEM IN SKILLFUL WAYS.

3. FOSTER A NONJUDGMENTAL, COMPASSIONATE APPROACH TOWARD OURSELVES AND OUR EXPERIENCES.

4. BUILD A LIFESTYLE THAT SUPPORTS BOTH MINDFULNESS PRACTICE AND RECOVERY.

SELF-COMPASSIONATE APPROACH TO CRAVING
EVIDENCE-BASE, CONT.

• TRAUMA, PTSD
  • VAN DER KOLK, 2014
    • “WE’RE NOT DOING TRAUMA TREATMENT UNLESS WE’RE PRACTICING YOGA”
    • YOGA IMPROVES HEART RATE VARIABILITY (HRV)
    • MEASURE OF BALANCE BETWEEN SNS AND PSN
    • YOGA IMPROVES INTEROCEPTION
  • VAN DER KOLK ET AL., 2014
    • RTC – 64 WOMEN WITH CHRONIC, TREATMENT-RESISTANT PTSD
    • 52% OF YOGA GROUP NO LONGER MET CRITERIA FOR PTSD, COMPARED TO 21% OF CONTROL GROUP
• JOHNSON ET AL., 2015
  • MILITARY PERSONNEL W/PTSD
  • CLINICALLY AND STATISTICALLY SIGNIFICANT REDUCTIONS IN PTSD SCORES (CAPS MEASURE)
  • NO DIFFERENCE IN MINDFULNESS SCORES (FFMQ)
EVIDENCE BASE CONT.

• EVIDENCE FOR UNIVERSITY FACULTY, STAFF AND GRAD STUDENTS 😊
  • SIGNIFICANT IMPROVEMENT AFTER A SINGLE 10-WEEK YOGA SERIES IN PERCEIVED STRESS, AS WELL AS SELF-REPORTED PSYCHOLOGICAL, BEHAVIORAL, AND PHYSICAL SYMPTOMS OF STRESS (N=50) (BREMMS, 2015)

• NURSES & BURNOUT
  • YOGA PARTICIPANTS REPORTED SIGNIFICANTLY HIGHER SELF-CARE AS WELL AS LESS EMOTIONAL EXHAUSTION AND DEPERSONALIZATION UPON COMPLETION OF AN 8-WEEK YOGA INTERVENTION (ALEXANDER ET AL., 2015)

• SOCIAL WORKERS & COMPASSION FATIGUE
  • BRIEF YOGA AND MINDFULNESS PROGRAM MAY HALT THE DECREASE OF COMPASSION FATIGUE (GREGORY, 2015)
EVIDENCE BASE CONT.

SYSTEMATIC REVIEWS & META-ANALYSES FOR YOGA AND OTHER MENTAL HEALTH DISORDERS

• BASICALLY YOGA HAS BEEN MORE EFFECTIVE THAN CONTROL AND WAITLIST CONTROL CONDITIONS, ALTHOUGH NOT ALWAYS MORE EFFECTIVE THAN TREATMENT COMPARISON GROUPS SUCH AS OTHER FORMS OF EXERCISE (FIELD, 2016)
  • STUDY SUPPORTS ABILITY OF YOGA TO AMELIORATE ANXIETY, DEPRESSION AND FATIGUE SIGNIFICANTLY AND ENHANCE QUALITY OF SLEEP AND DAILY LIFE IN CANCER PATIENTS (CHEN ET AL., 2014)
  • YOGA RESULTED IN IMPROVEMENTS IN BALANCE AND PHYSICAL MOBILITY IN PEOPLE AGED 60+ (YOUKHANA, ET AL., 2016)
  • PROMISING METHOD FOR TREATING ANXIETY (HOFFMAN ET AL., 2016)
  • PROMISING COMPLEMENTARY TREATMENT FOR MENTAL DISORDERS (KLATTE, 2016)
  • ANCILLARY TREATMENT OPTION FOR PATIENTS WITH DEPRESSIVE DISORDERS
SIDE EFFECTS AND RISKS OF YOGA

• YOGA APPEARS AS SAFE AS USUAL CARE AND EXERCISE (CRAMER ET AL., 2015)
• GENERALLY LOW-IMPACT AND SAFE FOR HEALTHY PEOPLE
• LOW RATE OF SIDE EFFECTS
• RISK OF SERIOUS INJURY FROM YOGA IS QUITE LOW
  • CERTAIN TYPES OF STROKE & PAIN FROM NERVE DAMAGE ARE AMONG THE RARE POSSIBLE SIDE EFFECTS
• PREGNANT WOMEN AND PEOPLE WITH CERTAIN MEDICAL CONDITIONS (HIGH BLOOD PRESSURE, GLAUCOMA, AND SCIATICA) SHOULD MODIFY OR AVOID SOME YOGA POSES.
• IF CONSIDERING YOGA AND YOU HAVE HEALTH CONCERNS, ALWAYS CHECK WITH YOUR DOCTOR FIRST!

(NCCIH, 2013)
IN CONCLUSION


• KEVIN GRIFFIN SAYS THE TWO PRIMARY PARALLELS ARE
  1. SELF-ACCEPTANCE
  2. STAYING IN THE MOMENT
AND FINALLY

REGARDING BUDDHISM’S EIGHTFOLD PATH AND THE 12 STEPS, GRIFFIN STATES

• THE FIRST NOBLE TRUTH IS THAT THERE IS SUFFERING. THE SECOND NOBLE TRUTH IS THAT THE CAUSE OF SUFFERING IS **CLINGING OR CRAVING.** AND IF YOGA AND MEDITATION PRACTICE WORKS WITH SUFFERING, WITH CLINGING AND CRAVING, IT’S GOING TO HELP WITH ADDICTION. AND IT DOES!

(GRIFFIN AS CITED IN KRIPALU, 2017)
YOGA & RECOVERY RESOURCES

- YOGA ALLIANCE: https://www.yogaalliance.org/
- YOGA JOURNAL: https://www.yogajournal.com/
- KRIPALA CENTER FOR YOGA & HEALTH – https://krupalu.org/resources?im_field_resource_category=150&im_field_resource_type=&keyword=
- RECOVERY 2.0, TOMMY ROSEN – http://recovery2point0.com/
- PALOUSE MINDFULNESS https://palousemindfulness.com/
NAMASTE
नमस्ते

• I BOW TO YOU
• GESTURE OF RESPECT, GRATITUDE, ADORATION, & REVERENCE
• ANJALI MUDRA
LET’S PRACTICE!
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