2013 SYTAR Accepted Common Interest Community Proposals

Rehabilitation Professions, Bridging the Past With the Future

Yoga for Stroke Survivors: A Hospitalbased Outpatient Hatha Yoga Program

Kelli Bethel, PT, E-RYT 200, YT in training

Body Harmony Yoga, Greater Baltimore Medical Center (GBMC), Baltimore, MD

Key Words: yoga, stroke

Objectives: The Yoga for Stroke Survivors Program at Greater Baltimore Medical Center (GBMC) is a comprehensive, hospital-based program. In its fourth year of existence, the program provides an outpatient Hatha-based yoga class to members of the Greater Baltimore community who have suffered neurologic injury as the result of a stroke. Classes are delivered at GBMC, a 310-bed tertiary care medical center located in northern Baltimore County, Maryland. The hospital is nationally recognized as a premier stroke treatment center. The program is in partnership with the GBMC Stroke Center and provides students with a safe, therapeutic, and adaptive yoga class. The program is led by an instructor who is a PT/200E-RYT, with additional RYTs with varied medical backgrounds (RN, RD). This allows for a 1:3 to 1:5 teacher-student ratio. Each class includes pranayama, asana, and meditation. Class time also gives members an opportunity to discuss the many challenges of navigating life after stroke. All participants in the program are chronic stroke survivors. The students are screened medically and therapeutically prior to enrollment and participate in classes twice weekly. The presentation will include a detailed description of the program, the program goals and progress as recorded by the instructors, and benefits of the program as recorded by outside therapists, physicians, and student reports. The program's success as an integral part of the Stroke Center was recognized by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) as a "best practice" in 2010 and 2012. Teaching Methods: PowerPoint presentation and a professionally recorded video highlighting a class.

Description: It is estimated that about 795,000 Americans per year suffer a new or recurrent stroke. Strokes are one of the leading causes of death and disability in the United States. Strokes often result in impairments to balance, muscle function, mental acuity, endurance, and overall strength. In addition to the physical impact of stroke, survivors often experience depression and social isolation. Yoga incorporates many disciplines that are beneficial to stroke survivors. Results from recent research studies continue to support yoga as a beneficial method to help stroke survivors in their continued recovery.

Interest to the Community: This program can be replicated in the community by yoga therapists.

Speaking Experience

As a physical therapist for the past 20 years and a yoga instructor for the past 5 years, I have spent most of my adult life teaching. My background in physical therapy is in neuro-rehabilitative medicine. Working with clients who often have cognitive deficit or language impairment helps me adapt teaching and lecturing by using multisensory techniques. For the past 5 years I have led yoga classes 5 days a week to groups of individuals with neurologic deficits. In this setting, I use many strategies, visual, auditory, touch, and demonstration to engage the students and provide an interactive learning environment.

I have spoken to large and small groups as a physical therapist and rehab manager. I have presented about patients, techniques, and other topics at in-services, rounds, grand rounds, and state conferences.

As a business owner I often talk in front of large groups of potential clients, physicians, and therapists to market my programs. It has been beneficial to use a multisensory method in this arena as well. In addition to PowerPoint, I use video, photos, and question and answer periods.

Tools for Yoga Therapy Assessment and Measurement

B. Gold-Bernstein, E-RYT 500, L. Jacobsohn, RN, MSN, PMHCNS-BC

TriYoga Boston, Waltham, MA

Key Words: yoga therapy assessment, assessment tool, assessment template, yoga therapy metrics

Objective: There are many lineages and approaches to yoga therapy and different emphases in different yoga therapy trainings. The essential question is, "What works?" Although standardization of training requirements ensures that therapists receive an appropriate level of training, it does not ensure the actual therapeutic methods used by various therapists and schools produce the same desired outcomes. We are proposing a set of assessment and measurement tools that are lineage and methodology independent and that provide yoga therapists, schools, and potentially licensing and insurance boards a consistent way to measure the efficacy of yoga therapy interventions. **Teaching Methods:** A brief didactic PowerPoint description,

including rationale for the assessment tools followed by a presentation of the tools and metrics.

Description: Yoga teachers interested in yoga therapy come from many backgrounds and may have different approaches to working with patients. The concise and comprehensive assessment tool and metrics is compatible with a wide variety of yoga styles. It is designed to incorporate the subjective experience of physical, psychosocial, and spiritual domains into the yoga therapy assessment process and engage the patient to actively participate in setting realistic goals for change, wholeness, and wellness. The measurement tool elicits responses to questions and rating scales from the literature and research from yoga philosophy and from traditional professional disciplines, including medicine, psychology, and nursing. The student completes the assessment before the initial meeting, 30 days after the meeting, and again at 3 months and 6 months to assess the long-term effectiveness of the intervention.

Interest to the Community: This assessment tool can be used in yoga therapy training programs by individual therapists who wish to measure and report on the progress of their patients, and potentially by the IAYT and licensing boards to determine what schools have consistently positive outcomes in case studies.

Presentation Experience

In her high-tech career Brahmi (Beth Gold-Bernstein) presented at many conferences (see list). Brahmi has also coproduced the cable show, TriYoga for Health, on Waltham Cable. These segments can be viewed at http://wcactv.wordpress.com/original-programming/triyoga-for-health/.

Lorrie Jacobsohn has presented on segments of TriYoga for Health. Lorrie has also g iven 2-day seminars on Yoga for Anxiety and Depression and has presented workshops on Yoga for Insomnia, and Moving Through Loss. As a psychiatric clinical nurse specialist, Lorrie has presented at Massachusetts General Hospital on Nursing Resilience: Bouncing Back and on Staying Safe: Managing the Spectrum of Disruptive Behavior in the Workplace.

Yoga Therapy for Generation Rx

Jay Gupta, RPh, MScIM, RYT, MTM Specialist

YogaCaps, Inc., RxRelax, LLC, Merrimack, NH

Key Words: yoga therapy, medication, side effects, adverse drug reactions, postural adjustments

Objective: Medications present a significant aspect to consider in the practice of yoga therapy. Participants will gain the following:

- 1. an overview of how medications affect the whole person
- 2. an interview guide for medication-related assessment
- 3. awareness of limits
- 4. resources for additional research and support
- 5. information about a sea change in the pharmacy space

Teaching Methods: Didactic PowerPoint will outline key considerations. Review of RxRelax "Medication Interview Guide" with case study illustrations.

Description: A number of data sources corroborate that prescription drug use has escalated during the past 10 years. The Center for Disease Control estimates that 82% of American adults take at least one medication and 29% take five or more. Patients are filling prescriptions from multiple doctors and a variety of pharmacies, which has led to fragmented care. The percentage of adverse drug events has grown steadily from 2001 to 2010. The se and other factors are leading to significant changes in the pharmacy profession to a more therapeutic, service orientation. We are on the brink of a unique opportunity for partnership between yoga therapy and pharmacy profession!

In the meantime, yoga therapists may use this time to understand prescription medications. All medications have side effects and interactions that add layers of consideration for the yoga therapist. Dizziness, a common side effect, may increase the potential for falls. Some medications increase the potential for bone fractures. In these cases, staging or use of props may be necessary. It gets more complex when we consider the example of metabolic syndrome, which results from several of the medications used for mental health conditions.

Safety and efficacy of yoga therapy when medications are involved are enhanced by asking the right questions at the right time; becoming more facile with names, classes, and actions of drugs; practicing within the appropriate limits; and of course, empowering clients to exercise their choices and rights.

Interest to the Community: Medications address a wide spectrum of presenting issues ranging from possible root causes of disease to alleviating side effects, and extending to palliative support. This interview guide may be easily used by yoga therapists. If/as yoga therapists are better informed, they will practice with greater awareness and be well positioned to serve on medical care teams as new healthcare models emerge.

Presentation Experience

Jay Gupta is a registered pharmacist. Terry Gupta is a social worker with more than 25 years of senior management experience in the nonprofit sector, and now serves as a consultant. They are internationally trained yoga teachers and the cofounders of YogaCaps, an all-volunteer 501 c(3) nonprofit that brings the best of Eastern and Western approaches to special populations with chronic physical and mental illness.

They have presented to audiences primarily in the New England region of the United States, and also in Switzerland and India. Audiences have included yoga teachers, medical association groups, corporations, hospitals, colleges, community centers, festivals, workshops, retreats, and sanghas. They have been lecturing on the faculty of a number of yoga teacher training programs (200 hours and one 500-hour program) in Massachusetts, New Hampshire, and Rhode Island.

They also conduct corporate wellness seminars on behalf of a prominent insurance company.

The Guptas are integrated into the cancer care teams of five southern New Hampshire hospitals. They also integrate into the care team of Greater Nashua Mental Health Center, where they work closely with the executive director/chief medical officer and all levels of staff. Classes each week may include doctors, nurses, social workers, mental health clinicians, fitness trainers, and case managers, as well as yoga teachers wanting to observe.

The Guptas coordinate the annual *New Hampshire Yoga for Peace*. The 5th event in 2012 served 600+ attendees, making it New England's largest donation-based day of yoga. It also brings the yoga tea cher community toge ther in shared seva. They conduct an annual Visiting Scholar's Program and just completed a 10-month Ku ndalini Sangha. They have published yoga articles in popular med ia outlets and are the creators of the audio CD "Rx Relax: Presc ription for Restful Sleep" and the DVD "Subtle Yoga for Rejuvenation: a Time Capsule from the Himalayas."

Y.O.G.A. Rehabilitation Program

Carina Raisman, Bsc E-RYT

Re:source School for Yoga Therapeutics, Montreal, Qc

Key Words: rehabilitation, mental health, stress management

Objective: Describe the step-by-step Y.O.G.A. Program (Y.O.G.A. = Yoga kit, Observation, Guidance, Application) in the context of work disability and to demonstrate this approach as a method to train the nervous system's adaptive response to manage any type of stressor.

Teaching Methods: A short PowerPoint presentation will support a handout. A practical exercise will help illustrate certain principles described in the presentation.

Description: Compromised mental health is the leading cause of work disability in Canadian corporations and costs employers and health insurance billions per year. Yoga re:source has pioneered an innovative approach with insurance companies using yoga therapy to reestablish the health of patients suffering from depression, anxiety, and professional burnout. For years, hundreds of participants have benefited from the program "Rehabilitation with Y.O.G.A," which provides the tools to Observe, Guide, & Apply the process toward health management and stress management. With these tools, the person can be autonomous, productive, and efficient at taking care of his or her work and health.

Our program includes the following:

Yoga kit: Clients receive a kit with tools and literature that help them make yoga part of their daily lives, get back to work, and stay healthy. The rehabilitation counselor uses the yoga kit to monitor clients' progress and carry out an assessment at the end of the program.

Observation: Step 1 helps clients better understand the cause of their discomfort and learn how to deal with it. They learn basic yoga techniques, including relaxation, breathing, and meditation. **Guidance:** In Step 2, clients learn to make yoga part of their daily lives and apply the techniques in stressful situations.

Application: In Step 3, clients prepare to return to work and apply new concepts in a familiar setting. They are monitored before and during their return to work.

Interest to the Community: Rehabilitation involves a cognitive reeducation of the nervous system. The process works to create balance in the stress response and relaxation response. Once balance has been established, the progress can be continued by then training the nervous system to maintain a state of balance despite stressors, strain, pain, and challenges. This approach can be applied, then, to any healing process.

Presentation Experience

I am accustomed to teaching and presenting to large groups in various formats, such as group classes, workshops, teacher trainings, seminars, and PowerPoint presentations.

Special events I taught with Lululemon and Yoga Mala (a yoga fundraiser event), average 75–100 people each, and Salutation Nation, with more than 250 people.

Group classes, workshops, and teacher trainings average 20–30 people each, at various institutions in Montreal, namely, Yoga Sangha, Heaven Studio, and Studio Bliss. My workshops at Wanderlust averaged more than 50 people.

Seminars, conferences, and PowerPoint presentations have been done regularly at various corporations, including SNC Lavalin, W Hotel, Novartis, Great West, Standard Life (with video conferences connected to Toronto, Calgary, and Vancouver offices), with an average attendance of 75 people.

Transcending the Traditional Medical Model: Integrating Yoga Therapy in an Inpatient Neurological Rehabilitation Setting

Jordan Staenberg, OTD, OTR/L, RYT, YT-500

Mindful Occupational Therapy, Scottsdale, Arizona Barrow Neurological Institute, Phoenix, Arizona

Key Words: yoga, neurological injury, spinal cord injury, brain injury, inpatient, rehabilitation, medical model, koshas, reimbursement, occupational therapy, occupational performance

Objective: The objective of this presentation is to understand how a yoga therapy program was successfully integrated into a traditional medical model inpatient neurological rehabilitation setting. To achieve this objective, participants will learn how the kosha model was merged with traditional evaluation to develop occupational therapy goals and comprehensive treatment plans, discover the method used for development of group and individualized yoga therapy for clients with spinal cord injury and acquired/traumatic brain injury in this setting, and be able to translate the language of yoga into effective documentation for reimbursement.

Teaching Methods: A didactic PowerPoint presentation with case examples will be used.

Description: The traditional medical model focuses on the physical body to cure and manage illness and injury. In traditional medical model inpatient neurological rehabilitation, the

profound change in the energy, psycho-emotional, wisdom, and spiritual bodies are not often addressed. To improve the client's rehabilitation potential, it is essential to address the multiple dimensions of the individual as an integrated whole. Greater functional outcomes can be achieved through bringing awareness to the five koshas and empowering the individual to facilitate his own occupational performance.

This presentation outlines the integration of a yoga therapy program in the Occupational Therapy Department of Barrow Neurological Institute's Inpatient Neurological Rehabilitation Center to improve functional outcomes. Through examination of case-study examples, the presenter will describe individualized evaluation and treatment and implementation of group yoga classes in this inpatient neurological rehabilitation setting. With a heavy focus on reimbursement in medical model settings, it is important that services are understood by providers through documentation and illumination of functional outcomes. Clinical examples of translation of the language of yoga to the medical model will be provided.

Interest to the Community: To be an effective yoga therapist in a traditional medical model setting requires an understanding of how to work with and achieve the go als of payor-driven organizations. This can be a daunting task. Clinicians can use the knowledge gained from this presentation for successful implementation of a yoga therapy-based program in a medical model setting.

Presentation Experience:

I have presented to large groups numerous times. In 2013 I have presented on therapeutic yoga for pregnancy for the Jewish Bureau of Education and taught a CEU workshop for early childhood educators on integrating yoga in the classroom. In 2006, I was the assistant teacher for a Master's in Occupational Therapy course on environment/external factors contributing to occupational performance. Also in 2006, I presented a research poster at the national AOTA conference and a review of a journal article to the Washington University Movement Disorders clinic journal club. In 2006, I also presented my doctoral research and a proposed model of practice that I developed during my doctoral work to multiple groups. In 2004, I taught a CEU workshop on writing an effective advocacy letter.

Yoga for Rheumatoid Arthritis— A Community Approach to Clinical Research

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- 3. Department of Preventive and Social Medicine, Dunedin School of Medicine, University of Otago, Dunedin, New Zealand
- 4. Group Health Research Institute, Seattle, USA

Key Words: yoga, rheumatoid arthritis, randomized controlled trial

Objective: Evidence suggests the practice of yoga may result in clinically significant improvements in pain and functional outcomes in people with musculoskeletal conditions. This presentation outlines the development of a pilot randomized, controlled trial of yoga for people with rheumatoid arthritis in a New Zealand population. An integration of patients, physicians, rehabilitation physical therapists, yoga teachers, and the national arthritis organization informed a study to assess the feasibility and safety of a population-appropriate intervention on a limited research budget.

Teaching Methods: A PowerPoint presentation supplemented with practical demonstrations of modifications of *asana* and props for functional limitations of participants; discussion of the choice and sequencing of asana in the protocol.

Description: Focus groups of people with rheumatoid arthritis were initially held to identify potential barriers and aids to participation in a yoga study. A Delphi survey of researchers and yoga teachers was then conducted to identify core design components of a clinical yoga trial. Class plans were developed in consultation with Robin Rothenberg. One hundred and three people with diagnosed rheumatoid arthritis were identified from a patient database at a local teaching hospital by practice nurses and consultant rheumatologists and invited to join the study. Twenty-six people met eligibility criteria (25%), completed baseline assessments, and were randomized into either the yoga group (receiving eight weekly 75-minute yoga classes) or a wait-list control group. Participants were predominantly female (96%), with an average age of 54 years (29-73) and an average duration of rheumatoid arthritis of 12 years (1-31). Data collection will be completed in May 2013.

Interest to the Community: The involvement and integration of local medical, rehabilitation, and yoga personnel in the design and conduct of this study has established open communication between health professionals and the local yoga community and has enabled the study to be conducted at a minimal cost. In addition, identifying and removing potential barriers to participation prior to the study allowed the recruitment of participants who would normally be excluded from a yoga study because of physical limitations. These facets of design increase the environmental validity of the study, enhancing the potential establishment of therapeutically oriented yoga classes in this local community.

Presentation Experience

I have experience with professional presentations both in teaching and in conference environments and am very comfortable presenting to an audience. I am a yoga teacher and regularly teach in group situations. In addition, as a current PhD student I am required to regularly give departmental presentations of my research to staff and students at the University of Otago, New Zealand.

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Mental, Emotional, and Spiritual Health

Assessment and Treatment Planning for Anxiety and Depression: Integrating Western Psychology Standard of Care With Yoga Therapy Protocols

Julie Carmen, MA, LMFT, ERYT-500, YTRX

Private Practice Psychotherapy in Malibu, CA; Exhale Center for Sacred Movement (since 2001); Loyola Marymount University Yoga Therapy RX Psychology Instructor

Key Words: assessment, intake, acute, chronic, major, moderate, mania, psychosis, anxiety, depression, trauma, yoga, protocol

Objective: To deepen understanding of the Diagnostic and Statistical Manual of Mental Disorders. To increase bilingual Eastern and Western vocabulary about mental health so psychological considerations can inform a yoga therapist's dynamic and comprehensive treatment plan. To study and practice differential diagnosis.

Teaching Methods: A lecture augmented with PowerPoint and Pressy. A short video clip of a case study intake assessment interview that will stimulate an interactive discussion. Handouts available in English and in Spanish.

Description: We will look at the implications of prescribing particular *asana*, *pranayama*, and meditation techniques for clinical and subclinical anxiety and depression. We will sharpen our eyes and ears to improve our assessment skills. We will focus on subtle counterindications from a mental health perspective, with the goal of practicing *Ahimsa*, "doing no harm." **Interest to the Community:** Yoga teachers are often hired by dual diagnosis inpatient treatment facilities where people struggle with eating disorders addiction domestic violence, anxiety.

gle with eating disorders, addiction, domestic violence, anxiety, depression, and personality and thought disorders. Yoga therapy interventions can be tailored more effectively to the client's individual needs if the therapist has a deeply rooted understanding of the whole person psy chologically, emotionally, socially, culturally, spiritually, and physically. Speaking the language of Western psychology makes it easier for yoga therapists to interface with resident nursing staff, medical directors, and administrators. Because there is often high acuity, morbidity, recidivism, and litigation connected with high-priced, inpatient treatment facilities, understanding differential diagnosis will instill confidence in a yoga therapist's skills.

Presentation Experience

Yoga therapy is one of three longtime professions that I love

deeply. For 30 years I worked consistently as an actress on Broadway and in Hollywood films. Family concerns led me to yoga teachers' training in 1999 with Lisa Walford and Maty Ezraty, followed by graduate school and licensure as a marriage and family therapist. For four years I taught yoga at Monte Nido Eating Disorder Center. From 2001 to 2003 I designed and implemented the daily yoga therapy and drama therapy departments of Passages Drug and Alcohol Treatment Center. I was the yoga teacher at Los Angeles Unified School District Pregnant Teens Program and the drama therapist at Cell Block Theater in New York City. Currently I teach Western psychology assessment and treatment planning at Loyola Marymount University's Yoga Therapy Rx four-year certificate program and will supervise their fourth-year interns. Communication and generativity are core values that inspire me to teach. As a teaching sample, I've attached a short YouTube clip of a class that Christopher Chapple asked me to teach called Yoga for Actors, Directors, Singers, and Dancers. The goal was to excite LMU students in the Theater and Dance departments to take classes in the LMU Yoga Philosophy Department. Scroll down to LMU video www.juliecarmenyoga.com/newsletter

Yoga Promotes Relaxation in Children and Adolescents With Recurrent Headache

M. Fury, MA, LPC, RCYT

Department of Neurology, Children's Hospital Colorado, Aurora, CO

Key Words: yoga, recurrent headache, children, adolescents

Objective: Recurrent headaches are prevalent in children and adolescents. Up to 89% of these individuals identify stress as a trigger. Yoga offers a complementary and alternative method for this population, who often lacks effective relaxation tools for stress relief. This presentation describes the yoga group offered as part of the Integrative Headache Clinic (IHC) at Children's Hospital Colorado. One of the objectives is to determine the effect of the yoga group for children and adolescents with recurrent headaches on pain and relaxation scores.

Teaching Methods: A brief didactic PowerPoint description of the IHC yoga program and the pain/relaxation score results, followed by a demonstration of the current IHC *asana* sequence.

Description: During the course of 18 months (January 2011 to June 2012), a retrospective chart review was conducted of 40 children and adolescents with an average age of 15 years, 62.5%

of whom were female. During the first hour of clinic, every individual takes part in a 50-minute group yoga session consisting of 10 asanas that promote relaxation and pain relief. Before and after yoga group, participants rate their level of pain and relaxation on a scale from 0 (no pain or relaxation) to 10 (maximum pain or relaxation). The average "before yoga" pain score was $3.7 \ (+/-3.0)$ and "after yoga" pain score was $3.4 \ (+/-3.1; p = 0.0672)$, representing a decrease in pain. The average "before yoga" relaxation score was $5.2 \ (+/-2.3)$ and "after yoga" relaxation score was $7.5 \ (+/-1.9; p < 0.0001)$, representing a statistically significant increase in relaxation.

Interest to the Community: Group yoga is effective for promoting relaxation in children and adolescents with recurrent headache. Yoga may offer an adjunct to common pharmaceutical options for headache management for children and adolescents.

Public Speaking Experience

As a clinician in a new field (yoga therapy for mental health) who also works at a learning hospital, I have much experience with professional presentations to large groups. In 2007 I presented a poster on anxiety sensitivity at the ADAA (Anxiety and Depression Association of America) conference in Seattle, WA. Later in 2007 I was invited to do a 20-minute presentation (very similar to the current CIC model) at the inaugural SYTAR conference in Los Angeles, CA, on yoga therapy for eating disorders. On the Anschutz Medical Campus where Children's Colorado is located, I have presented on the subject of yoga therapy for mental health to 100-200 people for such purposes as a nursing conference (2009), the release of our very own yoga video for teens (March 2012), and to the University of Colorado physical therapy doctoral students (August 2012). In the Denver community at large, I have conducted educational workshops on yoga for children with autism (2011) and on the psychology of yoga at a local yoga school (Axis Yoga, 2009 and 2010). I presented to postdoctoral psychology students in our Behavioral Clinic and to University of Colorado medical students in March 2013. In all past presentations, I have received positive feedback on my dynamic, fun, and interactive style.

Yoga Therapy for Promoting Social Interaction Among Children With Autism Spectrum Disorders (ASD)

Louise Goldberg, MA, ERYT 500

Creative Relaxation®, Margate, FL

Key Words: yoga, autism, children, social interaction

Objective: According to the DSM-IV (American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*, 2000, 299.00), "The central features of Autistic Disorder are the presence of markedly abnormal or impaired development in social interaction and communication, and a markedly restricted repertoire of activity and interests." Playful interaction in a comfortable environment can stimulate com-

munication and social exchanges. Research suggests a correlation between "imitation and play skills" and the development of language skills when a "naturalistic behavioral approach" is used with children on the autism spectrum (Ingersoll & Schreibman, 2006, p. 488).

Teaching Methods: A brief PowerPoint with photographs of children in postures, discussion of techniques to enhance social interaction, and a brief practice session

Description: Yoga the rapy is a movement therapy that appeals to many children with ASD. It is visual, inclusive, and noncompetitive and provides opportunities for each child to participate in his or her own way. Many children smile and laugh spontaneously while trying their favorite yoga postures and games. They develop additional social skills, such as listening to others, waiting their turn, following instructions, and imitating movements.

The therapist can partner with children in nontraditional ways, accommodating sensitivities to touch, preference for deep pressure, reluctance to move, and challenges in following instructions. The interaction may be subtle or brief, but learning to recognize it and build upon it is the foundation for the therapeutic exchange.

Interest to the Community: This approach can be replicated in schools, group or private yoga therapy sessions, in combination with other therapeutic modalities, or at home. It will be useful for yoga teachers, therapists, educators, and parents who work with children with autism and related disabilities.

Experience Presenting to Large Groups

As a teacher and educator, I have spoken before groups of diverse sizes for more than 30 years. During recent years, I have participated in the Weekend with the Expert Series where I addressed parent groups, and I have taught CEU trainings to various-size groups of educators as a consultant to the Broward County, Florida, public school system. I presented a series of PowerPoint presentations to Citrix, a software company in Fort Lauderdale, about health and wellness.

On the state level, I have presented to a large group of nurses at the Florida Rehabilitative Nursing conference in Orlando and to varied parent groups through CARD, the Center for Autism and Related Disabilities.

Nationally, I have been a presenter at the Autism Society of America's annual conferences in 2008, 2009, and 2011 in Florida and Arizona. In February, 2012, I presented at the Learning and the Brain conference in San Francisco.

My presentation style is conversational and clear. I draw from research and my teaching experience and I put my audience at ease and welcome questions.

Yoga for Stress Management in an Outpatient Mental Health Clinic

Marilyn Granger, MD, RYT

DayMark Recovery Services, Winston-Salem, NC

Key Words: Stress response, mental disorders, limbic system, autonomic nervous system (ANS), neuroplasticity, *Yoga Sutras of Pantanjali, samskaras*

Objective: This presentation describes my experience in providing a yoga therapy group for stress management in a clinic serving a poor socioeconomic population having mental disorders. Diagnoses included mood disorders and anxiety disorders with or without alcohol/substance abuse. I will present samples of yoga practices of how I applied yoga techniques of breath awareness and adaptations, postures, chanting, and meditation as tools to self-regulate the stress response. I will share specific responses of the participants. Also, a brief review of obstacles encountered in the clinic setting will be discussed.

Teaching Methods: Lecture with PowerPoint

Description: The stress response is triggered through the limbic system of the brain that then can influence the signals of the autonomic nervous system (ANS), resulting in significant changes on physical, cognitive, and emotional levels, thus affecting the course of a major mental illness. In the field of neuroscience and brain imaging studies we are learning about the neuroplasticity of the brain. The ancient teachings of yoga appear to have application in the positive direction of brain changes. The Yoga Sutras of Pantanjali provides guidance to address the obstacles of the mind and the negative samskaras that can lead to a heightened stress response. Guided by the Yoga Sutras, this yoga therapy for stress management emphasized separating the Seer from the Seen. Self-awareness was reinforced by doing self-reports before and after the yoga practices. The practices were intentionally kept short and simple. Handouts were given to encourage a home practice. Each session began with a brief didactic talk to increase understanding of the intention of the practices.

Interest to the Community: I am very encouraged by some of the responses of immediate stress reduction based on the participants' reports after the practices. Yoga therapy has a definite role as an intervention to improve the quality of life of people with chronic mental illness. Further exploration and refinement of the specific yoga techniques using the breath, postures, chants, and meditation to specific components of stress (physical, cognitive, and emotional) is warranted. Yoga practices can help toward positive changes in the neuroplastic brain.

Presentation Experience

I have had professional presentation experience in small settings. The settings have included the following:

1. Presentation to local pharmacists about a new medication, Prozac, back when it was just coming on the market in the late 1980s.

- 2. Seminars to psychiatry residents about the history and role of community mental health centers.
- 3. In-service clinical staff training about Diagnostic and Statistical Manual IV Diagnoses.
- 4. In-service clinical staff trainings on psychopharmacology.
- 5. In-service clinical staff training on the stress response.
- Four 5-hour yoga workshops on yoga and neuroplasticity, including didactic and yoga practices for the general public.

The feedback from the audience has always been positive about the organization and information provided.

Yoga Therapy, A Complementary Treatment for PTSD: A Neuroscientific Approach

Heather Mason

The Minded Institute

Key Words: PTSD, neuroscience, yoga therapy

Objective: To expound on why yoga therapy is an important treatment for PTSD from a neurologically sound and scientifically grounded perspective and to offer innovative yoga therapeutic techniques that are neurologically informed and population specific.

Description: PTSD has a significant physiological component that may not be effectively treated by cognitive therapeutic approaches, i.e., top-down therapeutic approaches. Further, the specific neuropathology of PTSD brings into question the efficacy of talking therapy as the sole form of treatment. We now know the brain can change, and we should intelligently assess how to capitalize on this neuroplastic potential. Research suggests body-based approaches are an important consideration, given the neuropathology of PTSD, in part because they may support the necessary neuroplastic changes to engage in long-term effective treatment and short-term symptom relief for those with PTSD.

Yoga therapy is emerging as one of the most significant body-based treatments for PTSD because of its profound impact on the nervous system combined with its focus on gentle and graded body awareness. Moreover, as yoga therapy practice is correlated with the development of mindfulness, yoga therapy is also a form of top-down regulation and consequently an integrative form of therapy. During this talk we will explore the neuropathology of posttraumatic stress disorder, highlighting the importance of body-based and integrative treatment approaches. We will also briefly investigate some of the proposed or known neurological effects of yoga, thus, express why yoga therapy is salient and appropriate treatment for working with posttraumatic stress. Finally, we will cover a

few innovative yoga techniques, developed by the Minded Institute, that call on the link between neuroscience and yoga, which specifically caters to the psychological and neurological needs of those with PTSD.

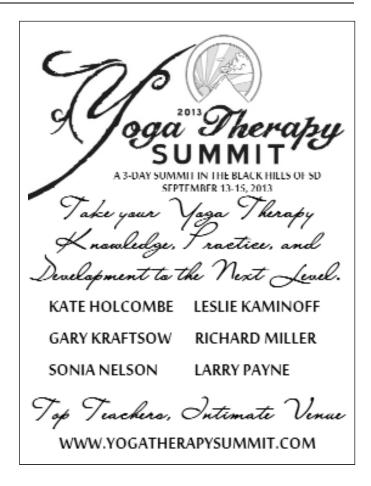
Interest to the Community: Yoga therapy is currently being touted as emerging CAM treatment for PTSD. Many yoga therapists appreciate the importance of trauma-sensitive yoga and how yoga may be generally useful for those with PTSD. Nonetheless, few practitioners are aware of the physiological basis of yoga for the treatment of PTSD or are unclear about the actual relationship be tween yoga and physiological and neurophysiological changes. By arming yoga therapists with neuroscientific insight, they will be able to develop practices that are not only trauma sensitive, but that meet the actual neuropathology of PTSD more effectively, thus providing more successful interventions. Further, yoga therapists should be more efficacious in their efforts to convince the med i cal and psychological community of the benefits of offering yoga to a PTSD population.

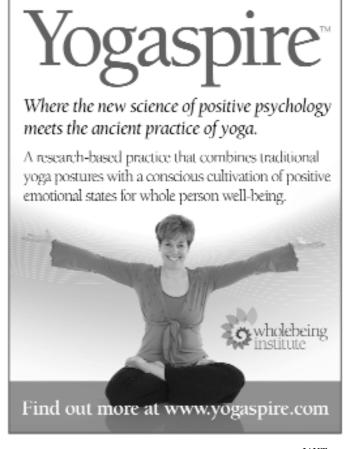
Teaching Methods: Lecture and 5 minutes of guided practice.

About the Pre senter:

Heather Mason is the founder of the Minded Institute, an organization that trains professionals and develops, implements, and researches innovative methods for mental health treatment based on the fusion of yoga therapy, mindfulness techniques, neuroscience, and psychotherapy. The Minded Institute offers a renowned 500-hour yoga therapy training program in the UK for professionals who are specifically interested in using yoga therapy to work with dinical mental health populations.

Heather possesses a robust educational background, including an MA in psychotherapy, an MA in Buddhist studies, and an ongoing MSc in neuroscience. She is also a 500 RYT, a yoga therapist, and an MBCT facilitator. In addition to forming the Minded Institute and supporting its various activities, Heather created and continues to teach an ongoing elective at the Boston University School of Medicine for first and second year medical students, focusing on the neural correlates and clinical applications of yoga. Previously, Heather lectured on the neurobiology of PTSD neurological mechanisms of yoga and mindfulness as relevant interventions for Boston Trauma Center yoga training, and she developed a program for those with PTSD at the Maudsely Hospital in London, the main psychiatric hospital of the UK. Heather is a seasoned lecturer, and recently she organized a conference in London on Yoga and the Brain, where she offered a keynote address alongside some of the most respected researchers in the field of yoga therapy.





Introduction of Yoga for Stress Reduction to a Graduate Medical Education Program in Emergency Medicine

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Key Words: Yoga, physician wellness, burnout

Objective: A recent study in the Archives of Internal Medicine reported that 46% of physicians in the United States have one or more symptoms of burnout and 38% have positive screens for depression. Yoga has been introduced successfully into schools and business settings and has been shown to help people manage stress and have improved levels of wellness. This presentation describes a pilot program that introduced yoga into the curriculum of an emergency medicine graduate medical education program.

Teaching Methods: During a 2-year period, instruction in simple *asana*, *pranayama*, and meditation was included as part of the wellness curriculum of the emergency medicine residency program in Fresno, California. The techniques taught included quick practices they could use during a shift to help them become present and refocus and more in-depth techniques they could explore outside of the emergency department.

Description: Forty residents training to be emergency physicians and some of their faculty have now been exposed to some key elements of yoga that can help with stress reduction and promotion of well ness. During the pilot period, burnout amongst the residents lessened, based on voluntary responses to the Maslach Burnout Inventory. The number of residents who describe having a regular yoga practice increased during this time from 0% to 10%. Other residency programs have begun to invite us to come share the se techniques with their residents.

Interest to the Community: This program can be easily replicated and can provide young doctors with techniques to help with stress reduction that they could use throughout their careers. It also helps make physicians aware of the benefits of therapeutic yoga for themselves and their patients.

Description of Professional Presentation Experience

Dr. Weichenthal has been a clinical educator in emergency medicine for 15 years. Her duties include providing 6–10 didactic lectures per year to residents and medical students. Dr. Weichenthal has also been invited to speak at regional and national conferences to large groups on a variety of topics, including physician wellness, medical education, and wilderness medicine.



