

***Comments on the Yoga Alliance Policy
by Marlysa Sullivan***

In late January, The Yoga Alliance (YA) made an announcement regarding yoga therapy that has incited much discussion in the yoga world and brought to the forefront the need for a clearer understanding of this emerging field and for distinctions to be made between traditional yoga teaching and yoga therapy. Over the last several years, I have been involved in some of the significant milestones in the development in the field of Yoga Therapy and wanted to offer some thoughts on the recent YA announcement.

I was a member of the educational standards committee for the International Association of Yoga Therapists (IAYT) as well as the founding clinical director for the Masters of Science in Yoga Therapy Program at Maryland University of Integrative Health (MUIH). I teach courses in theoretical and applied yoga therapy and lead graduate students in clinical supervision at MUIH and Aum hOMe Shala, both IAYT accredited yoga therapy programs. In addition, I teach a graduate-level university course on yoga and physical therapy to students in Emory University's Doctor of Physical Therapy program. I am also a co-founder of the Center for Integrative Yoga Studies which offers 200 and 500 hour yoga teacher training programs with a meditative and therapeutic focus. While I do feel a distinction between traditional yoga teaching and the field of yoga therapy and practicing yoga therapists is needed and important, the Yoga Alliance policy and their current stance on yoga therapy may have unintentionally fractured the yoga community, even as it attempted to address this important issue and start a necessary discussion.

Through my work on the IAYT's educational standards committee, I had the opportunity to experience a fully collaborative, transparent and mindful process involved in shaping the field of yoga therapy. I found people willing to put aside personal agendas in favor of a greater unified vision for the field. In the process of creating the standards, feedback was requested and received from within the committee as well as from IAYT members and member schools. In addition, opinions and ideas from experts in the development of other complementary fields were brought in to help us learn how to help propel the field forward in a professional manner that would respect the ancient tradition of yoga and integrate current knowledge to help this practice to be accessible to those in need.

Having taught in various settings including physical therapy, integrative health, yoga therapy and traditional yoga teaching, I have been incredibly inspired by the work we are doing in both traditional yoga and yoga therapy. Teaching in these different environments makes it very clear that there is indeed a distinction between teaching yoga in a therapeutically-oriented manner, being a yoga therapist and working as a healthcare professional who incorporates yoga into their practice. It is for this reason that I do want to emphasize that I am in complete support of the creation of distinctions and language that will serve to help yoga teachers, yoga therapists, the public and the healthcare field in clarifying and understanding the difference between yoga therapy and yoga teaching. I applaud Yoga Alliance for wanting to create this clarity as well as suggesting verbiage such as "therapeutically oriented yoga," which does provide useful alternatives and descriptions toward this end.

My main concern regarding the new YA policy is the apparent misunderstanding and misrepresentation of the definition of the word "therapy." To say that the word "therapists" implies "diagnosing and treating" is a significant and unfortunate misunderstanding of the word "therapy" or "therapist" as well as a reflection of a lack of awareness of the work IAYT has already done on this very subject. Many therapists in many different fields do not provide a medical "diagnosis," nor do they "treat" mental and/or health conditions. As a licensed physical therapist (PT) it was always made clear to me that we do not, and legally cannot, diagnose medical conditions. In my PT work I may create a "PT diagnosis" that fits within my clearly defined scope of practice which is very different than a "medical diagnosis" and treatment. As a PT, I work with what I find within my scope of practice, I do not "treat" the medical diagnosis. IAYT has carefully articulated a long and short definition of yoga therapy that does not include diagnosing or treating medical conditions. These terms were added by the Yoga Alliance in their announcement and are unfortunately misleading, inaccurate and create unnecessary confusion.

A quick look at the IAYT definition of Yoga Therapy will highlight this:

“Yoga therapy is the process of **empowering** individuals to **progress toward improved health and wellbeing** through the application of the teachings and practices of yoga.

Yoga therapy is the appropriate application of these teachings and practices in a therapeutic context in order to **support a consistent yoga practice that will increase self-awareness and engage the client/student’s energy in the direction of desired goals”**

These statements illustrate the very different therapeutic relationship that is the basis of yoga therapy. In this non-hierarchical model, the therapist is there to help empower and support a process that moves towards the client’s own goals and well-being. This is very different than the model of “diagnosis” and “treatment”.

The definition further states:

“The goals of yoga therapy include eliminating, reducing, or managing symptoms that cause suffering; improving function; helping to prevent the occurrence or reoccurrence 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.** “

This expanded definition illustrates that the intentions of yoga therapy are not about “treatment,” but rather to assist the individual in moving towards well-being and a shift in the relationship to the condition, suffering or pain of the individual.

For the Yoga Alliance to state the term “therapy” or “therapist” implies a medical diagnosis and treatment, seems out of alignment with any existing understanding of “therapy” and with the IAYT’s definition of yoga therapy in particular. Yoga Alliance’s opinion on what “therapy” means or implies (legally or otherwise) is misleading and is further concerning because it feels hierarchical, lacks transparency as to how that particular definition was created and also shows a lack of insight or awareness of the larger repercussions stemming from these inaccurate definitions and positions on the work and practices of their members and on the larger yoga and yoga therapy communities.

This definition and position on “therapy” and yoga therapy are further out of alignment, not only with other existing fields of “therapy” and the IAYT, but the public’s actual understanding and use of yoga for health. In Yoga Alliance’s own “Yoga in America “ study, 49% of people reported using yoga for health reasons and 11% were referred by a healthcare professional¹. In other studies, such as the 2012 National Health Interview Survey, the use of yoga for health by the general public continues to increase, with 9.5% of Americans using yoga as a complementary health service². Other surveys of those practicing yoga illustrate that significant numbers of people use yoga for general wellness (78.4%), improved immune function (49.7%), back pain (19.7%) and other health reasons³. Many people see yoga as a way to work with or alleviate a health condition (50% and 28% respectively)⁴. The Yoga Alliance’s stance on yoga therapy, therefore, seems at odds with the public’s perception and use of yoga as well as the results of their own commissioned study.

What is also of particular concern is the Yoga Alliance’s response to questions or concerns regarding their new policy. When questions or issues regarding their policy have been brought up, concerned parties have felt dismissed by Yoga Alliance as they were simply referred back to the policy as written without having an opportunity to pose their questions or gain clarity. The unwillingness of Yoga Alliance to look at their policy to see if it is meeting the needs of the community or if revisions need to be made demonstrates a lack of collaboration and transparency that feels at odds with creating community and cohesion in yoga.

In this same vein, I feel the policy over-reaches and over-burdens practitioners by asking for a lengthy disclaimer to be placed on any outside marketing materials and external websites. Regardless of any enforcement issues this policy raises, of which there are several, it also fails to recognize or respect the work and professionalism of members who have earned titles and credentials that are affected by these policies. Yoga Alliance did not issue the credentials or provide the training for these affected professionals so it feels entirely inappropriate for YA to attempt to dictate how a professional with an earned credential may refer to themselves, especially if that credential and title was earned through a respected and accredited educational program.

It remains unclear what the purpose or intent of the new Yoga Alliance policy and position on yoga therapy might be. It is likely that it was not intended to fracture the yoga community or attempt to destabilize the emerging field of yoga therapy by creating unnecessary barriers to entry or spreading misinformation about the field or practice. If this policy had been approached with greater transparency as a collaborative process involving the public, the IAYT and practicing healthcare professionals it may have been received much differently and really met the needs of the community of yoga teachers, yoga therapists, healthcare professionals and the general public. As it stands, many members of the yoga therapy profession and others in the healthcare field have been left confused and concerned wondering if the Yoga Alliance is an organization that no longer supports or values them as members. It is my hope that the Yoga Alliance will re-examine their policy and re-visit their definition of “therapy” and collaborate with the IAYT and other healthcare professions in this process to ensure that they are meeting the needs of the community and all their members while also supporting them in an alliance of clarity, cohesion and growth for all the expressions and applications of yoga.

In Service to Community,

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“The contents and opinions in this letter are those of Marlysa Sullivan and are not necessarily the views of Maryland University of Integrative Health, IAYT, or AUM hOMe Shala.”

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