

BEFRIENDING THE SURVIVOR: A QUALITATIVE ANALYSIS OF YOGA AS AN  
ADJUNCTIVE THERAPY FOR FEMALE SURVIVORS OF SEXUAL ABUSE

By

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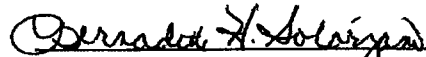
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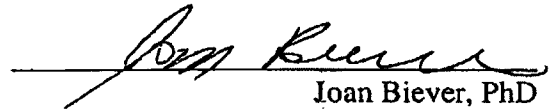
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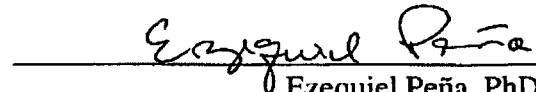
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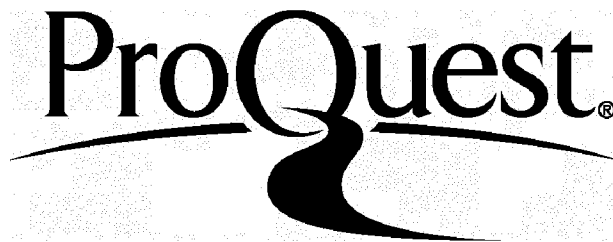
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## **ABSTRACT**

Within the United States, mind-body healing techniques are increasingly used in ever-expanding multi-disciplinary approaches to healing. The use of yoga as an adjunctive therapy for female survivors of sexual abuse was examined using a phenomenological qualitative analysis. Four female survivors of sexual abuse, ages 29-66 participated in six weeks of yoga. The participants chose to be a part of the study after responding to posted fliers. Each of the participants were also attending individual therapy at an agency providing services to sexual abuse survivors. Individual semi-structured interviews were conducted at the conclusion of the yoga classes to explore participants' experiences and whether the yoga practice had any impact on their healing processes. Significant themes emerged within the data and included: an experience of yoga as therapeutic, finding a sense of calm and relaxation, a shared journey of healing, connectedness to body, empowerment, cultivating an open heart, self-compassion and acceptance, physical embodiment of emotion, others noticed a change, yoga practice translates to daily life, physical results and plans to continue practicing yoga. Thus, the study participants described physical, psychological and emotional benefits from the addition of yoga to individual therapy. Future research should address the barriers against broader implementation of adjunctive therapies for the treatment of trauma in the field of counseling psychology.

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## **CHAPTER I: INTRODUCTION**

*“Yoga teaches us to cure what need not be endured and endure what cannot be cured”*

*B.K.S. Iyengar, India.*

### **Statement of the Problem**

Within the United States today there is increasing awareness of the importance of the mind-body connection. The practice of traditional eastern healing methods such as acupuncture, meditation, Tai Chi, Qi Gong and yoga has proliferated in recent years (Miles et al., 2013). According to a national survey by Birdee et al. (2008) while 3.7% of the population reported practicing yoga in 1997, there was a 5.1 % prevalence of individuals practicing yoga in 2002. Many variations of yoga have proliferated throughout the United States. Western yoga practitioners sometimes utilize yogic postures without the meditation or breath control components, while others focus primarily on meditation or breathing exercises.

Individuals and professionals are combining western medical advances with established eastern medical techniques in an effort to approach health more holistically (Rao, Varambally & Gangadhar, 2013). As our culture embraces these traditional healing methods, recent research specifically establishes an impressive link between ancient healing methods, such as yoga, and mental health (Streeter et al., 2007). The ancient Indian tradition of yoga is gaining popularity among the general public and health providers alike. However, despite increasing public awareness of the mind-body connection, counseling psychologists often lack knowledge of the opportunities and advantages of adding complementary and alternative approaches to the services they provide.

Yoga incorporates mind-body techniques by guiding the body through a series of postures while focusing on breath and mindfulness. Yoga practitioners are encouraged to be mindful of physical sensations that they experience as they move through the various poses. Yoga asanas, or poses, can be challenging, requiring strength and balance or more passive and restorative. The goal of yoga is not to enter into seemingly impossible stretches and postures. Instead, the intention is the focusing and calming of the mind despite the challenge or discomfort that the yoga poses present. This is achieved through breath awareness, intention setting, and relaxation training. As a result, yoga “enables patients to experience their bodies in a new way” (Boudette, 2006, p. 168).

Because of this connection, it is not surprising that researchers demonstrated the benefits of yoga for those suffering from eating disorders (Dittmann & Freedman, 2009), post-traumatic stress disorder (Descilo et al., 2010), domestic violence (Allen & Wozniak, 2011) and depression (Streeter et al., 2007). In each of these cases, people are often both physically and psychologically affected by the pain they have endured. Survivors of sexual assault often perceive their bodily, sensory, and psychological experiences as stolen and feel a lack of control over their own experiences. The practice of yoga addresses the mind-body connection that may be lacking in a traditional therapeutic context. Through yoga, I believe that survivors of sexual abuse may experientially rediscover ownership of their bodies and their experiences in a manner that complements and enhances the goals of traditional psychotherapy.

### **Purpose of this Study**

The purpose of this study is to assess the applicability of yoga as a complement to traditional psychotherapy for the treatment of sexual abuse trauma. It will investigate the

role of yoga as sexual abuse survivors work toward goals established in therapy. This paper will specifically address the importance of addressing mind-body aspects of mental health through the application of yoga for sexual abuse survivors.

### **Significance of this Study**

The word yoga means union (Chaoul & Cohen, 2010, p. 144). I hope to broaden awareness, through this study, of the union of the mind-body connection for survivors of sexual abuse. This inner-connectedness is rarely addressed in the context of traditional psychotherapy though survivors of sexual abuse have been physically violated. Through this study I aim to explore the power of incorporating yoga as an adjunctive therapy to traditional psychotherapy.

The psychological benefits of good physical health are already well established. Yoga incorporates these advantages and gently encourages exploration of the body and mind. Relaxation and mindfulness are emphasized while practitioners are empowered by regaining ownership of their bodies. “Yoga offers a non-verbal, experiential adjunct to talking therapy that provides an opportunity for connection with the physical body and the inner experience” (Boudette, 2006, p. 170). As Western societies continue to acknowledge and incorporate Eastern approaches to healing, it will be important for counseling psychologists to understand the benefits of these adjunctive therapies.

Although there is considerable research addressing yoga as an adjunctive treatment for a variety of physical and psychological ailments, there is a scarcity of research on the use of yoga for the treatment of sexual trauma. This study will begin to fill this gap in the counseling psychology field by providing a qualitative exploration of yoga an adjunctive therapy for female survivors of sexual abuse.

## **CHAPTER II: LITERATURE REVIEW**

### **What is Yoga?**

#### **Philosophical Origins of Yoga**

The Sanskrit word yoga means union and is often interpreted as the balance and inner-connectedness of the mind, body and spirit (Chaoul & Cohen, 2010). Yoga is an ancient Indian philosophical tradition that encompasses a wide range of practices. It is not a religion, but a particular way of living that has been practiced for over 4000 years (Vaze & Joshi, 2010). The Patanjali identified the Eight Limbs of Yoga in the ancient Yoga Sutra. They include yamas (ethical disciplines), niyamas (individual observances), asana (postures), pranayama (breath control), pratyahara (withdrawal of the senses), dharana (concentration), dhyana (meditation) and samadhi (self-realization, enlightenment) (Bryant, 2009). The three main components of yoga that are most commonly recognized and practiced in the West are breath awareness and control (pranayama), meditation (dhyana), and yogic postures (asanas) (Vaze & Joshi, 2010).

#### **Pranayama**

Pranayama is a Sanskrit word meaning “control of energy” or “expansion of energy” (Brown & Gerbarg, 2009). Breath awareness and control have been important parts of a complete yoga practice for thousands of years by Eastern societies (Brown & Gerbarg, 2009). The mind and the breath are thought to be closely interconnected, with control of the breath having a significant impact on the mind (Brown & Gerbarg, 2009). In yoga tradition, stress is thought to occur as our minds constantly shift from avoiding unwanted experiences or thoughts and approaching that which we desire (Brown & Gerbarg, 2009). In yoga, the breath is the vehicle through which we abandon this

perpetual state of fluctuation and become present in the moment. Focus on the present offers respite from stress and helps us achieve the peace that we desire (Brown & Gerbarg, 2009). Yoga practitioners frequently reference the ability of the breath to bring stillness and quiet to the mind.

Ujjayi breath, translated as victorious breath, is a commonly used breathing exercise in yoga practices within the United States. It involves a steady diaphragmatic inhalation through the nostrils followed by a controlled nasal exhalation through a narrowed throat and air passageway, creating a whispering sound. Ujjayi breath is often said to sound like the ocean by yoga practitioners. Inhalations and exhalations are of equal duration. This rhythmic breathing is paired with yogic postures and is shown to “activate the parasympathetic nervous system” (Brown & Gerbarg, 2009, p. 56).

Findings from recent research support the benefits of yogic breathing exercises for the improvement of both physical and psychological well-being (Brown & Gerbarg, 2009). Practitioners of Ujjayi breath and other yogic breathing techniques have been found to demonstrate increased vagal tone or parasympathetic response (Porges, 2001). Increased parasympathetic response has been connected with emotional regulation. Philippot, Gaetane, and Blairy (2002) found that voluntary breath change was implicated in 40% of the variance in common emotions such as fear, anger, sadness, and even joy. Ujjayi breathing not only activates the parasympathetic nervous system, but improves heart rate variability (Carney et al., 1995). Low heart rate variability is often present in individuals coping with anxiety, panic disorders and depression (Friedman, 1998).

Ujjayi, the “om” chant, slow breathing with extended exhalation, and other yogic breathing exercises show promise when utilized in various therapeutic contexts. Cappel

and Holmes (1984) conducted a randomized study of 70 college students who used slow breathing with extended exhalations in anxiety-inducing situations. The implementation of this breath control exercise was shown to reduce psychological and physiological arousal for these students (Cappo & Holmes, 1984).

Pranayama has also been shown to be effective in the treatment of individuals coping with a traumatic event. After the 2004 Asian Tsunami, the prevalence of post-traumatic stress disorder (PTSD) demanded creativity in treatment methods. A waitlist-controlled study involving 180 survivors living in refugee camps showed that pranayama practice significantly reduced symptoms of PTSD and depression as measured by the PTSD Checklist-Civilian and Beck Depression Inventory (Descilo et al., 2006). These improvements were maintained at 6 week, 3 month, and 6 month follow-ups.

There also appears to be support for pranayama for individuals who have endured sexual trauma. Findings by Sageman (2004) show that survivors of sexual abuse benefit from pranayama in combination with psychiatric and psychological therapies through a reduction in PTSD symptoms.

Pranayama was also found to be effective in the treatment of depression and dysthymia in a study by Janakiramaiah (1998). In fact, the effects of the pranayama practice are shown to be equivalent to treatment with 150 mg/day of imipramine, a tricyclic antidepressant, in 45 hospitalized patients with severe depression (Janakiramaiah et al., 2000). According to Janakiramaiah et al. (2000), Sudarshan Kriya Yoga, a particular form of pranayama, was shown to be only slightly less effective than electroconvulsive therapy.

## **Dhyana**

Patanjali's Yoga Sutras describe meditation as a state of pure consciousness. According to the Yoga Sutras (200 B.C.), meditation is more than simply sustained focus or concentration. Meditation is expanded awareness. Most yoga practitioners begin meditation by focusing on the breath or a particular physical sensation, chanting a mantra, using imagery, or gazing upon an object. Seated cross-legged pose is the most commonly practiced position and the early morning hours are considered best for meditation. However, in the United States yoga practitioners often meditate at the end of their asana and pranayama practice.

Dhyana is often practiced during the last portion of yoga classes in the United States. Savasana, which means corpse pose, is the last posture that is taken in most yoga classes. The previous asanas and pranayama are considered preparation for this final relaxation pose. In savasana, practitioners lie in the supine position with arms relaxed by the sides and legs extended and relaxed. Savasana is said to be the most important of all yoga asanas. Although most practitioners (yogis) would say that their entire practices are forms of "moving meditation," it is during savasana that many practitioners enter a full meditative state (Khalsa, Shorter, Cope, Wyshak & Sklar, 2009).

The methods by which western yogis practice dhyana are as varied as the many forms of meditation in general. For example, transcendental meditation was first introduced to the United States by Maharishi Mahesh Yogi in 1959 (Smith, 1976). The practice involved two daily seated sessions of passive attention and repetition of a unique phrase or mantra.

In another form of meditation, Loving-Kindness Meditation, practitioners are encouraged to focus attention on the region of the heart and then toward a person for whom they have loving feelings and warmth (Frederickson, Cohn, Coffey & Finkel, 2008). They are then instructed to offer those same feelings toward themselves and, later, others. The goal is to foster positive emotions of love, kindness, contentment and compassion and for these to endure throughout daily living. Among the many forms of meditation, perhaps the most commonly recognized and studied form is Mindfulness Meditation.

### **Mindfulness Meditation**

Mindfulness is an ancient Buddhist practice and is gaining popularity in modern general and clinical applications. It has been defined as a “moment-to-moment awareness of one’s experience without judgment” (Davis & Hayes, 2011, p. 198). Mindfulness can be practiced apart from a meditative state, but mindfulness meditation (Vipassana) and its benefits are central to the practice of yoga. Vipassana is the systematic focus of attention to physical sensations, thoughts, emotions and the surrounding environment (Germer, Siegel, & Fulton, 2005).

Mindfulness meditation and its benefits for emotional regulation have been found to have strong empirical support (Davis & Hayes, 2011). This is believed to be largely attributable to the reduction in physiologic sympathetic activity resulting from meditation. Hoffman, Sawyer, Witt & Oh (2010) recently conducted a meta-analysis of 39 studies examining mindfulness based therapies and their effects on anxiety and depression symptoms. The authors found a large effect size for clinical populations and a moderate effect size for the 19 studies that collected long-term, follow-up data. This

study provides support for mindfulness based therapies for the treatment of depression and anxiety symptoms.

Additionally, neurological studies on the effects of mindfulness meditation indicate that self-observation “disengages automatic pathways created from prior learning and enables present moment input to be integrated in a new way” (Davis & Hayes, 2011, p. 201). Thus, mindfulness meditation has promising clinical applications for a client who has suffered physical trauma and is having difficulty with the current automatic emotional and physiological responses to the experience.

### **Asana**

Asanas are the physical movements and poses that are popularly associated with the term yoga. In fact, in the United States when one refers to the practice of yoga, they are typically referencing asana. However, asana practice is detailed in Patanjali’s Yoga Sutra, dating back to 200 B.C. Much like pranayama, yoga asanas are practiced as preparation or a pathway through which the other Eight Limbs of Yoga are achieved. In Hatha yoga, asanas, combined with pranayama and dhyana, lead toward self-awareness (Riley, 2004). Yoga asanas involve “systemic isometric contractions of the skeletal muscles” (Miles et al., 2013, p. 39). The postures increase strength and flexibility and include: backbends, forward bends, twists, balancing, and standing, and inversions (Riley, 2004). Even more importantly, “they cause a beneficial influence on the four major systems of the human body: for locomotion, through the musculoskeletal system; for oxygen delivery, through the cardiopulmonary system; and for the nervous system and the endocrine control systems” (Raub, 2002, p. 798). Although asana is an important

part of a complete yoga practice, many serious yogis cringe at the implication that yoga is simply exercise.

Despite the sometimes unwelcome comparison, the practice of yogic asanas boasts many of the same beneficial effects as exercise in general (Smith, Greer, Sheets and Watson, 2011). For instance, Swapna, Haripriya, Tamilselvi, & Hemamalini (2012) found that seven days of yoga training resulted in significant decreases in hip-to-waist ratios and systolic blood pressure for people with hypertension. A study by Pastucha et al. (2012) provided similar support for the physiological benefits of yoga including decreased risk of developing cardiovascular disease. Yoga practitioners in this study were found to have lower glycaemia, cholesterol, triglycerides, blood pressure and improvement in overall subjective measures of quality of life.

Yoga asanas also show promise for psychological health and have been documented as a promising treatment for mood and anxiety disorders. Researchers have determined that individuals suffering from depression and anxiety typically have low Gamma-aminobutyric (GABA) levels, a calming inhibitory neurotransmitter (Brambilla et al., 2003; Sanacora et al., 1999). In a study by Streeter et al. (2007) a 60 minute asana practice was followed by a 27% increase in GABA levels for experienced yoga practitioners. Streeter et al. (2007) point out that the accessibility of yoga as a treatment with few, if any, side effects when compared to pharmacologic treatments is worth serious consideration.

Sarang and Telles (2006) found additional psycho-physiological benefits in their study comparing simple supine rest and yoga asana combined with transcendental meditation. The results of the study demonstrated that the combination of yoga postures

and meditation resulted in a subsequent reduction in heart rate that was greater than the reduction of heart rate following supine rest. The participants in the asana-meditation group seemed to experience “parasympathetic dominance” after the session involving lowered heart rate and heart rate variability (Sarang & Telles, 2006).

### **Yoga and Medicine**

Mind-body techniques for the treatment of physical and psychological ailments have a rich history in Eastern medicine. There is an acknowledgement of a connection, or a union, between the physical, psychological, and spiritual parts of the human experience. While health in the East is approached holistically, Western medicine is more compartmentalized. In fact, the concept of mind-body approaches to health is in its nascent stages comparatively. Nonetheless, Western society has experienced an undeniable proliferation of mind-body treatments in recent years.

As the practice of yoga has become widespread in the United States, researchers have begun to wonder about its potential applications for the treatment of various ailments. Yoga is no longer considered simply an alternative treatment but a standard of care in many treatment centers across the country (Chaoul & Cohen, 2010, p. 160). The benefits of yoga for the improvement of physical health are established with regard to brain activity, immune function, and endocrine function (Chaoul & Cohen, 2010), smoking cessation (Bock et al., 2012) cardiovascular disease risk (Cade et al., 2010; Bijlani et al., 2005; Herur, Kolagi, & Chinagudi, 2010; Pastucha, et al., 2012), diabetes (Agarwal et al., 2003; Agte & Tarwadi, 2004; Duraiswamy, Balasubramaniam, Gayathri & Suthanthirakannan, 2011; Nagarathna, Usharani, Rao, Chaku, Kulkarni & Nagendra, 2012;) carpal tunnel syndrome (Garfinkel et al., 1998); osteoarthritis (Garfinkel et al.

1994), epilepsy (Lundgren, Dahl, Yardi & Melin, 2008), stroke rehabilitation (Garrett, Immink and Hillier, 2011; Lynton, Kligler, & Shiffett, 2007) and psycho-physiological effects of cancer (Banerjee, Vadiraj, Ram, et al., 2007; Raghavendra, Nagarathna, Nagendra, et al., 2007). In some cases, the practice of yoga has effects similar to pharmacologic treatment. For instance, Mishra, Singh, Bunch & Zhang (2012) found such impressive links between yoga practice and reduced cardiovascular disease risk that they concluded “a commitment to an intensive yoga therapy can...reduce various cardiovascular risk factors to levels which rival those attained by prescription drugs” (p. 248).

### **Yoga and Psychology**

Although the medical community has begun to embrace the practice of yoga as a viable treatment option for patients, the psychological community has been slower to examine potential benefits. However, in recent years, many studies have been published, providing support for the use of yoga as a therapy for a wide range of psychological problems including depression (Butler et al., 2008; Woolery, Meyers, Sternlieb & Zeltzer, 2004). The addition or substitution of yoga with traditional psychopharmacologic treatment maybe help to mitigate the undesirable side-effects associated with medication (Rao, Varambally & Gangadhar, 2013).

In a study by Woolerly, Myers, Sternlieb, and Zeltzer (2004), 28 young adults were randomly assigned to a yoga group or control group. The yoga group participated in two yoga classes per week for five weeks. Participants in the yoga group showed significant improvement in Beck Depression Inventory scores, decreased negative mood

and fatigue, and decreased levels of trait anxiety. Interestingly, the effects were seen halfway through the class and continued throughout the duration of the study.

Similar findings were obtained by Smith, Greer, Sheets and Watson (2001) who found decreased depression stress, and anxiety scores and increased hope scores for yoga practitioners after 7-14 yoga sessions. The participants also demonstrated decreases in salivary-cortisol levels, pointing to the effectiveness of yoga for stress-reduction.

## **PTSD**

Yoga for the treatment of post-traumatic stress disorder (PTSD) is receiving attention as psychologists look for versatile, effective and culturally-sensitive methods for handling natural disasters such as the 2004 South-East Asia tsunami and man-made disasters such as the World Trade Center Bombings of 9/11. Descilo et al. (2010) examined the effects of yoga breath-based intervention with refugees living in a camp eight months after the 2004 South-East Asia tsunami. The breath-based yoga intervention was taught as two hour sessions over four consecutive days. Tsunami survivors reported rapid reduction of PTSD symptoms which were sustained at a six-week follow-up. At the start of their study, some survivors reported an inability to return to their fishing villages because the sound of the ocean caused PTSD symptoms. However, by the conclusion of the study, some participants were able to return to their villages.

Similar improvements were shown with Australian Vietnam War veterans diagnosed with PTSD (Carter & Byrne, 2004). In this two year study, yoga significantly improved depressive symptoms. Pranayama and meditation in addition to yoga asana greatly reduced PTSD symptoms and specifically anxiety, insomnia, and rage (Carter & Byrne, 2004).

## **Eating Disorders**

The addition of yoga to traditional forms of psychological therapies acknowledges “the body as a modality for healing” (Douglas, 2011, p. 84). For cases such as eating disorders in which the body is integrally related to psychological functioning, it makes sense that the inclusion of a physical therapy might be helpful. As Boudette (2006) asserts- it seems that sometimes “words are not enough” (p. 170).

Numerous researchers have identified the benefits of yoga as an adjunctive therapy for clients with eating disorders (McIver, McGartland & O’Hallorn, 2009; Dale et al., 2009; Dittman & Freedman, 2009; Douglas, 2011). In fact, some eating disorder treatment facilities are including yoga classes as an adjunctive therapy (Boudette, 2006; Douglas, 2011). Oftentimes, these yoga classes are led by a psychologist who specializes in the treatment of eating disorders and is also a certified yoga instructor. According to Boudette (2006) who is one such therapist and yoga teacher, “yoga helps patients to experience their bodies in a new way (p. 168).” She described clients with eating disorders as “disconnected” from their bodies as well as their “inner experience[s]” (p. 168). Boudette (2006) shared the story of a particular client with whom she worked individually. Boudette and her client collaboratively composed a yoga practice that encouraged the client’s positive connection to her body and also challenged her emotionally and physically.

There is great potential for clients to be empowered by the sense of control that can be cultivated in a regular yoga practice. Yoga challenges the practitioner to cope with physical and emotional discomfort. At the same time, there is a mindfulness of the physical needs and limitations of the body. Respect and compassion for the bodily

experience should inform all yoga practices. Clients are empowered to pay attention to their bodies and do only what is right for them in each particular yoga session (Boudette, 2006). Douglas (2011), another therapist and yoga instructor finds that yoga classes teach: “it is safe to relax, it is okay to respond to the sensations of the body (adjusting or coming out of poses altogether)” (p. 92).

A qualitative study on female clients’ experiences of a 12 week yoga course identified a reported shift between feelings from disconnectedness to connectedness with bodily experience (McIver et al., 2009). The researchers found that participants, beginning in the 9<sup>th</sup> week, went from feeling estranged from their bodies to feeling empowered in regard to their bodies. This connection was associated with a phenomenon of ease, relaxation and enjoyment of the body.

### **Yoga and Sexual Abuse Survivors**

Though seemingly distinct phenomena, it has been found that many people suffering from eating disorders have also suffered from sexual abuse (Brown, Russell, Thornton & Dunn, 1997; Tice, Hall, Beresford, Quinones & Hall, 1989;; Wonderlich, et al., 2001). However, even when these do not co-occur, the bodily experience is inextricably linked to both experiences of sexual trauma and the experiences of eating disorders. Douglas (2011) pointed out that we learn about who we are through our bodies and through the movement of our bodies. Though there is far less research on yoga as an adjunctive therapy for sexual abuse survivors, many of the findings on yoga and eating disorders relate to sexual abuse survivors.

Douglas (2011) wisely stated that “As humans we have a visceral knowledge that when we change what we do with and to our bodies, our experience changes” (p. 92). A

yoga practice is a safe place for clients to reclaim and reconnect with their bodies. Douglas emphasizes our natural tendency to learn through bodily experiences. In many ways, survivors of sexual trauma have learned to feel disempowered in regard to their bodies. Yoga offers an opportunity for “embodied learning” that contrasts with the experience of sexual trauma (Douglas, 2011, p. 85). It is a supportive space for clients to be challenged physically and emotionally, resulting in new, more positive mind-body associations. Practitioners “literally ‘embody’ new ways of thinking” (Douglas, 2011, p. 85).

### **Narrative Therapy**

Yoga is a natural fit as an adjunctive treatment to narrative therapy for survivors of sexual abuse. Similar to yoga, narrative therapy invites alternative explanations and understandings for survivors of sexual abuse. A narrative view of the human condition is that “there are no essential truths” (Freedman & Combs, 1996, p. 22). Realities, and therefore our beliefs about ourselves, are constructed from social interactions between people. We make meanings from our social interactions. The resulting narratives guide our understandings of who we are and lead us in defining ourselves.

It seems that the practice of yoga and narrative therapy have additional surprising commonalities. The aim of both practices is not necessarily “resolving or working through problems,” but “creating preferred experience” (Gehart & Pare, 2008, p. 302). Both yoga and narrative therapy help clients to move away from problem saturated narratives and work toward “a thickening of particular accounts of identity aligned with persons’ hopes and commitments” (Gehart & Pare, 2009). In narrative therapy there are no true versions of the self. Narrative therapy, in particular, collaborates with clients to

co-create stories featuring client's preferred versions of themselves (White 2007). For example, a female client who has experienced sexual abuse and defined herself as a victim at the outset of narrative therapy may come to view herself as a survivor. Inherent in the storyline of a survivor are strengths, resilience and resources. This shift in perspective occurs through the thickening of storylines that are not necessarily in line with a client's current personal narrative. This occurs through collaborative conversations that explore unique outcomes.

### **Unique Outcomes and Alternative Understandings**

Identifying unique outcomes as a gateway to re-authoring stories is a trademark of narrative therapy (White, 2007). Unique outcomes are exceptions to the prevailing narratives of anxiety, self-hate, shame or culpability. They are small windows into alternative explanations or possibilities in our life stories. Oftentimes these unique stories are obscured by the dominant storyline (Miller, Cardona & Hardin, 2006). Narrative therapists seek to develop these alternative, more preferred narratives through "questions that encourage people to recruit their lived experience, to stretch their minds, to exercise their imagination, and to employ their meaning-making resources" (White, 2007, p. 62). For sexual abuse survivors, unique outcomes may be experiences that counter previous views of reality such as "I am damaged or my body is not my own." Through narrative therapy survivors may identify many life experiences that support their ownership of their bodies.

### **Externalizing Conversations**

Another pathway for creating more preferred identities is through the externalization of problems. Narrative therapy provides a space for "the witnessing of

experience” (Gehart & Pare, 2009, p. 308). Externalizing conversations encourage clients to see themselves as separate from the problem. This often occurs by naming the problem such as “anger”, “fear” or “shame” and by referring to the problem with language that creates space between it and the client. An externalizing question might be- “In what way does fear prevent you from achieving the peace you would like to feel?” When problems are externalized, clients are able to examine their relationships with problems and to establish more preferred relationships with them (Roth & Epston, 1996). This approach does not deny that problems, pain and suffering exist. Rather, narrative therapy empowers clients to choose preferred relationships with the problems they face.

Gehart and Pare (2008) discussed one externalizing approach that involves “befriending” problems (p. 309). The authors stated that the befriending stance involves engaging a problem with curiosity and a willingness to understand its needs, purposes, and meaning in order to more successfully work with it...” (p. 309). Stacey (1997) promoted several similar metaphors that include collaborating with problems, minimizing the effects of problems, and collaborating with problems. Gehart & Pare (2008) provided a poignant example of an externalizing question:

What difference might it make to welcome (the problem), to greet it and nurture it rather than to push it away? If you were to choose to do this, how would you proceed- is there a time you would set aside for (the problem) in your day, or a place where you might be with it? What do you think the impact on (the problem) would be if you were to shower it with your care? (p. 311).

Each of these creates distance between the problem and the client, allowing for alternative meanings and new ways of knowing oneself. Because externalizing

conversations create space between people and problems, previously held truths about the self simply become one of many possible ways for a client to know and understand herself (White, 2007).

### **Yoga and Narrative Therapy**

*“Yoga’s philosophy reminds me that I do not need to solve every conflict, but to create a context, a holding container, in which conflicting ideas, positions, and people are invited to play, to not know, and to imagine new ways of being together in the world” (Douglas, 2011, p. 93).*

Both yoga and narrative therapy acknowledge the relationship between problems and people. In the practice of yoga, it is understood that challenge, difficulty and negative emotions will likely arise. The goal of yoga is not to absolve oneself of these discomforts, but to employ strengths and resources to engage the problem, thereby creating new meanings and ways of knowing. The utilization of these strengths and resources is empowering and meaningful. These would be known as unique outcomes in narrative therapy. They are enactments of the preferred version of the self and they thicken the plot of the preferred narrative.

Narrative therapists argue that language guides our understandings of the world and of ourselves (Freedman & Combs, 1996, p. 22). I would add that for someone who has been victimized sexually, physical movement and lived experience has played an important role in how survivors understand themselves and their world. Thus, a therapy which acknowledges the physical writing of a story and addresses this through physical movement is needed. Yoga as an adjunctive treatment to narrative therapy addresses the need for the re-authoring of the bodily narrative as well as the cognitive and emotional

narrative created through language. Again, the addition of yoga to traditional forms of psychological therapies acknowledges “the body as a modality for healing” (Douglas, 2011, p. 84)

Yoga is the experiential embodiment of strength, power, calm and physical and emotional control. It does not deny suffering or pain, but equips practitioners with the experience of befriending challenge and discomfort. Practitioners are met wherever they arrive and are encouraged to listen to their bodies and to their thoughts without judgment. Acceptance of oneself and one’s personal journey are emphasized. Assuming this curious, not-knowing stance creates space for clients to know themselves differently than the problem saturated narrative with which they arrived. These connections between yoga philosophy and narrative theory provide the rationale for my research.

### **Research Questions**

1. How do survivors of sexual abuse understand the physical and psychological connection of the trauma they survived?
2. What role might yoga play in the improvement of psychological well-being for the treatment of sexual abuse trauma?
3. To what extent does yoga address the physical effects of trauma that traditional therapy does not?
4. How might the practice of yoga complement a narrative approach to therapy?

## **CHAPTER III: METHODS**

### **Design and Paradigm**

I utilized a phenomenological approach to explore the mutual experiences of participants in this research. In phenomenological research, the commonalities of participants' experiences are described as the essence of a particular lived experience (Marshall & Rossman, 2011). The use of a phenomenological method of qualitative research allowed me to learn about and describe the essence of the experience of yoga through the lived experience of the participants. (Creswell, Hanson, Clark, & Morales, 2007).

Additionally, the participants in this study each survived some form of sexual abuse. Utilizing a phenomenological approach gave me insight into the perspective of the survivors of sexual abuse as they participated in yoga as an adjunct to traditional psychotherapy (Groenewald, T., 2004). Although current researchers address the utilization of yoga as a treatment for various psychological disorders, there has been little to no exploration of the perspective of the participant. A phenomenological approach permitted me to learn about the experiences of the participants and to capture the essence of yoga as a treatment for sexual abuse survivors.

### **Constructivism-Interpretivism Paradigm and Philosophical Assumptions**

At the foundation of my research design is an underlying paradigm that guided my method of inquiry. A constructivism-interpretivism paradigm influenced this study. Thus, I sought to understand the perspective of the participants and describe the essence of their common experiences, while acknowledging that there is no reality that is waiting to be discovered.

From a constructivist-interpretivist perspective, there is no one objective reality (Morrow & Smith, 2000). Rather, reality is constructed through the meanings which we, as individuals, attribute to our experiences (Morrow & Smith, 2000). Each of these realities is equally valid and worthy of inquiry (Ponterotto, 2005). There are assuredly differences between each of our individual realities, but there are also likely commonalities between them. Influenced by a constructivism-interpretivism paradigm, I expected to find that each participant's description of the experience (reality) was unique. However, I was also interested in the common themes that emerged from the shared portions of the participants' experiences. These meanings were co-constructed along the way, by researcher, participants, outside influences and the interaction between us all (Ponterotto, 2005).

This phenomenological approach, grounded in a constructivism-interpretivism paradigm was the appropriate foundation for this study because it allowed the experiences of the participants to be explored and described as they lived out a particular phenomenon. This research design and paradigm situated realities within the context of individuals while allowing space for a broader, more general understanding of the essence of the shared experience. Thus, individual realities were honored while acknowledging the clinical value of describing and understanding common meanings.

### **Participants**

Seven participants were recruited and took part in the yoga classes. For some prospective participants, the designated time slot for the yoga class conflicted with their schedules, thus limiting the sample. Additionally, I was unable to make contact with three of the women who participated in the yoga classes to complete interviews. Thus, four

women participated in the complete study. This sample size generated repeated and significant themes and allowed for depth of data collection and analysis. Participants were women between the ages of 29 and 66 who were survivors of sexual abuse. These individuals represented various ethnic and cultural backgrounds. Two of the participants were Latina, one was White and one participant was Black. All of the women reported being single at the time of the study. Two of the participants had children and two were childless. The age at which women had suffered from abuse varied. Half of the women reported suffering from abuse as young children, and half were abused as adults. The nature of the sexual abuse also differed from participant to participant. However, each of the women reported undesirable emotional and psychological symptoms which they attributed to the sexual abuse they suffered. Each of the participants attended individual therapy at a non-profit agency for sexual abuse survivors for the duration of the study.

Participants were chosen using purposeful criterion sampling. According to Patton (1990), purposeful sampling is a qualitative method of participant selection which allows for “in-depth” study of “information-rich” cases (p. 182). The purpose of criterion sampling is to select participants who each meet a certain set of criteria (Patton, 1990). Criterion sampling allowed me to recruit participants who I could be sure experienced the phenomena of interest for this study. This provides “quality assurance” to my data collection and analysis because the cases selected for study were “information-rich” (Patton, 1990, p. 176-177).

### **Setting**

Participants were recruited from a non-profit agency for sexual abuse survivors in central Texas. The goal of the agency is to provide comprehensive services and support

to sexual assault victims and their families. The private, non-profit agency provides counseling, education, hotline support, hospital accompaniment and advocacy to victims of sexual assault.

The yoga classes and interviews also took place at the agency. This location was selected because participants were already familiar with the facility because of prior visits for therapy sessions. A large, private multi-purpose room was designated for the yoga classes which were scheduled to take place on Monday afternoons for six consecutive weeks. Interviews were conducted in a small, private therapy room which, again, participants were already accustomed to visiting. This setting was thought to allow for maximum convenience and comfort for the participants.

### **Researcher as Instrument**

The nature of phenomenological research dictates that researchers play a compassionate and personal role in the research they conduct. However, of equal importance is the ability of the researcher to set aside personal bias and expectations so that data may be collected and analyzed without undue influence on the participants and in order to maintain the curiosity needed to truly gain new understanding of the phenomena of interest. Many researchers take on studies in which they are “insiders” to the experiences of the participants. It is perhaps our “insider” perspectives on various issues that call us to conduct certain topics for research. To some extent, this has been the case for me in this study.

I began practicing yoga, admittedly, strictly for exercise purposes ten years ago. My practice was made up of purely asanas for several years before I discovered the richness that the other components of yoga could offer. Two years ago I took part in a

weekend yoga retreat that emphasized asana, pranayama, meditation, and self-reflection. It was at this retreat that I discovered the true healing power of yoga as I struggled with a difficult medical issue. Although yoga did not completely cure my body of the medical problem, it provided me with emotional and cognitive coping mechanisms that helped me immensely throughout my journey.

It was soon after this retreat that I began to wonder about the possible implications of yoga for coping with difficult physical and psychological situations. I specifically became interested in how yoga bridges the mind/body gap for problems that affect both people emotionally and physically, such as sexual abuse.

Although I am an “insider” in the realm of yoga, I am an “outsider” when considering the trauma experienced by sexual abuse survivors. I believe that this “insider-outsider” balance helped me to maintain maximum curiosity about the phenomena. I was able to maintain a “not-knowing” stance throughout the study by keeping a journal of significant thoughts and feelings that I experienced throughout the process. This allowed me to review instances in which I may have been too far on either end of the “insider-outsider” continuum. The journal provided me with a vehicle for self-reflection and an overview of my own process and influence during the study. In addition to the journal, I shared my personal journey as researcher with a group of peers who helped me to carefully evaluate my biases and expectations, allowing for corrections and adjustments to my approach along the way.

My training as a postmodern therapist contributes to my understanding of yoga as connected to postmodern forms of therapy such as narrative therapy. As a postmodern therapist I am also a social constructionist. I am comfortable entertaining multiple truths

and realities. I understand people as social beings whose identities and personal narratives are a mosaic of cultural and contextual influences.

I believe it is important to have a vested interest in the research we conduct. This is what gives research meaning and worth. I have experienced the healing power of yoga practice. However, I recognized that the realities and experiences of sexual abuse survivors are different from my own. I was cognizant of the fact that yoga may not fit or be as beneficial for varying populations and individuals. The insider perspective allowed me to study the phenomena with great depth while the outsider perspective granted me the intense curiosity and tentativeness needed for true exploration of others' realities in relation to the phenomena.

## **Procedures**

### **Recruitment**

I initiated contact with the non-profit agency through email communication with the Executive Vice President of Client Services and the Clinical Director. During an initial meeting on November 14, 2011, I explained the purpose of the research, and provided a copy of the Introduction to the study. We discussed my research questions and the contributions to counseling psychology. I agreed that after data collection and analysis, the study would be available to the agency in an effort to give back to the agency and the community. After the Executive Vice President and the Clinical Director consulted with the Chief Executive Officer of the agency, I was granted permission to conduct the research.

I then met with the psychotherapists of the agency during their staff meeting to explain the study. Mental health therapists were provided with flyers (Appendix A) that

they were asked to give to adult female clients who had been sexually abused. Therapists were asked to explain the study as voluntary and to give the flyers to every client fitting the criteria so that clients would each be given an equal opportunity for participation. The flyer provided my contact information (email and phone number) to participants who were interested in taking part in the study. Once contacted by potential participants, I explained the details of the yoga classes and study participation. When group members agreed to participate, they were invited to attend the first yoga class.

### **Yoga Classes**

Participants attended between four and six weekly group yoga classes. These classes were taught by an experienced yoga instructor who was informed of the purpose of the study. The instructor and I also discussed the parameters of her role in the study as yoga instructor and she was given information on how to handle any participants' questions about the study that may come up in classes. She also completed a confidentiality agreement with the agency.

Each of the six yoga classes took place in a large multi-purpose room at the agency on six consecutive Monday afternoons, with a seventh class added as a make-up class. The agency already owned a set of yoga mats and so these were provided to the participants for their use. Yoga classes were 60 minutes in duration and began with focused attention on the breath in a seated, cross-legged position. Breath was emphasized as an important component of yoga practice in the beginning and throughout each class. The instructor then began leading the participants through gentle yoga postures to warm up, eventually building to more difficult asanas. The yoga classes ended with the traditional corpse pose, or savasana, in which participants lie on their backs with arms

and legs stretched out and relaxed on the floor. A simple meditation was offered during savasana at the end of each yoga class. These meditations often focused on mindfulness, compassion, love and kindness for oneself and others. Because yoga can often be an emotional as well as a physical challenge, clinicians from the agency were available before and after yoga classes as resources for any clients who needed clinical support.

### **Interviews**

One week after the yoga classes concluded, I met with participants for interviews. The interviews were semi-structured and took place at locations that the participants identified as comfortable. Open-ended questions were asked in an effort to fully access and understand the experience of the participant. The following questions were asked during interviews:

- Can you tell me about your experience of the yoga classes?
- Did your experience of yoga change from when you first began the classes to the end? If so, how?
- Did yoga affect you emotionally over the past six weeks? If so, how?
- Did yoga affect you physically over the past six weeks? If so, how?
- Did yoga affect your progress in psychotherapy? If so, how?
- How have your feelings about your body changed since participating in the yoga classes, if at all?
- Is there anything that came up for you during yoga classes that surprised you?
- Did taking the yoga classes affect the remainder of your week?

- Did the yoga classes affect your ability to cope with the sexual trauma that brought you to therapy?
- Do you think that you will participate in yoga in the future?

Each of the interviews was transcribed following the completion of data collection.

### **Field Notes**

After each interview I spent ten minutes taking field notes which also contributed to the data. These notes contained a summary of the participants' answers to the interview questions and any important responses or themes that stood out during the interview. Because face-to-face interviews consist of emotional and nonverbal responses that are not evident in the audio recording, I noted these in the field notes as well.

### **Data Analysis**

The process I used to analyze the data was first developed by Stevick-Colaizzi-Keen and presented by Moustakas (1994). Creswell (2007) further simplified this method of analysis and it includes the following steps:

- 1) Bracketing (describing and setting aside researcher bias).
- 2) Identifying significant statements.
- 3) Clustering significant statements into units of meaning.
- 4) Developing a textural description of the data (what the participants experienced).
- 5) Formulate a structural description of the data (the context of participants' experiences).
- 6) Compile textural and structural descriptions to identify the essence of the lived experience in relation to the phenomenon.

In phenomenological research, data analysis begins with the bracketing of the researcher's own personal biases and understandings of the phenomenon of interest in order turn full attention to understanding the lived experiences of the participants (Wertz, 2005). I bracketed prior clinical and personal knowledge of the phenomenon throughout the study by keeping a journal of personal reflections as I conducted the research. I shared reactions, thoughts, emotions, and struggles with trusted colleagues who assisted me in keeping my biases from unduly influencing the study. This process helped me to approach the analysis of the data, eager to understand each participant's unique meanings and realities.

After verbatim transcription of the data were completed, I listened to each audio recording and read each of the interviews in their entirety to become better familiar with the words of the participants (Hycner, 1999). I repeatedly reread the transcriptions to preserve the meanings as they were situated in a particular context, being careful to consider the emerging themes and meanings within their contexts (Hycner, 1999). As I read and reread the interview transcriptions I identified significant statements that illustrated how participants experienced the phenomenon (Creswell, 2007).

I then connected significant statements across interviews to identify and isolate units of meaning or themes (Creswell, 2007). This process allowed me to construct a "textural description" of what exactly the participants experienced using specific quotations from interviews as evidence (Creswell, 2007). I then began to approach an understanding of how the participants experienced the phenomenon, a "structural description." This includes a consideration of the specific context in which the

phenomenon occurred. Finally, I combined these textural and structural descriptions, compiling them into a final “essence” of the experience (Creswell, 2007).

I subsequently provided the de-identified transcriptions, along with my findings, to two peers. One peer had some prior familiarity with yoga. Both reviewers are therapists, but neither were affiliated with the agency where the participants received therapy. My peers read through each of the transcriptions and checked to determine the validity of the themes that I had previously identified. Following this process, the four study participants were each provided with the study findings by email and asked to reflect on their accuracy. This process served as a member check. For one participant, I called and read study findings to her because she did not have access to email. Peer reviewers and study participants each provided feedback confirming the validity of the identified themes and the shared essence of the experience.

### **Trustworthiness and Rigor**

Trustworthiness and rigor are important measures of quality when considering qualitative research (Morrow, 2005). From a phenomenological perspective, standards of trustworthiness and rigor require that the researcher follow “a systematic process, systematically followed” (Patton, 2002, p. 546). In other words, it is important for the researcher to follow a set of outlined procedures that are grounded in the foundations of phenomenological theory.

For this study I referenced several guides for conducting phenomenological research (Groenwald, 2004; Wertz, 2005; Marshall & Rossman, 2011; and Creswell, 2007). In addition, I followed closely the Stevick-Colaizzi-Keen method for data collection and analysis. This method has been peer-reviewed and utilized as a valid

approach to phenomenological research by other researchers such as Moustakas (1994). The specific procedures for the Stevick-Colaizzi-Keen approach can be found in the data analysis section of this chapter.

### **Triangulation**

In addition to dependability, triangulation is method of establishing trustworthiness and rigor in qualitative research (Marshall & Rossman, 2011). Triangulation involves accessing several sources of data to better understand the phenomenon from multiple perspectives (Morrow, 2005). Thus, I chose a sample size which would offer me various impressions of the phenomenon I studied. In-depth interviews with ten participants allowed me to hear and describe a variety of voices as the phenomenon was experienced.

In addition, I kept field notes of my own impressions and observations following each of the interviews. Marshall and Rossman (2011) described field notes as an important method for recording “concrete descriptions” of the interviews directly after they have occurred (p. 139). These field notes allowed me to capture components of the interviews that may not have been evident through the audio recordings such as nonverbal cues, participant and researcher rapport, and the emotional qualities of the interviews. In an effort to gain further perspectives, two of my peers reviewed interview transcriptions to determine the validity of my findings.

Lastly, and perhaps most importantly, I engaged study participants in a process of “participant checks” (Morrow, 2005). This allowed me to provide participants with the analysis of the data to check for validity. Participants were given the opportunity to

review themes and give feedback about the accuracy of my findings. This feedback was incorporated into the overall data and integrated into the analysis ensuring rigor.

### **Researcher Reflexivity**

Finally, I assumed a stance of researcher reflexivity throughout the duration of the study. Researcher reflexivity is a third method through which rigor and trustworthiness are enhanced in qualitative research (Creswell, 2007). Morrow (2005) described this process as a means through which researchers can understand and “bracket” how their particular “experiences and understandings of the world” may inadvertently influence the study (p. 253-254).

I maintained a reflexive stance throughout the study by keeping a journal of thoughts, emotions, observations, impressions and reactions to the research process. I reviewed the entries of the journal repeatedly in an effort to understand how my subjective reality, ‘identity,’ “assumptions” and “sensitivities” may be influencing my approach to the research (Marshall & Rossman, 2011). In addition, I discussed these thoughts, feelings and reactions with three peers and my advisor who helped me to bracket any biases that I may have brought to the study.

## **CHAPTER IV: FINDINGS**

In the results section, I introduce the participants of the study and present the meaningful themes that emerged among the study participants. Within each theme I have included each participant's articulation of that theme, in their own words. These serve as participants' individual textural descriptions of the themes. They are followed by a composite description of the essence of participants' common experiences.

### **Participants**

The study participants included four women, ranging in age from 29-66. The participants were ethnically diverse and their previous experiences with yoga ranged widely. All participants were also clients at the agency for sexual abuse survivors at the time of the study. The women were all participating in individual counseling, in addition to the yoga classes. Some of the women were employed, while others were retired or unable to work. None of the participants were married, and half of the women were mothers. Some of the women chose to disclose their ages at the time of their abuse and these ranged from childhood to adulthood. A brief description of each of the participants follows.

#### **Jordan**

Jordan identified as an African American woman in her forties. She was single and lived in an apartment in San Antonio with her adolescent daughter. She had some prior experience with a personal yoga practice as well as a yoga retreat. At the time of our interview she was unable to work due to work-related physical injuries.

**Sophia**

Sofia identified as a Latina woman from San Antonio. She was in her late twenties and had limited prior experience with yoga. At the time of the yoga classes, she was struggling with a chronic health condition that limited her ability to work and function in daily life.

**Sarah**

Sarah identified as a white woman in her mid-thirties from Oklahoma. She was divorced and shared that she had experienced sexual abuse within her marriage. She had been living in San Antonio for the past three years, working as a pastor and a writer. She recently published her first book, a collection of sermons and essays. She had never formally practiced yoga prior to the study. She was nearing the end of her psychotherapy at the agency when she began taking the yoga classes. We met for our interview at her church.

**Monica**

Monica identified as a Latina women in her early sixties. She indicated that her daughter currently resides with her in her home. She explained that she is divorced and has three children. She disclosed that she experienced a sexual assault 50 years ago and had not told anyone about the abuse to anyone prior to attending counseling at the agency. She stated that she had previous experience with yoga and a meditation group, which she attended with her daughter.

**Meaningful Themes**

Several themes emerged from the interviews with the study participants. They included an experience of yoga as therapeutic, finding a sense of calm and relaxation, a

shared journey of healing, connectedness to body, empowerment, cultivating an open heart, self-compassion and acceptance, physical embodiment of emotion, others noticed a change, yoga practice translates to daily life, physical results and plans to continue practicing yoga.

### **Experienced Yoga as Therapeutic**

Each of the women described yoga another form of therapy. Jordan expressed that the yoga session fit best in her schedule directly after her weekly therapy appointment. She indicated that yoga served to focus on the healing of her body rather than continuing to focus primarily on her thoughts.

Jordan: So that moment, of that yoga right after a counseling session was nice. It was like, "Ooh." I looked forward to it.

Laurel: You would do your session and right after you do yoga?

Jordan: I would do yoga. That was really nice too just to kind of take my mind off of certain things and just kind of focus on this is healing my body.

Sophia also described her belief that the yoga classes served as a form of therapy.

Sophia: ...it's another kind of therapy, at least in my experience. It's another kind of therapy, different from sitting down and talking about things in a specific way, with a counselor, it's almost like a silent therapy in a sense, but at the same time, like a movement therapy.

She continued to describe the function of yoga as a type of therapy.

Sophia: So, for me the yoga classes were another way of tapping into harmonizing with your body, and also releasing a lot of these emotions.

She juxtaposed yoga as different from the cognitive process of therapy.

Sophia: It's definitely very different. For me, it just feels like rather than just being cerebral about therapy and about a traumatic event . . . It's more about tapping into your physical body and being conscious and aware, and being in tune, to then be able to have access to a deeper relaxation, a deeper release, that

will then, potentially translate subconsciously into something that can allow for an emotional release.

Sarah shared her belief that healing requires various elements.

Sarah: It seems more and more clear to me. I think about this, too, in my work as a pastor but then my own inner work is that healing takes so many different things, pieces. I think any kind of therapy or road to healing that isn't multifaceted isn't really going to touch all the pieces. I think it's really important to be exploring things like yoga combined with therapy or art or music or whatever just to broaden your picture.

Sarah identified as introverted and emphasized that using verbal expression as a medium for healing was scary.

Sarah: I think it will be really interesting for people to also think about what is it like for an introverted person to try to heal versus an extroverted person. I'm a pretty articulate person. I write books. I write poetry, but this particular piece of my life is very, very hard to talk about. That was the scariest thing in the world to me to show up to the therapy. I'm glad I went and everything, but it just hadn't really occurred to me to be in this yoga group... We're addressing this specific trauma but we're not talking about it. We're just being here doing something with it and about it.

Maybe there needs to be more groups or opportunities that aren't talk-centered. I do think we do need to talk and words are important but that's not the whole picture and especially if you're feeling stuck on your words. But still having a place where you can go that is helping you on some level process or acknowledge that without making you say a bunch of stuff before you're ready. Not that therapy necessarily makes you but kind of; that's the goal, right? I don't know. I just think that will be interesting to think. I'm always trying to think here when we have small groups and stuff, how do I get the introverted people in the room to feel comfortable participating. I just think that will also be interesting from a therapy standpoint of people who don't want to say all the stuff. How do you help them? That's the interesting result of a yoga class because talking isn't the critical piece to that.

Monica described yoga as accessing her inner-child.

Monica: They teach you how to do some different poses, the different things, but the way she guide us was to cure our inside. I think she cured my inner girl. I think my little girl that was inside me was screaming at me, not happy...

## Calming and Relaxation

The participants each described the sense of calm and relaxation they experienced through yoga. Sarah described feeling better able to have awareness of her breath in her daily life.

Sarah: That's actually started to become something if I'm really stressed about something or I can't stop thinking about something, I'll just go do a lot of stretching and realizing, "Okay, I am really tense." Oh, the yoga breathing has made a big difference. I'll just realize that I'm in a situation that makes me nervous or I'm talking to somebody and they're making me anxious and I just consciously think, "Okay, take a deep breath." I sort of feel my body relax and I suddenly feel more present to a situation and present to my mind.

I think it's more small things like that like learning . . . I think that's what yoga has done for me; small tools like that to just relax in a high pressure moment or being in the car on the way to a speaking engagement and just doing really intentional breathing in and out, and just trying to just focus on the breathing. Then I get there and I feel way less keyed up than I normally would.

Jordan reported that focusing on her breath was balancing to her.

Jordan: ...I really paid attention to my breathing...I guess because I've done it before that was what I was doing was also focusing on my breathing. What I was doing, balancing myself because my body is out of whack. I was like, "What are you doing to me?" and I was like, "I'm balancing you."

Monica explained that participating in the yoga classes had been a healing process for her and that she particularly enjoyed the meditation component because it allowed her to calm and relax her body and her mind. She expressed that the meditation practice was comforting. She described her meditative process as beginning with concentrating on her breath.

Monica: I think... start concentrating and breathing. Learn how to breath is so important and knowing that every time you have a memory, you can breathe. Even if you are driving, you can breathe and relax.

Sophia described her ability to reach a sense of relaxation, stating that this is typically something that does not come easily to her.

Sophia: It's more about tapping into your physical body and being conscious and aware, and being in tune, to then be able to have access to a deeper relaxation, a deeper release... I, at that time, was able to feel really connected to my body. I was able to experience a lot of good deep relaxation which probably otherwise, probably would not have been possible. And also, at the very end of the postures and everything, we always had a relaxation exercise, which was just very soothing and relaxing, and allowing me to really reach a sense of relaxation, which obviously, is very difficult for me.

Laurel: Yeah, so like you said, wouldn't have otherwise been possible?

Sophia: Right, right. That's not a relaxation I experience, for example, in the talk therapy.

Laurel: Okay. Do you think that having that relaxation is important? Or is it something that is just a nice bonus?

Sophia: No, I think it's very important. I think, even on an emotional level, to be able to connect with our truest, deepest emotions, even at a subconscious level, we need to have that state of relaxation that allows us to tap into that. Otherwise I think we, either consciously, or subconsciously are setting up blockages around traumatic events, or topics that we would not normally want to tap into.

### **A Shared Journey of Healing**

The participants emphasized the unexpected power of practicing yoga with other women who had survived sexual abuse. Sophia spoke about the dynamics of practicing yoga within a group.

Sophia: ...it was very comfortable, I didn't feel like I had to put on any kind of facade or anything, I just felt very comfortable in the classes. I felt like I could be myself, we were all in the process of getting in touch with ourselves and being connected to our bodies. So it was a really, really, interesting process, because it's like we're all in this journey together. And every time we had a class, it was us all working individually, but at the same time, together as well, because we were all working on it at the same time. And in a shared phase.

Sarah noted comforting group dynamics.

Sarah: I mean I have done a little bit of yoga before but I've never done something like that where it was all kind of . . . People who have gone through a similar experience doing it for a similar reason. I think even though it's not like we really talked a lot to get to know each other, somehow we had this bond of something -- we're all here for a reason. I think that made it feel a little more intimate. And it was a small group... It seemed like a diverse group of women and so it was sort of interesting to think, "Oh, we're all on a journey of healing in our own totally different lives." Yeah, I thought about that a few times when we were sitting there

doing whatever, stretching and breathing. I guess it was comforting. Maybe that's a good word for it. It just seemed comforting. In a way for me it was nice that . . . I'm quiet when I first meet people. To just be in a room and you have something to do and you're not trying to talk to each other, I kind of liked that.

Sarah expressed what it was like for her to practice yoga within a group of women who had each experienced sexual trauma.

Sarah: I think it was helpful. I kind of feel like I'm still on this journey and I think it was kind of interesting to be in a room with a whole group of people that had all had some kind of trauma. We might have all had very different experiences. I've never gone to any sort of support group or group therapy. That doesn't appeal to me. I think there was something kind of powerful about that. I don't even know what everybody's story is but somehow we've all been traumatized. I think maybe we need that. We need each other's story. I know that because sometimes I'll just read a story or someone will be telling me their story and I'll just really connect and resonate with it. I still haven't felt like I want to go purposefully be with a group of woman but that was like a way of . . . it's not like we're coming together to talk about it, but we're still sharing an experience. I guess that was surprising; that was unexpected. . . I didn't think about that going into it. I was just like I'm going to go do this yoga like an individual. There was something kind of moving or powerful about feeling like, "Yes, this is not me by myself going through this." Even the room we were in at the first, they had all this different stuff on the walls that people had written or whatever and so we'd just be stretching looking at the thing. I guess maybe it took some of the aloneness out of it; that would be unexpected.

Laurel: What was that like for you to feel less alone even though it wasn't what you were looking for?

Sarah: I guess it's just validating somehow.

Sarah discussed how much she enjoys being in a group of people in silence.

Sarah: I just like silence in general. I think there is something very spiritual and powerful about it. . . I'm really introverted so to be around people even if I like it or enjoy it, it's just draining. It's not very common in society for there to be things you're doing with people but you're quiet. Last week, I went on a silent retreat where you eat with people but you don't talk. I know some people would hate that but to me it's powerful because you're not totally alone. You're all there experiencing something together, but you don't have to make small talk. . . I spend a lot of time in silence by myself but to me there is this whole other element in a group. I feel like you kind of create an environment or atmosphere or energy together like you're all . . . You're not just silently watching a movie. You're really . . . whatever you're doing. You're meditating or you're really reflecting on life or whatever. It feels safe. I know other people with other personality types would

hate it. They'd want to talk, but to me it's like . . . I get be around people, but we all get to sit here with our own thoughts. There is just a comforting feeling to me about that.

Monica described how she benefited from the group dynamic as helping her feel less alone.

Monica: I didn't feel alone. I didn't feel sorry because I am a person that cares about other people, but it was nice to know. It was like going to a knitting class. Everybody goes for the same reason, meaning you get different projects, different results.

### **Connectedness to Body**

The participants disclosed that yoga impacted their relationship with their bodies. Sophia described yoga as a way of “tapping into [her] physical body.” She stated that all of the yoga participants were “in the process of getting in touch with [themselves] and being connected to [their] bodies.” She explained her belief that yoga was “another way of tapping into and harmonizing with [her] body.” Jordan’s physical concerns meant that she was conscientious about her physical limitations within her daily life and during the yoga classes.

Jordan: Well, the thing is that being very conscientious of not hurting ourselves and knowing our own limits. Kathy (the yoga instructor) expressed that a lot pertaining that to making sure, you know, that you honor your body and what it's telling you and so that was awesome too, because then again it's not forcing you to do anything and you're not trying to overdo it yourself on top of that. So it was really good.

Laurel: Is that something that came easily to you, or did you have to constantly remind yourself not to force yourself to honor where you were at?

Jordan: Well, I did but I also too was challenging myself too because I guess, I am so tired of being in a disabled state and a lot of frustration came with that. Then it's kind of like I can do this and even if I do feel a little bit of pain, it's kind of like running. That's how I was taking it as. A lot of times if you, once you feel that first pain in the side or etc, that first kind of like shortness of breath, sometimes if you stopped then, you could cripple yourself for a long time. But continuously going, I even noticed how I got, I was a little bit more flexible than I

was when I first began again, too. So that was another thing I noticed. I was really good. Could I imagine if I was doing this a lot longer like I used to how much more flexible my body would be.

Jordan mentioned how she had benefitted from the modifications available within the yoga practice.

Jordan: ...I wasn't able to do it before and I was even kind of scared because you know, you've got to be very careful in posing certain ways. So when she was showing me these modifications, I was like, "Yes. I could do this." I'm winning again.

She continued to describe the psychological impact of her realizing that she could achieve her physical goals.

Jordan: I was like, "Wow, my body is doing it." Even better than some of the girls that were way more flexible and for the fact that their bodies were more in a healthy position than mine, and I was able..."I did it." Not to be in competition, but it just kind of taking an obvious look at things and saying, "Wow, I can do this better than what I thought I could. I'm getting it, I'm healing more and more and more."

Sarah disclosed received messages from her family of origin about how she should relate to her body.

Sarah: I grew up in this really, really conservative strict environment. I think there is a lot of shame about having a body in general. It wasn't necessarily that I went around thinking, "Oh, I'm such an ugly person," but just the sense of having a body. Anything about your body was just don't think about it, don't acknowledge that you have one. You couple that with the personality I already told you about which is to be inside my head. I think I felt in a lot of ways like a disembodied person. I'm like this mind walking around who doesn't know she has feet or toes.

All of my bad experiences that I'm healing from were in my marriage. I think in a lot of ways I was totally unprepared to get married, to have a physical relationship. I didn't have that for someone to rob me of to begin with. I had no ownership of my own self before I got married. I think now after I've gotten out of my marriage that I spend this long recovery dating beyond that all the way to my childhood of figuring how do I reconnect with this body and acknowledge that it's mine, it's good and it's here. I do think yoga . . . things as simple as stretching before I go to bed is just a way of acknowledging to myself I have a body and it deserves to be taken care of or just like taking baths or putting on lotion or just tactile body, paying attention to what smells I like, just getting a candle. All of those kind of small little things to help me reconnect with a sense of body...

Sarah continues to discuss her desire to feel whole.

Sarah: I want to be my full self. I don't want to be disembodied. I don't want to be fragmented. I want to be whole. I want to own all the parts of me and feel connected to them. I guess I want to be whole.

## **Empowerment**

The women each described feeling empowered as a result of the yoga classes.

Jordan explained the role that yoga played in her sense of empowerment in relation to her own body and with regard to her self-concept.

Jordan: The [sexual assault] did make me a stronger person. It made me who I am today too, but I'm not going to allow the situation to overtake me and just really I can't do that. I want to define it. I don't want it to define me, and that's kind of like how I was dealing with that, with yoga. It was nice. It was really nice.

Jordan disclosed feeling empowered to make decisions about her body in the yoga classes and how different that felt from the lack of control she experienced when she was sexually assaulted.

Jordan: I feel [yoga] really put you at a different place. It puts you back in a position of empowering yourself and not allowing things. . . because being that you know your limit, you can control how you do things. If you want to lay out. If a position is too hard for you or you're not comfortable in a position, you can choose to take a different type of position to where you can relax yourself. To me I feel it puts a woman back into control of things, back into control of her life in that moment even in the point of, "I know this is helping me, but I still have the choice of whether or not I want to do this or not." And to me that's really powerful too because when you're in a sexual assault type of situation, you're being forced to do things that you're not wanting to do. That's the whole point of why it's called rape and sexual assault in the first place. So being able to do that and process it in that way, it just puts you right back into control. I'm in control of my breathing, I'm in control of the positioning that I'm taking, everything. So to me that's really healthy, too.

Monica explained that she never disclosed her experience of sexual assault before coming to the agency for individual therapy. She emphasized the importance of feeling as though she was in control of her emotional and physical experiences through yoga.

Monica: And opening this box after 50 years, that I have that in the back of my memory and never share it with anybody. Fifty years, but there was something every time I think about it my stomach was upside down. With yoga, it teach you that you can control, you can control.

She identified how her sense of control empowers her to make decisions in her life.

Monica: To be strong and to say that I'm a successful person, and that I can control everything around and inside me. And I can decide when, how, with whom, and where to go, what to do, with whom I am going to get together to meet, crochet or whatever.

Sarah described feeling empowered when she noticed progress in the yoga classes.

Sarah: "It was a little bit of emotional burst like, 'Oh, I can stretch further!'"

### **Self-compassion and Acceptance**

Yoga participants indicated that they developed a greater capacity for self-compassion and self-acceptance as a result of the yoga classes. Jordan shared that she gained new perspectives about the sexual assault she survived and how it was a part of her experience, but did not define her. She indicated that this brought her a greater sense of acceptance, peace and a new understanding of herself.

Jordan: I liked how it really was helping me in regards to it doesn't make me who I am. The situation I've been through, like, you know, it doesn't define me. But also too it was something that she was saying in regards to how to, I'm trying to think of the words to put it in. I'm sorry.

Laurel: No, that's okay.

Jordan: It's not that it's rejoicing that it happened but how to kind of like still have a joy and a peace of knowing that it doesn't define me even though those things happened. Kind of like a way of accepting it and trying to find the silver lining in it, is kind of how she was putting it. And it did make me look at things a little differently. So when I was doing them, I kept that with me from the beginning to the end and it just was kind of empowering for me in regards to that in that way of healing, of knowing that that's not who I am and it doesn't define me or whatever. But helping me to be at peace with things, to kind of move forward also, too.

Monica explained the aspects of the yoga classes that she believes continue to impact her. These largely centered on promoting her feelings of self-worth.

Monica: As Kathy tell us, when you wake up, tell yourself in the mirror, "You are very important. You are very important and you have a purpose in this life."

She continued to share what she learned about her own importance.

Monica: ... that I deserve to be a person that counts, that counts in my family, that counts in the world... I consider myself a strong person, but every class that I took with her just took us to ... to make us feel that we're worth it. And everything is through yoga concentration. Even the pose is so important to reach it and feel that you can stand in your life for yourself. She taught us so many poses and each one of them have had a meaning. I can control myself. I can stand up in life. I'm important. I think that's why I found in yoga I love it. I love to practice it.

She also expressed her newfound sense of strength and openness.

Monica: Stronger, I felt stronger. I felt that I can look up. I was shy. Now I know that I can be straight, go and look ahead of me. I was trying just to protect myself, my breast, and walking like that all the time, walking a curve. And now I can think and be straight, think like you have a string on your head and it's got to be set, and shoulders back, and look in front of you. Life is yours. I'm in control.

Laurel: So being physical in the class in a way that felt strong sounds like changed how you thought about how you could be in the world?

Monica: Oh, yes. Oh, yes. Even if I said, "I'm strong. I'm strong. I made mistakes, but I feel like I can look ahead and do things," and nobody is going to judge me. And if they judge me, who cares. I have physical impediment. I have a shorter leg and through yoga, let me tell you that, that helped me too.

Laurel: In what way did it help you?

Monica: Every time I walk I just limp. Kathy told me, "Look ahead. Look up and be strong. And doesn't matter, the physical problems that you have." Life is there for me.

She noted feeling differently about herself and how this outcome surprised her.

Monica: Yes, that I'm worth it. I am very important person and before that I felt that I don't deserve things from feeling guilty. Before, I felt guilty.

Sarah described her experience of realizing through yoga that harshness toward herself was an act of violence.

Sarah: ...in yoga you're never violent to yourself. I was like, "Oh." That really hit me just the ways we do violence to ourselves by trying to push ourselves beyond our current capabilities. Kathy always says you can't do it *yet*. I thought about that a bunch of times not about can I do this yoga move but just in life thinking I don't know how to handle such and such. I don't know how to handle it yet, but I will eventually. I think there have been little things that you pick up on that this is more than just about a stretch or a pose. It's kind of a life lesson.

Laurel: Can you tell me more about what it was like for you to hear that instructor say that in yoga you're never violent to yourself and why that particular idea was meaningful to you?

Sarah: Well one, I'm a very anti-violence person but I don't always think that my harshness on myself can be an act of violence against myself. It just made so much sense to me when she said that because normally when I'm being really harsh or pushing myself too hard that I don't get good results. It's normally when you calm down and are gentle and patient with yourself that you suddenly get the insight or take the next step. This idea of not just passively not addressing your life and your issues and your problems but if you're gentle and you're not being overly harsh then that opens the door for healing. Growing up I played basketball and loved it but that mindset was always you're doing something athletic and you just push, push, push, push, push. It's different to do a physical activity and have the opposite approach of it's not push, push, push, push, push. You are putting out effort and working hard but you're not trying to see how far can I take it. Even though that's important because you can injure yourself trying to do a certain thing farther than you're currently capable of doing yet.

### **Cultivating an open heart**

The ability to open oneself up to vulnerability and love was a profound experience described by the participants. Jordan discussed how heart-opening exercises connected to her becoming more open emotionally.

Jordan: ... Kathy (the yoga instructor) was really awesome too because she was able to talk about why it's important to have your heart open, you know? Again, another way to give you power back because when people are abusing you and doing those things and taking something precious from you like that, it can put you at a place of bondage of course, because a lot of times you don't want to go anywhere, you don't want to deal with certain people, you're closed in emotionally, you're not wanting to talk to people. Things like that and it can cause you to be open to heal, because if we are not talking, if you're not allowing it to be released in some kind of way, then it can cause you to be sick. That's how some people get cancers and all kind of stuff. So it's just awesome all the way around emotionally and everything.

Jordan described her beliefs about the importance of the heart and the heart's ability to hold onto memory and emotion. She noted an ability to release emotions without completely detaching from them through heart opening yoga postures.

Jordan: ...it really did allow me to open up my heart and the importance of that too because I had had heart issues in the past, too. Emotionally and spiritually, a minister that I know he was picking up some things in the spirit in regards to me, and he was saying how I suppress a lot of things to my heart and that's not good...basically our heart gains memory...And so when they were telling me pertaining trying to not detach myself from reality, but kind of like detaching myself from certain emotions of things to where spiritually it's helping, but then I'm able to release things, while not allowing things to detach. So I thought that was real interesting how she kept talking about the heart and opening up the heart and etc. etc.

Jordan expressed that heart-opening practices in yoga encouraged acceptance and openness to love and be loved.

Jordan: It helped to heal a lot in terms of accept and able to accept and love you so you can be able to love others too was really nice to open an arm, being open to love. That was awesome. That was really awesome.

Jordan later emphasized how particular yoga postures enabled her to experience the feeling of opening her heart. She then shared how this process is important because it promotes physical wellness. She also indicated how she experienced yoga as cultivating compassion toward those who hurt her.

Jordan: Open up your heart and that has stuck with me because again, there's positions that I've done in the past but I didn't know the deepness of that in terms, "Opening up your heart brings healing." I think about scripture in regards to the conditioning of people's hearts when their heart gets hardened and when their heart gets like this and their heart gets like that. Hardened like with stones in it with thorns and with etc. That it causes you to react to things in a certain way and so to me those positioning was allowing and saying, "You know what, I'm trying to get my heart as good soil again so I can be receptive to things so I can grow and I can move forward with things." Because as long as we're not doing that, we can't be healed, and then we're also gaining sickness as it goes on too and that's not good.

So it opens you up to love other people and also opens you up to love yourself. Not blaming yourself, it's not your fault that people are the way that they are. And it also too it made me feel like you don't wish nothing bad on those persons. You want them to be healed just as much as you're being healed, and putting that out there in the universe. The love out there that it touches you because you know you were hurt, because hurt people, hurt people.

Jordan acknowledged that she felt closed-off as a result of trauma. She indicated that yoga played a role in allowing herself to be receptive and open again.

Jordan: She was able to kind of allow us to open ourselves up to be healed, open ourselves to be receptacle to things that . . . Not everything is bad, we don't have to be close to it, but to really open up our hearts again because you do kind of close yourself in there. You can't trust people, little things like that and that was really awesome.

Monica noted a change in her posture that was a tangible representation of the openness other participants described. She discussed her posture previous to the yoga classes and how it became different during the yoga practice.

Monica: I was just trying to protect myself, my breasts, and walking like that all the time, walking in a curve. And now I can think and be straight, think like you have a string on your head and it's got to be set, and shoulders back, and look in front of you.

Sophia described postures that allowed her to open her chest and heart also helped her open emotionally. She noted the importance of opening for sexual assault survivors.

Sophia: There were even certain postures, for example, that the instructor let us do, to be able to open up emotional centers, like opening up the chest and allowing for your heart to be open . . .

Laurel: Yeah. You keep using the word "open," and I'm wondering if that's significant to you as a part of your healing process.

Sophia: Yeah, that's very intuitive of you. Definitely openness is part of the healing process, and something that, specifically, I would say, with survivors of sexual assault. It's a very closed off, lonely, isolated place to be, where, becoming open, and being in a comforting place like a yoga class, or even at the Crisis Center is definitely a place where you can feel like you can be open.

## Physical Embodiment of Emotion

Participants spoke about their experiences of emotion as physical. Sophia indicated that she was able to cultivate a deep sense of relaxation as a result of participating in the yoga classes. She described this relaxation as necessary for accessing difficult emotions.

Sophia: Well, definitely, I, at that time, was able to feel really connected to my body. I was able to experience a lot of good deep relaxation . . . Which probably otherwise, probably would not have been possible. And also, at the very end of the postures and everything, we always had a relaxation exercise, which was just very soothing and relaxing, and allowing me to really reach a sense of relaxation, which obviously, is very difficult for me.

Laurel: Yeah, so like you said, wouldn't have otherwise been possible?

Sophia: Right, right. That's not a relaxation I experience, for example, in the talk therapy.

Laurel: Okay. Do you think that having that relaxation is important? Or is it something that is just a nice bonus?

Sophia: No, I think it's very important. I think, even on an emotional level, to be able to connect with our truest, deepest emotions, even at a subconscious level, we need to have that state of relaxation that allows us to tap into that. Otherwise I think we, either consciously, or subconsciously are setting up blockages around traumatic events, or topics that we would not normally want to tap into.

Sarah noted the ability of yoga to impact her emotionally.

Sarah: I don't know that I really felt affected emotionally in the class. I mean over the last two months though I personally have this whole thing about connecting my emotions and my body, and not keeping everything segmented. I just have this general sense that pain stays lodged in your body and that I need to do things to get it out. I need to do something physical and I just signed up for that yoga class and they also were going to another yoga class all at the same time. That feels like in some general overarching way, has an emotional impact. I certainly feel calmer afterwards but I wouldn't say I was in the middle of yoga and wanted to cry. I didn't have an experience like that.

Laurel: You said sort of in this general overarching sense that you feel that you are connected and that this was your way of accessing that emotional pain?

Sarah: Yeah, or trying to.

Laurel: To what extent do you feel like you were successful?

Sarah: I think for me it's still a work in progress. One of the things that I have learned about myself in the last year is I'm someone who very much stays in my head. I have emotions but they're buried way down there and in some instances they are really, really buried. I can also stay pretty disconnected from my body. I feel like I'm on this journey of trying to be more holistic; believing and acting as if it's all connected. I don't know that I'm so much better than I was six weeks ago. I feel like for me it's just a part of that whole effort of bringing all of those pieces together. Another thing I started doing a lot . . . well I have always walked a lot but maybe more intentional walking but just using physical things to stop the obsessive train in my head.

Laurel: Is that to say that when you're walking or your experience with yoga, doing something physical is another way of breaking away from . . . How would you describe that? Breaking away from that train of thought in your head that's sort of disruptive?

Sarah: Yeah, maybe just dislodging things that are stuck like we have an outdoor labyrinth on our properties. If I'm stuck writing this sermon I go out there and walk the labyrinth. It's just this sort of idea of when you have a mentally stuck place or an emotionally stuck place instead of focusing more energy in a direct way like going and doing something physical. It's like it clears . . . That would be a good word. I think it clears space.

She continued to describe her physical experience of emotions.

Sarah: I went through a divorce about a year and a half ago. I realized how much I could feel physical pain. If he was making me nervous, I would have a shooting pain, a physical pain in my side. There were just experiences like that that were like, "Okay, I can't just fix this with my brain." There is more going on with our bodies.

Monica noted that she learned in yoga to accept her emotions.

Monica: That it's okay. It's okay to cry when you want to cry... I wanted to cry every time, every time that little girl inside me was healing.

She explained the sadness beneath wanting to cry during yoga classes and identified her emotional vulnerability as strong. She indicated that she would not have previously believed this sort of emotional vulnerability was a strength.

Monica: Yes, very sad, very sad, very sad. But on the other hand, I know that now I'm strong. I wanted to be strong all of my life thinking like, "You're strong, you're strong, you're strong. Yeah, you need to do this if this marriage is not doing

good for you and this person is not giving you what I needed, and he's disrespectful. I need to get out of it here. I need to get out here." I thought, "Okay, I'm strong to do that," but any divorce is just ... It's sad.

Monica stated that she handles sadness differently now and that this change is a result of a combination of therapy and yoga classes.

Monica: That sadness, I think, it will be there, but now I can know how to handle it. I know how to handle it and I know how to manage my life better than it was before. It was a combination of the yoga that was very important and my meetings with [my therapist] that helped me a lot.

She provided an example of how she uses distraction from her feelings less since taking the yoga classes.

Monica: Yes, my attitude. And it was very important my daughter was telling me, "Mom, I see you're happier, you go to bed with different ... you go to bed early, you lay down and you have the remote control." Like, "What? Mom with the remote control under your hand."

Laurel: Because before it was different?

Monica: Yes, yes, yes. As I told you, I tried to be awake and just to be busy doing things in the house or.

Laurel: To distract?

Monica: To distract, yes. Just to be tired, going to bed and be tired, be tired. Because if I can do that, I was going to ... It was just crazy. It was anger. It was guiltiness. It was frustration, a lot of anger.

Laurel: And if you were tired enough then you can avoid so that ...

Monica: Right, I guess. Just be tired and go to bed and that's the best way to comfort myself or to feel anything in my guts.

### **Others Noticed a Change**

Jordan discussed the effects of yoga as perceivable to those around her including her therapist. She also described her practice of yoga as relevant to her work in therapy.

Jordan: Yeah, because [my therapist] asked me about that. She noticed how vibrant I was and I think she would have noticed it even more if I...did the yoga session first and then come to her. She would have noticed it even a lot more in

regards to that. And Kathy kept on saying, sometimes I would come in there because I just did a session and I'd just be like, "Man, and when I leave that session I'd be grinning." She was like, "Look at that." It just does something with the . . .

Laurel: So your therapist noticed you sort of coming in with a different . . .

Interviewee: Demeanor.

Laurel: Different demeanor. And so how did you explain that...?

Jordan: I told her and I even mentioned to her, "What's going on? We ain't going to do the yoga stuff no more?" She said, "You really are liking that." I'm like, "Yeah, I do." I really enjoy it. I really enjoy it.

Laurel: Were you ever able to connect what you were doing in yoga to what you were doing in therapy? Or were those two separate things for you?

Jordan: I did connect because a lot of things that Kathy mentioned and for the fact that she could actually relate to me from the everything that she spoke throughout the whole time of us being there, it was awesome. It was perfect for that, like, I just really wish it could be done like that. It could be an ongoing thing and that's me...I think all people could benefit from it honestly.

Monica shared that her children experience her differently after attending the yoga classes.

Monica: Even my kids tell me, "Mom, you're more calm, now I can see you that you can sit down watch a TV show or watch a movie. We've never saw you doing that. You were always trying to be busy, trying to distract your mind... "

### **Yoga Practice Translates to Change Off of the Mat**

Yoga participants reported that yoga impacted their daily lives. Sophia shared that she and her therapist discussed her participation in the yoga classes and how it impacted her work in therapy.

Sophia: ...I do recall being in therapy at one point, and mentioning the yoga class, precisely because I just felt like it was, to a certain extent, therapy in motion. It was where I was tapping into emotions but not having to say anything. So I do recall that. I specifically remember that and speaking to my counselor about that.

Laurel: So you did find that it translated into the other efforts towards healing that you were making at the time?

Sophia: Oh, absolutely. I think yoga has the power to connect in so many ways. It's so much more than going to the class and leaving what it brings isolated inside of a room.

Monica explained her belief that her practice of yoga was generalizable to her daily life goals. She used the example of a yoga balancing pose called Tree Pose. She identified balance in yoga and in daily life as freedom from distraction.

Monica: I think that when you stand up with your leg and tree, and that's your balance in life, and just reach a point and try to do it, I couldn't do it. And I think I'm reaching it. She told us that when you reach that balance in your body you're going to feel it in your life. And I'm targeting to do it because I want to have it and I have to do it both feet, so ... Even when I go to a yoga class, I don't even finish. I just stand up where I'm in the house and I have good balance, I have good balance. Even going to a restaurant and look to a menu to see what I am going to eat it, I can be staring at it, but I need to concentrate and see what I want to eat. That distraction in my life that has been all my life distraction, distraction. I want that balance and I think I'm reaching it... You stand up in a pose and get a balance, and that means that you're going to get balance with everything.

### **Physical Results**

Each of the participants stated that they experienced positive physical results.

Sarah noted the physical benefits that she experienced as a result of her participation in the yoga classes.

Sarah: It feels good. It feels like you're getting exercise but you're not totally wiped out either. I'm pretty stiff and not flexible, but I think it's really good for me to start getting a little more flexible and stretching. I sit at a computer a lot, so I've noticed the more yoga plus stretching I do, I have a lot less tension in my neck and my shoulders and I get less headaches. That's a good result.

Monica described feeling stronger.

Monica: Physically, stronger. I felt stronger. I felt that I can look up.

Jordan and Sophia both talked about the accessibility of yoga despite chronic physical pain. Jordan stated her surprise during yoga classes, "Wow, my body is doing it!"

### Plans to Continue Yoga as Part of the Healing Process

The study participants all voiced their motivations to continue practicing yoga.

Jordan expressed disappointment that the yoga sessions were ending. She disclosed that she would continue to seek out yoga classes taught by Kathy in other locations.

Jordan: I was thinking like, "My body is starting to get more back into the swing of things." And I'm going to look into . . . I know she has classes and things other places, it's just trying to implement it into my schedule.

Sophia discussed her intention to continue her practice of yoga.

Sophia: Oh no, absolutely and undoubtedly I am doing my best to recuperate my health so that I can go back to having physical activities, and being able to exercise, and definitely yoga is something that really centers me. There's no better way to say it. It centers me, and it gives me a focal point and it brings balance to my life, so I'm definitely looking forward to that possibility again.

### Composite Description of Meaning as a Whole

As depicted in the previous section, common themes among the yoga participants emerged from the data and represent the essence of the shared experiences among participants. I have presented a composite description of these significant themes, in an effort to give voice to the experiences that participants collectively valued.

Participants each indicated that they believed yoga to be *another form of therapy* that promoted *relaxation* and *calming*. Jordan, Monica and Sarah all described the yoga classes as *a healing experience* and all of the participants spoke about yoga encouraging *openness*.

Each of the women also described a *re-connection to their bodies* through the yoga classes that promoted more positive appreciation of their physical selves. Sarah noted feeling better about her body and wanting to be whole. Jordan noted feeling *strengthened* from her core. Sophia discussed a sense of harmonizing with her body and

feeling better connected to her body. Monica shared greater acceptance of her physical limitations.

All of the participants described yoga as a departure from a cognitive approach to healing toward a more mindful state of being. This appeared to be a process of *moving from a state of thinking to being*. Sophia described this process as being less cerebral, but more conscious and aware, while Sarah described it as getting out of her head. Jordan described it as taking life moment by moment and appreciating each moment, each breath. Sarah mentioned mindfulness within the context of *breath awareness*. She indicated that a high attunement to her breath has helped her in subsequent stressful situations. Monica also described conscious awareness of her breath as helpful when she feels overwhelmed by disturbing memories.

Each of the group members also talked about an *emotional release*. Interestingly, several of the group members talked about using the relaxation and calm they experienced in the yoga classes to allow themselves to become more emotionally open and vulnerable. Monica discussed the inner girl that wanted to cry, and realizing that she could cry if she needed to cry. Sophia talked about her belief that deep relaxation allows for an emotional release. Jordan likened sexual trauma to feeling emotional bondage. She spoke about yoga as an opportunity to release emotions and prevent illness. Sarah described connecting her emotions and her body.

Sarah, Jordan and Monica also emphasized feeling *self-compassion* as a result of the yoga classes. They identified gentleness, not pushing too hard, acceptance of limitations, and non-violence as important outcomes of their yoga practices. Jordan, Monica and Sarah also described feeling *empowered* by the yoga classes. Three

participants also spoke to the sense of *balance* they gained in the yoga class and how this balance seemed to be replicated within their daily lives.

All participants reported *physical benefits* including fewer headaches, reduced muscle tension and improved muscle strength. Sophia and Jordan both indicated that they felt that the yoga class was accessible to them despite chronic health concerns.

Jordan and Monica both indicated that important people in their lives noticed differences in them after beginning the yoga classes. Jordan stated that her therapist noticed how vibrant she was. Monica said that her kids commented on how calm and happy she seemed.

Three of the group members addressed the power of the group. Sarah, Sophia and Monica all described how being in a group of women who had suffered the same trauma, made her feel less alone. Sophia similarly stated that, though group members were working individually, it felt important that they were working together and at the same time. The participants collectively described the group dynamic as *a shared journey of healing*.

Two participants acknowledged the silence of yoga. Sophia described yoga as *a silent therapy*. This theme of silence was strongly valued by Sarah who described herself as introverted. She emphasized the need for trauma care that does not require verbalization, a form of expression that she identified as very difficult with regard to her trauma. She shared that she found the yoga classes helpful because she was able to work toward healing in a way that felt congruent with her personality.

## **CHAPTER V: DISCUSSION**

The use of yoga as an adjunctive therapy has proliferated in recent years within the context of chronic illness, eating disorders, etc. However, there continues to be a scarcity of research on how the implementation of yoga as an adjunctive therapy might impact female survivors of sexual abuse currently engaged in psychotherapy. In this study, I aimed to better understand how the addition of yoga to ongoing psychotherapy might affect female survivors of sexual abuse. In this chapter I discuss the implications of my research, its applicability to current understandings of yoga as an adjunctive treatment for female sexual abuse survivors, the limitations of my study, and areas for future inquiry.

### **Summary of Findings**

The purpose of this study was to better understand whether yoga, used as an adjunctive therapy, would contribute to the healing process for female survivors of sexual abuse. In particular, I wanted to explore how participants experienced the yoga classes, whether they believed their participation in yoga contributed to their healing process, and how it impacted them in their daily lives. I also addressed the role yoga can play in the improvement of psychological well-being for the treatment of sexual abuse trauma. Finally, I sought to understand how the practice of yoga might complement a narrative approach to therapy.

The study participants were a diverse group of women who had very little to moderate previous experience with yoga. None of the participants had participated in yoga specifically intended as an adjunctive therapy. All of the study participants reported that the yoga was helpful with regard to their individual goals for healing from sexual

trauma, even describing yoga as another form of therapy. They each identified greater awareness of their breath as instrumental in their cultivation of mindfulness. Mindfulness was noted as helpful for disengaging from disturbing memories and dwelling on various troubling aspects of daily life. They explained that yoga provided them with a greater sense of calm and relaxation and allowed them to feel more open emotionally and physically. Each of the women described a better sense of connection to their bodies, acceptance of physical limitations and greater motivation to honor and appreciate their bodies. They reported a strengthening and improvement toward feeling whole.

Participants highlighted the importance of engaging in a healing practice that was less cognitively-focused. Participants asserted the benefits of yoga as helping them to become disentangled with their tendencies to overcome distress and emotional pain through thought. They described moving from a state of thinking to a state of being by bringing conscious awareness to their present experiences.

All group members indicated that yoga allowed them to become more emotionally attuned and vulnerable. They described greater awareness and acceptance of their emotional experiences. They acknowledged that emotions reside within the body and that the practice of yoga allowed them to feel more connection between their physical and emotional experiences.

Self-compassion was also a common theme among most study participants. Group members described feeling greater acknowledgement of their own limitations. They emphasized feeling empowered to make decisions about those limitations, for example, whether to challenge further or accept where they were for that day. Participants indicated that this increased self-compassion and sense of empowerment

translated to their daily lives. They identified achieving a sense of balance in yoga that they were able to carry over into their everyday life decisions.

Each of the group members identified physical benefits, including fewer headaches, reduced muscle tension and improved muscle strength. The yoga classes appeared to be accessible to participants with physical limitations and chronic health concerns. This seems to be especially true because it was possible to provide modifications for participants with physical health concerns.

Most of the women described the group dynamic as a shared journey of healing. They emphasized the power of working individually, but in the same space, toward healing from sexual trauma. Participants emphasized feeling less alone in their trauma as a result of participating in the yoga classes.

Finally, two group members discussed the silence within the yoga classes. One group member called it a silent therapy. Another group member articulated the importance of having a space and method for healing that does not require her to verbalize her emotional pain. She suggested that yoga and other forms of healing be offered for people identifying as introverted.

### **Applicability to Current Research**

#### **Pranayama**

The importance of the breath for each of the participants is consistent with current research that indicates that greater breath awareness and control is linked to parasympathetic nervous system activation (Brown & Gerbarg, 2009, p. 56). This parasympathetic nervous system activation may be responsible for the calm and relaxation experienced by the study participants. Jordan reported that the yoga class felt

like “a little piece of heaven.” This description of her experience makes sense given that increased awareness and focus on the breath offers respite from stress and helps us achieve the peace that we desire (Brown & Gerbarg, 2009). Monica spoke about her increased sense of emotional control, which is likely an indication of activation of the parasympathetic response and shown to be connected with emotional regulation. Monica also pointed out that when she had disturbing memories, awareness and focus on the breath brought her back to the present moment, indicating a possible reduction in symptoms of PTSD (Sageman, 2004).

### **Mindfulness Meditation**

Vipassana (mindfulness meditation) is the systematic focus of attention to physical sensations, thoughts, emotions and the surrounding environment and it is essential to the practice of yoga (Germer et al., 2005). The strong empirical support for mindfulness as tool for improving emotional regulation is supported by my findings. (Davis & Hayes, 2011). The mindfulness meditation component of yoga provided participants with a new and novel cognitive focus, different from learned and habitual ways of thinking. This has the potential to disengage participants from current automatic emotional and physiological responses to trauma.

### **Asana**

Participants in the study described increased connectedness to their bodies, which is similar to prior research indicating asana as a contributor to greater self-awareness (Riley, 2004). Group members described improved strength, flexibility and balance, likely as a result of practicing asana (Riley, 2004). The implications from prior research for greater range of movement, strength and nervous system regulation were self-reported

benefits for these study participants, as well (Raub, 2002, p. 798). No negative side-effects were reported by study participants, likely as a result of the modifiability of yoga asana for varying levels of physical ability (Streeter et al., 2007). The women in this study described achieving calm and relaxation after their yoga classes, similar to the “parasympathetic dominance” described by Sarang & Telles (2006).

### **Yoga and Psychology**

Similar to Boudette’s (2006) research on eating disorders, these study results suggest that sometimes “words are not enough” (p. 170). For these female survivors of sexual abuse, addressing the bodily manifestation of trauma, through mindfulness and greater attunement to the connectedness of the emotional and physical lived experiences, was impactful. The ability to acknowledge the wisdom of the body, to feel, perceive and sense their experiences of the world is vastly different from cognitive and behavioral approaches to psychotherapy. In these cases, words were not a necessary medium through which to re-write unhelpful stories.

This study also supports positive outcome for improved connectedness to clients’ experiences of their bodies (Boudette, 2006). Study participants described improved appreciation for their bodies. They explained that they felt more control and ownership of their physical experiences (McIver et al., 2009). They expressed feeling empowered to make decisions about their bodies- their positioning, decision of whether or not to challenge themselves, or even participate at all. This contributed to greater mindfulness of their physical needs and preferences.

## **Yoga and Narrative Therapy**

Douglas (2011) pointed out that we learn about who we are through our bodies and through the movement of our bodies. The experience of sexual abuse is a physical trauma, thus often contributing to a woman's understanding of who she is. From a Narrative perspective, this involves the creation of a personal understanding of the self that is obscured by a dominant storyline (Miller et al., 2006). Thus, in the case of sexual abuse, a woman's understanding of herself may become overshadowed by her experience of sexual abuse.

The practice of yoga provides a complementary method for co-creating unique outcomes. Yoga provides a safe space for clients to explore alternative understandings of their bodies. Holding a difficult yoga pose, combined with mindfulness of physical sensations, awareness of the breath and acceptance of the physical experience, presents the opportunity for clients to cultivate self-compassion, appreciation of the ability of their bodies and self-empowerment.

Clients experience themselves in yoga, just as they are, providing a perspective of themselves as separate from the problem. As Monica so confidently stated, "It doesn't define me." This serves to support the externalization of the problem, often a helpful intervention used in Narrative Therapy. In yoga, practitioners observe and are curious about their sensory and emotional experiences. This practice of mindfulness enables practitioners to disentangle from unhelpful judgements, evaluations and conclusions, creating space for more nuanced and preferred ways of understanding themselves and their relationships with the pain they experience.

Both yoga and Narrative Therapy serve to loosen clients' grips on previously held "truths," giving voice to a new understanding of themselves. Yoga, in combination with narrative therapy, provides clients with access to a form of healing that addresses the physical, emotional, cognitive and spiritual embodiment of the trauma they endured. Yoga and narrative therapy are complementary approaches to co-creating a new, more preferred way of knowing oneself.

### **Limitations of My Study**

#### **Personal Presuppositions**

I identified several personal presuppositions prior to beginning this study. I worked to be aware of these as I conducted the research. One particular method I used for observation of my own biases was to record them in my self-reflexive journal.

- Yoga is helpful for a variety of physical and psychological ailments.
- Psychotherapy is sometimes limited in its method, providing only a verbal medium for processing, making meaning and creating change.
- Physical and emotional pain is experienced in every human system: cognitive, emotional, physical, spiritual.
- Various levels of previous experience with yoga will either increase or limit the participant's perceived benefits from the practice.
- Participants with physical limitations may find it more difficult to benefit from the various components of the yoga practice.

Despite my efforts to carefully bracket these assumptions, I am aware that study participants may have been influenced by my assumptions. These assumptions could have become apparent to participants through the way I phrased sentences, vocal

intonations, word choices and reflections. As I read through interviews, I also became aware of my tendency to reflect back my perceived understandings of clients' responses. This may have encouraged the client to consider particular meanings for their experiences, thus influencing their responses to later interview questions based on these newly identified meanings.

### **Sample Size**

The small sample size is a limitation of this study. There were several clients of the agency that were interested in participating in the yoga classes, but were unable to attend class at the designated time. Additional yoga classes, and perhaps a weekend class, may have provided greater access and, thus participation in the study. Though seven women participated in the yoga classes, various factors limited my ability to collect data from three of the women. One such factor was an inability to reach two of the participants by phone to schedule an interview. Another factor was inconsistent yoga class attendance. This inconsistency appeared to be connected to travel and physical illness rather than a lack of interest in the class. However, I chose not to interview these women because of their limited participation.

### **Sampling Method**

Participants were referred to the study by their therapists. In many ways, this seemed to be a comfortable referral method for both clients and therapists. Though therapists were asked to tell each client about the study, they may have presented the study differently for clients based on their own presuppositions about whether they would benefit from yoga. This may have produced a sample that was partially screened by the

referring therapists. Future research might also provide clients with a flyer when they check in for therapy sessions, detailing the class.

### **Instructor**

Just prior to the start of the study, Kathy, our yoga instructor, shared with me that she is a rape survivor. She expressed that leading this yoga class would be particularly meaningful for her. Each of the participants commented on Kathy's approach in the yoga classes. They noted how exceptional and special she was as a yoga instructor. The women in the study may have benefited from Kathy's ability to empathize and understand the particular needs of the participants. This may have influenced her approach to the class. Though every yoga class and every yoga instructor is different, Kathy's identification as a rape survivor may have influenced the participants' experience.

### **Implications and Areas for Future Inquiry**

I believe that this study brings greater awareness to the physical embodiment of sexual trauma and how yoga can play a useful role in healing. The phenomenological methodology gives voice to the participants of the study and creates a depth and context to their experiences of yoga as sexual abuse survivors. Through their individual stories and shared themes, a better understanding of how yoga is connected to the healing process is achieved. I hope this study will contribute to counseling psychologists' understanding of yoga as an adjunctive therapy for survivors of sexual abuse.

Future research is needed to understand various aspects of implementing yoga therapeutically for survivors of sexual abuse. Considerations for future research include the following:

- What are the limitations and concerns of agencies and psychologists for the implementation of adjunctive therapies, such as yoga?
- How does ongoing yoga participation impact progress in therapy and length of therapy for survivors of sexual abuse?
- What is unique about male survivors of sexual abuse using yoga as an adjunctive therapy?
- What are the unique implications for introverted survivors who include yoga as an adjunctive therapy?
- What are the effects of bringing elements of yoga into individual, group or family counseling?
- What are the experiences of participants of a yoga class led by an instructor who does not identify as a survivor of sexual abuse?
- What are the longer-term effects of a greater sense of self-compassion and empowerment for survivors of sexual abuse?

### Conclusion

*Yoga is the journey of the self, through the self, to the self. –The Bhagavad Gita*

The women in this study each provided their individual experiences and stories from which a general essence of the experience emerged. Participants identified the yoga practice as another form of therapy from which they achieved a sense of relaxation, calm and emotional regulation. They found attunement to the breath as a helpful tool in cultivating mindfulness and disentanglement from stress. Group members also shared the experience of greater connection to their physiological experiences and how they connected to their emotional experiences. They emphasized that yoga encouraged a

departure from a tendency to solve problems and make meaning from a purely cognitive perspective. They discussed a “heart-opening” that allowed for a more general sense of openness to their emotional experiences. This openness translated to their personal lives enabling them to consider loving and being loved more freely.

The women in this study spoke of self-compassion and yoga’s teaching of non-violence. They admitted to previous self-directed harsh self-evaluation. They indicated that yoga created space for other ways of understanding their limitations. They spoke of new stories of empowerment and importance in their own lives. The participants expressed a newly achieved sense of self-worth. They described a sense of purpose and that they deserved to be cared for by themselves and others.

Survivors in this study described the power of the group and how they felt less alone in their pain. They noted, in particular, the silent solidarity within the group and how comforting it felt to be on a shared journey of healing while maintaining the uniqueness of their personal stories. They appreciated the absence of pressure to verbalize their stories and feelings. Participants also emphasized the importance of non-verbal healing methods for those identifying as introverted.

All of the study participants described wishing that the yoga classes could continue. Some expressed the belief that it should be regularly available as an adjunctive therapy within the agency. All of the women indicated that adding yoga as an integral part of their therapy, contributed to their progress toward healing.

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## **APPENDIX A: RECRUITMENT FLYER**

Want to give back?

Research study including

# **FREE BEGINNER YOGA CLASSES!**

Mondays from 12:00noon – 1:00pm

6 weeks of free beginner yoga classes for adult female clients as part of a research study to determine the effects of yoga for female survivors of sexual abuse

Please contact Laurel Bluntzer at 210-255-0923 or  
lbhawks@lake.ollusa.edu

## **APPENDIX B: INFORMED CONSENT**

### **OLLU INSTITUTIONAL REVIEW BOARD ADULT INFORMED CONSENT FORM**

#### **Yoga for Female Survivors of Sexual Abuse Study Informed Consent**

##### **Background**

You are invited to participate in a research study. The purpose of this study is to explore the effects of weekly yoga classes in addition to ongoing traditional psychotherapy for female survivors of sexual abuse.

##### **Study Procedure**

The study is expected to last for eight weeks. Each person who agrees to participate will meet with the researcher for an initial one hour interview with the researcher at the [agency]. Participants will then attend a one hour yoga class each week for six weeks. The yoga classes will be private and held in the [agency] group room. The classes will be taught by a licensed female yoga instructor who is not otherwise involved in the research. The last week will involve a final one hour interview with the researcher at the [agency].

##### **Risks**

Possible risks include the experience of strong emotions during the interview. These emotions may be similar to those felt when talking to a close family member, friend or a counselor. Therapists with the [agency] will be available should the participant or the therapist believe it would be helpful. General fatigue or discomfort commonly associated with physical exertion is a risk to participation. You should consult your doctor before beginning any program involving exercise.

##### **Benefits**

Possible benefits resulting from participation may include an improvement in physical fitness commonly associated with exercise. Participants may also benefit emotionally from their participation in the yoga classes. They may also gain an improved understanding of the mind-body role in healing. Additionally, your participation may benefit psychologists' understanding of how to better serve women who have shared experiences similar to yours.

##### **Confidentiality**

All information disclosed during the interview will remain confidential, except in cases where the law requires that the authorities be notified (danger to self or others, child or

elder abuse). You will be allowed to choose a code name which will be used in the transcript of your interview and your information will be disguised so that you remain anonymous. Information that you provide will be kept in a locked cabinet at Dr. Bernadette H. Solórzano's office (research supervisor), and any computerized files will only be kept by the researcher, stored in a password protected drive on the university storage system. Once the final research is completed, any remaining information will be properly destroyed.

### **Contact Persons**

If for any reason you need to contact the researcher, you may call Laurel H. Bluntzer, M.S., at (210) 255-0923 or email [lbhawks@lake.ollusa.edu](mailto:lbhawks@lake.ollusa.edu). You may also call the researcher's supervisor, Bernadette H. Solórzano, PsyD., at (210) 434-1054 or email [bsolorzano@ollusa.edu](mailto:bsolorzano@ollusa.edu). You can also contact Dr. Christine Carmichael, PhD, CCC-SLP at the Our Lady of the Lake Institutional Review Board at 434-6711, ext. 2402 or email [ccarmichael.ollusa.edu](mailto:ccarmichael.ollusa.edu)

### **Voluntary Participation and Withdrawal**

Your participation in this study is voluntary and you may discontinue participation at any time without penalty.

### **Costs to Participate**

There is no financial cost to participate in this research study. However, you will be volunteering 8 hours of your time to participate in the interview and yoga classes. I understand that your time is valuable and I will make every effort to schedule the interview at a time that is convenient for you.

### **Consent**

By signing this form, I acknowledge that I have read the above information and I agree to participate in this research study. I have also been given an opportunity to ask any questions concerning the study and the primary investigator, Laurel H. Bluntzer, M.S. has been willing to answer them. You will be given a signed copy of this consent form to keep, and the researcher will also keep a signed copy.

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Participant's Printed Name

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Participant's Signature

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Date

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Researcher's Printed Name

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Researcher's Signature

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Date

**IRB Approval Notice**

This research study has been reviewed and approved by the OLLU Institutional Review Board. For questions about participant's rights during or after the study, contact the IRB at 210-434-6711, ext. 2402 or [ccarmichael@ollusa.edu](mailto:ccarmichael@ollusa.edu).