

## Yoga Therapy for Mental Health: Understanding Competence in the Context of Collaborative Treatment Teaming

By Elisabeth Crim

### IAYT's Mental Health Competencies

Yoga therapists are discussing the issue of competence in treatment of people with mental health symptoms and diagnoses—wrestling with how to define, measure, and achieve it within a discipline that is both Eastern in origin and increasingly Western in practice. The latest version of the Educational Standards for the Training of Yoga Therapists<sup>1</sup> exhibits the great effort and collaboration of yoga therapists and other healthcare professionals who support the credibility of yoga as “a respected and recognized therapy” according to IAYT's mission.

I echo Bo Forbes in her interview in the last issue of *Yoga Therapy Today*<sup>2</sup> and

in her *International Journal of Yoga Therapy* article in 2011.<sup>3</sup> Forbes voiced concern about the requirements for training for mental health treatment competencies in IAYT's standards document.<sup>1</sup> Under Category 2.3, Psychology and Mental Health, 3.1, Basic Principles of the Therapeutic Relationships, and 4.2, Provide Yoga Therapy, we find:

- 2.3.1 *Basic knowledge of commonly occurring mental health conditions—from psychological distress to psychiatric conditions—their symptoms, and common approaches/interventions, as they relate to the work of a yoga therapist.*
- 2.3.2 *Basic knowledge of psychological concepts and terminology, including mood, cognition, behavior, and personality, as relevant to work of a yoga therapist.*

- 3.1.3 *Demonstrated ability to recognize and manage the subtle dynamics inherent in the therapist/client relationship.*
- 4.2.1.2 *Assessing the current condition using the tools relevant to the yoga therapist, including an evaluation of the physical, energetic, mental, emotional, and spiritual dimensions of well-being.*

While I applaud that these concepts are required for yoga therapists and believe yoga as therapy can yield positive effects in mental health treatment, I think a great caution regarding competence is in order here. Knowing basically that these conditions and concepts exist is one thing—knowing how to assess and treat them and how to communicate and intervene safely and within the therapeutic relationship regarding these issues is quite another.

As a yoga therapist approaching the individuals in your care holistically, you may find translating these competencies into treating individuals diagnosed with mental disorders to be daunting. Mental illnesses, disorders, and imbalances include disorders of mood, anxiety, psychosis, trauma, neurobiological development, relational attachment and personality, and addiction, among others. Each has its own etiology, prognosis, and treatment requirements. For yoga therapists, defining competence in the area of mental health treatment is both an act of clarifying what, as a yoga therapist, you are trained to do and what you are clearly not trained to do in assessing and treating such disorders.

Let me clarify from what perspective I am writing. I am a licensed psychologist; a certified Relax and Renew Yoga Trainer (Judith Lasater, PhD, PT); the founder/director of a holistic, integrated treatment network of independent healthcare professionals; and a provider of professional development services, including continuing education. As a psychologist, I practice psychodynamic and mind-body-spirit-oriented psychotherapy. I speak, write, and consult on issues of transference



and counter-transference in psychotherapy, the body's process in psychotherapy, health care provider compassion fatigue, and collaborative treatment teaming.

I am not a trained yoga teacher or yoga therapist. I do not consider myself to be trained at the level of expertise to independently, safely, or knowledgeably guide a client through a yoga asana or pranayama practice. I can certainly talk about, safely practice, and even demonstrate many of the elements of the eight limbs of yoga—but I am not competent to specifically teach or guide others with expertise and safety on my own. I am careful to stay within my scope of practice. I posit that mental health professionals who are not attending to the entire mind-body processes of the individual directly or via referral to an appropriate professional are offering incomplete, and perhaps even unethical, treatment. Anyone who directly intervenes with the body's process in mental health treatment without adequate training is operating in a potentially unsafe, and therefore unethical, manner as well. And, those in body-based work, including yoga therapy, who are attending to mental health treatment and are not trained in the dynamics of psychotherapy and transference are equally in potentially dangerous and unethical territory.

There is a trend in both psychotherapy and in the emerging discipline of yoga therapy for a single provider to take care of the mind, body, and spirit via one treatment modality, whether it is based on yoga, somatic therapy, psychotherapy, or some other form of integrated treatment. We as a field are exploring and creating ethical and effective single provider integrated training programs where appropriate (e.g., Jack Rosenberg/Marjorie Rand; Pat Ogden; Richard Miller; Bo Forbes). However, even as these approaches are developed and established, I propose and practice an additional alternative approach to integrated treatment by a single provider—that of a collaborative and interprofessional (multidisciplinary) treatment team for the individual, couple, or family I am treating.<sup>4</sup>

### Collaborative Treatment Teams

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treatment in the current mental health treatment climate. I apply this approach predominantly for issues of competence both for myself and for the yoga therapist and other healthcare providers on my treatment team. I find that many yoga therapists, psychotherapists, and other CAM providers—as well as conventional healthcare providers—are in fact relieved to hear someone calling for competency and training and providing integrated care. I believe that, in many cases, depending on the complexity of the case, one practitioner cannot provide all that is needed for ethical and effective treatment.<sup>4</sup> Some individuals, couples, and families need an interprofessional team to adequately attend to the complex symptom, diagnostic, and relational dynamics presenting in treatment.

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The concept of a collaborative treatment team is not new to the mental health community. For decades, inpatient and partial hospital (or day or intensive outpatient) treatments have used formal treatment teams to attend to the patient. These treatment teams typically include a psychologist, psychiatrist, licensed psychotherapist, nurse, nutritionist, and adjunct therapists, including art, music, dance, and recreation. This approach is less often used in outpatient treatment, but I have for years advocated building such teams at the outpatient level of care.<sup>5</sup> This model easily incorporates CAM therapies, including yoga therapy and acupuncture. Increasingly, many traditional mental health professionals who are seeking to attend to mind-body processes in treatment are open to teaming with licensed and certified CAM practitioners.

### Key Factors for Working in Collaborative Treatment Teams

For me, yoga is a discipline, a world view, and an integrative life path. I deeply value it as a therapy to be applied to treatment of various disorders and imbalances that emerge across all of the five *koshas* (sheaths or layers of the self). As a psychologist treating mental illness, disorders, imbalances, and symptoms from a holistic and integrated perspective, I absolutely want the patients I treat to also be practicing yoga with a yoga therapist. I also want some of them seeing a board-certified psychiatrist. I refer some to a licensed acupuncturist, or a physical therapist, a registered nutritionist, or an ob-gyn. And when I say I want them in yoga therapy, I do not necessarily mean a yoga teacher, though many of my patients do yoga with yoga teachers and it has yielded powerful, positive therapeutic effects for them. If I, as their treating or evaluating psychologist, introduce them to yoga and incorporate it as a recommendation within their treatment plan, I want them to see a qualified yoga therapist whom I trust and with whom I have developed a referring and collaborative treatment relationship. This process occurs based on four key factors:

1. *Training and Certifications.* For yoga therapy, I want work with professionals who have achieved a 500-hour level of yoga training, and who have had further training in yoga as a therapy.
2. *Safe, Client-Centered Teaching/Intervention.* It is essential to ensure the client's physical safety. A yoga therapist working with me must be able to accurately assess a client's needs based on an individual, client-centered assessment rather than on standardized protocols.<sup>4</sup> Equally essential is the client's emotional/relational safety based on the yoga therapist's clear personal, relational boundaries, and understanding of the limits of his or her training.
3. *Good Communication.* Collaborative treatment teams thrive on regular communication among all treatment-team members regarding the interventions and experiences with the shared patient/client. The benefit to the patient of a team of professionals who are communicating with one another should not be underestimated. One patient I treated through the collaborative team approach noted that it was an unusual and uniquely valuable experience to

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enter each team member's space for treatment with that team member having already communicated with the others regarding her treatment. It not only allowed for more coordinated, integrated care, it allowed her to spend treatment sessions focused on that particular therapeutic intervention versus relaying her experience in other therapies to each provider; for people with trauma the verbal repetition with each provider can actually be re-traumatizing. Good communication among team members also ensures appropriate and timely referrals.

4. *Effective Collaboration.* An attitude and approach of mutual respect and learning between the yoga therapist and the psychotherapist, as well as other treatment team professionals, fosters collaboration and effective treatment. The yoga therapist on my team must understand, for example, that as a psychodynamic psychotherapist, I am very skilled in working on the strengths and potential pitfalls and dangers of relationship that are based in early childhood relational dynamics. These interpersonal dynamics, which are often unconscious, are called transference for the patient and countertransference for the treatment provider. Early relational patterns persist for most people into adulthood, including psychotherapists and yoga therapists! This is one reason, I believe, that people treating mental health issues should participate in psychotherapy for understanding and healing of their own personal mental-emotional-relational injuries.

It's necessary for anyone treating clients for mental health issues to understand how interpersonal dynamics work. Yoga therapists and psychotherapists need to know how to communicate safely and therapeutically within the therapeutic relationship to avoid emotionally or physically dangerous misunderstandings and actions—or inactions—on the part of the therapist toward the patient. For example, a person with a history of physical or sexual abuse may experience touch by a yoga therapist as a threatening physical or sexual advance or assault; or a therapist not returning a phone call in a time frame that for a particular client/patient may result in him or her feeling abandoned and then refusing to return for treatment, or becoming suicidal or even homicidal. In a collaborative team, the yoga therapist less

experienced in these dynamics needs to respect and rely on the psychotherapist as a resource for this knowledge.

It is equally important for the yoga therapist to be respected by the psychotherapist and other team members. In addition to being willing to learn from other professionals on the team, the yoga therapist needs to educate the psychotherapist and other team members regarding yoga theory and the yoga interventions used. The yoga therapist must work with the other team members to explore how yoga interventions and theory intersect with psychotherapy and other interventions in the shared treatment.

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### Conclusion

Referring with the goal of collaboration can lead to holistic integrative care. Successful collaborative treatment that bridges health-care disciplines for holistic treatment of an individual can be profound and synergistic in its reach. Challenges to this model of integrative care include time, money, and finding qualified professionals who value and are committed to communication and collaboration. There are also tremendous benefits that include the provision of effective integrated treatment that incorporates streamlined communication, increased resources for the patient and treating professionals, and in some cases, reduced overall cost and length of time in treatment. Additionally, for the providers in an interprofessional treatment team the benefits include increased professional knowledge and development and a counter to isolation that can result in compassion fatigue or burnout.<sup>5</sup> Competence in one's field of expertise is as much about knowing when and how to make an appropriate referral as it is about knowing how to treat effectively. Central to building or participat-

ing in a collaborative treatment team is the issue of competence. The context of accurate referrals in a collaborative team attends to the need for integration of mind and body for the patient and better ensures that patients are referred to the right specialist for their particular health concerns. Collaborative treatment can secure ethical intervention for issues specific to each discipline, allowing the treatment team as a whole to hold the standard of competency necessary for safe and ethical treatment.

Now is an exciting time for all of us trained in the healing of others and for the health care profession, regardless of point of entry, background, and training. Yoga as a therapy is an emerging and powerful voice in this climate. As we applaud the evolution we find ourselves in, we must honor multiple paths to integration and holistic treatment for individuals struggling with mental health symptoms and diagnoses. At the same time we must require knowledge, training, and competence for those of us on these integrative and holistic paths. **YTT**

### References

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