

# Perspective

## A New Direction for Yoga Therapy? A Physician's Perspective

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The first annual SYTAR conference by IAYT was full of energy and hope for the future of Yoga therapy. Yoga therapy is now a professional discipline with a variety of standards and a blossoming research base. I will address the opportunities and pitfalls for the development of Yoga therapy from the perspective of a practicing physician who uses Yoga in his own life and prescribes Yoga for his patients. I am not a Yoga therapist, but I have been fortunate to learn much about Yoga therapy while co-writing *Yoga Rx* with Larry Payne.

I see the following questions as critical for the future of Yoga therapy:

- Should there be a single standard for Yoga therapy based on nationwide criteria?
- Is it okay to have multiple standards based on multiple schools?
- Should there be licensure available and, if so, should it be required in order to practice Yoga therapy?
- Will standards and licensure increase the number of referrals from physicians and other healthcare professionals?
- Will standards and licensure lead to greater third-party coverage for Yoga therapy?
- What are the benefits and risks of third-party coverage?

Medical education went through a transition in the early 1900s, when Abraham Flexner wrote a report criticizing the apprenticeship method of training that was being used in medical schools across the country. This prompted the development of national standards for curricula and changed the nature of medical education. Is there something wrong with the current method of training Yoga therapists? Do the many existing training programs need to find common ground, or is it okay for each school to develop its own standards? Even medical education, with its very strict guidelines, does support 126 schools, each with a somewhat

different curriculum. So can Yoga therapy have national standards and still support diversity?

Licensure generally means standardized testing, and fees to support the testing, and the granting of licenses. I know first-hand the amount of work and expertise needed to create a licensure exam. I also know how much money can be involved in the administration, grading, and evaluation of these tests. Large and expensive bureaucratic agencies are created over testing and licensure. These bureaucracies can sometimes be very frustrating and impersonal to deal with. There is great power and the potential for ugly politics around regulations and systems of licensure. However, having a license to practice Yoga therapy will most likely increase the number of referrals to Yoga therapists by physicians and other healthcare professionals. Standards and licensing will likely raise the visibility of Yoga therapy and most likely increase the credibility of Yoga therapy as a healthcare profession. Is it possible for some therapists to get licensed and others to continue to practice without a license?

Who will benefit from standards and licensure? More patients will likely be referred to Yoga therapy, and this can benefit more people. Unfortunately, the hassles of dealing with standards and licensure will probably be unpleasant for many Yoga therapists. The greater demand for Yoga therapy could support more Yoga therapists and groups of Yoga therapists. The business models may change, and this will have its risks and possible benefits. Quantity of clients could begin to compete with quality of service. The demand to care for more people may result in less time per client. Medicine continues to grapple with the quantity and quality issue, and for the most part, the pressure is for numbers over quality. When quality is measured, it is often with numbers that are not good measures of true quality of care.

Do we really want third-party coverage for Yoga therapy? Most likely, third-party coverage would allow people to benefit from Yoga therapy who would not dream of going for

Yoga therapy at this time. But as a doctor and a patient, I am keenly aware of the hassles of dealing with insurance companies. This is a double-edged sword, but Yoga therapists could make individual decisions about whether or not to accept third-party coverage, as some doctors do at this time.

In conclusion, Yoga therapy is at a crossroads in its professional development that resembles where medicine was 100 years ago. While Yoga is over 5,000 years old, Yoga therapy as a healthcare profession is relatively new. Research on Yoga therapy is beginning to help inform the best methods of practice. But because the body of evidence is still so small, and Yoga therapy is so individualistic, the need for and value of standards is debatable.

Standards and licensure come with a demand for much time and effort by many people who need to come to agreements. Who will pay for this time, or who is willing to donate this time without pay at this moment? Who is qualified

to develop the standards and who will assess the value of the standards? Can IAYT do this?

Probably, the first step is to bring together the thought leaders in Yoga therapy to begin to discuss standards. Of course, standards need to precede licensure. This could start at the next SYTAR conference when people are already together. This should be a safe start that costs only the time of those involved. The politics of different schools and opinions will be challenging, but this could be the beginning of the process.

I realize that I have asked as many questions as I have suggested answers. Proceed with caution, and continue to care for the people in the wonderful way that you currently do. The bottom line is still about giving to others with your heart, your hands, and your knowledge.

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