

Editorial

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What is the Evidence for Yoga Therapy?

Much of the conversation among Yoga therapists and researchers these days is about *how* we talk about Yoga—with each other, with the public, with healthcare professionals, and with “the powers that be,” also known as the funding agencies, the program directors, and the policy-makers.

There is one stream of conversations that I have the privilege of “overhearing” and, in many cases, moderating: the flow of ideas between the authors who submit articles to the *Journal* and the peer reviewers who provide feedback. These are the questions we’re asking each other, and they reveal how we think about Yoga therapy. These conversations also provide key insights into what will be required of the field as we communicate the value—and *values*—of Yoga to those outside our field.

There is one question that comes up again and again in peer reviews, and it may be the most critical question for the field as a whole to address. That question is: *What is your evidence for that claim?*

Reviewers consistently want to know more about why an author is claiming that this breathing practice will be helpful for this disorder, or this posture is contraindicated for this condition, or this psychological disorder is associated with this energetic imbalance. Our reviewers want to know: On what authority do you make that claim? The lineage of your teachers, and your teachers’ teachers? Your own clinical experience developing a therapeutic Yoga practice for a specific condition or population? Your training in another therapeutic or healthcare profession? Evidence from scientific research?

A big part of this question is reviewers trying to figure out what paradigm the author is working from: Ayurveda, a specific style of *Hatha* Yoga, Western medicine, somatic psychology, some other perspective, or some combination

of perspectives? Many of us try to juggle multiple paradigms in our work, and we know that different paradigms require different kinds of evidence. Reviewers don’t necessarily want every possible kind of evidence, just evidence that the author is working with integrity within a given paradigm.

As you can tell from a quick look at the list of reviewers on the inside cover of this issue, and the author bios at the end of this issue, this is a diverse group of people. For an article on something like Yoga for depression (this issue has two!), the peer reviewers may include a clinical psychologist, a Yoga therapist trainer specializing in mental health, and a Yoga researcher. They may each have very different ideas about the role Yoga therapy plays in mental health, and what evidence is required to support a specific approach. Their collective and sometimes conflicting feedback requires the author to be more clear in his or her discussion about not just the what, but the why of Yoga therapy. So far, this system is working well (in this editor’s opinion) to produce articles that contribute to the larger, ongoing conversation about Yoga therapy.

But as a field, I believe we have yet to fully come to terms with the fact that we do not all work from the same “evidence base.” In this issue alone, authors supported their claims with the following types of evidence:

- Traditional Yogic and Ayurvedic texts
- The author’s direct relationship with a well-known and respected teacher
- The reported/published opinion of a well-known and respected teacher
- Peer-reviewed, published scientific studies
- Popular-press articles and books
- The author’s general professional experience
- Specific case studies from the author’s professional experience

- The author's professional training in fields *outside* of Yoga therapy
- The author's logic or opinion, with no additional evidence

Although not cited in this journal, direct personal experience, including spiritual realization, are commonly cited in the Yoga community as evidence for an approach.

Are all of these types of evidence “equal” to you? Or are some more convincing than others? Which form of evidence would hold stronger sway in your own mind and heart if the evidence they provided seemed to contradict each other? Are we each well-trained enough to evaluate different forms of evidence, including scientific studies, different teachers' claims, and individual interpretations of traditional texts?

Recently, there have been calls within our organization to make Yoga therapist training programs “evidence-based.” What would that look like? Who gets to decide what counts as evidence? Should a field like Yoga therapy align itself with the “student” model of knowing that relies on direct experience, studying traditional texts, and working closely with a respected teacher? Should we focus on outcomes as evidence, whether that comes from case studies, clinical research trials, or expert consensus about “what works” within the community? When do we know that we have enough of the “right kind” of evidence to recommend an approach?

I don't have any answers to these questions. But I do think that if we as a field don't bring this discussion into the open, we risk splintering into interest groups who accept their own evidence and reject evidence from outside their primary paradigm.

With a field as diverse as our own, we need to be clear about the basis for our individual and collective work, and

expect that certain types of evidence or reasoning will be more compelling than others to different individuals and organizations. Individually, we cannot—and should not try to—offer all forms of evidence for our work. We simply need to be clear about what we believe is “good enough” evidence to guide our work, be it the study of Yoga philosophy, a committed relationship with one teacher or lineage, in-depth Western or Ayurvedic medical knowledge, our years of clinical experience, a list of scientific studies, or some combination of the above.

The value of an organization like IAYT is that it is creating and documenting an evidence base for Yoga therapy that draws on every definition of “evidence” that a Yoga therapist or outside party might find compelling. What approaches to Yoga will this large evidence base support the most? Will Yoga therapy be, as most of us believe, helpful for just about anyone and any condition, if it is adapted with skill and compassion?

That remains to be seen. If we have already made up our minds and are simply looking for the evidence to support our beliefs, there can be no such thing as true evidence-based practice. But the one element of evidence-based practice that we can all practice immediately is a willingness to observe what is actually happening in the present moment. This means using every tool available, from direct observation to sophisticated data analysis. As the editor of this journal, I welcome your contribution to this conversation, and look forward to asking you, “What is your evidence for that?”

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