Yoga Therapy for Veterans with PTS(D) and/or Trauma

RICHARD TRZCINSKI E-RYT 500

19May2017

Email: ricktrz@ktc.com

Author note:

This research was conducted at the studio of Rick's Yoga Therapy, in Kerrville, Texas by Richard Trzcinski (Rick) E-RYT 500 and yoga therapist in training with Yoga Yoga of Austin, Texas. Rick has completed two Level 1 trainings with Dr. Daniel Libby of the Veterans Yoga Project (VYP), and is presently the Austin representative for VYP, and a training with Stephanie Lopez, senior trainer of the Integrative Restoration Institute (IRI), iRest yoga nidra level 1. This research was based on a six-week study of a small group (seven veterans) who have been diagnosed with having symptoms of Posttraumatic Stress Disorder (PTS(D)) and / or Military Sexual Trauma (MST) by the Veterans Administration (VA), for a thesis and final project for graduating yoga therapy teacher training at Yoga Yoga per IAYT standards.

Abstract

Objective: The objective of this study is to see if using the Veterans Yoga Project (VYP) protocol, Five Tools of Mindful Resilience, and the protocol of the Integrative Restoration Institute (IRI), The Ten Tools of iRest, together, would in fact make a difference in the veterans PTS(D), pain and stress levels in as little as six classes or weeks. Methods: 75 minute sessions were held for six consecutive weeks. There were seven veterans in this program, however only six veterans completed the class series. The protocol was consistent for each class during the six-week series. All sessions consisted of 10 minutes of awareness meditation and centering including body sensing (Annamaya kosha, the physical body or sheath), breath sensing (Pranamaya Kosha, the energy body or sheath) and mind sensing (Manomaya Kosha, the body of mind and senses). Next was to cultivate sankalpa (born from the heart of our BEINGNESS); Intention, Heartfelt Desire, and Inner Resource. 20 minutes of adaptive asana (poses) in which four veterans did chair yoga and three veterans did floor yoga. 10 minutes of pranayama (breathing) using a 5.0.5.0 ratio and full yogic breath pranayama, guided by Dr. Mark Uridel and his harmonium on his "CD" "Pranayama, The Art of Conscious Breathing". Followed by 30 minutes of iRest yoga nidra guided meditation, 1st Training Practice: Teaching Group iRest. (1) We closed the class with 5 minutes of gratitude. The same protocol of meditation, asana, pranayama, iRest yoga nidra and gratitude were given in each class for six weeks. 4 veterans did chair yoga and 3 veterans did floor yoga. All were lying down for pranayama (breathing), and iRest meditation. The classes were taught following this protocol using the tools as taught to me by Yoga Yoga, VYP and IRI. Results: The results showed that using this protocol ALL the veterans had reduced pain and stress levels, were more calm and relaxed, and most reported sleeping better, in as little as six classes/weeks, or even less for some veterans. The significance of these results will only further to help other yoga therapists in the treatment of PTS(D)

with veterans, and possibly set a standard in the protocol used to help veterans with posttraumatic stress and trauma related issues.

Key words: Veteran, PTS(D), Trauma

Introduction:

Post-traumatic stress disorder (PTSD) is a chronic, debilitating anxiety disorder (Vata imbalance) associated with significant disability and functional impairment and a host of comorbid physical and mental health conditions. PTSD is characterized by a prolonged psychophysiological response to 1 or more traumatic events and manifests in 3 clusters of symptoms, including reexperiencing (e.g., intrusive thoughts and memories, nightmares, flashbacks), avoidance (e.g., avoiding thoughts, feelings, people, places associated with the trauma, emotional numbing) and hyperarousal (e.g., hypervigilance, exaggerated startle response, difficulty sleeping). PTSD often co-occurs with major depression, anger and impulsive aggression, chronic pain, insomnia, addiction, and suicide. (2)

Summary of Veterans Statistics for PTSD, TBI, Depression and Suicide:

- As of September 2014, there are about 2.7 million American veterans of the Iraq and Afghanistan wars, compared to 2.6 million Vietnam veterans who fought in Vietnam; there are 8.2 million
 "Vietnam Era Veterans" (personnel who served anywhere during any time of the Vietnam War)
- According to RAND, at least 20% of Iraq and Afghanistan veterans have PTSD and/or Depression. (Military counselors I have interviewed state that, in their opinion, the percentage of veterans with PTSD is much higher; the number climbs higher when combined with TBI.) Other accepted studies have found a PTSD prevalence of 14%; see a complete review of PTSD prevalence studies, which quotes studies with findings ranging from 4 -17% of Iraq War veterans with post-traumatic stress disorder). A comprehensive analysis, published in 2014, found that for PTSD: "Among male and female soldiers aged 18 years or older returning from Iraq and Afghanistan, rates range from 9% shortly after returning from deployment to 31% a year after deployment. A review of 29 studies that evaluated rates of PTSD in those who served in Iraq and Afghanistan found prevalence rates of adult men and women previously deployed ranging from 5% to 20% for those who do not seek treatment, and around 50% for those who do seek treatment. Vietnam veterans also report high lifetime rates of PTSD ranging from 10% to 31%. PTSD is the third most prevalent psychiatric diagnosis among veterans using the Veterans Affairs (VA) hospitals." PTSD and comorbid AUD", Subst Abuse Rehabil. 2014; 5: 25–36, Ralevski, et al.
- 50% of those with PTSD do not seek treatment
- Out of the half that seek treatment, only half of them get "minimally adequate" treatment (RAND study)
- 19% of veterans may have traumatic brain injury (TBI)
- Over 260,000 veterans from OIF and OEF so far have been diagnosed with TBI. Traumatic brain
 injury is much more common in the general population than previously thought: according to the
 CDC, over 1,700,000 Americans have a traumatic brain injury each year; in Canada 20% of teens had
 TBI resulting in hospital admission or that involved over 5 minutes of unconsciousness (VA surgeon
 reporting in BBC News)

- 7% of veterans have both post-traumatic stress disorder and traumatic brain injury
- Rates of post-traumatic stress are greater for these wars than prior conflicts
- In times of peace, in any given year, about 4% (actually 3.6%) of the general population have PTSD (caused by natural disasters, car accidents, abuse, etc.)
- Recent statistical studies show that rates of veteran suicide are much higher than previously thought, as much as five to eight thousand a year (22 a day, up from a low of 18-a-year in 2007, based on a 2012 VA Suicide Data Report). (See suicide prevention page). Contrary to the impression many media articles give, veteran suicide rates, although higher, are not astronomically higher than civilian rates. See *New York Times* 2013 article, "As Suicides Rise in US, Veterans are Less of total," by James Dao.
- PTSD distribution between services for OND, OIF, and OEF: Army 67% of cases, Air Force 9%, Navy 11%, and Marines 13%. (Congressional Research Service, Sept. 2010)
- Recent sample of 600 veterans from Iraq and Afghanistan found: 14% post-traumatic stress disorder; 39% alcohol abuse; 3% drug abuse. Major depression also a problem. "Mental and Physical Health Status and Alcohol and Drug Use Following Return from Deployment to Iraq or Afghanistan." Susan V. Eisen, PhD
- Oddly, statistics for veteran tobacco use are never reported alongside PTSD statistics, even though
 increases in rates of smoking are strongly correlated with the stress of deployment and combat, and
 smoking statistics show that tobacco use is tremendously damaging and costly for soldiers.
- More active duty personnel die by own hand than combat in 2012 (New York Times)
- According to September 2015 New York Times articles, some branches of the military do not keep fine-grained data, or any data at all on the suicide rates (and this must mean on the mental health as a whole) of their veterans. There are "battalion epidemics" of suicide in the military, with much higher rates of suicide and mental health problems. (3)

The statistics speak for themselves. Our veterans are suffering, and yoga therapy can help. So, what is being done? Many organizations like IAYT, VYP and IRI are leading the way in yoga and yoga therapy research to help our veterans heal. However, according to a study published in the International Journal of Yoga Therapy - No.26 (2016) (A National Survey of Yoga Instructors and their Delivery of Yoga Therapy), there are still many questions as to uniformity in yoga therapy criteria given to the veterans.

"There is increasing scientific evidence to support the use of yoga as a method of improving health and enhancing wellbeing, as numerous reviews of the literature have found that yoga appears to reduce symptoms and improve outcomes associated with a number of chronic health conditions including cardiovascular disease (Innes, Bourguignon, & Taylor, 2005), obesity (Bernstein, Bar, Ehrman, Golubic, & Roizen, 2014), diabetes (de G R Hansen & Innes, 2013), chronic obstructive pulmonary disease (Liu et al., 2014), arthritis (Haaz & Bartlett, 2011), and cancer (Culos-Reed et al., 2012). Yoga particularly appears to be helpful in reducing symptoms of depression, anxiety, and pain-related conditions (McCall, Ward, Roberts, & Heneghan, 2013). There has been a surge of research related to the health benefits of yoga during the past decade, particularly randomized controlled trials (RCT's) examining the effects of various types of yoga interventions for a variety of symptoms associated with chronic health conditions (McCall,

2014). Evidence suggests that yoga interventions are effective at improving health outcomes, but a distinction should be made between yoga traditionally taught in yoga studios, yoga therapy, and yoga as it is used in many RCT's." (JYT No 26-2016. Pg. 81) (4)

"It should be noted that thus far no studies have examined whether any style of yoga and/or treatment methods, including Iyengar Yoga, indeed lead to therapeutic results when delivered outside of an intervention protocol. Further, although there are important efforts underway to establish universal training requirements for yoga instructors to qualify as "yoga therapists" (Kepner et al.,2014), controversy remains among experts in the yoga teacher community about the wisdom and viability of these efforts (Kaminoff, 2016).

A second interesting finding in this study is that yoga therapy being delivered to the public may be different than yoga therapy delivered in clinical trials. Whereas yoga in Random Controlled Trials (RCT) typically is delivered in homogenous group settings with all individuals in the group class having a common health condition, most of the teachers in this study report that most yoga therapy is being provided individually, with only half teaching therapeutic group classes. Furthermore, when they teach therapeutic group classes, these classes are small and most often "general" in nature, including a variety of health conditions and symptoms in a single therapeutic class. Research is needed to examine the effectiveness of yoga therapy under such conditions.

Another finding of interest in this study is that the overwhelming majority of teachers cited pain as the most frequent symptom for which individuals seek yoga therapy. Individuals seek yoga therapy for several pain-related conditions including musculoskeletal injuries and conditions such as arthritis, as well as headaches and chronic conditions for which pain is a symptom such as fibromyalgia, multiple sclerosis, irritable bowel syndrome, and menstrual problems. Yet fewer than half of the instructors are keeping any records on their therapy sessions; the majority assesses the effectiveness of their sessions by asking students if their symptoms have improved. Less than 2% of instructors use a standardized validated questionnaire to follow the effectiveness or progress of their therapy sessions. This work illustrates the importance to further explore and build consensus on standardized/validated questionnaires and their utility in measuring clinical outcomes." (IJYT No 26-2016. Pg. 89) (4)

Using iRest alone. "Transforming Trauma: A Qualitative Feasibility Study of Integrative Restoration (iRest) Yoga Nidra on Combat Related Post-Traumatic Stress Disorder L. Stankovic, MA, RYT John F. Kennedy University, Pleasant Hill, CA. This eight-week study examined the feasibility of offering weekly classes in Integrative Restoration (iRest), a form of mindfulness meditation, to military combat veterans at a community mental health agency in the San Francisco Bay Area. Participants were 16 male combat veterans (15 Vietnam War and 1 Iraq War) of mixed ethnicity, aged 41 to 66 years, suffering from posttraumatic stress disorder (PTSD). The 11 participants who completed the study reported reduced rage, anxiety, and emotional reactivity, and increased feelings of relaxation, peace, self-awareness, and self-efficacy, despite challenges with mental focus, intrusive memories, and other concerns. All participants reported they would have attended ongoing iRest classes at the agency approximately once

per week." (11) So, according to this study, iRest as a stand-alone practice does work and helps Veterans with PTS(D).

The Veterans Yoga Project does not have any published research studies yet to date, however, from the VYP website I found this, "Mindful Resilience Yoga is not intended to be a standalone treatment for PTSD. Mindful Resilience Yoga practices are excellent complementary treatments because they achieve the Phase I goals of PTSD treatment: mastery of self-regulation skills. Such mastery is required before a veteran can engage in Phase II trauma processing. Mindful Resilience yoga makes the therapist's job easier by giving his or her patients the skills required to cope with, and move through the difficult jobs of digesting or processing the trauma. It also may be a way to get veterans who are wary of talk therapy in the door. Mindful Resilience yoga also helps to achieve Phase III goals of engaging with meaning and purpose and moving from post-traumatic stress to post-traumatic growth, and can also help patients deal with stress, depression, substance abuse, and pain so that psychotherapy can progress more effectively." (5) "Guided Rest" is the fourth element in their protocol, in which iRest could be used but is not necessarily the standard. VYP does use yoga nidra in their guided rest part of the protocol, which iRest also uses, but the methods of iRest as opposed to a general yoga nidra guided mediation are quite different. Many VYP yoga teachers are not iRest trained or certified and are not qualified to teach iRest so this is a grey area for the standards of "guided rest" for VYP as not all their instructors are iRest certified.

In this RCT study, using the protocol of both VYP and IRI, I blended the two modalities together to see what effects they would have on the veterans in as little as six weeks. My hopes were to show the need of doing more RCT studies in the field of "Yoga Therapy for Veterans with Posttraumatic Stress and / or Trauma", and the importance of using standardized questionnaires.

Methods:

Protocol: Veterans Yoga Project (VYP): Five Tools of Mindful Resilience

Mindful Resilience is what we call the collection of mind-body practices that we teach: Breathing, Meditation, Mindful Movement, Guided Rest, and Gratitude. These tools help us breathe easy, focus clearly, move freely, rest deeply, and remember what is working in our lives. As a result, we become more resilient in the face of both ordinary and extraordinary challenges. The five tools are:

- 1. Breathing Simple techniques that enhance the relaxation response.
- 2. Meditation Awareness exercises that enhance focus and concentration.
- 3. Mindful Movement Deliberate exercises that bring the body through its natural range of motion to enhance strength and flexibility.
- 4. Guided Rest Guided meditation practices that lead to deep and profound relaxation and rest in the mind and body. (Insert iRest practice.)
- 5. Gratitude Simple exercises in being thankful for what is right.

(5)

Protocol: Integrative Restoration Institute (IRI): The Ten Tools of iRest.

The ten tools that form the iRest Program for Healing PTSD can be incorporated into every part of your daily life to foster health, healing, and wellness at all levels of your body, mind, and spirit. They are:

- 1. Affirming your heartfelt mission. Your heartfelt mission is your inner compass of core values that provides purpose and meaning to your life.
- 2. Affirming your intention. Intentions are statements of fact and actions that are guiding forces in your life.
- 3. Affirming your inner resource. Your inner resource is an inner refuge of constant stability, safety, and well-being. Your inner resource helps you to weather all difficulties you encounter as you heal your PTSD and move through your life.
- 4. Practicing body sensing. Body sensing helps you experience deep relaxation. It enables you to access information within your body and mind so that you feel grounded and able to respond to every circumstance, no matter how challenging.
- 5. Practicing breath sensing. Breath sensing further enhances deep relaxation and well-being through easy to learn and easy to practice breathing patterns. Breath sensing allows you to connect to the natural healing forces within your body and mind. This connection helps you stay on course and heal your symptoms of PTSD.
- 6. Welcoming opposites of feeling and emotion. Learning to welcome opposites of feeling and emotion teaches you how to respond to negative and positive emotions with actions that empower you and give you a sense of control in your life.
- 7. Welcoming opposites of thought. Learning to welcome opposites of thought teaches you how to respond to negative and positive thoughts, images, and memories so that you feel empowered and in control of your life.
- 8. Welcoming joy and well-being. Joy and well-being are your birthright. iRest teaches you how to access the power of joy, well-being, and inner peace in every moment of your life, no matter your circumstance.
- 9. Experiencing Being Awareness. iRest teaches you how to take a step back and observe your thoughts, emotions and circumstances from a broader viewpoint so that you can recognize empowering actions that keep you in connection and on course with yourself, others, and your life. Experiencing being awareness enables you to understand and experience your wholeness with all of life.
- 10. Experiencing Wholeness. Experiencing your wholeness helps you recognize how every situation arrives paired with its perfect response. Recognizing and responding with your perfectly paired response allows you to experience true healing, health, harmony, and well-being in yourself, your relationships, and with all of life. (6)

During iRest, we observe, welcome, and engage various aspects of our waking existence, starting with the most gross form, the physical body (Annamaya Kosha). Then moving on through more subtle layers, such as the breath (Pranamaya Kosha), feelings and emotions (Manomaya Kosha), thoughts and beliefs (Vijnanamaya Kosha), and pure joy (Anandamaya Kosha). As we welcome everything that is present in

the body and mind, our emotions and thoughts begin to grow calmer. In the process, we discover and connect to the aspect of ourselves that is always peaceful and at ease. (7)

Veteran Study Group (Class):

The six - week study began by reaching out to Mental Health Developmental Disabilities (MHDD), and the Military Veteran Peer Network. Together we recruited seven veterans who have all been diagnosed with post-traumatic stress disorder (PTS(D)), Military Sexual Trauma (MST) and/or other trauma and health related issues (comorbidities) by the Veterans Administration (VA). We had seven veterans (5 men and 2 women) participate in this study. They had co-morbidities of high blood pressure (3), heart conditions (2), headaches (1), asthma (1), back pain (5), knee pain (3), arthritis (7), and (1) amputee.

An introductory folder was given to each participant. In it was a before and after veteran's health questionnaire (used with permission from Colin Silverthorne), a confidential student registration form with a brief health history, the (VYP) Subjective Units of Distress (SUD) scale, monitoring pain and stress levels before and after every class. Also included was an information sheet about yoga and yoga etiquette, the (VYP) proposal: mindful resilience yoga for PTS(D) patients, and an article on the full yogic breath. Also, included was a poem about "attitude" and an article on guided meditation. At week three all the veterans received an "iRest at Ease" yoga nidra guided meditation compact disc (CD) composed by Dr. Richard Miller of (IRI). The "CD's" were provided by the Sons of the American Legion, Kerrville Squadron #208, to take home and use daily.

My first objective was to create a comfortable and safe environment for the veterans. "Living in a war zone requires being on constant alert for survival. In an environment where people are trying to kill you, vigilance pays off. Veterans have learned quickly either by direct experience or by hearing about it that letting your guard down can result in severe injury or death." (8) I set up the room in a semi -circle of mats and chairs (as needed), with my back to the door, so all the veterans could see the door, thus reducing their stresses about being safe. Creating a safe atmosphere is very important when working with veterans with PTS(D). The veteran, who's sympathetic nervous system is in fight or flight, must be able to feel safe and secure to relax. I informed them that they were in a safe environment and that "I had their back". Nobody was coming through the door without going through me, first. This gave them the permission to relax and be at ease. I supplied bolsters, blankets, blocks, eye pillows, and in one case, for a veteran who was 400 pounds and couldn't get on the floor for relaxation, I brought in my massage table. I also provided bottled water for each class in efforts to make them feel welcomed and comfortable.

Trust is the second most important element when working with veterans with PTS(D). "Veterans must adjust their sense of trust in a war zone. Relying on good intentions of others can get you killed. Thus, veterans learn quickly not to trust people." (8) I began to gain their trust by attending group PTS(D) meetings with MHDD at the local Veteran Center. Some knew me already through my veterans work with the American Legion, another platform I use to reach veterans and gain their trust.

Classes were held at 0900 on Saturday mornings for six consecutive weeks, and were 75 minute sessions. We started the group class by introducing ourselves. Getting to know one another is very important for safety and trust. They were all sizing each other up and trying to figure out if they could trust me and

each other. After introductions, we went through the literature in the folders which were handed out. This was done to eliminate any surprises of what might be coming next. Giving them a plan and informing them of the protocol was imperative so there were no surprises.

All sessions consisted of 10 minutes of awareness meditation and centering, 20 minutes of adaptive *asana* (poses), 10 minutes of pranayama (breathing), 30 minutes of iRest yoga nidra guided meditation, and 5 minutes of gratitude. Protocol for The Veterans Yoga Project (VYP) and Five Tools of Mindful Resilience.

(Five Parts of the Class) VYP Protocol:

- 1. 10 minutes of Awareness/Centering Meditation: Centering by body sensing, just checking in and scanning the body. Simply noticing what is noticed. All the qualities (*Gunas*) of the physical body. Breath sensing, noticing the breath as it makes its way in and out of the body. Noticing the prana or life force energies, and all the qualities of the breath. Mind sensing, checking in with all the qualities of the mind, the everyday thoughts and senses. Next, cultivate sankalpa, (San born from the heart, and Kalpa unfolds over time) "born from the heart of our being-ness". This would be steps 1-3 of the iRest protocol of Intention, heartfelt desire, and inner resource. With hands in *Anjali mudra* (prayer pose) at the heart, place an intention for the practice. Intentions are statements of fact and actions that are guiding forces in your life. Affirming your heartfelt mission. Your heartfelt mission is your inner compass of core values that provides purpose and meaning to your life. Affirming your inner resource. Your inner resource is an inner refuge of constant stability, safety, and well-being. Your inner resource helps you to weather all difficulties you encounter as you heal your PTSD and move through your life. (6)
- 2. 20 minutes of adaptive *asana* (poses) in which four veterans did chair yoga and three veterans did floor yoga. The asana practice was designed to help with the most prevalent co-morbidities of muscle tension, back pain and arthritis. The yoga postures called asanas improve respiration through focused breathing techniques while the body maintains the specific poses. Physical yoga poses support the respiratory system in doing its work by expanding the lungs and giving them space to breathe, by activating the different body parts and stimulating the blood flow so that oxygen can be provided throughout the body. (12) Asanas are most effective when the mind and body work in unison. A person should only perform the asanas to the best of their ability. Not one yoga instructor or fellow yogi will ever ask a yoga student to cause distress to their body (*Ahimsa* or non-violence, Yoga Sutra 2.35). The point of yoga is to make oneself feel better, not worse than before they began. My *Mantra* (chant) is, "we're here to heal our aches and pains, not create new ones." (See Appendix for the Asana Practice.)
- 3. 10 minutes of pranayama (breathing) using a 5.0.5.0 ratio and full yogic breath pranayama. "The Full Yogic Breath revitalizes the entire body with Prana (essential life force energy). It benefits the vital organs, which can easily become stagnant, constricted, or fraught with

emotional and physical tension when we experience stress. Full Yogic breath relieves stress, refreshes the mind, and activates the para sympathetic nervous system, encouraging a calmer, more balanced state of being overall." (9) Using a "CD" by Dr. Mark Uridel called "Pranayama, The Art of Conscious Breathing", I found that the sound of the harmonium really helped the veterans to relax and find the flow of breathing. Most of the Veterans were very shallow breathers and the pranayama was very difficult for them. They tended to hold their breath and breathe very shallow. The music helped relax them.

- 4. 30 minutes of iRest yoga nidra guided meditation, 1st Training Practice: Teaching Group iRest. (1) iRest is integrative, as it addresses both psychological and physical issues, such as stress, trauma, insomnia, and pain in the body and mind. iRest is restorative because it helps you recover your inner resources of joy, peace, and well -being, which enable you to feel connected to yourself and all of life. Research reveals the iRest program as a complimentary intervention that supports other methods used to heal PTS(D). (6)
- 5. 5 minutes of gratitude. Again, with the hands at the heart in Anjali mudra, check in once again with the annamaya, pranamaya, and manomaya koshas or The Body, Mind, and Spirit. Notice any differences from the awareness practice in the beginning of class. Give gratitude, simple exercises in being thankful for what is right. Gratitude opens the door to more relationships, improves physical health, improves psychological health. Gratitude enhances empathy and reduces aggression. Grateful people sleep better. Gratitude improves self-esteem, and increases mental strength. (10)

Statistical Analysis and Results:

Prior to beginning the series of classes, and at the end of the six classes, everyone filled out a voluntary and confidential (5) page veteran health questionnaire, which I received for use from my teacher Robin Gueth of the Yoga Yoga, yoga therapy teacher training program, with permission from Colin Silverthorne.

Veterans Health Questionnaire (VHQ): The initial veteran answers prior to starting the study are marked in RED. The Green marks are all changes noticed by the veterans after the six weeks of yoga therapy.

Thank you for taking the time to complete this questionnaire. Please be aware that completion of this questionnaire is entirely voluntary, meaning you may decline to participate or stop at any time. Please be as honest as possible. All of the answers you provide in this survey will be kept anonymous.

honest as possible. All of the answers you provide in this survey will be kept anonymous. Please rate the following statements of what is generally true of you. In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you: Have had nightmares about it or thought about it when you did not want to? Yes 🗌 Tried hard not to think about it or went out of your way to avoid situations that reminded you of it? No Felt numb or detached from others, activities, or surroundings. Were constantly on guard, watchful, or easily startled? Never or Very Often or Often Sometimes Very Always IN THE PAST WEEK Rarely - yer I found it hard to wind down. 1111 I was aware of dryness of my mouth. CEAL I couldn't seem to experience any positive feeling at all. I experienced breathing difficulty. I found it difficult to take the initiative to do things. 11 - IM I tended to over-react to situations. I experienced trembling (example: in the hands). I JHI 111 141 I felt that I was nervous. I was worried about situations in which I might panic 0.4 11 T 111 and make a fool of myself. I felt I had nothing to look forward to. $\Box \mathcal{W}$ 1111 I I found myself getting agitated.

IN THE PAST WEEK	Never or Very Rarely	Sometimes	Often	Very Often or Always
I found it difficult to relax.				□
I felt sad.	$\square H$			□ !!
I was intolerant of anything that kept me from getting on with what I was doing.				
I felt I was close to panic.				
I was unable to become enthusiastic about anything.	-111	\square m1		
I felt I wasn't worth much as a person.				
I felt that I was rather sensitive.				
I was aware of the action of my heart in the absence of physical activity (example: sense of heart rate increase, heart missing a beat).		- JUH		
I felt scared without any good reason.				
I felt that life was meaningless.	$\Box \eta \eta$	□ kt		
IN THE PAST YEAR	THE STATE OF			
How often did you have a drink containing alcohol in the Never Monthly of less Two to four times a month Two to three times per week Four or more times a week	past year?			
How many drinks containing alcohol did you have on a ty 0 drinks 1 or 2 3 or 4 5 or 6 7 to 9 10 or more	pical day wl	hen you were	drinking in ti	ne past year?

How often did you have six or more drinks on one occasion in the past year? Never ///		
Less than monthly /		
Monthly		
☐ Weekly //		
Daily or almost daily		
IN THE PAST WEEK		
In the past week, have you taken a medication, alcohol, or herbal remedy to help you sleep?	Yes 🗌	No 🗌
If yes, list name: Typedor Pm ITAZADODZ	111	1111
Did you take it:		
less than once per week		
1 or 2 nights per week		
3 or more nights per week ///		
Considering the past week, how would you rate your sleep quality?		
very good (wake up feeling refreshed every morning)		
fairly good (wake up feeling refreshed more than 3 days a week) ///		
fairly bad (wake up unrefreshed more than 3 days a week)		
very bad (wake up feeling unrefreshed every morning)		
In the past week, how many times did you typically wake up during the night?		
never or once /		
1-2 times, depending on the night //		
2 to 3 times, depending on the night		
3-4 times, depending on the night		
always 3 or more times at night		
In the past week, how sleepy did you feel during the day?		
not at all sleepy		
a little sleepy (less than 2 days a week)		
very sleepy (more than 3 days a week)		
I would fall asleep when Ii did not really want to (most days of the week)		

n general, wou	uld you say you	ur nealth is:				
	Excellent	Very Good	Good	Fair	Poor	
	0	0	0	0	0	
	1	1	//	//	1	
The following t	two questions ese activities? I	are about activities f so, how much?	you might do	during your typic	cal day. Does you	ir health now
				Yes, limited a lot	Yes, limited a little	No, not limited at al
	tivities, such as ner, bowling, o	moving a table, pur playing golf.	ushing a	111	,0	111
Climbing seve	eral flights of st	tairs		MO	0	0
Accomplished	d less than you	would like.		OHITI	0 11	
	d less than you in the kind of	would like. work or other activ	vities.	OHT	011	
Were limited During the pas	st 4 weeks, well problems (suc	work or other active re you limited in the chas feeling depression.	e kind of work	O HT	0111	as a result of
During the pasany emotional	st 4 weeks, well problems (sud	work or other active re you limited in the chas feeling depression.	e kind of work ssed or anxious	you do or other)? Yes	O III regular activities	as a result of
Ouring the pasany emotional Accomplished Didn't do wo	st 4 weeks, well problems (sud d less than yourk or other act	work or other active re you limited in the ch as feeling depress	e kind of work ssed or anxious as usual.	you do or other)? Yes O JHTI O JHT	O III regular activities No O III// O II IIII	
During the pasany emotional Accomplished Didn't do wo	st 4 weeks, well problems (sud d less than yourk or other act	re you limited in the chas feeling depressively would like.	e kind of work ssed or anxious as usual.	you do or other)? Yes O JHTI O JHT	O III regular activities No O IIII O II IIII	
During the pasany emotional Accomplished Didn't do wo	st 4 weeks, well problems (such diess than yourk or other act st 4 weeks, howeverk)?	work or other active re you limited in the chas feeling depression would like. ivities as carefully a would pain in	e kind of works ssed or anxious as usual. terfere with you	you do or other)? Yes O JHT O JHT ur normal work	O III regular activities No O IIII O II IIII	vork outside th

The next three questions are about how you feel and how things have been during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks:

	All of the time	Most of the time	A good bit of the time	Some of the time	A little of the time	None of the time
Have you felt calm and peaceful?	0	0	0	1111	0	0
Did you have a lot of energy?	0	0	0	0	0	0
Have you felt downhearted and blue?	0	0	0	0	0	0

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc)?

All of the time	Most of the time	A good bit of the time	Some of the time	A little of the time	None of the time
0	0	0	0	0	0
111	1	111	11	11	

Thank you for your time and willingness to participate in this study.

USED WITH PERMISSION
FROM
COLIN SILVERTHORNE

VHQ – VETERANS HEALTH QUESTIONNAIRE BEFORE AND AFTER THE STUDY HIGHLIGHTS BELOW

Question	Always	Most of the time	A Good bit of the time	Sometimes	A little of the time	Never
Have you felt calm and peaceful			4	4	1	1
Did you have a lot of energy		1	1	1 2	3	1
Have you felt downhearted and blue		3	1	2 1	1	
Sleep Quality	Very Good	Fairly Good	Fairly Bad	Very Bad		
		3	1 4	2		

RED BEFORE STUDY BLUE AFTER STUDY

VHQ - VETERANS HEALTH QUESTIONNAIRE BEFORE AND AFTER

HIGHLIGHTS OF SOME QUESTIONS AND ANSWERS SHOWN BELOW

Question	Before or After Study	Yes	No	
Falt number detected from others activities and argumentalings	Before Study	6	0	SMALL IMPROVEMENT
Felt numb or detached from others, activities, and or surrounding	After Study	5	1	SMALE IST HOVESTERY
Is constantly on guard, watchful, or easily started	Before Study	5	1	NO IMPROVEMENT
is constantly on guard, watering, or easily started	After Study	5	1	10 110 110 110 110 110 110 110 110 110
Accomplished less than desired	Before Study	5	1	MUCH IMPROVED
Accomplished less than desired	After Study	3	3	MOON IM NOVID
Did not perform work or other activities as normal	Before Study	5	1	MUCH IMPROVED
Did not perform work or other activities as normal	After Study	2	4	

The second evaluation tool I used in this study was the Subjective Units of Distress (SUD) Scale 1 to 10 with permission from Dr. Daniel Libby of the Veterans Yoga Project. 1-2 = slight, 3-4 = A Little 5-6 = Moderate 7-8 = Quite a Bit 9-10 = Extreme distress. Each week/class, the veteran would log their levels of distress in both pain and stress categories, before and after the class, using the scale of 1-10 and adding any comments for each class.

		-5	Resuc	15	
Mindful Resilience YO	OGA Class	Sign In	& Release	,	VETERANS YUGA PROJECT
By signing, I acknowledge that yo acknowledge that participation in practice within those limitations. I all claims associated with or arisin pertinent to my yoga practice. Subjective Units of Dist	ga is a physical yoga exposes m I take full respo g from its activ	discipline that e to a possible assibility for m ities. I am awa	t requires a cer risk of person y own safety a tre that I should	tain amount o al injury. I ago and well-being d inform the to	ocation: Reco Yoga ToceaPy f mental concentration and physical strength and endurance. I ree to honor and respect my body and its limitations and to .1 release Veterans Yoga Project and it's agents from any and eacher of any injuries, limitations or other information that is
1-2= Slight 3-4= A Little Sign Name	Pain I	5-6= Moderate Pain Levels Scale 1-10 fore Class After Class		Levels 1-10	-10= Extreme Comments
Veternet 1	3	2.164	Before Class	2.161	(16) CLASSES, ALMOST QUIT WEER'S.
Veteran # 2				(1)	ENOTION AL BREATHING BETTER 1855 STRESS 316) CLASSES, MISSED 1857 3 NOVERS QUE TO WORK & HEALTH, DID NOT GET FINAL POSTOT
Vererau = 3	1.5	1.251	2.25	2.0 %	FELT MORE RELAXED + CALM, Steeping BETTE
Veteran # 4	7.6	5.6 ₺	10+	7 1	516) CLASSES, MISSED FILSTWEEK - NETUONS LOVES THE CLASS, MURE RULAYED, FELLING BET
Vererau # 5	3,25	0.250	4.5	0.50	US LIFE, WADIS TO DO LOUR TRAINING
Vererau # 6	8.8	8.6V	7.60	7.20	516) CLASSES. SLEEPING BETTER, HAPPY FERLS CHATEFIX, PETTER ATTITUDE COLLASSES, WAS ABLE TO RELAX MORE
VETERAN 7	7.66	3,161	7.66	4.5	LESS BODY PAIN, MORE CENTERED

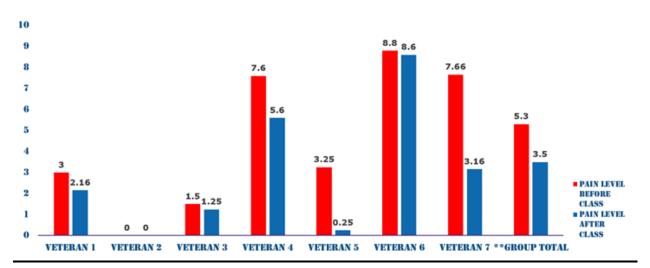
AND STRESS LEVES DEPRED 1.8 POINTS

Patient Privacy Note: For clinical referral programs patient names will be retained at the treatment facility only.

Group TOTALS

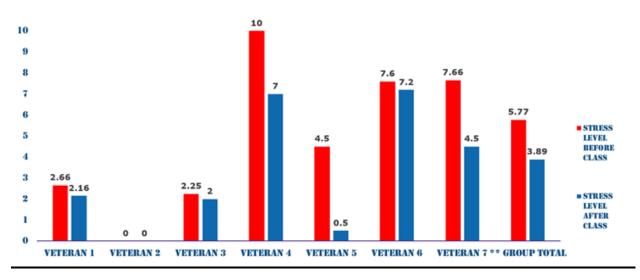
VYP - SUBJECTIVE UNITS OF DISTRESS (SUD)

PAIN LEVEL (SCALE 1-10)



VYP - SUBJECTIVE UNITS OF DISTRESS (SUD)

STRESS LEVEL (SCALE 1-10)



The third evaluation form was a form I created myself to critique the structure of the class and the class itself. Using four simple questions I asked if they liked the class, what did they like about it, did the practice help in any way, and would they like to continue a Yoga Therapy for Veterans with PTSD and /or trauma class?



RICK'S

YOGA THERAPY

For Health and Wellness

Yoga Therapy for Veterans with PTS(D) and/or Trauma

Class Evaluation Form

 Did you like the class? Circle one: Yes If no, please explain what can be done better.

- 2. What did you like about the class? Circle any that apply:
 - Practicing with other Veterans a.)
 - Practicing asana (poses)
 - Practicing Pranayama (Breathing)
 - Practicing iRest, guided meditation

Practicing Gratitude 6/60 All of the above

> 3. Do you think this practice has helped you in any way? Circle one: Yes No 6/6

REPORTED LESS TEASIUM, STRESS. ABLE TO RELAX AND SLEEP BETTER.

4. Would you like to continue a Yoga Therapy for Veterans with PTS(D) and/or Trauma class? Circle one Yes No 6/6

Thank you very much for your service, and taking the time to complete all this paperwork

Discussion:

This work illustrates the importance to further explore and build consensus on standardized/validated questionnaires and their utility in measuring clinical outcomes." (IJYT No 26-2016. Pg. 89) (4) The objective of this study was to see if using the Veterans Yoga Project (VYP) protocol, Five Tools of Mindful Resilience, and the protocol of the Integrative Restoration Institute (IRI), The Ten Tools of iRest, combined, would in fact make a difference in the pain and stress levels of these veterans in as little as six weeks. All three of the evaluation forms that were used in this study are different, yet all showed improved effects in the veteran's pain and stress levels

To me the Suds scale used by VYP was the best of the three to accurately see the levels of pain and stress the veterans are experiencing week to week. The findings of this report showed that as a group their pain went from 5.3 (moderate) before the class, to 3.5 (A Little) after the class. Pain levels went down by 1.8 points from before to after class. Similarly, the stress levels before class as a group were 5.77 (moderate) and 3.89 (A Little) after the class, down 1.88 points.

One limitation in this study is the size of the group. It's obvious that more group studies using this exact same protocol would be needed to have a better understanding if in fact the protocol used in this study is indeed as good as the results showed. I would conclude that further research could include consistent measurements between the approaches prior to and after intervention then compared to the data of this study, which would be beyond the scope of this first investigation.

Conclusion:

In conclusion, I am extremely pleased with the way the study went, the excellent results for the veterans of less pain and stress, better sleep and simply being more calm and relaxed. The statistics of the SUDS scale and the comments of the class evaluation form speak for themselves. They enjoyed the effects of this study so much, we are continuing the veterans only Yoga Therapy for Veterans with PTS(D) and/or Trauma class on a weekly basis.

My hope is that by using the same criteria as I used in this study, other yoga therapists can mimic this study and we may be better able to see if the results of this small random controlled study are genuine and will contribute to the overall field of study of, Yoga Therapy for Veterans with PTS(D) and/or Trauma.

Acknowledgements:

I first want to thank the veterans of this study for their service and sacrifices, for their time filling out all the forms, and our newfound friendship. We have a new yoga family!

I also want to acknowledge my father Stanley Trzcinski, USMC 1959-1967, for teaching me the values of Family, God and Country. And to Steven Tingley, USMC 1980- 1983 KIA Beirut, Lebanon 1983. I began volunteering and serving our veterans to honor Steven, who was my best friend in high school. Dad inspired me to get involved with the Elks, Sons of the American Legion and the VA. Together, Dad and I volunteered helping our local veterans for many years. They are both gone now, and I miss them both tremendously. But, in their memory, I continue to pay it forward and help our Veterans any way I can.

Semper Phi Dad and Steven





Bibliography: Yoga Therapy for Veterans with PTS(D) and / or Trauma

- 1. Integrative Restoration iRest Level 1 Training: Appendix III: Teaching group iRest 1st Practice, p. 227 232.
- http://iaytjournals.org/doi/pdf/10.17761/ijyt.22.1.v71h07m12412k218. Issues in Yoga Therapy,
 The Use of Yoga in Specialized VA PTSD Treatment Programs. Daniel J. Libby, PhD, RYT,1,2,3,4 Felice
 Reddy, MA,2 Corey E. Pilver, PhD,3 & Rani A. Desai, PhD, MPH 1,2,3. (IJYT No 22-2012. Pg. 79)
- 3. http://veteransandptsd.com/PTSD-statistics.html. "Veterans statistics: PTSD, Depression, TBI, Suicide." Veterans and PTSD. September 20, 2015. Web. [month, day, year accessed.
- 4. http://iaytjournals.org/doi/pdf/10.17761/1531-2054-26.1.83. A National Survey of Yoga Instructors and their Delivery of Yoga Therapy. Alyson Ross, PhD, RN, Katharine Touchton-Leonard, MA, Li Yang, MA, Gwenyth Wallen, Ph. D, RN. (IJYT No 26-2016. Pg. 81,89)
- 5. http://www.veteransyogaproject.org/mindful-resilience.html. About, mindful resilience. April 2017.
- 6. Miller, Richard. The iRest Program for Healing PTSD. Oakland: New Harbinger Publications, Inc., 2015. P.19, 21-23.
- 7. Miller, Richard. The Art & Science of iRest Yoga Nidra Meditation, workbook. San Rafael: IRI, 2006-2015.
- 8. Discussion Guide Bring Everyone in the Zone, Inc., Dealing with the aftermath of Trauma. P.32.
- 9. https://www.banyanbotanicals.com/info/ayuvedic-living/living-ayurveda/yoga/full-yogic-breath.
- 10. https://www.psychologytoday.com/blog/what-mentally-strong-people-dont-do/201504/7-scientifically-proven-benefits-gratitude.
- 11. https://www.irest.us/sites/default/files/Transforming%20Trauma%20IAYT%20Stankovic.pdf
- 12. http://www.jaisiyaram.com/yoga-poses/yoga-for-respiratory-system
- 13. http://www.yogajournal.com/lifestyle/good-karma-army-vet-dan-nevins-found-hope-yoga



APPENDIX

RICK'S

YOGA THERAPY

For Health and Wellness

Yoga Therapy for Veterans with PTS(D) and/or Trauma

Adaptive Asana (Poses), For Muscle Tension, Arthritis and Back Pain

(This is a step-by-step practice to assist those unfamiliar with yoga)

1) Sukhasana (Easy Pose) If seated on the floor, fold one or two blankets into a firm support or sit on a bolster to elevate the hips. Relax the back and set the pelvis to a neutral position. Sit close to one edge of this support and stretch your legs out in front keeping them on the floor in Dandasana (Staff Pose). Cross your shins, widen your knees, and slip each foot beneath the opposite knee as you bend your knees and fold the legs in toward your torso; i.e., sitting "Indian Style". Support the knees with blocks for more support and comfort. You'll know you have the basic leg fold of Sukhasana when you look down and see a triangle as three sides formed by the two thighs and the crossed shins. As always, you should sit with your pelvis in a relatively neutral position. Lengthen your tailbone toward the floor, firm your shoulder blades against your back to your upper torso, but don't over-arch your lower back and poke your lower front ribs forward. You can sit in this position for any length of time but, if you practice this pose regularly, be sure to alternate the cross of the legs. A good rule of thumb: you can divide the practice time in half and spend the first half with your right leg forward and the second half with the left leg forward. I like to switch the legs after my first seated forward fold (see # 11).

If seated in a chair, sit in Dandasana. (see # 12)





2) Centering (Awareness) Practice. Begin by closing your eyes (only if you wish) and take your awareness to the physical body, noticing any qualities of the body (*annamaya* kosha and body sensing). Then, bring your awareness to the breath (*pranamaya* kosha and breath sensing). Then, bring your awareness to the mind (*manomaya* kosha mind sensing). Just notice what you notice.

Bringing the hands together at the heart, *Anjali Mudra* (prayer pose) place an intention for your practice today. Maybe say a prayer for yourself or someone you love, or maybe just give thanks - gratitude for being and taking this time for your healing practice today in this safe and present moment. (It's called the present moment because it's the gift we give ourselves).





3) *Urdhva Hastasana* (Upward Raised Hands Pose) - With the palms pressed together at your heart (prayer pose), inhale and press the palms upward. Then, exhale releasing the hands and in a big circle, bring the hands around and back to the heart. Repeat 3x moving with the breath.









4) Angel Wings – Keeping the palms together at your heart, extend the arms out in front. Keep the palms together at shoulder height. Inhale and open the arms out wide to the side. Exhale and bring palms back together in front. Repeat 3x moving with the breath.









5) Wrist Rolls – Separate the hands and do some circles with the wrists. Do 3-5 circles in one direction, then reverse and repeat. Then, shake them out front to back and side to side.





6) Shoulder Rolls – Bringing the hands to the lap, inhale and lift the shoulders forward and up. Exhale and relax the shoulders back and down. Repeat 3-5x moving with the breath. Then, inhale and squeeze the shoulders up towards the ears tight. Pause and Hold. Then, exhale and release, drop the shoulders and release any stress or tension in them. Repeat 3-5xs.













7) Parivrtti Urdhva Hastasana (Side Bending, Raised Hand Pose) – Sitting tall, release the left hand to the floor or chair for balance. Inhale while raising the right arm upwards toward the right ear, lengthening and reaching for the sky. As you exhale, press through the right sit bone and arch as you lengthen to the left, bringing the right arm over the right ear. Hold for 3-5 breaths. Then, inhale and lift the arm and torso up to center, exhale and release the right arm in a circle back to the floor or chair. Repeat on the other side.





- 8) Neck Exercises Sitting tall with your hands on your lap, palms facing up.
 - A) Inhale and bring the right hand to the left shoulder while turning the face to the right simultaneously. Exhale and return the hand to the lap and face back to center. Try to do both movements simultaneously while moving with the breath, like saying "No" with the head. Repeat 3 x, alternating from side to side and moving with the breath.









B) Keeping hands on the lap with palms turned up inhale and raise the face and chin towards the sky. Exhale and bring the face and chin down to the chest, like saying "Yes" with the head. Repeat 3x moving with the breath.









C) Lifting from the top of the head, inhale, and as you exhale, relax the right ear toward the right shoulder to stretch the left side of your neck. Bring the left hand to your side with palm up and lengthen the left arm. Open the hand and maybe wiggle the fingers. Then, inhale, curl the fingers into the palm and make a fist. Squeeze the right arm taught. Then, exhale and release the hand, opening the fingers wide apart. Repeat 3x moving with the breath. Wiggle the fingers, bring the left hand back to your lap and bring the right hand to the right side of your face and help the heavy head back to center. Repeat on the other side.









D) Turtle/Chin glide – Inhale, and pull the chin in and lift from the top of the head. Exhale, and glide the chin forward as far as you can while keeping the chin parallel to the floor and the shoulders relaxed and back. Try not to lean forward. This pose is like a turtle sticking its head in and out of its shell. This will help align the discs in the neck.









9) Gentle Seated Twist – Take the left hand to the right knee and the right hand to your side for support (either to the floor or chair). Inhale and lengthen the spine. Then, exhale as you shift your weight to the right sit bone and gently twist to the right. This will protect your SI Joint. Hold for 3-5 breaths. Then, relax, unwind your twist and come back to center. Repeat on the other side.









10) Torso Circles/Forward Fold – With your hands on your lap, begin a circling forward bend with the upper torso. Inhale and lengthen, exhale and circle the torso down and around. Lead with the top of your head and keep the spine long. Lower yourself as far as you can comfortably on your exhale and then while inhaling, circle back up. Repeat 3-5 times.



- 11) If in Sukhasana, switch leg cross. Repeat #9 twisting to left and #10 circling opposite direction as earlier.
- 12) Dandasana (Staff Pose) If sitting on the floor, uncross the legs and bring them out in front. Sit towards the front edge of the sit bones. Without hardening the belly, firm the thighs and press them down against the floor/chair. Rotate them slightly in toward each other and draw the inner groins toward the sacrum. Flex your ankles, pressing out through your heels. Try to lengthen your front torso perpendicular to the floor/chair. Think of the energy streaming upward from the pubis to the sternum, then down the back from the shoulders to the tailbone. Then, imagine the tail lengthening into the floor/chair. Imagine your spine being long as a "staff". Hold the pose for 3-5 breaths or longer.





13) Ankle Rolls – Picking your right foot up off the floor, begin to rotate the foot and ankle in one direction for 3-5 circles, then reverse. Bring foot back to the floor and switch sides and repeat.





14) Quad sets – If seated on the floor in Dandasana quad set, keep the knees slightly bent. Then, lift on the kneecaps and squeeze the thigh muscles to the femur (thigh bone) and hold for 3-5 breaths. If seated in a chair leg extension, lift the foot off the floor and extend the leg out straight. Pull the toes back (flex the foot) and press through the heel. Either hold for 3-5 breaths or bring foot down on exhale and raise again on inhale. Repeat 3-5 times moving with your breath. Then, switch sides and repeat.





15) Marjaryasana – Bitilasana (Cat–Cow Pose) - If seated on the floor, come up to your hands and knees in a "tabletop" position. Make sure your knees are set directly below your hips and wrists while elbows and shoulders are in line and perpendicular to the floor. Center your head in a neutral position with eyes looking at the floor. As you inhale, lift your sit bones and chest toward the ceiling while arching or concaving your spine and allowing your belly to sink toward the floor. As you exhale, round your spine toward the ceiling and arching (convex) through the shoulder blades and tuck the sitting bones under. Make sure to keep your shoulders and knees in position. Relax your head toward the floor, but don't force your chin to your chest. Repeat 3–5xs. Inhale as you come back to a neutral "tabletop" position on your hands and knees.

(If seated in a chair, sit in dandasana with your hands on your knees and follow the same instructions.)





16) Spinal Balance – From tabletop position if on the floor or dandasana if in the chair, inhale and raise the right arm up by your ear. Extend the hand straight out at shoulder height with the thumb up as if to shake someone's hand. Then, simultaneously extend the opposite or left leg straight out at hip height, flexing the foot while pressing through the heel and pulling the toes back. Keep your spine long and gaze at the floor while lengthening from the fingertips to the opposite heel. Hold for 3-5 breaths. Then, switch sides or try using dynamic movement inhaling up and exhaling down while alternating from side to side and moving with the breath. Repeat 3-5xs.



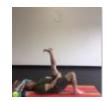






17) Leg Extensions – Lying on your back with your knees bent and the feet flat on the floor (Constructed Rest), pick the right foot up and interlace your fingers behind the right hamstring. Inhale and straighten the right leg up towards the sky pulling the toes back and pressing through the heel. If you wish, do a few ankle rolls circling the foot in one direction then the other. Then, while pressing through the heel, hold this stretch for 3-5 breaths. Exhale, bend the knee and relax the right foot down towards the buttocks. Release the hands and bring the foot to the floor. Repeat this stretch with left leg.





18) Constructed twist – Lying in constructed rest, inhale and as you exhale, release both knees to the right and turn your head to the left. Relax here for three to five breaths, then inhale to center and exhale to the left. Repeat as needed.





19) Setu Bandhasana (Bridge Pose) Modified Version, Slant Board Pose. Lie in constructed rest. If necessary, place a folded blanket under your shoulders to protect your neck. If possible, place a block or pillow between the thighs for pelvic stability. Keep the feet and thighs parallel. Inhale and as you exhale, lengthen the tailbone towards the heels. Inhale again and exhale while firming (but not hardening) the buttocks and lift the buttocks off the floor. Keep your knees directly over the heels but push them forward (away from the hips) and lengthen the tailbone toward the backs of the knees. Hold for 3-5 breaths and then SLOWLY release on exhale and roll your spine down to the floor one vertebrae at a time.





20) *Apanasana* (Vital Air Pose) Lifting your feet off the floor, one at a time to protect your back, bring your hands to the top of your knees with your fingers towards your toes. Bend your knees and relax the heels towards the buttocks. Then, pull your toes back and your knees away until your arms are straight. Inhale and as you exhale, bend your elbows and pull your knees in towards your chest. Inhale and pull the knees away until the arms are straight. Exhale and repeat 3-5x moving with your breath.





21) Savasana (Relaxation Pose) - In Savasana, it's essential that the body be placed in a neutral position. Lying on the floor in constructed rest with knees bent and feet on the floor, place a blanket or bolster under the knees to release pressure in the low back. Use a folded blanket under the head and neck for support while keeping the forehead above the level of the chin to relax the thinking mind. If desired, use an eye pillow over the eyes to ease tension in the brain. With your feet on the floor, lift your pelvis slightly off the floor and, with your hands, push the back of the pelvis toward the tailbone and return the pelvis to the floor. Inhale and slowly extend the right leg, then the left, pushing through the heels. Release both legs, softening the groins, and see that the legs

are angled evenly relative to the mid-line of the torso and that the feet turn out equally. With your hands, lift the base of the skull up and away from the shoulders, lengthening the back of the neck and rest the head down. Make sure your ears are equidistant from your shoulders. Reach your arms toward the ceiling, perpendicular to the floor. Rock slightly from side to side and broaden the back ribs and the shoulder blades away from the spine. Then release the arms to the floor, angled evenly relative to the mid-line of torso, with palms facing up. Make sure the shoulder blades are resting evenly on the floor.











- 22) Full Yogic Breath 5 -10 minutes. (See Handout in folder.)
- 23) iRest Practice, or at home use the CD "iRest at Ease" (by Dr. Richard Miller)