Trauma-Informed Yoga: 
Conceptualization and Application

Syllabus

Lauren Justice, PhD, ERYT500
March 4 – 5 and April 1 – 2, 2023; 30 hours across two weekends

Target Audience and Instructional Level

This is an intermediate-level course geared to students in the YogaX 300-hour Therapeutic Yoga Program (YTT300) and the following audiences:

- Psychologists, psychiatrists, and other mental healthcare providers interested in bringing pranayama principles and strategies into their clinical practice.
- Psychology, psychiatry, and other mental health-program students in graduate or medical programs interested in bringing pranayama principles and strategies into their supervised clinical practice.
- Yoga teachers interested in offering advanced pranayama practices, especially to students in healthcare settings.
- Yoga therapists providing offering advanced pranayama practices, especially in healthcare settings.

Training Pragmatics

- Cost: $800 tuition for this 30-hour workshop or YogaX YTT300 prepaid enrollment
- This training is delivered via online synchronous instruction and with fulltime contact with the lead teacher, Chris Brems
- (see Training Format below for specific details of training delivery)
- Yoga Alliance Continuing Education credits (30 hours) are included in the tuition cost; a CE certificate is issued upon request
- Participation (by entering the zoom link and/or making payment) implies that you have read and agreed to the Stanford Assumptions of Risk, Release of Claims, and Hold Harmless Agreement at https://www.yogaxteam.com/healthandsafetyinformation
- YogaX Refund and Payment Policy is available at https://3de0fc17-ea21-4854-87c7-777a583c02cf.filesusr.com/ugd/37469f_73d3c9e8ebb14214a60e11d8b08baba1.pdf
- YogaX has no commercial support for this event and there are no disclosable conflicts of interest.
- The zoom link for this event is: https://stanford.zoom.us_TBA

Instructor

Lauren Justice, PhD, ERYT500
YogaX Team Member
Department of Psychiatry and Behavioral Sciences at the Stanford School of Medicine
More information at https://www.yogaxteam.com/team
This 30-hour YogaX Trauma-Informed Yoga (TIY) training focusing on yoga as a complex, multifaceted practice that fosters resilience and equanimity. The TIY training helps yoga teachers and health professionals make yoga practices accessible to students with trauma-related symptoms. Trauma-informed yoga (TIY) is a form of yoga adapted to meet the unique needs of individuals working to overcome trauma. Although yoga is often considered a healing practice, yoga that is not designed to meet the needs of students with histories of trauma may inadvertently increase reactivity and activate symptoms.

We offer trauma-informed yoga principles for teachers working to create accessible and inclusive classes, while also providing tools to help teachers navigate difficult situations when they arise in class. We explore through practice and contemplation how yoga may offer students a way to navigate the uncertainties of life with mindfulness and equanimity.

Participants will learn TIY principles that ground the yoga practice into a multi-modal, integrated and holistic theory of understanding the body-mind connection. We will demonstrate how that connection is explored in the practice of yoga to alleviate suffering related to differing forms of trauma across a variety of populations. We integrate the teachings of Patanjali’s Yoga Sutras with the panchamaya kosha model as a way to understand the complexity of the human experience, methods for self-regulation, befriending the nervous system, and aspiring to equanimity regardless of circumstances. W embed this ancient wisdom in modern science, especially the science of polyvagal theory and other nervous system research.

The training includes multiple integrated and holistic practices to provide participants opportunities to experience the depth of yogic teachings and be able to relay them to their students in a variety of healthcare settings. To do so a variety of teaching techniques are applied – all modeling TIY principles. These strategies include didactics, experiential learning, discussion, application, and personal exploration. In all teachings, language, context, and environments that are conducive to the experience of psychological and physical safety are integrated and role-modeled.

Participants explore yogic principles, skills, and applications related to a range of facets of trauma-informed yoga and modern psychology, including (but not limited to):

- Foundational considerations, including definitions of trauma and review of the koshas along with their developmental relevance to trauma
- Discussion and implications of yoga’s risks, benefits, and possible contraindications for work with trauma
- Review and enhanced understanding of the nervous system with focus on polyvagal theory
- Theory and practice of creating opportunities for a sense of psychological safety through exploration of structural, language, relational, power, and interpersonal dynamics
- Theory and practice of creating opportunities for a sense of physical safety through exploration of contextual and environment features
- Theory and practice of TIY class structure
- Applications of interoception, neuroception, and mindfulness in the TIY context
- Special considerations in a range of healthcare settings
- Special considerations for TIY teacher resilience, burnout prevention, and risk management
Learning Objectives

Learning Objective #1:

1. Learn foundational considerations and contraindications for TIY
   a. Enhance understanding of trauma, trauma-related symptoms, and trauma-informed approaches to patient-care and practice
   b. Explore how western psychological perspectives of trauma overlap with yoga philosophy (gunas, koshas)
   c. Understand how to emphasize parasympathetic engagement (pranayama practices and asana)
   d. Understand how to carefully utilize sympathetic engagement and when to limit it

Evaluation Method for Learning Objective #1

- Define and provide examples of trauma-related symptoms and yoga interventions for those symptoms
- Define TIY framework and basic themes
- Define contraindications for TIY classes that may be common practices in commercial yoga classes

Learning Objective #2:

2. Gain basic understanding of how to structure a TIY class while staying flexible in that structure
   a. Develop mindfulness cues and pranayama practices to create themes in practice rather than sequencing toward a “peak pose”
   b. Learn how to adapt sequence based on present-moment needs of students in the class
   c. Effectively balance pranayama, pratyahara, and asana to emphasize engagement of parasympathetic nervous system
   d. Understand how to use props as a tool of support rather than deepening

Evaluation Method for Learning Objective #2

- Define and explain the difference between TIY sequence themes and commercial yoga sequencing techniques
- Develop a sample TIY sequence and be able to address potential needs for adaptation and modification
- Implement TIY mindfulness cues with intention and purpose

Learning Objective #3:

3. Learn in-depth understanding and application of interoception and mindfulness from a TIY framework
   a. Define and explore dissociation
   b. Review polyvagal theory and how hyper- and hypoarousal may inhibit mindfulness and interoception
   c. Become proficient in how and when to utilize specific mindfulness practices to facilitate interoception

Evaluation Method for Learning Objective #3

- Define and provide examples of specific mindfulness cues and how they facilitate interoception
- Define interoception and importance in treatment of trauma-related symptoms
- Develop a sample TIY sequence emphasizing the development of interoceptive awareness and pratyahara
**Learning Objective #4:**

4. Learn how to apply TIY framework in different environments (hospital settings, in-patient, clinical, etc)
   a. Explore ways of working with staff within a given type of institution to ensure TIY considerations (safety, consistency)
   b. Identify outreach opportunities while also considering diversity and inclusion to emphasize accessibility for target populations (veterans, the incarcerated, sexual assault survivors, first responders)
   c. Outline specific cultural and clinical considerations for differing environments

**Evaluation Method for Learning Objective #4**

- Define and provide examples of significant cultural considerations for specific TIY populations
- Define spiritual bypassing and race-based trauma
- Define and explain how one might provide outreach and coordination with staff in different settings for TIY
- Define barriers to accessibility and special considerations for different TIY populations
- Develop sample outreach plan for specific population instructor would like to work with or currently works with

“TIY instructors prioritize safety considerations over offering a predetermined sequence or achieving a peak posture. Although specific interventions may vary, TIY instructors may add to their skillset by having multiple strategies for cultivating an external sense of safety (in the practice space, in their own presence, in the tone they set for their classes) in addition to cultivating an internal sense of safety in their students (through interoception and mindfulness). TIY instructors may therefore advocate for keeping classes small, being thoughtful about touch, using modifications, and emphasizing invitational over command language to highlight a sense of safety and choice in their students. Instructors in larger-class contexts are not as able to attend to the individual needs of students, leaving students to model after what they see as opposed to what they feel. This type of context may leave students with trauma experiences vulnerable.”

Quoted from
### Schedule and YA Continuing Education Categories

#### Weekend One – Days 1 and 2 of the Training

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>TTP</th>
<th>TM</th>
<th>AP</th>
<th>YH</th>
<th>Prc</th>
<th>Spc</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 1</td>
<td>9a – 11a</td>
<td>Introductions; TIY experiential sessions</td>
<td>.5</td>
<td></td>
<td>1.5</td>
<td>2</td>
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<tr>
<td></td>
<td>11a – 12p</td>
<td>Review of the koshas and discussion of their relevance to TIY</td>
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<td></td>
<td>1p – 2:30p</td>
<td>Risks, benefits, and contraindications</td>
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<td></td>
<td>2p – 5:30p</td>
<td>Trauma and the nervous system; PVT</td>
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<tr>
<td>Day 2</td>
<td>9a – 11a</td>
<td>Structuring a TIY class – overview</td>
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<tr>
<td></td>
<td>11a – 12p</td>
<td>Developing a TIY class sequence</td>
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<tr>
<td></td>
<td>1p – 2:30p</td>
<td>Creating opportunity for physical safety</td>
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<td></td>
<td>2:30p – 4p</td>
<td>Creating opportunity for psychological safety</td>
<td>1.5</td>
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<td></td>
<td>4p – 5:30p</td>
<td>Practical applications of safety consideration with special populations</td>
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#### Weekend Two – Days 3 and 4 of the Training

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<th>YH</th>
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<th>Spc</th>
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<tbody>
<tr>
<td>Day 3</td>
<td>9a – 11a</td>
<td>TIY-informed mindfulness practice and theoretical debrief</td>
<td>.5</td>
<td></td>
<td>1.5</td>
<td>2</td>
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<tr>
<td></td>
<td>11a – 12p</td>
<td>Mindfulness applied to TIY principles</td>
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<td></td>
<td>1p – 3p</td>
<td>Interoception and neuroception</td>
<td>2</td>
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<td></td>
<td>3p – 5p</td>
<td>Practicing -ceptive and mindfulness cues</td>
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<td></td>
<td>5p – 5:30p</td>
<td>Debriefing the experiential work</td>
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<tr>
<td>Day 4</td>
<td>9a – 12p</td>
<td>Special principles for specific subgroups of trauma and by healthcare settings</td>
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<td></td>
<td>1p – 3p</td>
<td>Provider resilience and burnout prevention</td>
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<tr>
<td></td>
<td>3p – 5p</td>
<td>TIY teaching practice in small groups</td>
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<tr>
<td></td>
<td>5p – 5:30p</td>
<td>Debrief of all experiences</td>
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30 hours of YA CE or YTT 300 in the following categories:

1  15  5  1  8  30

**Notes:**
YA = Yoga Alliance; CE = Continuing Education
TTP = Techniques, Training, and Practice; TM = Teaching Methodology; AP = Anatomy and Physiology; YH = Yoga Humanities; Prac = Practicum; Spc = area of program specialization
Handouts Provided

Several handouts and the slide set for the workshop will be provided to registered and paid enrollees on the day of the workshop. These materials are provided with the understanding that students will not duplicate, distribute, or otherwise publicly use these materials without express permission and proper attribution and referencing.

Handouts to be provided include:

- Integrated Holistic Yoga – Koshas, Limbs, Biopsychosociocultural Context
- Eight Limbs of Yoga
- Pathways of Sensory Processing Engaged in Integrated Holistic Yoga
- Principles of Trauma-Informed Yoga
- Gunas –Fundamental Expressions of Nature
- Slide Set for the Training
- Content Manual for the Training

Suggested Readings and Practices

It is recommended that in preparation for the workshop you read all YogaX blogs, especially the following:

https://www.yogaxteam.com/blog/polyvagaltheory
https://www.yogaxteam.com/blog/blogbreath
https://www.yogaxteam.com/blog/physicallimbs
https://www.yogaxteam.com/blog/innerlimbs
https://www.yogaxteam.com/blog/lifestylelimbs
https://www.yogaxteam.com/blog/koshas

It will be helpful to have independently taught at least 10 hours of yoga prior to attendance, but it is not required. If you want to read a nice beginner’s asana book, check out Bondy (2020; see citation below).

Also, peruse YogaX webpage resources and try out some of the offered free practices (asana, pranayama, meditation, and more) at yogaXteam.com and on the YogaX Team YouTube channel.

The following readings will be helpful as you deepen your journey once you have completed the workshop.

Training Format

The workshop uses mixed pedagogical methods, ranging from didactics/lectures to discussion to experiential work, including small group activities. Lecture/didactic time invites discussion throughout and is accented by experiential exercises and activities. The experiential work is yoga-based and includes asana, pranayama, meditation, and guided imagery. To make sure that everyone can enjoy the yoga-based activities safely and with maximum comfort, please note the following (more personal) thoughts and requests.

- Stanford University requires that you sign the release form (link above) to be able to participate in the activities that are part of this workshop. It assumed that you have agreed to this document when you pay or use the provided zoom link for the workshop.

- Required training activities start promptly. To make sure that we can start on time and that you have ample opportunity to get settled or ask questions, it would be lovely if you could arrive as much as 10 minutes early.

- Participants provide their own props for the virtual training sessions. Minimum prop equipment includes 2 yoga blocks, 1 yoga strap (10 feet is preferrable), 1 yoga bolster, 1-2 blankets, and a yoga mat. Access to a clear wall space is extremely helpful (a closed door works). Prop substitutes are fine (e.g., a stack of books instead of blocks; a scarf instead of a strap, sofa cushions instead of a bolster, etc.). Please have all props at the ready for each training session.

- Yoga is best practiced on a relatively empty stomach but not starving. A sustaining but light meal prior to class will help you maintain your energy without having a full belly that makes bending and twisting difficult.

- Please ask questions – before class, after class, and during class. If you are wondering about something – whether it’s the reason for a particular shape or movement, an alignment question, or a more healthful way of doing something – someone else is likely to ponder the same thing.

- Always honor your own intuition and body wisdom – if something feels wrong, do NOT do it. We are all anatomically unique and we all express the same yoga shape, breath, or practice in different ways. What works for us, your teachers, or the person next to you, may not be optimal for you. Allow yourself the joy of using props and variations based on the feedback from your own body, breath, and mind. We offer both freely and demonstrate their use throughout.

- Yoga practiced in a group is inspirational. It is never competitive. Work within your own body limits and preferences; give yourself permission not to strive to do what others are doing. Delight in the pleasure of expressing each pose or breath in uniquely your way. If something comes easily, celebrate this state of pure joy; if something is a struggle, embrace the moment of learning.

- Thank you in advance for making me aware of any medical conditions that may affect your yoga practice. It is helpful for me to know if you are modifying practices for a particular reason or if you would like to have help in working with a particular concern.

- Thank for turning off all cell phones, beepers, or other noise-making or distracting devices before you settle in for any given training session.

- Thank you for keeping your cameras on during virtual sessions to the degree possible and appropriate.
Pranayama: Polyvagal Theory

The Physiology of Safety
(gratitude to Stephen Porges)

- **Perception of danger**: prepared for danger, live in a near-constant state of sympathetic arousal, isolation, and physiological overload or break-down; mobilized sympathetic NS state of fight or flight – MOBILIZATION

- **Perception of safety**: live in a socially engaged parasympathetic nervous system; relaxed, engaging, and restorative (myelinated) ventral vagal space – SOCIAL ENGAGEMENT

- **Perception of life threat**: develop a habitual pattern of shrinking back from life, withdrawing – even dissociating – from human experiences; parasympathetic NS is at an extreme state of withdrawal, of surrender and hopelessness – IMMOBILIZATION

Pranayama: Polyvagal Theory

Hybrid states
(gratitude to Stephen Porges)

- Perception of the need for safe action or mobilization in the service of personal or collective growth, health, and PLAY – PREPAREDNESS, PLAY (VVC + SNS)

- Perception of the need for safe immobilization in the service of prosocial activities (e.g., child birth, nursing, sadness, collapse in laughter) – INTIMACY, SHARED STILLNESS (VVC + DVC)

- Perception of the need to cease mobilization in service of survival in face of being overcome – FREEZE, SUBMIT (SNS + DVC)
Trauma-Informed Yoga: Conceptualization and Application

Content Manual
Lauren Justice, PhD, ERYT500

Necessary Background Knowledge about Trauma-Informed Yoga

What is Trauma?

- Posttraumatic stress disorder (PTSD) is defined as exposure to trauma followed by the development of four symptom clusters (APA, 2013):
  - re-experiencing
  - avoidance
  - negative alterations in cognitions and mood
  - hyperarousal/reactivity
- Lifetime prevalence rates for PTSD are estimated at 6.8% (Kessler et al., 2005). But this is likely an underestimate.
- For individuals that appear to be highly agitated or hypervigilant, they may be stuck in a state of hyperarousal (see image below), i.e. “always on alert”

Autonomic Nervous System (ANS)

Sympathetic NS
“Arouses”
(fight-or-flight)

Parasympathetic NS
“Calms”
(rest and digest)
Our “Alarm System”

☐ **Sympathetic Nervous System (SNS):** designed to mobilize the body in case of danger; fight or flight; adrenaline; inhales

  o *Overarousal sx:* anxiety and fear, intrusive memories, triggered reactions, concentration problems, nightmares, hypervigilance, etc.

☐ **Parasympathetic Nervous System (PNS):** turns “off” body’s activation; rest and digest; acetylcholine; exhales

  o *Under-arousal sx:* emotional numbing, social avoidance, hypersomnia, fatigue, low energy and dissociation

☐ **Fight - SNS**
☐ **Flight - SNS**
☐ **Freeze - SNS and PNS**
☐ **Submit - PNS**

☐ **Polyvagal Theory:**
 ☐ SNS (danger): defensive mobilization; “fight or flight”
 ☐ Dorsal (life threat): defensive immobilization; “freeze”; “play dead”
 ☐ Ventral (safety): social connection; “social engagement system”; “tend and befriend”

☐ **Heart Rate Variability (HRV):** measures balance between the SNS and PNS and coherence of heartbeat and breath

  ☐ High HR - rhythmic fluctuations in heart rate and moves with breath
  ☐ Low HR - lack of fluctuations in heart rate and is out of sync with breath

**It is the Effect, Rather Than the Event**

☐ Chronic trauma-related symptoms can alter neurobiological structures

☐ More specifically, the limbic system (comprised of the amygdala and the hippocampus) is impacted

☐ When experiencing or re-experiencing trauma, individuals often experience overactivity in their amygdala (the brain’s emotional response and survival system) and their hippocampus (where your brain records facts and sequences events) often stops functioning properly due to the abundance of stress hormones that are released

☐ This is why trauma is often remembered as fragments - images, body sensations, and words that become reactivated later by similar images, sensations, etc.

☐ Individuals can feel as if the impact of the original trauma is ongoing, this can sometimes cause numbness as the re-experiencing can be too much

☐ Trauma often occurs with other mental illnesses, such as depression and anxiety, as well as substance use.

☐ Also with physical diseases, such as chronic pain and auto-immune diseases

☐ Can be particularly detrimental to health and wellbeing if trauma occurs in early childhood (See ACE Study; Felitti et al., 1998)

☐ See Nadine Burke Harris’ Tedtalk “How Childhood Affects Health Across a Lifetime”
  https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetim#t-943450
**Complex/Developmental Trauma**

- The experience of multiple and/or chronic and prolonged, developmentally adverse traumatic events, most often of an interpersonal nature (e.g., sexual or physical abuse, war, community violence) and early-life onset (van der Kolk, 2015).
- Trauma devastates the social engagement system and interferes with cooperation, nurturing and the ability to engage in prosocial behaviors and be a part of a community.
- People can learn to self-regulate and rewire their trauma response but only if they feel safe and secure enough to practice new solutions.

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**The Koshas**

- Annamaya kosha (food body or the physical sheath), pranamaya kosha (energetic sheath), manomaya kosha (mind sheath) all interact and are impacted by our environment and therefore experience more fluctuations.
- They may also access points to become more mindful in each moment.
- Vijnanamaya kosha (wisdom sheath) and anandamaya kosha (bliss sheath) are more stable over time and thus may help us transcend our reactions or habits.
- When in union, body, mind and breath may help us access our wise self as well as our sense of love and belonging.
- When in disharmony, the body, mind, and breath may muddle our sense of intuitive wisdom, love, and belonging.
Samskaras

- **Definition**: “…refers to deeply entrenched habits or patterns that exist on a physical, mental, or emotional level. Some samskaras serve us well; others do not. Often we are not conscious that we have these patterns.” (Wheeler, 2014, p. 25)
  - Not necessarily good or bad: habit forming, learning, schemas
  - A trauma may be considered a deeply ingrained samskara
  - Their impact can change through discipline (tapas) and self-study (svadhyaya)

The Gunas

- Similar to how Western science views homeostasis in the autonomic nervous system (ANS), yoga refers to the gunas for balance in practice
- Hyperarousal may be viewed as the extreme end of rajas while hypoarousal may be viewed as the extreme end of tapas
- Mindful (TIY) yoga practices can work to cultivate greater sattva by finding balance and grounding on the mat
- For example, belly breathing and ujjayi breath help to stimulate the vagus nerve (the 10th cranial nerve), which in turn can signal to the brain that it may disengage from fight or flight mode (moving from rajas to sattva)
- When your students learn how to cultivate sattva in their practice and within themselves, they may help their autonomic nervous system return to homeostasis and subsequently allow the different parts of their brain to function more cohesively
- One factor which is fundamental to students development of sattva is interoception

**Qualities of Nature (Adapted from Yoga International)**

<table>
<thead>
<tr>
<th>Qualities</th>
<th>Tamas</th>
<th>Rajas</th>
<th>Sattva</th>
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<tbody>
<tr>
<td><strong>Season</strong></td>
<td>Winter</td>
<td>Summer</td>
<td>Fall/Spring</td>
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<tr>
<td><strong>Food</strong></td>
<td>Stale, heavy, highly processed, overly sweet, over cooked</td>
<td>pungent, spicy, salty, strong taste</td>
<td>light, fresh, easily digested, calming, grounding</td>
</tr>
<tr>
<td><strong>Body</strong></td>
<td>heavy, lethargic, stiff, fatigued</td>
<td>restless, active, difficulty with sitting still</td>
<td>energetic, calm, light, flexible</td>
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<tr>
<td><strong>Emotions</strong></td>
<td>sadness, lethargy, clinging, fear, apathy, aversion</td>
<td>anger, ambition, motivation, desire, jealousy, egoism, competitiveness</td>
<td>faith, devotion, peace, humility, contentment, intimacy, engaged</td>
</tr>
<tr>
<td><strong>ANS</strong></td>
<td>PNS dorsal vagal, freeze/submit</td>
<td>SNS, fight/flight</td>
<td>PNS ventral vagal, tend/befriend</td>
</tr>
<tr>
<td><strong>Mind</strong></td>
<td>depressed, rumination, dull, hopeless, unclear</td>
<td>excited, hyperactive, worried, anxious, “monkey mind,” flighty, distracted</td>
<td>clear, introspective, inspired, concentrated, focused</td>
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Pathways of Sensory Processing Engaged in Integrated Yoga

<table>
<thead>
<tr>
<th>Neuroception</th>
<th>The evaluation of current level of safety that results in a felt sense of safety, danger, or life threat, followed by a commensurate nervous system response that activates either the ventral vagal complex (safety), the sympathetic nervous system (danger), or the dorsal vagal complex (life threat).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interoception</td>
<td>The capacity to attune to, receive, process, and integrate signals about the internal state of the body, including the capacity to sense the physiological state of the body from within via sensations arising from various physiological systems of the body, including but not limited to the respiratory, cardiac, gastrointestinal, thermoregulatory, and nociceptive systems.</td>
</tr>
<tr>
<td>Exteroception</td>
<td>The ability to attune to stimuli from outside the body, to perceive and take in stimulation from the outside world – conscious and mindful perception of these stimuli can then be integrated with stimuli arising from inside the body (i.e., interoception) and help inform neuroception of safety, danger, or life threat.</td>
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<tr>
<td>Proprioception</td>
<td>The ability to grasp the body’s movement, directionality, alignment, and positioning in space based on stimuli that arise solely from within the body itself.</td>
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**Interoception**

- The ability to sense within the body and connect those sensations to emotions or needs (internal)
  - “…it is the process of receiving, assessing, and appraising internal body sensations.” (Farb et al., 2015, pg. 1)
- Important mechanism of survival, self-regulation, and emotion regulation (Farb & Mehling, 2016; Mehling et al., 2011)

**Top-down and bottom-up processing**

- Top-down: regulation of attention and intention setting
- Bottom-up: breathing and movement, physiological mechanisms

**How is TIY different? Beneficial Practices:**

- It emphasizes an engagement of the parasympathetic nervous system (PNS) through slower pacing, repetition, and increased cuing for interoception (mindful awareness of internal sensations)
Safety of students is always emphasized through attention to the space (no “stacking” of mats, students have more personal space), no indiscriminate touch (always asking permission), and increased use of modifications and “all levels” poses.

Students are told where exits are if they need to leave and can see their instructor at all times.

Instructors work to be a kind and accepting presence and are encouraged to stay mindful of their own autonomic nervous system reactions.

Instructors provide a consistent, safe, and stable locations for TIY classes.

Typically, there is increased use of props to provide comfort and support.

Instructors use invitational language (“When you feel ready…” or “I invite you to place your left foot….”) versus command language (“Place your left at the front of the mat.”)

As TIY instructor work to ground their students within their body and breath, remember your students will be the best at knowing what they feel ready to explore.

In developing interoceptive awareness, instructors may start with more neutral parts of the body (feet, hands) but remember your students are in the process of learning what feels safe for them.

**Contraindications to TIY**

- Touching without prompting and therapeutic relevance
- Postures that position the hips in vulnerable ways
- Fast sequences that make modifications and adaptations a challenge for students to integrate
- Large classes in which students are positioned very close to one another
- Practices which cause a sustained engagement of the sympathetic nervous system such as:
  - Breath retention or complicated breathing practices
  - Deep backbends
Instructor Training and Preparation for TIY Classes

- Self-care and use of mindfulness techniques to protect and facilitate instructor resiliency
- Explore how to use personal power (inherent in the teacher role) as a therapeutic tool rather than simply being an authority figure
- Flexibility for individual student advancement and personalization of practice (personalization as empowerment)
- Because TIY is often taught in a range of locations (from prisons to hospitals) be adaptive and “take the lead” when there may be reduced availability of a consistent space and props to practice with

Proposed structure of TIY class

- Begin in a restorative pose conducive to pranayama practice
- Pranayama practice is introduced and is woven throughout class sequence
- After pranayama practice set an intention with students, allowing them to personalize any yoga philosophy or psychological concept the instructor may introduce (if this occurs the introduction would begin before practice)
- Start to integrate movement with breath moving slowly with cues to gage how body feels (helping students to learn how to modify based on their body’s cues)
- Consider introducing a modified sun salutation or warm-up series that further integrates movement with breath
- “Peak Poses” may be introduced in this later part of class but should be flexible in the instructor’s mind, i.e. it is recommended that poses are tiered with the most accessible version taught first and the instructor is always willing to adapt their pre-planned sequence if needed
  - more challenging versions can be introduced mindfully but should be based on the instructors in the moment assessment of the classes’ responsiveness to these poses
  - Assess if the class remains cohesive or if they begin to appear fragmented, i.e. some students remain engaged in their breath and their attunement with the instructor while others begin to appear “checked out” or overwhelmed
- The cool down in class in some ways may be more important than the peak pose or warm-up in its emphasis on sensory withdrawal and interoception
  - Avoid or minimize long holds of hip stretches, heart openers, challenging twists, and long periods of silence
  - Consider gentle reclined flows or restorative shapes that are accessible and do not place students in vulnerable positions
  - Re-integrate mindfulness cues and pranayama practice into final shapes
  - Emphasize attention to neutral parts of body (interoception) and exhales for parasympathetic nervous system engagement
- Before the final meditation allow students to take any movements or adjustments they may enjoy, encourage them to guide their mind toward letting go of expectations of the class (the past) and move into the present moment
- The final meditation should be no more than five to 10 minutes and preferably be guided using neutral TIY language and content
- At the end of class allow clients time to slowly transition back into the space (reorienting them into their senses within the space)
- Invite questions or feedback, allow time for social interaction between students
Interoception & Mindfulness in TIY

1. **Dissociation**
   a. Brief review of ANS and hyper/hypoarousal (from day 1)
   b. Depersonalization and derealization
   c. Functions of numbing (short-term solution) from trauma perspective
   d. Long term consequences of numbing (mental and physical health outcomes)

2. **Interoception and Body Awareness**
   a. Review window of tolerance
   b. Define interoception and evolutionary purpose
   c. Move pathways of sensory engagement here
   d. More on interoception and neurobiological pathways

3. **Sensory overload versus sensory withdrawal (Pratyahara)**
   a. Pranayama practice
   b. Mindfulness cues

TIY for Special Populations

1. **Working within “untraditional” settings (in-patient, hospitals, VA, prisons, community health clinics, educational settings, etc)**
   a. Veterans both in and outside of VA
      i. Cultural considerations
      ii. Language modifications
      iii. Modifying for pain tolerance and developing awareness of pain threshold
      iv. Physical and mental health comorbidities (TBI, medications, disability)
   b. Sexual assault and abuse survivors
      i. Asana and prop modifications
      ii. Importance of gender-specific classes when possible
   c. First responders
      i. Cultural considerations (need to be “on” as part of job)
      ii. Burn-out and vicarious trauma
   d. Incarcerated individuals
      i. Safety considerations, working with staff, respect for students
      ii. Physical and mental health comorbidities
   e. Inpatient Settings (Substance use; SPMI)
      i. Safety considerations, working with staff, respect for students
      ii. Mental health comorbidities and impact of medications on ability to practice
      iii. Offering alternatives to positively reinforce mindful and restorative presence in class without forcing practice

2. **Review role of student-instructor relationship and group dynamics**
   i. Review of attachment styles and implications for student-instructor relationships
   ii. Protocol for following-up with students after class if an incident occurred during class
   iii. Balancing boundaries with the facilitation of safety and community
   iv. Importance of self-care in maintaining healthy relationship
      a. Signs of compassion fatigue, burnout, and secondary trauma
      b. Use of mindfulness and interoception in monitoring instructor burnout

3. **Social justice and inclusivity**
   i. The **Race-Based Traumatic-Stress Injury Model** focuses on the impact of race-related events, not on changing the response of the person who was harmed (Carter, 2007)
ii. Dissociation and numbing may be adaptive responses to oppression: “It is passed on from one generation to the next as a way of dealing with the unbearable suffering imposed on black and brown bodies who were/are unable to escape physical abuse, emotional abuse, injustice, the agony of family separation, the fear of bodily harm, and even loss of life.” (Parker, 2020, p. 102)

iii. **Spiritual Bypassing**: Term originally coined by Ram Dass and later developed for clinical use by John Welwood in the 1980’s

iv. “Spiritual bypassing perpetuates the idea that the belief “we are one” is enough to create a reality where we are treated equally and as one. It is not. Spiritual bypassing permits the status quo to stay in place and teaches people that if you believe in something and have good intent that is enough. It is not.” (Johnson, 2017, p. 31)

v. “A practice of witnessing allows one to understand that most places where yoga is practiced are a microcosm of the larger culture. Whatever is happening outside the yoga space is happening inside of the space.” (Johnson, 2017, p. 33)

vi. A yoga class can easily shift from an empowering experience to an alienating one depending on many instructor and environmental factors

vii. “Our cultural blind spots might be called our cultural kleshas, those things that we are unable to see. Knowing they are there helps us navigate more clearly.” (Parker, 2020, p. 129)

viii. We might similarly consider white supremacy as a form of samskara, it takes tapas and svadhyaya to change our learned behaviors

**Applied TIY Teaching Assignment**

1. Assignment is based on observing, assisting with, or conducting three trauma-informed classes followed with a formal reflection of experiences.
2. Reflection will include:
   a. How the instructor consciously integrated TIY themes and challenges to implementing TIY guidelines
   b. Why the instructor chose to work with the specific population of the class and what considerations were made specific to that population
   c. If student is observing as opposed to teaching or assisting, reflection will necessitate a brief interview with the instructor
### Bibliography

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<th>Trauma Research and Clinical Practice</th>
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<th>Relevant Yoga Psychology Readings</th>
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**Related YogaX Team Member Publications**

**Trauma-Informed Yoga**


**Wellness, Stress, Coping**


**Access and Barriers to Yoga**


**Evidence-Based Benefits of Yoga for Wellbeing**

**Stress**


Coping Skills

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Emotional Wellbeing

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Relevant Yoga Mechanisms Readings

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