Yoga for Eating Disorders

YTT300 Module Details





Integrated Holistic Embodiment: Yoga as A Conceptual Model in the Prevention and Treatment of Eating Disorders, Disordered Eating Behaviors, and Body Dissatisfaction Yoga for Eating Disorder Recovery

Syllabus

*Heather Freeman PsyD, ERYT500*July 25 – August 31, 2023; 30 hours (Tuesdays 5 - 8p and Thursdays 5 - 7p)

This is an advanced-level pranayama 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 teachers, Heather Freeman
- (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 <u>upon request</u>
- 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

Heather Freeman, PsyD, ERYT 500 YogaX Team Member Department of Psychiatry and Behavioral Sciences at the Stanford School of Medicine More information at https://profiles.stanford.edu/heather-freeman

Training Content Summary

This training is dedicated to infusing clinical psychology with the ancient wisdom of yoga to understand the complexity and healing pathways of disembodiment, disordered eating, and eating disorders. We will be exploring the foundations of eating disorder current trends and treatments, discuss yoga as adjunctive treatment for eating disorders, and explore teaching considersations and skills for both prevention and healing for individuals who are at risk and/or currently struggling with disembodiment, disordered eating, and eating disorders. This advanced training helps yoga teachers and health professionals develop an understanding of the etiology, supportive treatment methods, and prevention of experiences of disembodiment, disordered eating, and eating disorders through a yogic lens and integrated holistic embodiment practices. Students will develop a foundation of current understandings of eating disorder's etiology, pathology, and interventions to inform their development as a yoga professional applying therapeutic yoga for prevention and adjunct to treatment for eating disorder recovery and positive embodiment. Students will also learn specific teaching considerations based in therapeutic yoga and eating disorder treatment to inform how to work therapeutically and adjunctively with this population.

Participants will develop an understanding and apply skills to foster healing for students/clients with disembodiment, disordered eating, and eating disorders thorough awareness, knowledge, and skills. As such, participants learn to develop strategies, apply skills, and problem-solve related to the following applications of eating disorder-informed yoga teaching principles:

- Understanding and applying yogic psychology to as an adjunctive treatment model to conceptualize and
 offer interventions for individuals who struggle with feelings of disembodiment, disordered eating, and
 eating disorders
- Defining eating disorders and disordered eating from modern psychology and a bio-psycho-social-cultural lens to build a foundational understanding of working with this clinical population
- Learning current trends in ED research and proposed mechanism of action for the therapeutic use of yoga for healing experiences of disembodiment, disordered eating, and eating disorders
- Defining and applying skills to work directly with individuals with ED bx/symptomology in either therapeutic groups or to help students with EDs integrate into studio classes or as prevention
- Integrating cultural sensitivity and competence, including language skills, empowerment, collaboration, and interpersonal skills as a part of preventative measures and adjunctive treatment of eating disorders with therapeutic yoga

Learning Objectives

Learning Objective #1:

- 1. Learn foundations of current understanding of eating disorders
 - a. Enhance understanding of EDs through review of current research and diagnostic criteria
 - b. Explore the common causes and treatments of EDs through a Western lens
 - c. Understand how yoga can be adjunctive to current treatment for EDs

Evaluation Method for Learning Objective #1

- Define and provide examples of common and newly defined EDs in the DSM-V and beyond
- Explore and define areas of pathology related to etiology and expression of ED bx
- Identify current research findings related common and evidence-based treatments of ED

Learning Objective #2:

- 2. Understand and apply yoga philosophy lens to the presentation and recovery of eating disorders.
 - a. Enhance understanding koshas model related to pathology and healing interventions related to mental health
 - b. Explore the understanding and treatment of common EDs through the koshas model of presenting concerns and possible treatment considerations.
 - c. Utilize yoga psychology tools (koshas and kriya yoga) to understand and offer support related to ED and ED related bx

Evaluation Method for Learning Objective #2

- Define and explain etiology of ED through a yoga philosophy lens
- Apply yoga psychology interventions as adjunct to ED treatment/to aid in ED recovery alongside mental health services and supports
- Identify areas of pathology and discuss potential interventions related to common ED presentations

Learning Objective #3:

- 3. Learn and understand the history and effects of weight stigma and anti-fat bias in both yoga and healthcare settings
 - a. Recognize the sources of weight bias and stigmatization in both healthcare and yoga settings.
 - b. Describe the adverse consequences of weight stigma on students' and patients' emotional and physical health.
 - c. Identify personal assumptions about body weight, and how these views can influence working with yoga students and clients

Evaluation Method for Learning Objective #3

- Define and identify areas of weight-stigma and anti-fat bias both personally, professionally, and societally
- Identify and apply strategies to dismantle anti-fat phobia in healthcare and in yoga
- Identify and apply strategies to improve accessibility and comfort for students in larger bodies to feel welcomed in a yoga environment.

Learning Objective #4:

- 4. Defining and applying skills to work preventatively and/or directly with students with eating disorder bx/symptomology in either therapeutic groups or to help students with eating disorder integrate into studio/community classes
 - a. Define and identify healing interventions from the koshas model to support healing for those with feeling disembodied, disordered eating, and eating disorders
 - b. Explore therapeutic yoga skills that apply to increasing positive embodiment, interoceptive awareness, and habit reversal/impulse control
 - c. Evaluate and determine appropriate and intentional language/ teaching cues that cater to the healing needs of this population in a way that is informed, discerning, and empowering for both teachers and students

Evaluation Method for Learning Objective #3

- Identify and apply strategies to teach embodiment-jnformed yoga that is healing for individuals with feelings of disembodiment, disordered eating, and/or eating disorders
- Develop critical thinking skills to evaluate and utilize language that is nuanced for this population and consider individual differences

Schedule and Continuing Education Hours by IAYT Category

Date	Time	Topic	TTP	TM	AP	YH	ТТР
Didactics 1	Tuesday 5p-8pm	Introductions/Check-in; Koshas Framework Review Overview of Eating Disorders (Bio-psychosocial-cultural)	1			2	1
Practice 1	Thursday 5-7pm	Yoga and ED Session 1 Debrief	2				2
Didactics 2	Tuesday 5p-8pm	Eating disorder overview and current treatment trends • Eating disorder overview • Types and diagnostic codes • Medical Complications/Considerations • Current treatment	2		1		2
Practice 2	Thursday 5-7pm	Yoga and ED Session 2 Debrief	2				2
Didactics 3	Tuesday 5p-8pm	Anti-fat bias and weight stigma • Anti-fat bias and weight stigma • Culture • Media • Medical community • HAES and Intuitive Eating/Movement • Body trust/Radical Self-Love	2		1		2
Practice 3	Thursday 5-7pm	Yoga and ED Session 3 Debrief	2				2
Didactics 4	Tuesday 5p-8pm	Yoga and eating disorders: Current research and evidence • Yoga Research • Proposed Mechanisms of Action • Where yoga can "heal" • Where yoga can "hurt" • Considerations for future directions	1			2	1
Practice 4	Thursday 5-7pm	Yoga and ED Session 4 Debrief	2				2
Didactics 5	Tuesday 5p-8pm	Yoga and eating disorder models and teaching principles • Koshas model for ED considerations and interventions • Kriya yoga: Skills for growth and transformation • Teaching principles and considerations	1	1		1	1
Practice 5	Thursday 5-7pm	Yoga and ED Session 5 Debrief	2				2
Didactics 6	Tuesday 5p-8pm	Yoga and eating disorder models and teaching principles • De-brief and catch up	1	1		1	1
Practice 6	Thursday 5-7pm	Yoga and ED Session 6 Debrief	2				
	30 hours of YA CE or YTT300 in the following categories:					6	0

Notes: YF=Yoga Foundations; BPF=Biomedical and Psychological Foundations; TT=Yoga Therapy Tools and Therapeutic Skills; Prc=Practicum; PP=Professional Practice

Suggested Readings and Practices

It is recommended that in preparation for the workshop you read all YogaX blogs, 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.

It will be helpful to have familiarity with the *Yoga Sutras of Patanjali* prior to attendance (but it is not required). Many translations exist and you can choose any one. Several are available for free online (http://www.swamij.com/yoga-sutras.htm and http://www.arlingtoncenter.org/Sanskrit-English.pdf).

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

Association for Size Diversity and Health: https://asdah.org/

Barkataki, S. (2020). *Embrace yoga's roots: Courageous ways to deepen your yoga practice*. Orlando, FL: Ignite Yoga and Wellness Institute.

Cook-Cottone, C. (2020). Embodiment and the treatment of eating disorders: The body as a resource in recovery. New York, NY: W.W. Norton & Company:

Gordon, A. (2023). "You just need to lose weight" and 19 other myths about fat people. Boston, MA: Beacon Press.

Gordon, A. (2020). What we don't talk about when we talk about fat. Boston, MA: Beacon Press.

Kinavey, H., & Sturtevant, D. (2022). Reclaiming body trust: A path to healing and liberation. New York, NY: TarcherPerigee.

Marsh, S. (2015). Hunger, hope and healing. Boulder, CO: Shambala.

Taylor, S.R. (2018). The body is not an apology. Oakland, CA: Berrett-Koehler Publisher, Inc.

Provided Handouts

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:

- Yoga for ED Recovery Protocol
- 5 Slide Sets for the Training

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.

Yoga for Eating Disorders

Content Manual





Integrated Holistic Embodiment: Yoga as A Conceptual Model in the Prevention and Treatment of Eating Disorders, Disordered Eating Behaviors, and Body Dissatisfaction Yoga for Eating Disorder Recovery

Content Manual

Heather Freeman, PsyD, ERYT500

Necessary Background Knowledge and Training Rationale

Yoga is an ancient practice rooted in Indian philosophy that people around the world practice for both physical and psychological health. In its most holistic form, yoga is a series of eight interrelated categories of practices, or "limbs," that are thought of as a path to healing and transformation. The practices are based in ethics, physical movement, nervous system regulation, and mindfulness. Most come to yoga for some healing or change, whether it is only to become more flexible, for stress reduction, or as adjunct to heal some greater trauma or diagnosed mental health disorder (Park et al., 2019; Taylor et al., 2020).

Therapeutic yoga works beyond our modern trauma and mental health healing modalities in a way that is bidirectional and multimodal (Gard et al., 2014; Taylor et al., 2010). Despite talk therapy's success, it can be limited in how it helps people heal from psychopathology and trauma if the interventions are only utilizing a top-down approach (e.g., talk therapy). Solely relying on top-down interventions for those who have significant trauma, can lead to high attrition rates and sometime re-traumatization (D' Andrea & Pole, 2011; Niles et al., 2018). Yoga not only offers interventions that include top down approaches (mantra, intention setting, cognitive re-framing) but yoga practices also incorporate body interventions that include movement and breath work that are utilizing bottom-up processing, teaching participants to retrain their own nervous system (Emerson & Hopper, 2011).

There have been countless studies that reveal the healing potential of yoga. Below is a list of studies that briefly cover the range of studies conducted using yoga as an intervention for clinical symptoms and disorders.

Table 1: Evidence Base for Yoga's Mental Health Benefits (created by C. Brems)

Documented Mental Health Benefits – Clinical Symptoms and Disorders				
Anxiety	Khalsa, Greiner-Ferris, Hoffman, & Khalsa, 2015; Li & Goldsmith, 2012; Satyapriya, Nagarathna,			
Allxlety	Padmalatha, & Nagendra, 2013			
Anger	Kanojia et al., 2013; Noggle, Steiner, Minami, & Khalsa, 2012; Lavey et al. 2005;			
	Butler et al., 2008; Chandratreya, 2011; Kanojia et al., 2013; Kinser, Bourguignon, Whaley,			
Danragion	Hauenstein, & Taylor, 2013; Lavey et al. 2005; Lavretsky et al., 2013; Shahidi et al., 2011; Sharma,			
Depression	Das, Mondal, Goswami & Gandhi, 2005; Woolery, Myers, Sternlieb, & Zeltzer, 2004; Uebelacker et			
	al., 2010			
Attention Deficit	Chaya, Nagendra, Selvam, Kurpad, & Sirinvasan, 2012; Jensen & Kenny 2004			
Eating Disorders	Carei et al., 2010; Mitchell, Mazzeo, Rausch, & Cooke, 2006			
	Carter et al., 2013; Emerson & Hopper, 2011; Mitchell et al., 2014; Staples, Hamilton, & Uddo,			
Trauma Spectrum	2013; Thordardottir, Gudmundsdottir, Zoega, Valdimarsdottir, & Gudmundsdottir, 2014; Van der			
	Kolk et al., 2014			
Documented Mental Health Benefits – Wellbeing				
Stress Perception	DSM-IV-TR, 2015; Kauts & Sharma, 2009; Luu & Hall, 2015			
Coning Skills	Chong, Tsunaka, Tsang, Chan, & Cheung, 2011; Noggle et al. 2012; Sethi, Nagendra, & Ganpat,			
Coping Skills	2013			
Emotional Wellbeing	Sethi et al., 2013; Telles, Sing, Bhardwaj, Kumar, & Balkrishna, 2013			

Psychopathology of Eating Disorders

Eating disorders are known as psychiatry disorders characterized by pathology in eating patterns and eating-related behaviors (Walsh, Attia, & Glasofer, 2020). These behaviors include but are not limited to disordered eating (e.g., restriction, binging and compensatory behaviors (exercise, purging etc.)), and preoccupation with body size and weight. Eating disorders outlined in the DSM-V include anorexia, bulimia, binge-eating disorder, avoidant/restrictive food intake disorder (ARFID), pica and rumination with some additional considerations that are not formally included such as orthorexia, and diabulimia (Walsh, Attia, & Glasofer, 2020). The eating disorders defined in the DSM-V differ significantly from each other in their symptoms, prognosis, and receptivity to treatment with the prevalence of these disorders growing in industrial nations across the world (Ostermann, Vogel, Boehm, & Cramer, 2019; Walsh, Attia, & Glasofer, 2020).

Eating disorders can cause problems physically and psychologically, and decrease an individual's quality of life (Jahanbin, 2019). Patients with disordered eating and eating disorders can also have medical complications and be deadly if not treated. Specifically, anorexia nervosa has one of the highest mortality rates of any psychiatric disorders while other eating disorders can affect metabolism, how the body absorbs nutrients, and both create short term and long-term effects on blood pressure and heart health (Walsh, Attia, & Glasofer, 2020). Not only can there be severe consequences for people with disordered eating and eating disorders, but the disorders can also be difficult to treat due to the lack of patient's interest/willingness to use available treatments. This can be due to a lack of insight that the disordered eating or eating disorder is a problem, or because the ego syntonic nature of some of the disorders (Jahanbin, 2019).

There are studied genetic, biological, psychological, social, cultural, and environmental factors that can contribute to the presentation of ED and ED symptomology. Genetically, those who are related, as well as, female-identified individuals are known to have an increased risk of developing a disorder. Additionally some studied biological origins include abnormalities in norepineprhine and serotonin neurotransmitter systems. In terms of psychological and environmental influences, those who have difficulty with self-management, experienced abuse and difficult family/relational dynamics while also the emphasis on "ideal body" types, the social pressure to be thin and the pervasiveness of "diet" culture all can impact the presentation, precipitation and prognosis of disordered eating and eating disorders (Jahanbin, 2019). Additionally it is well known how the culture of the United States and European beauty ideals have influenced the fixation around "losing weight" or "being thin" to be considered attractive with US beauty standards having global negative impact (Silen & Keski-Rahkonen, 2022; Becker, 2004). With the rise of social media and our constant access to content, current research indicates a correlation between time spent on social media and an increased risk for ED (Suciu, 2021).

Yoga and Eating Disorder Research

Therapeutic yoga has been applied and studied in a variety of settings, with many psychopathologies as indicated in the table above. Yoga psychology's focus on mind-body connection, stress management, resilience and relaxation tools offer most individuals who are dealing with some aspects of difficulty (physically or psychologically) some relief for present circumstances and tools to manage future stressors. Specifically related to eating disorders, practicing yoga can impact the onset, duration, and outcome of eating disorders (Jahanbin, 2019). Research suggests individuals who regularly practice yoga have a decreased risk for developing eating disorders and decrease the presence of common eating disorder risk factors such as body dissatisfaction, self-objectification, poor interoception, food preoccupation, and poor body awareness (Carei, Fyfe-Johnson, Bruner, & Brown, 2010; Klein & Cook-Cottone, 2013). A yoga practice is also correlated with higher levels of eating disorder protective factors such as greater self-competence, positive physical and social self-concepts and emotion regulation skills (Klein & Cook-Cottone, 2013).

Yoga is known to increase body awareness and mindfulness in daily activities, which has also been seen to contribute to more intuitive eating and a healthier relationship to food in female-identified individuals (Dittman & Freedman, 2009). Yoga also impacts serotonin function, which is known to be impaired in individuals with eating disorders, even after recovery from behavioral symptoms (Ostermann, Vogel, Boehm, & Cramer, 2019).

While there is no conclusive evidence that yoga is an effective primary treatment, the results are promising that a yoga intervention can be successful in aiding recovery (in addition to having an integrative medical team) and reducing negative affect during stressful treatment experiences (e.g. mealtimes). Yoga can be included as an adjunct or complimentary intervention to other psychological and psychiatric treatment methods while patients navigate their recovery for their eating disorder (Jahanbin, 2019; Pacanowski, Diers, Crosby & Neumark-Sztainer, 2017). Opposingly, yoga can be problematic and add to a client's presentation of ED symptoms if it is not. There is some research that suggests that instead of aiding in recovery, yoga can actually contribute to the creating and sustainment of ED thoughts and behaviors. The researchers suggests if the practice is focused only on the physical practices and encourages behaviors related to self-objectification, restricting food intake, fasting and labeling foods as "good" or "bad" yoga can do more harm than good (Domingues & Carmo, 2019).

Yoga and Eating Disorder Recovery

Yoga as an intervention offers a range of tools and practices that can be tailored to specific health outcomes and patient needs. However, despite yoga's generalizability, yoga for populations with dangerous pathology, such as eating disorders, needs to be rooted in research, offered as an adjunctive treatment method rather than the primary intervention, and in its holistic form (five koshas and eight limbs). Yoga classes, therapeutic groups, and individual sessions, as adjunctive care for eating disorders, need to be dedicated to integrating the mind, body, and spirit through ethics, nervous system regulation and mindfulness, rather than just concentrating on body-based practices that potentially contribute to ED pathology (such as self-objectification and body dissatisfaction).

Yoga for eating disorders recovery is presented to teach yoga teachers how to work in support of individuals working on healing their experiences of disembodiment, disordered eating, and eating disorders. It provides yoga teachers with the relevant skills to work on increasing experiences of positive embodiment, nervous system regulation, and utililzing intentional yoga practices that support health and wellbeing of those who struggle with utilizing their body as a resource rather than a battle ground. It is predicated on collaborative relationships with other health care providers who support the therapy and medical needs of this high-risk population. It emphasizes the potential harm that can be done by yoga practices that are uninformed about eating disorders in that they may deepen and perpetuate physical practices and behaviors related to selfobjectification, restricting food intake, fasting, and food labeling if not done with informed-care and intentionality. Specifically, this module seeks to assure that yoga teachers understand disembodiment, disordered eating, and eating disorders more completely. With this training, teachers will have more thoughtfylness in workign with this poulation and exercise caution that yoga can do more harm than good in this vulnerable population if it is not presented from a holistic lens. Yoga can aid in increasing positive embodiment, untangled habits of disordered eating and help in the recovery of those with eating disorders if the yoga that is shared with them attends to all koshas, gives resources from all eight limbs, and invites students to engage in introspective, self-compassionate, and socially conscious actions.

References and Bibliography

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