

yoga

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When Yoga Becomes Psychotherapy

Learn to spot the boundary between guiding poses and guiding emotions.

By Dan Charnas

My mother is a psychotherapist. I became a yoga teacher out of that same desire to heal. I was intrigued by yoga's ability to deal simultaneously with body and mind: Emotional issues that might take years to tease out in conventional therapy were instead brought to the surface physically, and causes of physical disease could often be deduced through conversation.



For me, the union of yoga and psychotherapy was natural. Students would come to my class not just in need of a physical workout, but often in great emotional pain. For those who stayed after class to talk, I'd spend time listening to their problems and trying to guide them on their healing path. Most times those remedies would be an exercise or meditation. But at other times, I'd speak to them with the bluntness of my teacher, Yogi Bhanan, the Master of Kundalini Yoga, who would often not even let his students finish their sentences before reading their energy and dispensing instructions.

I've never gone quite as far as that, but venturing into "therapeutic talking" with my students scares me a bit, partly because it comes to me so easily. I am, after all, just a yoga teacher, trained only in the effects of certain sets of exercises on the body, mind, and spirit. I am not a psychotherapist. I don't have an advanced degree in psychology or social work, nor do I have any training in the clinical detachment that therapists use to guard the people in their care. This is serious stuff, and as a yoga teacher, I've had students with serious problems—addictions, bipolar disorder. God forbid I should overstep my bounds and say the wrong thing.

In classes where our students come to heal both physical and emotional wounds, they may turn to us for advice—not on postures, but about relationships, hardships, moral and ethical questions, and more. Many of us are unprepared for that kind of connection and responsibility. How do we navigate the fluid boundary between teacher and therapist? The answer often depends on how you were trained.

Old-School Yoga: Keep a Stiff Upper Lip

Years ago, Angela Farmer was practicing in B.K.S. Iyengar's studio in India. In the afternoons, Iyengar put his students into front bends for a half-hour at a time, which

Farmer found excruciating. Something released inside of her, and every day, tears streamed out of her eyes into puddles on the floor.

"This went on without mention," Farmer says, "Until one day Iyengar simply said, 'You've stopped crying.'"

Far from having worked through her emotions, Farmer now believes, she had simply arrived at a place where she could hold more stress within herself.

"You were discouraged from expressing emotions," says Farmer of her Iyengar practice. Now a renowned yoga teacher in her own right, Farmer says that it's hard for yoga teachers trained in primarily physical disciplines to relate to the emotional breakthroughs and breakdowns that often come with yoga practice. "When that happens to their students," she says, "they're thrown off balance."

For Farmer, finding a way to help her students meant finding a different kind of practice for herself. "I realized that a whole side of me was not allowed to be there."

New-Age Yoga: Come to Mama

"Not everyone does what we were taught to do," says Gurmukh Kaur Khalsa, founder of Golden Bridge Yoga and a teacher of Kundalini Yoga for more than three decades. "We were given a whole lifestyle, not just a mat style. Just as important as asana, we were taught how the mind works, and how to help people get to their neutral mind."

And help them she does. After Gurmukh's classes, there is usually a long line of students waiting to speak to her.

"In order to help people," Gurmukh says, "you have to know where they are." Some healers can read auras, Gurmukh says, but most teachers have to hear their student's stories.

Gurmukh's most frequently prescribed yogic tool is the 40-day meditation, a vehicle for exercises that Gurmukh handpicks for each student. But Gurmukh's supreme remedy is her own Mother energy, the hours she spends simply listening to students.

"If I'm not equipped to help them," Gurmukh says, "I have a whole network of people [who can.]" Her network includes dozens of doctors, psychiatrists, acupuncturists, chiropractors, and more. "If someone's got cancer, I'm not going to put them on a juice-fast. I'm going to send them to someone who's going to help them in the long run."

Seeing the Boundaries, Exploring the Possibilities

Many of those referrals go to Dr. Barbara Wingate, a Philadelphia-based psychiatrist, professor at the University of Pennsylvania, and certified Kundalini Yoga teacher who uses yoga in treating her psychiatric patients.

Sarah (her real name and personal details have been changed) was a medical student with a "significant depression," Wingate says. Sarah was going away for three months and didn't want to take medication. Wingate respected Sarah's integrity, but she was worried, too.

"In the middle of the session," Wingate says, "I lay down on the floor and said, 'Let me give you a tool. I'm going to teach you Stretch Pose and Breath of Fire.'"

Wingate's concerns about appearing unconventional were eased when Sarah got right down on the floor and did the exercise with her.

However, Wingate is much more cautious about using her psychiatric knowledge in the yoga studio.

"As a yoga teacher, I want to keep a clear boundary," Wingate explains. "I don't feel that if people come to me for a yoga class, I should be treating them with psychiatry."

"Unless we're trained therapists, we're not therapists," says Blake Martin, a Thai Yoga teacher-trainer in Canada. "There would be huge liability issues in Canada if I were to go and counsel someone."

So how do you know where the line is? According to Martin: "As soon as I'm doing anything other than active listening, I've crossed it. As soon as I give them advice and say, 'Do you think that's about your mother?'"

"I don't think it's your responsibility to fix people once they recognize they have a problem," Martin continues, "But you shouldn't just abandon them. You can't run off and say, 'Well, it looks like you're crying, I've got something else to do.' It's your responsibility to guide them through that moment."

Guiding Lights

So how do we guide our students when we're unsure of our own ability to do so? Here are some hints to help you help them, responsibly.

Use your emotional barometer. Some teachers who naturally offer emotional therapy may have a hard time sensing when they've crossed the line from teaching into therapy. So how do you know?

Your best barometer, Wingate says, is emotional. "If you're too excited to teach objectively, if something's making you feel emotional, it may be an issue that hits too close to home. When you start feeling off balance, that's when you know."

If you regularly go too far, Wingate says, eventually you'll get complaints.

Hold the space. The surest, best thing to do for our students is, happily, the most therapeutic: Just listen. Hold the space. "You can't create a space for them to feel safe if you don't feel safe," says Farmer. "What I try to do is be open to whatever is going to

happen. I try to stay inside myself and listen from there."

Assemble a dream team. Especially if you're a teacher who is less comfortable with counseling, Gurmukh recommends networking to find the best healers in your community. "You've got to have a grab bag of people," Gurmukh says. Assemble a panel of professionals to whom you can refer your students. That way, when problems arise that are out of your league, you won't leave your students out in the cold.

The next time you have the inclination to comfort and counsel a teary-eyed student, take a step back and analyze the situation. While your urge to advise may be strong, a healthy caution is necessary. In any case, you can't go wrong if you allow your intuition, neutral mind, and referral list do the talking for you.

Dan Charnas has been teaching Kundalini Yoga for more than a decade and studied under Gurmukh and the late Yogi Bhajan, Ph.D. He lives, writes, and teaches in New York City.

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