Chapter 13
Yoga in the Treatment of Trauma–Related Disorders: Connecting the Body and the Mind

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ABSTRACT

Objective: This research review aimed to investigate yoga as an alternative treatment to trauma-related disorders as depression, anxiety and PTSD. Method: We searched different databases as Oria, PsychNet, and PubMed, and a hand search of relevant papers. Only quantitative studies were included as there were few good qualitative studies. Results: The results are somewhat varying in yoga as an effective intervention for trauma-related disorders or symptoms. In some studies the yoga group show greater improvements than the passive control group. When the control group is active there seems to be less of a difference between the groups. Even though most of these studies have small sample sizes there is an indication that yoga may improve trauma-related disorders such as anxiety, depression, and PTSD. Since yoga is a time-effective and have low costs it may be considered as an alternative when more time consuming and expensive treatment is not available or possible. Yoga may also be implemented as an adjunctive treatment.

INTRODUCTION

Many clinical psychologists and scientists have recognized that ordinary talk therapy may not be sufficient to treat traumatized patients. Mind-body therapies, such as sensorimotor psychotherapy (Ogden, Pain, & Ficher, 2006) and Eastern traditions like yoga and mindfulness, view the body and the mind as interconnected. These traditions treat mental illnesses in a more holistic way recognizing the importance of also healing the mind through the body (Caplan, Portillo, & Seeley, 2013; Ogden et al., 2006; Van der Kolk, 2006). In this perspective trauma treatment is not about treating an abnormal state of mind but rather increase internal awareness, insight and acceptance (Briere, 2015). The field of neurobiology has contributed to the latest understanding of trauma, especially regarding the acknowledgement of how
essential bodily and sensational issues are to trauma patients. In effect, trauma treatment should involve more focus on the body together with the cognitive and emotional aspects (Van der Kolk, 2006). Yoga is one way to achieve this interconnection in the therapeutic room, as the mind and the body are the focus of intervention.

TRIUMA AND YOGA INTERVENTIONS: A DEVELOPING RESEARCH AREA

Trauma

Trauma is understood as an event which objectively would result in personal distress and an overwhelming psychophysiological emotional response, although many scholars understand the stress response in itself as a trauma (Briere & Scott, 2006). In the field of trauma research and treatment the PTSD-model\(^1\) has received the most attention. Other trauma-related symptoms have often been overlooked, even though how people react to a traumatic experience can differ extensively. Some may develop depression or anxiety, while others experience the traumatic event and the psychological adaptions to it as becoming a part of who they are, and develop a personality disorder (Briere, 2015). An extensive study conducted by Van der Kolk and colleagues (1996) found that the complexity of how a person adapt to trauma may be more complex than the PTSD-model comprised, and that symptoms as dissociation, difficulties in affect-regulation and somatization can both be interrelated and independent of other PTSD symptoms (e.g. intrusive memories and disordered arousal and emotions). This complexity may result in a wide-range of trauma-related disorders which often co-occur with PTSD or act on their own, as mood-disorder, anxiety disorders, eating disorders, somatoform disorders (Ogden et al., 2006), substance and alcohol abuse, and psychotic symptoms (Briere & Scott, 2006). Children exposed to complex trauma throughout their childhood may develop major impairments in several functions areas; biology, affect-regulation, dissociation, behavioral regulation, cognition, attachment and self-concept (Cook et al., 2005). The DSM-5 (American Psychiatric Associations [APA], 2013) has to a greater extent acknowledged the various reactions which can follow a traumatic event, and mood reactions have been implemented in the PTSD-model. It can be argued that trauma-related symptoms should be understood on a continuum, especially when considering the high comorbidity rate in PTSD. The Colombo Twin and Singleton Study illustrated that the association between trauma and PTSD is not unique, and there are high rates of other diagnosis associated with trauma exposure (Dorrington et al., 2014). This notion is important when investigating whether yoga has a healing effect on trauma; does yoga address different symptoms which can follow trauma experiences, and does yoga bring with it some effects that ordinary talk therapy lacks (e.g. bodily awareness)? Another notion is that trauma comes in various forms, from natural disasters to child abuse to torture, and studying the effect of yoga on different trauma is important (Telles, Singh, & Balkrishna, 2012).

Trauma and Yoga

Some benefits of yoga particularly address symptoms relating to trauma experiences, especially as people with Post Traumatic Stress Disorder (PTSD) have great difficulties recognizing and relate to their inner sensations (Caplan et al., 2013; Van der Kolk, 2006). A systematic review of 25 randomized-controlled studies (RCT) suggests that yoga practice affects stress-related symptoms and more specifically improves...