

Building the Business of Yoga Therapy

By Stephanie M. Shorter

As we head into 2017, IAYT continues to advance the field of yoga therapy by investing in targeted initiatives for accrediting yoga therapist training programs and credentialing yoga therapists while also helping to create market demand for their services. As a part of this effort, we want to highlight professionals working in the field who have made entrepreneurial strides building up their yoga therapy practice.

This new Professional Development feature will be an ongoing series of collected wisdom curated from yoga therapists who will share their practice-building strategies.

Coming together—as in yoga, “to yoke”—means that supply and demand for yoga therapy services intersect at the point where our skills meet the needs of the world. We congratulate these contributing authors and are grateful to them for taking the time to share their perspectives. We look forward to ongoing dialogue and shared learnings from “Building the Business of Yoga Therapy.”

Special thanks to Amy Weintraub and Richard Miller for helping us connect with these wonderful writers who are kicking off this new feature.

ROSE KRESS Diversify Your Offerings



Rose Kress, E-RYT-500, LFYE, YACEP, is the director of the LifeForce Yoga Healing Institute and has trained extensively with Amy Weintraub and Rama Jyoti Ver-

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The biggest lesson that I've learned in setting up my yoga therapy practice is the importance of diversifying my offerings. In part, this required expanding my income sources so that it did not just come from one source, like private ses-

sions. Catching the flu last spring meant that I could not see clients or teach for three weeks. Having other modes of income that were not dependent on my physical presence made all the difference. Making connections and networking with other professionals is also key. The business setting of a like-minded professional might be the place to offer a free informational workshop or ongoing classes or workshops. It is out of these connections that I gain referral partners.



Rose Kress with Torrey Postal

I teach therapeutic yoga classes for mood management, back care, and cancer support in the community, and a lot of my clients come to me through these yoga classes. These clients notwithstanding, the number one obstacle that I face in my yoga therapy practice is that most people do not know what yoga therapy is. When people discover what I do, they often assume that I bend people into pretzels.

My continued relationships with my mentors mean that I can reach out for them for support and questions. I have found these relationships to be more important than anything else.

It takes a longer conversation to describe yoga therapy and its benefits. Professionals who refer to me—massage therapists, chiropractors, and psychotherapists—understand the work that I do because I have spent time to educate them about yoga therapy.

My main advice to someone starting out in the field of yoga therapy today

would be to build and educate your network of professionals. Most people have some knowledge of yoga but do not know what yoga therapy is or how it differs from yoga. Hold informal networking lunches, invite other professionals out for tea, give free informational workshops, and connect with local groups that may have an interest in what you do.

When a client comes to me and wants a diagnosis, or more commonly, if he or she wants to go off medication, we discuss what my scope of practice is and the importance of working with an integrated team. I built my referral network by going to different practitioners, introducing myself, connecting with them, and in some cases receiving treatment myself in their modality. For example, I have a referral partnership with a chiropractor whom I also see for treatment. She understands and respects the work that I do. Because of these connections, when I find myself outside of my scope of practice, I have a trusted network of professionals I can refer my clients to.

My yoga practice began in the nineties as a means of managing physical pain and grew to include managing anxiety issues. After my initial yoga teacher training, I focused on LifeForce Yoga for depression, anxiety, and trauma with Amy Weintraub. Yoga therapy for mood issues was the primary focus of my practice for years. I obtained my 500-hour and then yoga therapy training through Functional Yoga Therapy with Maria Mendola. I continued to study with yoga therapists like Mukunda Stiles, Kausthub Desikachar, Richard Miller, and Doug Keller. Then I

met Rama Jyoti Vernon and have spent the last 9 years studying with her. My continued relationships with Amy, Maria, and Rama mean that I have mentors to reach out to for support and questions. I have found these relationships to be more important than anything else.

With the direction of IAYT, I believe that we will see yoga therapy as a modality

covered by health insurance. In my world, I see yoga therapy evolving and making its way into so many arenas, like Veterans Affairs hospitals, pulmonary offices, chiropractors, psychotherapy, oncology offices, hospitals, schools, and more.

TERRY ROTH SCHAFF Increase Your Medical Knowledge



Terry Roth Schaff is an E-RYT and certified IAYT yoga therapist who specializes in musculoskeletal and neurological conditions. At Schaff Yoga Therapy Inc., she

develops therapeutic yoga sequences for people recovering from injuries and living with physical challenges. She also specializes in post-operative rehabilitation and geriatric problems and teaches yoga at Bard College. She trains certified yoga teachers to work in warm water with students with limited mobility.
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My path as a yoga therapist began when I was hired by institutions to set up yoga programs that were geared towards specific populations with particular needs. To a large extent, my income was not based on the number of participants in my classes. In retrospect, I see that this gave me a tremendous amount of freedom. For close to 10 years, I taught the community class at the Sadhana Center for Yoga in Hudson, New York. I loved this class! It only cost participants \$5, and if that was a struggle, they

Don't pretend that you know more than you do. Be a good question-asker and an even better listener.

could come for free. This class was unique. People of all ages attended—from 2-year-old toddlers to people into their eighties. Social workers brought their clients. Three generations in one family would attend, people recovering from and living with serious physical and mental conditions, parents with their teenagers, married couples, farm workers, and schoolteachers. Word got out that a yoga teacher with some medical knowledge was teaching this class and it grew and grew. I started offering classes for people living with Parkinson's disease in Rhinebeck, New York, and at Bard College.

Because I had also started teaching at-risk children, I was being pulled in two directions and had to make a choice. As much as I loved working with these children, what really gave me the most joy and satisfaction was working with people with medical conditions, whether the diagnoses came with growing older or occurred from a congenital condition or a trauma.

An article that I had written entitled "Yoga In and Out of Chairs" for senior citizens appeared in a medical journal, *Topics in Geriatric Rehabilitation*.¹ Loren Fishman, MD, edited this article and I went to see him about collaborating on a study on the benefits of yoga for people with Parkinson's disease. As a physiatrist, he informed me this wasn't a focus of his work but welcomed me into his office to see if we could find something to work on together. After 6 months of shadowing him, I became an employee at his medical practice, Manhattan Physical Medicine and Rehabilitation. He is a brilliant doctor and a generous teacher, as well as a long-time yoga practitioner. He taught me how he made his medical diagnoses and I learned how to read medical reports. Most of our patients couldn't do classical yoga postures so I had to figure out how to keep the integrity of these postures so that the patient would benefit from them but also to modify the postures so that the patient could actually do them.

I started collaborating with one of the practice's five physical therapists to offer small yoga classes for patients with spinal conditions. I taught the class, and my colleague Purnima Singh assisted. By having a physical therapist involved in the prac-

now recognized and incorporated in the state of New York as Schaff Yoga Therapy Inc. I work with people with musculoskeletal and neurological conditions, both in and out of a warm water pool.

The challenges I have faced in building my career as a yoga therapist are twofold. First, I am continually looking for ways to expand my medical knowledge so that I have the information that I need to best help my clients and most effectively communicate with the medical community. Second, it is necessary to push the edge to get physicians to become more open-minded to including yoga as a healing modality and option for their patients.

I think that the medical community is going to require yoga therapists to show adequate training and knowledge in basic anatomy and physiology before they accept us into their community. And I agree with them. If we are going to bridge the gap between yoga and Western medicine, then we are going to have to show competency in both areas: yoga and medicine.

NATHALIE DE MEYENBURG Mine Your Experience

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Although my scope of practice is not limited to a particular group or specific medical condition, I specialize in neurological conditions and neuromuscular disorders, offering long-term, in-home therapy. This specialization came about through experience gained from my family's care and support for a friend with multiple sclerosis (MS) for over two decades, as well as a twist of fate that drew my awareness to what a diagnosis of MS could mean for an individual. As a result of unexplained, acute neurological symptoms in my early twenties, a tentative diagnosis of MS was suggested but was later retracted due to lack of conclusive test results. Although the final consensus was that a virus had attacked my nervous system, I never feel far removed from that experience. In retrospect, that mystery taught me a life lesson in compassion.

[1] Schaff, T.R. (2012). Senior yoga: In and out of chairs. *Topics in Geriatric Rehabilitation*, 28(3), 223–237.

[2] www.schaffyogatherapy.com

The unpredictable progression of the same constellation of physical, mental, social, and spiritual challenges in MS also occurs in Parkinson's disease, cerebral palsy, amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease), and several other neurological and neuromuscular conditions. With this lack of predictability comes the need for individualized, comprehensive, long-term care and support. As part of ongoing care, yoga therapy can play a valuable complementary role in maintaining quality of life, whether that means assisting with breathing techniques for the bedbound; maintaining range of motion for those in a wheelchair; mitigating chronic pain conditions; reducing stress, anxiety, or even depression; or providing in-home therapy as an adjunct to daily self-care.

Experience is the best teacher. Question your teachers, question yourself, and be open to lifelong learning and re-learning.

As a care provider, I have gravitated toward working with clients on a one-to-one basis in an effort to give them a means of self-care and long-term support. As a yoga therapist, this has translated into working with clients in their home, in some cases for over 10 years. From week to week, as yoga therapists we may be unaware of the subtle changes taking place in a client's life, physical state, or mental outlook. Similarly, we may fail to observe how our approach changes, what we have learned as we gain experience, and our increased or diminished empathy (the latter usually being attributable to burnout and lack of self-care).

As in many things, time is a teacher without peer: when we see a client regularly over the course of several years, we begin to appreciate and learn from the changes that take place, both from the client's perspective and from our own. Let your clients help themselves. Give them the opportunity to help themselves. They are the navigator and you are a guide.

LEE MAJEWSKI Create the Product



Lee Majewski, MA, DYEd, C-IAYT, is senior yoga therapist at the Kaivalyadhama Yoga Institute, Mumbai, India. She creates and teaches therapy programs for cancer survivors and psychosomatic chronic diseases. Her current projects include co-operation with the University Health Network in Toronto, as well as the Advanced Centre for Treatment, Research & Education in Cancer, Tata Memorial Centre in Mumbai.

Yoga therapy can bring a lot of health value where the allopathic medical world fails to address some fundamental patient needs. All we need to do is to look at our own life experiences to identify these unmet needs. Most of us have had some encounter with a health challenge; that challenge may, in fact, have been what brought us to yoga. Or maybe we already were practicing yoga and used it when dealing with health issues. This gives us an edge in terms of “insider” knowledge of the problem and how it was successfully addressed by yoga techniques. In my case, the health challenge was my own journey through cancer during which I used asanas, pranayama, meditation, and chanting to get through some very difficult moments of my allopathic treatment.

Go where the doors open most easily for you.

At the end of chemotherapy and radiation, my oncologist advised me, “Well, we have done everything possible for you and now it is time for you to go and enjoy your life.” I was stunned! What “life” was he talking about? I had no life—my brain was fogged, my body devoid of any energy, and I was unable to work and was deeply depressed. I had no idea what was happening and no idea how to get out of this rut. Was this the “life” he was talking about?! I recalled my husband's challenges with his health. He had gone through triple bypass surgery and was discharged after 4 days. This operation was followed by 6 months of intensive daily rehab at the hospital!

What about cancer patients? Where is our rehabilitation plan?! After we finish chemotherapy and/or radiation treatment,

many are depressed, like I was, and unable to think clearly, and often isolated from friends after long and traumatic treatments. Because the changes in our bodies were slow and gradual, we may not even realize that we are in such a bad state. And if we do, we have no clue what to do about it. We end up trying to cope with life the best we can, putting one foot in front of the other.

A few years later, I found myself studying at the Kaivalyadhama Yoga Institute in India. I was asked to do a small research project about cancer and yoga. I realized that to do so I would need some kind of



Program participants at the Kaivalyadhama Yoga Institute in Mumbai

standardized yoga protocol. At that moment, I recalled my own experiences during treatments, my oncologist's remark about enjoying life, and my husband's intensive rehab experience. In less than an

hour, the blueprint of my product was ready in my head, a 3-week residential retreat that would come to be known as Rejuvenation Retreat for Cancer Patients (www.kdham.com/cancer). I found my business partner, booked the venue 6 months ahead, and went to work on creating marketing materials. That was the beginning.

The product addressed the very apparent void in allopathic treatment for cancer that I had directly experienced myself. The end of treatments is a very difficult time for most cancer patients, when they are at the lowest point of their lives. While there may be some free asana classes available here and there once or twice a week, the truth is that at such difficult times cancer survivors need much more.

We need the knowledge and understanding of where we are and what can we do about it. We need to be guided from

passivity and victimhood to empowerment. We need positive experiences over time, proving that we are able to get better and that healing depends on us, not the doctors. My own experience also dictated that I should not limit the product to asanas and pranayama but use all known yogic techniques—chanting, meditation, yoga nidra, mudras, and even yogic counseling. I appreciated that patients must be taken out of their own environment to break their routines that had calcified over the last 12 to 24 months of cancer treatment—hence, a three-week residential retreat. And so I arrived at the product that was ideally suited to a very obvious and pressing need.

Look at the health and yoga experiences of your own life and the lives of those who are close to you. Because it is still only the beginning days of this industry, you will find a lot of yet untapped opportunities for creating value for those with health challenges.

In whatever you decide to do, find the way to measure effects of your yoga therapy intervention as objectively as you can. Speak to researchers to find out what research tools are best in your case. We are developing a new market. Word of mouth is very important for marketing purposes, but objective data are even more important.

ANNE DOUGLAS **Polish Your Niche**



Anne Douglas, RYT-500, is the director of trainers and a senior iRest® teacher for the Integrative Restoration Institute, where she co-teaches trainings and retreats with iRest

founder Richard Miller, PhD. Anne also holds professional certification as a Kripalu Yoga Teacher, a Phoenix Rising Yoga Therapist, and a Holistic Lifestyle Coach.

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In my early days as a yoga therapist, I would promote my practice to my yoga students by giving out business cards and flyers. These marketing materials invited them to deepen or customize their practice, work with challenging poses, or explore what I called the "Issues in the Tissues"—unintegrated events from the past that remain as tension in the body. It was actually the latter that brought most

clients to me, many of whom had exhausted all other forms of healing to finally find their way to me.

Around 2000, I began to offer yoga therapy classes based on the prevalence of chronic issues such as stress, anxiety, depression, fibromyalgia, myofascial pain syndrome, insomnia, and chronic fatigue. The classes were very well attended, and participants were hungry for natural interventions. Many of these class participants became private clients. In addition to our time in session together, I would offer customized practice recordings of iRest-Yoga Nidra that they could take home. This has proven to be a powerful resource for clients—they love to walk away with a tool in their hands.

I consider referring a client when we are no longer making progress or I feel uncomfortable about seeing them again. For me, it is that simple.

I now travel and teach yoga therapy workshops and iRest-Yoga Nidra trainings and retreats internationally. I offer yoga therapy sessions online and over the phone to an international clientele. It's a win-win situation because the clients are in the comfort of their own home and I am in the comfort of my home office. Typically, these yoga therapy sessions are a simple form of conversation or co-meditation that help clients to unconditionally meet and feel their symptoms as messengers that can convey powerful insights for action or change.

Yoga therapy has such a broad reach, regardless of culture or nationality. In one day, I can be talking to several clients from all over the world—Australia, New Zealand, Canada, and the United States. I'm always sure to leave my name and contact information on all of my printed materials so that students know where to find me if they are ever that way inspired.

For several years, I practiced yoga therapy in a collaborative care medical clinic that was owned and operated by a brilliant medical doctor. She had a team that consisted of a psychologist, an osteopath, an ayurvedic nutritionist, a chiropractor, a massage therapist, an acupuncturist, an intuitive healer, and several yoga therapists. We would have weekly meetings to discuss our clients in order to tailor treatment and support them best. When each practitioner shared their observations of the client, it would inform all the other practitioners and deepen their sense of how to best proceed and complement what had already been

offered by one of our colleagues. It was an inspiring work environment that created profound healing for clients and could be a fruitful model for the future of yoga therapy.

Although it was helpful to begin my yoga therapy practice by catering to a general market with a diversity of needs, I learned that I needed to develop a particular area of expertise that I am passionate about. When I was working with clients with varied needs, I would often feel more tired at the end of the day. In contrast, when I started to work in the niche that I am passionate about (Issues in the Tissues), I got energized by each session and didn't feel drained at the end of the day. Also, because there are so

many yoga teachers and yoga therapists out there now, it helps to have a particular niche for which you are known.

Over the years, my biggest professional challenge has been to trust my intuition enough to move with it with my clients. In a way, it is risking being wrong or "off" to see that the quiet voice within is actually often right.

I have also learned that having healthy boundaries is a great way to support my clients. This includes finishing at the agreed time, being clear about what needs I'm willing or capable of working with, and being willing to refer clients when it is out of the scope of my ability. It also extends to personal care. Given my workload, I am constantly checking in with myself to make sure that I practice what I teach. While my yoga and meditation practices make me more and more sensitive and thereby more effective and intuitive in my work, they also help me to clear my own nervous system daily. It feels like wiping the slate clean, like an etch-a-sketch toy that you shake clear of all the imprints. **YTT**



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