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ARTICLE



## Trauma- Sensitive Yoga as an Adjunctive Treatment: The G.R.A.C.E. Model

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### ABSTRACT

This was an exploratory study on the perceived benefits of one trauma- sensitive yoga program for women who self- selected to attend the program to improve their mental health. The participants in this study were women from the United States between the ages of 20–60 years old. Participants attended one of two six- week trauma- sensitive yoga groups utilizing the G.R.A.C.E model, a format developed based on Emerson’s trauma yoga guidelines and modified by the instructor. The themes of the weekly classes in this format include grounding, reconnection/relatedness, awareness/acceptance, and compassion and empowerment. The participants of this study completed pre- surveys and post- surveys. The results of the surveys indicated that participants perceived improvements in self- care, embodiment, and mood. These results show that trauma- sensitive yoga may have benefits beyond the treatment of specific diagnoses that could be applied to a variety of population.

### KEYWORDS

Embodiment; self- care; trauma- sensitive yoga; creativity in counseling

## Introduction

The clinical world is beginning to recognize the importance of somatic or body-based interventions for clients who seek treatment for symptoms of depression, anxiety, chronic stress, trauma, and other mental health challenges. Current research reflects on the benefits of these forms of treatment as clinicians explore the often-untapped benefits of working with the body. These benefits include greater embodiment and the creation of safety within the body (Herman, 1997; Rhodes, 2015), two areas therapists can spend a great deal of time cultivating. Yoga, tai chi, dance, drumming, and other forms of movement-focused treatment are now being utilized as co-current treatment formats at locations across the country (Van Der Kolk, 2015). Yoga as an adjunctive treatment is recognized as one medium through which individuals can work on finding relief from various mental health conditions and find empowerment (Kraftsow, 2014).

The research on the various forms of mental health challenges and diagnoses that have been treated through trauma- sensitive yoga is wide and varied (Doria et al., 2015; Emerson, 2011; Pascoe & Bauer, 2015; Schweickle & Donoghoe, 2016; Sharma, 2014; Sullivan et al., 2017; West et al., 2017). These studies show yoga as an effective treatment modality for issues such as trauma, anxiety, stress, and depression. Multiple researchers have noted the effectiveness of yoga for individuals who have experienced trauma, including Van Der Kolk

(2015), Emerson (2011), and West et al. (2017). Trauma-sensitive yoga can be utilized for treating other diagnoses as well. After completing a systematic review, Pascoe and Bauer (2015, p. 280) state that yoga appears to “improve positive affect and decrease depressive and anxious symptomology in diverse populations”, although they note that many of the studies had small sample sizes. Pascoe and Bauer (2015) note that individuals experiencing mood disorders may benefit from the treatment model, and that this practice assists at least partially by empowering individuals with the ability to manage their own care. As Kraftsow (2014) states, in trauma-sensitive yoga, the emphasis is on how yoga techniques can assist individuals to manage their specific symptoms and to take a more active roll in their own self-care (Herrick & Ainsworth, 2000; Kraftsow, 2014). Although the overall research has a tendency to focus on specific diagnoses, it is reasonable to consider that individuals who may experience symptoms relating to trauma, anxiety, or depression may benefit from this format, even if they are not formally diagnosed. The format may also be utilized to work on issues relating to day-to-day stress management (Sharma, 2014). Benefits could include better management of daily stressors, a better sense of embodiment, or improved self-care (Alexander, 2013; Impett et al., 2006). As Emerson (2015, p. 6) states, yoga can be used to “practice feeling and choosing what to do in the body”.

The research presented in this article seeks to provide feedback on the perceived benefits experienced by the participants within one trauma-sensitive yoga program. This program was open to the community (although a closed group once formed) and participants were not required to have a specific mental health diagnosis to attend. The majority of the participants were concurrently attending individual therapy for issues related to trauma, stress, anxiety and depression. In addition, as the research rarely includes a glimpse into what takes place within each week of a treatment group (Pascoe & Bauer, 2015), this article will discuss the format entitled “G.R.A.C.E.” that is being utilized with success in one program in Michigan. G.R.A.C.E. is an acronym for the primary themes of Grounding, Reconnection/Relatedness, Awareness and Acceptance, Compassion, and Empowerment that the program utilizes. This paper will explore the reported benefits that participants have shared as one example of a yoga approach that has assisted with symptoms of mental health challenges. There is still much to understand and discover about how to deliver yoga approaches that will positively impact individuals who are experiencing distress, however this paper attempts to give some insight into one approach and the benefits perceived by participants.

## **Purpose of study**

The purpose of this study was to gain greater understanding of the participant experience in two six-week trauma-sensitive formatted yoga groups. No specific diagnosis was required to attend the group, and no specific measurements regarding diagnostic criteria for trauma, anxiety, or depression were taken. The trauma-sensitive yoga groups were designed with the awareness that the participants had possibly experienced symptoms of trauma, and with the belief that all individuals would benefit from the interoception and reflection that is a part of this format. The G.R.A.C.E model, developed by the instructor, was created as the intervention. The participants were asked to complete a pre-survey and post-survey to offer feedback about their experiences within the group. This exploratory study seeks to explore if and perhaps how a trauma-sensitive yoga class may benefit individuals who feel they need

additional support and thus have elected to take the program. While research has shown clear benefits relating to specific diagnoses, it is unknown if there are benefits beyond the symptom reduction discussed in these studies.

### **The model: trauma-sensitive yoga: G.R.A.C.E**

The G.R.A.C.E. model was developed by Raechel Morrow BSW, E-RYT, Certified Yoga Therapist. Morrow is the founder of Grand Rapids Healing Yoga (GRHY) Institute for Healing Therapies, now renamed The Body Mind Being Institute. The Body Mind Being Institute is a certified yoga school recognized by the Yoga Alliance to offer Registered Yoga Teacher (RYT) trainings in addition to private and group yoga class offerings (Grand Rapids Healing Yoga, 2019). The trauma-sensitive methods are informed by several trauma related texts (Emerson et al., 2009; Levine, 2012; Nolan, 2016; Van Der Kolk, 2015) as well as the Trauma-Sensitive Yoga Facilitator Training that Morrow completed at the Trauma Center at the Justice Resource Institute, in Brookline, MA (Grand Rapids Healing Yoga, 2019). The Trauma-Sensitive Yoga format developed by Emerson (2015) has been thoroughly researched and replicated and is now a specific program training yoga instructors who are therapists in how to combine yoga and mental health therapy (Emerson, 2015). This format includes many of the same themes that were utilized by the instructor for the G.R.A.C.E. program, including interoception, bringing choice, taking action, and being present. However, this founder has adapted the model from the Trauma Center to fit within the G.R.A.C.E. model for work with clients at her location.

The G.R.A.C.E. model is a six-week trauma-sensitive yoga series. Each class has a specific theme (Morrow, 2019). The first session focuses on the theme of Grounding. Grounding is used as an activity to begin to create safety in the body and to cue the parasympathetic system to engage (Sullivan et al., 2018). An example of a grounding activity is to sit in a chair with one's feet on the floor and notice any sensations in the feet. The student brings attention to the feet and notices the pressure of the feet on the ground. Grounding can also be explored through the use of breathing techniques, because as Emerson (2015) states, "breath provides many opportunities to feel things in the body" [p. 122]. These and other grounding techniques are further developed in the following sessions. The second session theme is Reconnection and Relatedness. Reconnection focuses on the relationship to one's own body through embodiment cues that bring participants continuously back to the present moment's sensation in the body. Relatedness is the ability or opportunity for participants to genuinely relate to the facilitator (mirroring attachment). The third session focuses on Awareness and Acceptance. One example of using awareness in a yoga class is to cue the class to become aware of the sensations taking place in one part of the body, such as the bent front leg in a Warrior I position. Acceptance is considered a key piece of the format. Weintraub (2004) states that acceptance is necessary to develop control over symptoms. Acceptance could be brought up by encouraging participants to acknowledge any discomfort taking place in the bent front leg during this position, and to accept that it is a temporary condition. The fourth session explores Compassion, which often utilizes meditations on being kind to oneself throughout the class. Participants are often encouraged to explore self-compassion, perhaps by noticing the way they are speaking to themselves in the head during class and trying to find more positive self-talk statements to practice. The fifth session is based on Empowerment, which can be offered to the class by

providing options within the various yoga positions and allowing participants to select the option that works best for their bodies. The ability for an individual to be presented with a limited number of choices (two or three at the most) is a primary component of treatment according to Emerson (2015). The sixth session ties the themes together in an embodied and integrated experience. Each of these themes are woven into a series of postures similar to what would be taught in a typical yoga class; however, the trauma-sensitive yoga course will be aware of the reactions that may take place with the use of certain yoga poses. Some positions will be avoided in this class format, such as Happy Baby, as it can create a sense of vulnerability, particularly for participants who have experienced a sexual assault. Other positions or variations on positions may be specifically utilized to target symptoms of various mental health challenges (such as inversions for symptoms of anxiety) or to explore certain sensations in the body (Weintraub, 2004). Within the six-week series, therapeutic applications are offered as psychoeducation to group members. Participants are educated about mind and body connection as it relates to interoception and mindfulness, effective action and choice making, personal agency and the priority of self-care, as well as reclaiming connection or establishing connection to one's own body as a form of empowerment (Grand Rapids Healing Yoga, 2019).

Each class began with the yoga instructor/therapist welcoming the participants and offering a reminder about the importance of participants making choices for themselves regarding their own needs above adhering to the structure of the class. The yoga instructor's languaging was intentionally non-coercive, and the yoga movements were described as offerings and invitations rather than commands. Typically, several possible options were provided for more challenging poses, along with an invitation to rest when needed. Each class included a warm-up, which involved an invitation to notice breath or an offered breathing exercise. The yoga instructor then introduced the theme of the class and there was an offering to set a personal intention for the practice. The classes included traditional additional yoga movements (asanas) offered with a variety of choices (2–3, typically starting with the least challenging and building up to a more difficult level) for how the movements could be executed. Kramas, or levels, of poses were explored, so that individual students could select what was best for them and had knowledge of a less physically demanding position they could return to. For example, in the first krama of a series, anjaneyasana (low lunge with back knee on floor) might be in the sequence. In the second krama, a low lunge (with back knee off the floor) might be a part of the sequence, however students could make the choice to return to the previous offering of having the back knee on the floor for additional support. Psychoeducational and reflection materials were provided throughout the classes. For example, when discussing breath, it might be mentioned that elongating the exhale can assist the parasympathetic system to allow the body to relax. The class ended with rest (Savasana) and an integration of the class theme.

## Methods

This was an exploratory study utilizing secondary data collected by the instructor from two trauma-sensitive yoga groups to determine what the experience of the group members had been and if it was beneficial to their overall mental health. The two trauma-sensitive yoga groups were six weeks in length and led by a registered yoga instructor with specialized training in utilizing yoga for the alleviation of mental health challenges, as well as

a bachelor's degree in social work. Some of the individuals in the groups may have also worked with this instructor or another mental health therapist on an individual basis regarding their mental health challenges during the time of the group, however this information was not formally collected. The instructor of the yoga groups gathered pre- and post-group unmatched data from the participants to explore the experiences of the class participants. After the class was completed, the founder of the program/instructor of the groups and this researcher desired to utilize the data gathered for publication and applied for Human Review Board approval. Western Michigan University's Institutional Review Board (project number 19-01-25) granted approval to analyze and publish the results as secondary data after the conclusion of the groups.

The participants in the two trauma- sensitive yoga groups were women between the ages of approximately 20 to 60 who resided in a mid-sized city in Michigan at the time of the program. It is noted that while the class was based in a trauma- sensitive format, participants were not necessarily individuals who have experienced trauma, as this was not a requirement of the group and was not measured. The overall goal of the class was to assist women in improving their overall mental health, particularly in areas such as self- care practices and embodiment. All individuals who completed one of the six- week yoga groups were invited to participate in the study. Exclusion criteria included any individual who did not participate in the six- week groups. Of these participants, six completed both the pre- and post-survey, and all 10 of the participants completed a post-survey. Although this sample size is minimal, due to the exploratory nature of the study, it was determined that this did include useful information on the changes noted by the participants over the course of the six-week group.

Pre-surveys were sent to the registered participants of the trauma-sensitive yoga group through an invitational e-mail. The participants were informed that if they completed both the pre- and post-surveys, they would be offered a 50% reduction in the cost of an additional six-week trauma- sensitive yoga course. The e-mail informed participants that the data would be used to continue to improve the work of the agency within the community. The pre-survey included the following questions: 1. What interests you about this course?, 2. What do you hope to experience through the six weeks?, 3. What change do you want for your life that this course may help you with?, 4. Describe your current self- care, 5. Describe your current sense of satisfaction and purpose in life. Following these questions were three rating scales asking the participant to self- measure their current levels of stress, energy, anxiety, and connection to their bodies on a scale of 1 (very low) to 5 (very high) and one scaling question asking how often the participant felt sadness, hopelessness, or felt 'blah or down'. These questions were not written to determine a specific level of symptomology, but rather to allow participants to note their current feelings and give the instructor a general sense of the challenges of the participants in the class, thus no validated rating scale was utilized.

Following the completion of the six-week group, the instructor sent participants an e-mail inviting them to complete a post-survey. The post-survey included the following questions: 1. Describe any changes you experienced after the six weeks. 2. Please explain how this course may have impacted your ability to take effective action. 3. What aspects of this course were most useful or valuable? 4. What are you doing for self- care? and 5. How would you improve this course? The questionnaire included rating scales regarding the current level of stress, anxiety, level of embodiment, and how often the participant felt

down, sad, lonely. In addition to these questions, several questions regarding the instructor's skill and responsiveness and the organization of the content of the class were listed.

The pre- and post-surveys were de-identified, then sent to the primary and secondary researchers for further analysis. Unfortunately, the instructor did not correlate the pre- and post- questionnaires to allow to measure change in individual participants. Due to the small number of participants, qualitative software was not utilized, and t-tests were not performed. The data was examined by two researchers familiar with trauma- sensitive yoga for themes that resulted from the data. As well as possible with the small size of the sample and data, grounded theory methods were utilized (Glaser & Strauss, 1967). Several codes were created, and the codes were analyzed for themes and patterns. The primary themes regarding benefits are discussed.

## Results

The participants in the two six- week trauma- sensitive yoga groups shared their experienced through the pre- and post- surveys. Post- surveys in particular were useful to develop an understanding regarding the participants' experiences in these groups. Due to the lack of a validated scaling system and matching of pre- and post- survey participants, these results will focus on participants' experiences in the areas of self- care, perceived feelings of stress, sadness, and negative emotions, and embodiment.

The area with the largest improved reported growth was the area of self-care. After the six weeks, most participants noted an improvement in their self- reported ability to participate in a self- care routine. One participant noted that she is now "better able to take time, even just a few minutes, to be still when needed." Another stated that she can "take additional time during the day to breathe and relax my body." One participant noted that she is now able to take time just for herself, to "just be." As self-care is an area many individuals often neglect, this increase is a positive change for these individuals.

Perceived feelings of stress and sadness were areas with a high amount of reported symptomology. After six weeks, participants reported an improvement in their levels of stress and sadness. At the beginning of the study, participants did not report a high level of problematic symptoms in the area of feeling sad, however they did report an improvement in this area upon completion of the study. One participant noted feeling "more awaking and excitement for the future." Another participant noted, "I feel so empowered and confident. I feel a deep change in my ability to ask for what I want and set healthy boundaries." This positive change in looking toward the future and asking for what is needed is also challenging for many individuals in treatment. Negative emotions were often a challenge for this group of women; however, the trauma- sensitive yoga groups appeared to help shift this. One individual noted a new ability to "feel an emotion in my body before my mind goes down a normal pathway and being able to identify and pause in that." By slowing down and noticing these emotions in the body, it seems that there was greater ability to work toward change in those emotions.

The participant's embodiment, another positive area of experience, also improved by over the six weeks. Interestingly, this is an area that many of the participants reported as being highly important to them. One participant noted, "I feel more connected to myself, which lets me be more present and then feel more connected to others." Another stated that she experienced "increased physical and emotional self-awareness." It seems that the six-

week course was able to help participants improve their connections with both self and others. Participants appear to have an improved connection to the space around them. As one participant noted, “I was attuned to how I entered spaces, especially spaces where I was ‘new’ . . . [and] what role my body took on before my mind even formed a thought.”

Within the ability to be embodied, several participants noted being more mindful of their activities and how they feel during these activities. One participant stated, “I believe this class has made me more mindful with how I carry myself throughout this world and how big a part my ego has with my everyday life. I now look for ways on how my body is responding to the ego and situations I encounter.” Another participant noted that she is better able to be “present in the moment” and can forgive herself when she is being critical of herself. The ability to not internalize negative thoughts came up with several participants. One person stated she would “try not to internalize and be mindful with how I’m responding with my body.” The connection to the body appeared important for the women in connecting with both mindfulness and embodiment.

## Discussion

The data collected in this study is congruent with the literature related to the positive feedback from participants who participate in trauma-sensitive yoga formats due to a variety of symptomology and mental health needs (Clark et al., 2014; Cochrane et al., 2019; Dylan, 2014; Javanbakht, 2008; Nguyen-Feng, 2019; Nolan, 2016; Murphy et al., 2019; Price et al., 2017; Rybak & Deuskar, 2010). In addition, this study showed experiences similar to the currently published research in areas of improvement of self-care and embodiment (Alexander, 2013; Herrick & Ainsworth, 2000; Impett, 2006). The literature as well as this study highlights the overall positive impact of trauma-sensitive yoga. As noted previously, many of these studies were focused on a specific diagnosis, such as PTSD, or issues, such as domestic violence. For example, Price et al. discuss a twenty-week study of trauma-sensitive yoga for women who experience chronic symptoms of PTSD found that the women had a 64% decrease in PTSD symptoms after a two-month follow-up (Price et al., 2017). In addition, a twelve-week study of trauma-sensitive yoga for survivors of domestic violence reported that the trauma-sensitive approach was important to the positive outcomes for participants due to the emphasis on the survivors making choices for their own bodies, which was similarly a primary reported benefit in the G.R.A.C.E. program (Clark et al., 2014). While more data can be captured with longer studies, the findings of positive outcomes, even among studies of shorter duration, such as the six-week G.R.A.C.E. model in this study, are encouraging.

Discussion on improvements in self-care, the reduction of negative emotions and symptoms, and improved embodiment are evident in the current study, as in the previously published research. The G.R.A.C.E. model presented here, like other trauma-sensitive yoga formats, encourages a new connection to self and others. Each of these authors note the importance of engaging the physical body in the healing process in order to create change in the therapeutic context. The G.R.A.C.E. model and trauma-sensitive yoga approaches offer an opportunity to reconnect with the body through embodiment and improving the attention to the needs of the self through self-care.

It is noted that the benefits reported in this and other studies may have a wider impact than the utilization of trauma-sensitive yoga formats as adjunctive treatments for specific

diagnoses. While trauma-sensitive yoga is often viewed as a methodology for treating trauma, such as with veterans (Van Der Kolk, 2015) or with survivors of domestic violence or sexual assault (West et al., 2017), it can be applied to additional circumstances. Research has already explored the use of trauma-sensitive yoga for additional diagnoses such as anxiety, depression, and substance use (Doria et al., 2015; Dylan, 2014; Javanbakht et al., 2008; Pascoe & Bauer, 2015; Schweickle & Donoghoe, 2016; Weintraub, 2004), showing positive benefits and reduction of symptoms. However, this format can also benefit those who do not have a formal diagnosis as well. The use of yoga for professionals who experience stress and could improve in areas of self-care are discussed by several studies (Herrick & Ainsworth, 2000; Valente & Marotta, 2005). Therapists and nurses in these studies have reported improvements in their self-care practices, which enables them to work in high stress environments. This current study of the G.R.A.C.E. model of trauma-sensitive yoga showed benefits for a group of women in areas of self-care, embodiment, and perceived improvements in mood. This could be applicable and supportive for many individuals.

## Limitations

The writers of this study acknowledge several limitations. This includes the small sample size, lack of matching pre- and post-test results by the instructor, short duration of the study, and the lack of evidence-based screening tools which may provide a more thorough perspective of participants' symptoms before and after attending the yoga treatment series. The study also lacks demographic data beyond gender and age of the participants. For example, ethnicity, race, sexual orientation, economic status, physical health, specific mental health diagnoses, and education levels are unknown. At this time, there is also no long-term follow-up with the participants, which could be beneficial in understanding the long-term impacts of yoga practice.

## Suggestions for further research

The writers of this study suggest further research in the use of trauma-sensitive yoga for individuals who have experienced distressing health and mental health symptoms. It is suggested that individuals do not need to have a specific diagnosis, such as PTSD or an anxiety disorder, in order to benefit from participation in a trauma-sensitive yoga group.

Further study is suggested to explore the advantages of dual training for clinicians as yoga instructors in order to better assist their clients in connecting with the body, but also to mitigate the impacts of secondary traumatic stress. Secondary traumatic stress can result from the relationship between a professional or family caregiver and a person who has experienced trauma (Pryce et al., 2016). Van Dernoot Lipsky discusses the difficulty for care providers in distinguishing their own voices and experiences from their trauma-affected clients, and asserts that to be good trauma stewards, professional care providers must be willing to be helped themselves to prevent the development of serious symptoms, burnout, and unethical practices (Lipsky & Burk, 2009). It is hoped that clinicians with a background in trauma-sensitive yoga may have additional tools to keep them from experiencing the potential impacts of secondary traumatic stress.

Social Work education programs at the bachelor and master's degree level may also benefit from students engaging in yoga training for credit in their elective courses. Many university programs offer certificate programs in holistic health, school social work, policy and trauma. The writers of this study suggest that trauma- sensitive yoga training be considered as a modality in social work education. It would be beneficial to have a body of social workers who are also yoga instructors trained in trauma- sensitive yoga to increase the use of somatic interventions in the social work field. The benefits of yoga are not only applicable to clients. Students (Dol, 2019) and clinicians (Valente & Marotta, 2005) may be able to mitigate the impacts of secondary traumatic stress and life stress with the use of yoga in their personal and professional practice. Further study in this area is recommended.

## Conclusion

This study suggests that the G.R.A.C.E. trauma- sensitive yoga model provides a replicable structure that can be modified to appropriately serve individuals experiencing distress. Other recent studies discussed previously suggest that yoga is an appropriate adjunctive treatment for individuals experiencing distressing symptoms related to a variety of diagnoses. The writers of this study suggest that the G.R.A.C.E. model provides positive outcomes for the women who attended these group sessions, particularly in the areas of improved self- care and embodiment. Continued study and support in the use of trauma- sensitive yoga approaches for individuals who struggle to manage their symptoms is encouraged, as well as the possible utilization of this model for the providers who offer treatment options as a way to reduce the impact of secondary traumatic stress and improve their overall self- care practices.

## Conflict-of-interest statement

There are no financial relationships that would influence the content of the submitted work. There are no patents, copyrights, or royalties relevant to the submitted work at this time. There are no other known activities that could have influenced the content of the submitted work.

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