“Yoga is What You Want it To Be”

Untwisting the meaning of yoga, health and well-being in a Southern California community

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Amsterdam, 13 August 2001
“Yoga is a perfectly practical system of self-culture”

Swami Sivananada (1985:93)
# TABLE OF CONTENTS

- **ACKNOWLEDGEMENTS**
  - i

- **SUMMARY**
  - ii

- **INTRODUCTION**
  - 1.1 Background Information
  - 1.2 Statement of the Problem
  - 1.3 Literature Review
  - 1.4 Yoga
  - 1

- **OBJECTIVES AND RESEARCH QUESTIONS**
  - 10

- **METHODOLOGY**
  - 3.1 Study Location
  - 3.2 Study Type, Variables and Data Collection Techniques
  - 3.3 Study Limitations and Deviations
  - 11

- **PERSONAL REFLECTIONS**
  - 4.1 Becoming the Embodiment of Research
  - 4.2 Fieldwork Conditions
  - 4.3 Yoga and the Researcher
  - 14

- **THE FIELD**
  - 5.1 Description of Sample
  - 5.2 Description of the Field
  - 5.3 Yoga in the Here and Now
    - 5.3.1 Yoga in the Media
    - 5.3.2 The Quest for Credibility
  - 17

- **YOGA AS CURATIVE**
  - 6.1 Physical Health: Healing from Illness
  - 6.2 Physical health: Healing from Illness-Related Issues
  - 6.3 Mental Health
  - 22

- **YOGA AS PREVENTATIVE**
  - 7.1 The Physical Dimension
  - 7.2 The Mental Dimension
  - 30
• YOGA AS HOLISTIC: Mind, Body and Spirituality
  8.1 The Reduction of Scientism 32
  8.2 Yoga as a Spiritual Healing Phenomenon 34

• LAY DEFINITIONS OF YOGA
  9.1 Yoga and the American Body 36
  9.2 “Working in” vs. “Working out:
      Yoga in the Prevalent Fitness Center Context 36
  9.3 The Disconnection of the Mind and Body 38
  9.4 The Contextual Integration of Yoga in Life 38

• DISCUSSION AND CONCLUSIONS 39

• RECOMMENDATIONS 43

• REFERENCES 45

• APPENDIX 49
  Appendix 1. Asanas (Yoga Postures)
  Appendix 2. Time magazine cover and diagram

Picture on cover page from Sivananda Yoga Vedanta Center, Learn Yoga in a Weekend. London: Dorling Kindersley, p. 90.
ACKNOWLEDGEMENTS

This thesis could not have been created without all the helping hands from all the people around me. Greatest appreciation goes to my advisor Els van Dongen, whose brilliance and humor kept me sane and laughing during the manifestation of this work and to Sjaak van der Geest for his constant support and wisdom throughout the course of the year.

Gratitude is rightfully due to all my family members at home, who impatiently wait for my return. To all of my supportive friends who may feel that “maybe LeAnna leaves for gone too soon”, but I know that real bonds endure our separate journeys, wherever they may be in the world. Thank you to those at the yoga studio who so willingly and openly shared their personal stories. One of the most difficult parts in this production was to accurately illustrate the beauty of each person’s unique story in the context of his or her own life. It is my hope that I have done so.

I only could have survived the intensity of this year with my dear AMMA family who is now spread all over the world, but will always be central in my heart. With deepest love and appreciation, I will cherish this experience here forever.

Ultimately, this is dedicated to Mama, who is my anchor in the storm of life and continually amazes me with her uncanny ability to open up the magic and light in the souls around her. With utmost respect, this is for you. Thank you for giving me the courage to soar.

LeAnna Fries ☯

Amsterdam, August 2001
SUMMARY

The use of 'alternative' medicine is rapidly increasing in the Western world, of which ideologically conflicts with ideas of health and healing within the dominant biomedical framework. Despite the skepticism of traditional medicine, complementary approaches are still expanding in use by the popular sector, and in some cases are even being adapted into the public sphere.

Complementary medicine includes a diverse collection of healing techniques not generally acknowledged by the scientific community, such as yoga. In Southern California, yoga is being embraced by individuals who perceive benefits from such a traditionally Eastern practice, but has been culturally reinterpreted in this Western context. From the point of view of those who do yoga, this study aimed to explain the lay perceptions of the efficacy of yoga and explore perceived benefits in relation to health, however that is culturally defined. Furthermore, why do people first turn to yoga and what are the perceptions of its curative and/or preventative healing powers, if any?

This primarily qualitative study was completed by using traditional anthropological research tools, collecting data through participant observation and in-depth, open-ended ethnographic interviews. Because of the academic program's compact schedule, six weeks of field work was the time allotted to conduct this study.

It was found that the practice of yoga brings about physical, mental, and in some cases, spiritual benefits in the lives of the sample. Yoga went beyond the physical movements and affected the lives of people as a whole. For people, yoga was equated with healing and was a means by which perceived health was created and maintained. Moreover, it can be interpreted that this practice was a symbolic statement about how people are more than simply physical beings, but are thinking, feeling, dynamic and holistically-oriented individuals.

This thesis was completed for a Master's degree in Medical Anthropology at the University of Amsterdam.
INTRODUCTION

1.1 Background Information

In the last decade, the use of complementary and alternative therapies¹ has been rapidly increasing and shows no sign of losing its momentum in the Western world. According to a study published back in 1991 by the New England Journal of Medicine, it was estimated that 34% of the United States adult population had used at least one such therapy over a period of one year (Eisenberg 1993:246). In a publication released just seven years later, that number jumped to 40% (Astin 1998:1548). At present-day that figure has risen to approximately 50%. To accommodate the expanding interest in the popular sector, three quarters of medical schools now have classes in the subject and even biomedically rooted health insurance companies are offering compensation for varying types of nontraditional healing methods (Greenwald 2001).

Along with this rapid increase in the use of alternative therapies is the coinciding popularity of yoga spreading throughout the United States. The trend can be observed at the grassroots level, but is also perpetuated by prominent public figures. From Madonna to the White House staff on Capitol Hill, and from Jane Fonda to top lawmakers, diplomats and investors, yoga is spreading at all levels (Friedman 1997). Supermodel Christy Turlington was on the front cover of the mainstream news magazine Time in the month of April, captured in an advanced yoga pose. “The Power of Yoga” was the feature article of the edition (Corliss 2001). It states that 15 million Americans practice yoga, twice as many who did it just five years ago. Also, 75% of the health clubs in the United States now offer yoga classes to their members. Commonly cited benefits of yoga include improved strength, flexibility and stamina. People also rave about how it makes them feel better, relieves depression, reduces anxiety, helps in weight loss, aids in quitting smoking and eliminates insomnia. Countless more testimonials of the benefits of yoga can be found, stating that yoga has saved marriages and improved school grades. In addition, yoga and other alternative medicines are now common practices among pregnant women (Gibson 2001:44).

¹ The terms alternative, complementary, unconventional, unorthodox and nontraditional are used interchangeably throughout this text.
Despite the popularity and apparent efficacy of yoga and other alternative therapies in people’s lives, “there appears to be a constant tension between institutionally marginal, but popular, healing practices and the central medical establishment” (Goldberg and Hodes 1989:21). It is argued that there is a quest for authority and legitimacy in one’s own occupation, therefore creating a struggle for power and a conflict in ideologies between alternative and biomedicine (1989:22).

1.2 Statement of the Problem

“There seems to be no data to substantiate the argument that yoga can heal,” states Dr. Yank Coble, an endocrinologist at the University of Florida (In Corliss 2001:62). In order for a therapy to be considered efficacious by Western medicine, it must be scientifically proven under rigorous randomized clinical trials where the dependent variable can be clearly identified. This is where the conflict between the Eastern and Western paradigms of healing enters the picture. The former philosophy looks at health with a holistic approach, taking the entire person’s life in perspective, where all parts are interconnected as a whole. The latter framework analysis is done with a microscope, reducing the person to specific scientific compartments and disease categories, separating the mind from the body.

Despite Coble’s statement, there have been studies completed in the past and present within the biomedical establishment that scientifically prove the efficacy of a yoga practice. For example, just some of the recent studies in leading science journals include Orr and colleagues’ (1995:36) research that shows that yoga relieves stress and improves blood glucose control. Using 12 healthy volunteers, Sung et al (2000:185) documented how yoga reduces blood pressure associated with mental stress; yoga as controlled breathing was found as the most effective technique for recovery from mental stress compared to classical music and sounds of nature. Janakiramaiah et al (2000:255) stated that Sudarshan Kriya Yoga can be a potential alternative to drugs for depression (although the conditions of the study were not double blind). In the preliminary study of Garfinkel et al (1998:1601), it was found that a yoga-based regimen was more effective than wrist splinting or no treatment in relieving some symptoms and signs of carpal tunnel syndrome. The often-cited Ornish study (1990:129) concluded that patients with coronary heart disease can
reverse their condition by following a vegetarian diet and practicing yoga. Critics of Ornish’s study claim it was the strict diet and not necessarily the yoga that played the most role. These are just some of the more recent scientific publications.

Even though there are studies done on yoga and other alternative methods of healing within the Western biomedical framework which offer biomedical explanations for their efficacy, during the literature review I was unable to find any medical or social scientific studies exploring the lay perceptions of the efficacy of yoga. From an emic point of view, how do mainstream, non-scientific practitioners of yoga in the Western context explain how it ‘works’ and, consequentially, why do they choose to practice it? How do they experience yoga related to their health and what does it mean to them in the context of their lives?

1.3 Literature Review

To more effectively answer these exploratory questions, a foundation of theoretical background will be introduced in this section before the presentation of the study findings. For clarification, unconventional forms of health care are defined as those practices “neither taught widely in U.S. medical schools nor generally available in U.S. hospitals”. The most commonly used unorthodox methods include relaxation techniques, chiropractic and massage (Eisenberg 1993). Other popular complementary therapies include but are not limited to homeopathy, acupuncture, acupressure, herbal medicine, aromatherapy, massage, and music therapy. Even though these techniques differ from one another, they are compiled together in one category since they deviate from the biomedicine taught in medical schools and practiced in hospitals. Furthermore, Tuula Vaskilampi an anthropologist from Finland, offers another definition of non-orthodox healing systems. She suggests two open categories for classification: (1) how healing practices are learned and transmitted and (2) based on their content (Vaskilampi 1991).

Because of its rapid growth in popularity and prominence, British anthropologist Sharma states that “it will not be long before the term ‘alternative’ – with its connotations of a minority cultural taste or deviant activity – will no longer be appropriate.” She illustrates, for example, the significance of the former National Consultative Council for Alternative and Complementary Medicine changing its name to the British Council for Complementary Medicine, dropping the word ‘alternative’
In her book, *Complementary Medicine: Practitioners and Patients*, Sharma clarifies the difference between the more or less interchangeable words: complementary and alternative. Practitioners tend to use the word ‘alternative medicine’, implying a parallel but independent system. Sharma prefers the term ‘complementary medicine’ instead since it conveys the possibility of cooperation with modern medicine, but in this text, the words will be considered synonymous in meaning (ibid.:6).

There is published literature on the reasons why people turn to complementary and alternative medicines (CAM) in general. Many people want to leave no option untried in their healing practice and such alternatives are devoid of adverse side effects that can commonly be found in modern medicine (Ernst 1995:356). Leslie (1995:283) discovered that yoga was the most used complementary treatment for cancer patients in an inpatient and outpatient oncology setting in a large London teaching hospital. After experiencing yoga with the context of their illness, these patients desired more availability of such alternative medicine because they perceived it to benefit their quality of life.

Moreover, in a national study researching why patients use alternative medicine (Astin 1998:1548), three primary hypotheses were tested to explain such use: (1) CAM users are dissatisfied in some way with conventional treatment; (2) they see alternative treatments as offering more personal autonomy and control over health care decisions; and (3) the alternatives are seen as more compatible with the patients' values, worldview, or beliefs regarding the nature and meaning of health and illness. Based on the data collected from a mail survey distributed to 1035 randomly selected Americans across the country, Astin concluded that alternative medicine users are not necessarily dissatisfied with conventional medicine, but they find the nontraditional methods to align more with their own values, beliefs, and philosophical orientations toward health and life.

Along with identifying some reasons for practicing alternative medicine, Astin also collected demographic information of the users of nontraditional medicine. His research shows that a poorer health status and higher education were predictors of alternative health care use. Education was interpreted to have emerged as a predictor of alternative health care use because it may increase the probability that people will (1) be exposed to nontraditional therapies through their own reading on the subject;
(2) educate themselves about their illnesses and types of treatments; and/or (3) question authority of conventional practitioners (Astin 1998:1552). Also in Astin’s study, racial/ethnic differences did not predict use of alternative medicine, neither did income nor age.

Eisenberg (1993:246) found that alternative medicine use was not limited to a particular segment in society and spread through all demographics. The frequency varied somewhat among socio-demographic groups, with the highest use by non-black persons, with more education and higher incomes, between the ages of 25 and 49 years. Again, five years later, Eisenberg et al. (1998:1569) published another study that discovered that the use of alternative therapies in 1997 was not confined to any narrow segment of society. It was found to be less common among African Americans (33.1%) than of other racial groups (44.5%) (P=.004). The data, reflecting the U.S. population, are representative of a predominantly white population. The sampling frame had limitations to those who spoke English, and who had telephones (so to conduct the interview), in addition to the low response rate.

Conventional vs. Alternative Medicine

Dutch medical sociologist Aakster (1986:265) states that there are at least two realities that exist within the Western health practice: “the official and the unofficial, the legal and the illegal, the bright, scientific and heroic hospital doctor vs. the unscientific therapist or quack.” He conceptually divides these two conflicting realities in the figure below (ibid.:268):

<table>
<thead>
<tr>
<th>Concept</th>
<th>Conventional Interpretation</th>
<th>Alternative Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Absence of disease</td>
<td>Balance of opposing forces, internally and externally</td>
</tr>
<tr>
<td>Disease</td>
<td>Specific, locally defined deviations in organ or tissue structures</td>
<td>Body language indicating disruptive forces and/or restorative processes</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>Morphological</td>
<td>Functional</td>
</tr>
<tr>
<td>Therapy</td>
<td>Combating destructive forces</td>
<td>Strengthening constructive forces</td>
</tr>
<tr>
<td>The patient</td>
<td>Passive recipient of external solutions</td>
<td>Active participant in regaining health</td>
</tr>
</tbody>
</table>
In addition to differing in health and healing ideologies, conventional and alternative medicine significantly contrast in their financial, social and political support systems. Medawar (1997:75) discusses the significant impact of what he identifies as the three main power centers in (Western) medicine: government, professionals and the pharmaceutical industry. Biomedicine claims to conduct highly scientific and "objective" clinical trials, but is in reality influenced by these three power-houses. Because alternative medicine is not backed by these essential players in the whole scheme of things, it is struggling to earn its credibility and legitimacy in the already fixed biomedical establishment. Lee (1998:166) states that in the Western world, biomedicine is both structurally superior (referring to the relative standing in power, prestige, and wealth) and functionally strong (referring to the extent of the medical impact upon the society as a whole); letting in no "intruders" that would threaten the existence of their survival, credibility and dominance in society.

Sharma (1992:2) explains that the common recurring themes between complementary and orthodox medicine boil down to these issues: control and responsibility. The question is raised as to what degree the patient is to be responsible for his/her own treatment and the degree of control over the therapeutic process therapists may claim. It is based on the assumption in orthodox medicine that the doctor has the sole responsibility for therapy, where the patient simply 'complies' or 'fails to comply' with treatment. With complementary medicine, there is more self-responsibility for one's healing.

With this self-responsibility also comes the factor about the level of confidence one has concerning the perceived efficacy of the therapy, whether it is a traditional or nontraditional course of treatment. These beliefs, expectations and other "non-scientific" factors in the healing process is not something new to medical science, but the mind-body connection is often disregarded in pursuit of seemingly concrete scientific explanations. Moerman (1979:61) looks at the influence of mental, symbolic, and cultural phenomena on the physiological state by making these three general categories that augments "problems" in contemporary biomedical research: psychosomatic illness, biofeedback and host-pathogen interaction. In addition, the placebo effect, being defined as the desirable psychological and physiological effects of meaning in the treatment of illness, continues to cause "problems" in the scientific world (Moerman 2000:52, 1979:62-64). All of these prove that both psychological
phenomena correlate with physiological symptoms and indicate our ability to consciously control our physical body. Since this ‘mind-body’ connection is difficult to explain within the biomedical model, anything that cannot be rationalized within its rigid framework is consequentially classified and simply disregarded as the ‘placebo-effect’.

The problem with the Cartesian dualism of mind and body found in western medicine is that there implicitly requires mediation between the two realities, which is “inevitably elusive or mystical, at best difficult to define” (1979:62). Moerman argues that the hypothalamus mediates these two aspects of human existence and concludes that “there are not two systems, mind and body. We need no mediation. There is no little man, no little ‘self,’ sitting there transforming (transducing) thought into action. Thought is action” (1979:65-6). Symbolic healing is ‘effective’ because of the unitary conceptualization of the human organism which leaves out mystical explanations. Thus, from an anthropological perspective “the construction of healing symbols is healing” (1979:66).

Yoga has proven to be healing in people’s lives and because of the experienced efficacy, yoga itself becomes a healing symbol. More specifically, from an yogic point of view, this “unitary conceptualization of the human organism” is maintained through the power of the breath. The breath is said to be the connection between the mind and the body. This idea is not just the belief of the yogis themselves, but also can be found by members in the increasing mainstream yoga community population.

Even though Western medicine may seem fixed in orientation, it is apparently adapting to the desires of the ever-increasingly powerful CAM in the popular sector, of which the latter perceives an efficacy in such practices. However, these adjustments towards CAM only reach to an extent so that it continues to be situated in the ideology of the biomedical framework. For example, in late 1998 the U.S. government-funded National Institute of Health (NIH) sent a press release (via the Centers for Complementary and Alternative Medicine Research, NCCAM) stating that:

...there is a relatively paucity of data available to demonstrate convincingly the safety, efficacy, effectiveness and mechanisms of these CAM practices. A similar conclusion was reached in a 1990 report on unconventional cancer
treatments by the U.S. Office of Technology Assessment. This report urges a systematic analysis of alternative treatments and their effect on major disease, health and wellness (U.S. Office of Technology Assessment, OTA-H-405, 1990, p.255) (emphasis added).

To illustrate these changes, just two years later the same NIH printed a 25-page publication called Depression: What Every Woman Should Know (NIH Publication No. 00-4779, Aug 2000) through the National Institute of Mental Health. Following the list of treatment options for those suffering from depression including medication, psychotherapy and even herbal therapy (i.e. St. John’s wort)\(^2\), is a sub-category entitled The Path to Healing. It mentions that it may also help to “participate in activities that make you feel better, such as mild exercise or yoga” (2000:18-19, emphasis added)\(^3\). Before the NIH was not convinced of the efficacy of CAM’s, but now it suggests it may help in relieving depression? There appears to be a conflict-of-interest between government, professionals and the pharmaceutical industry and its alternative, popular and seemingly effective competitor.

1.4 Yoga

Yoga (meaning yoke or union in Sanskrit) was developed over 5,000 thousand years ago, but the exact date cannot be precisely stated. At least by the year 500 BC, yoga emerged as a full-fledged tradition in India. There are four main ancient texts which contribute to the body of yoga knowledge including the Vedas, the Upanishads, the Bhagavad Gita and the Yoga Sutras. Many modern yogis\(^4\) consider the latter text, written by the sage Patanjali between 300BC and the 3rd century AD, as the heart of yoga and the source of their lineage. The Yoga Sutra of Patanjali describes the eight limbs of yoga including 1) yama (restraint), 2) niyama (observance), 3) asana (posture), 4) pranayama (breath control), 5) pratyahara (withdrawal of the senses), 6) dharana (concentration), 7) dhyana (meditation), and 8) samadhi (super consciousness or bliss). If successfully followed, these paths can lead to the experience of liberation or self-realization, the main goal of yoga (Birch 1999).

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\(^2\) The publication notes that it “should be taken only after consultation with the doctor or other health care provider” (2000:17).

\(^3\) Isn’t the goal of relieving depression to “make you feel better” anyway, which they imply yoga can do?!

\(^4\) A yogi is a male practitioner of yoga; a yogini is a female practitioner.
Yoga is said to be an ancient and extended system of psychotherapy, which creates the patient to serve as his/her own psycho-analyst. It has a physical and mental objective which is both for Eastern and Western people (Yogi Vithaldas, no date:27-34). According to the sutras of Patanjali, yoga is defined as “the ability to direct the mind exclusively toward an object and sustain that direction without any distractions,” (Desikachar 1999:149).

In the Western context, yoga is said to be (1) a Hindu theistic philosophy teaching the suppression of all activity of body, mind, and will in order that the self may realize its distinction from them and attain liberation; (2) a system of exercises for attaining bodily or mental control and well-being (Merriam-Webster 2001). The second definition is the most lived and experienced by the yoga practitioners in the Western world, possibly because of the cultural idea of the physical body being the symbol of the key to health. Alter (1999:44) examines literature that explains, in the context of the American holistic health movement, that physical fitness has been integral to the development of so-called mainstream biomedical theories of disease, contamination, and pathology (Berryman, 1982, 1992; Park 1992, 1994; Rippe 1992). In recent times, it has moved out of the clinic and has been transferred to gymnasiums (Green 1986, Mangan and Walvin 1987, Smith 1972), thus out of the scientific domain and into that area of recreation and self-improvement.

Because of this focus on physical self-improvement, Hatha yoga is the most common branch found in the western world. Hatha yoga can be roughly considered as ‘physical yoga’, derived from the ancient Sanskrit words Ha (the sun) and Tha (the moon). In yogic tradition, one’s body is considered a microcosm of the universe and the goal is to be in harmony with the source of all creation (Dukes 1960:47-8). When Westerners often think of yoga, they often imagine lurid physical feats or postures (asanas) in pretzel-like positions. The asanas have their importance, but they are only part of the whole; the exercise is not just physical, but mental. The aim of the practice is to rise above the body and have mind control (ibid.:55-6).
OBJECTIVES AND RESEARCH QUESTIONS

During the fieldwork, data collection and data analysis stages, the research foundation flexibly focused on exploring the following two general objectives:

- To identify the lay perceptions of the efficacy of yoga.
- To discern and explain why people are attracted to yoga.

By focusing on the above objectives, during the course of the study I strived to answer, as much as is possible, the following specific research questions:

Choosing yoga:

- Why do people turn to yoga? For curative, preventative and/or other reasons?
- Why is yoga chosen over other methods?
- How is a yoga practice combined with any other types of healing?
- How do people explain the efficacy of yoga compared to other methods of healing?

Efficacy of yoga:

- If people experience benefits in practicing yoga, how do they explain its’ efficacy?
- How do they compare yoga with other types of healing, either traditional or nontraditional?
- What are the beliefs about the union of mind, body and spirit which is claimed to be attained in yoga? Is that related to perceived health? If so, how and why?

Yoga in the holistic context:

- How does yoga fit in the day-to-day context of people’s lives e.g. in respect to their health, work, family, other obligations etc.?
- How has it affected people’s lives as a whole e.g. different perceptions and outlooks on life, changes in well-being etc.?
- What benefits, if any, do people perceive from their yoga practice?
METHODOLOGY

3.1 Study Location

The fieldwork took place at a hatha yoga studio in Orange County located in Southern California. When I began data collection for the study, the studio had only been open and running for nine months. Laine, the director and main instructor of the studio has had 30 years of experience as a psychotherapist "specializing in the mind-body connection". In addition to her own studio, she is also employed by the city as a yoga teacher for the city-run classes and combined, teaches in total up to 25 classes a week. Classes are divided up into Gentle Stretch, Level One, and Level Two, lasting one hour and fifteen minutes in length.

Also offered at the studio are meditation groups and yoga and meditation workshops, in addition to psychotherapy sessions. She has run Yoga & Meditation retreats for 30 years, leading approximately two per year throughout California, Arizona, and Utah.

The studio lies in Orange County with a population of 2,867,900 inhabitants. The demographics of the people living in the surrounding cities vary. Median household income ranges from $54,636 to $74,347, with the county median being $59,190. In 1998, ethnicity around the entire area was broken down into the following percentages: Caucasian 63%, Hispanic 18%, Asian/Pacific Islander 10%, African American 5%, Other 4% (OCBC 2001), although those specific demographics do not precisely reflect the consumers in the immediate fieldwork area. Based on the data collected from the studio, the informants still classify in the upper-middle class to upper class income bracket, but the vast majority of the yoga students were Caucasian, with an Asian minority (See 5.1).

5 All names have been changed in this thesis to ensure confidentiality and anonymity.
6 It is to be noted that my mother is the owner of this selected studio. For more details please see Chapter 4: Personal Reflections
7 Yoga class enrollment with the city classes doubled from last year, from 60 students in 2000 to 120 in 2001.
3.2 Study Type, Variables and Data Collection Techniques

Because of the topic of my study and its six-week time limitation, the research was explorative and descriptive in nature. The medical anthropological data was collected through open-ended, in-depth ethnographic interviews as well as with participant-observation, which was the initial step and essential tool out in the field. Based on past yoga experiences, classes culturally vary between and even within yoga facilities. I attended and participated in the regular yoga classes to get a feel for the specific environment itself, be immersed in the atmosphere for which the yoga students may come, and socialize with potential informants for my interviewing. Depending on my scheduled interviews, I would attend class from one to three times a day, five days during the week. Over the course of the allotted research time, I experienced the Gentle Stretch, Level One and Level Two yoga classes, both in the mornings and in the evenings. To gain more of a perspective, I visited two other yoga studios which served as tools to compare and contrast diverse aspects regarding the selected fieldwork location.

In my research I initially sought after maximum variation within my study population at the studio. However, because of time limitations, realistically I was only able to focus on main variables. Such quantifiable variables that I obtained when interviewing informants included age, gender, race/ethnicity, occupation, education level and history of yoga practice (i.e. length and frequency of practice).

In the first week I conducted two pre-test interviews, to assess and refine my research objectives and questions, interviewing techniques and overall research confidence. Then, after taking into account the conditions of my unique field circumstances over the course of the first week, I decided, with the approval of the studio owner, to put out an interview sign-up sheet for those that would be interested in sharing their experience with yoga. I explained my situation as a graduate student in Medical Anthropology and requested their name, phone number and best time to call if they were interested. The sheet was placed next to the class sign-in paper on a table by the door, where the yoga students sign in for the day’s session. In addition, Laine subtly made a brief announcement about my studies and mentioned the

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8 Most of the research carried out in alternative health therapy classifies as explorative in nature since the popularity of CAM is newly being recognized by the modern medical establishment (McGregor 1996:1317).
interview sheet before or after yoga class. Within about four days I had 18 names on paper and interviewed everybody but one on that list, due to interviewee scheduling problems (for more details about the sample, see 5.1). The vast majority of my sample came from this voluntary interview sign-up and three informants were recruited from the snowball data collection technique.

The majority of the in-depth, ethnographic interviews lasted between 45-75 minutes and most were fully transcribed within two days. I also conducted some telephone interviews for those with whom it was more convenient, and finished the entire project with a total of 22 informants. The original aim of the study was to have only 10-15 informants due to the time restriction, so I therefore found myself very assiduous in the data collection stage. Before all the interviews began, I ensured confidentiality in all aspects of the research and anonymity in the print of the final thesis.

Naturally, these ethical considerations go beyond simply the informant interviews, but the confidentiality encompasses all the yoga students I conversed with and observed while at the studio. Several spontaneous Field Group Discussions came up where people shared personal stories about yoga and their life which only improved the quality and depth of the research. Participant-observation was key for enhancing and contributing to the data collection, analysis, and interpretation on a constant basis. Without this traditional anthropological orientation of “grasping the native’s point of view”, my informant data would have meant little without witnessing, experiencing and attempting to understand their yoga experience first-hand.

3.3 Study Limitations and Deviations

In my original proposal I stated that I would administer a questionnaire to the students at the yoga studio, so that I could gain some fundamental knowledge and be able to incorporate some quantitative data to complement the qualitative-focused work. Although mainly because of time pressure and the high interview response rate, I temporarily abandoned the idea of the questionnaire to focus my energies on interviewing. By the end of the research, I still found that time did not allow for such a quantitative data collection technique this time.
Again, the time limitation also prevented me from attending more yoga classes at other studios, which would have only enhanced my work.

There are also study limitations relating to the means of data collection. The snow-ball technique was implemented, which was used for three of the informants (all of which were in the 22-25 age bracket). Furthermore, there can be found to be a bias with the sign-up sheet since those who were listed were voluntary participants, thus excluding the ones who preferred not to share. To the best of my ability, I talked to as many of the yoga students I could to explore any possible hesitations for signing up, beyond personality factors. During the study I was concerned about this bias, but became somewhat at ease when numerous yoga students independently approached me. On different occasions they asked me about the progression of my research and informed me that they had wanted to sign up, but they had seen many names on the sheet already. They willingly offered their contact information if I still needed assistance. Laine also informed me that students approached her and told them that they desired to help if it was still needed. In fact, the voluntary aspect of the sample selection is a bias indeed, but since the objectives of the research were to explore the appeal of yoga and the reasons for practice anyway, it is logical to attract those willing informants.

This brings up another bias in the research in regards to the field location. Since Laine, the yoga studio owner and teacher, is my mother, I was curious as to how that was going to play itself out in the field. I was not introduced as “the daughter”, but that fact organically became known to the studio members as the days went by. My family connection is certainly a research bias, but I do not believe it to be a limitation. Actually it was a beneficial aspect since Laine seems to be very respected and well-liked, and those same impressions apparently trickled-down to me, being a relative. Of course, it is possible that I lost some potential informants who were hesitant to have an interview because I was a family member.

• PERSONAL REFLECTIONS

4.1 Becoming the Embodiment of Research

“One doesn’t do anthropology, one is...” my advisor shared with me during the course of my fieldwork. I had just shared with her how my life was not just revolving
around yoga, but that I was actually becoming an embodiment of yoga and the research. I awoke to 7:00 a.m., 8:15 a.m. and 9:30 a.m. yoga classes and ended the day with sessions at 5:00 p.m., 6:15 p.m. and 7:30 p.m., where I continued to have dreams about yoga during the nights. In between I drove in the car with my mother back and forth, from the home to the studio discussing yoga. Once home, we would talk about it even more. She continually helped me by giving stacks of books, magazines and other publications related to my research. I would watch yoga classes on television (about six air during the week on cable!), plus relevant news programs and shows. I tried to gather opinions about my study topic from everybody I came in contact with, such as my dentist, neighbors and people at the grocery store. Even at the end of it all, I found myself saying, “I need to go to yoga”, just to escape it all! Who would’ve thought?!

In the end, my biggest piece of advice is that before one starts a research project, one must ensure an enduring fascination and interest in the topic to be studied, for it becomes you.

4.2 Fieldwork Conditions

One unique condition with my fieldwork situation was working with my mother. Personally I had no hesitations about working at her studio and found it extremely beneficial for my research, as well as personally. Essentially I had unrestricted and unlimited access to my key informant, so that I could always explore yoga topics at any time, whether at the studio or at home.

Initially I was concerned with my perceived position at the studio being both “the daughter” an almost honorary insider, and being “the researcher”, the outsider. From the beginning, I was overwhelmed by the kindness and hospitality of everyone there. Quickly I transitioned from a self-perceived outsider to a warmly welcomed insider. I assumed that it was because of my family connection, but I observed that the same warmth spread among all the yoga students in class. Since I was not singled-out in my perception, I do not feel that the situation adversely impacted on my data collection in the field, but that is still clearly a researcher bias.
4.3 Yoga and the Researcher

I feel that I need to express my personal feelings about yoga in relation to the research experience. Introspection is an influential factor in anthropological, as well as any research, for absolute objectivity is impossible (there only exists varying degrees of subjectivity). Since I was not only studying yoga from an etic point of view, but also practicing yoga itself for participant-observation, I had a six-week intensive into the meaning of yoga in this specific community. I have been practicing yoga off and on most of my life, but I had not truly realized and understood its real effects until after this experience. The physical benefits that I observed was an increase in flexibility and strength, which are commonly stated attractions to yoga (which I will expound upon in the later chapters). I am enjoying the physical benefits, but the most potent is the improvement related to mental health. By learning to calm the mind, anxiety does not creep up on me anymore and I am more aware of my mental states. Others even shared with me that they noticed how I lost weight, had clearer skin, and radiated a visible “glow”.

I have always been the skeptical one in the family about yoga. I did not deny it nor embrace it, but when I was young I found that I rarely mentioned my mother’s work to others. In my extremely conservative hometown of predominantly wealthy, fundamentalist Christian, Republican Bush-supporting, white inhabitants, some people would laugh and others would say nothing at all, holding back judgment about my mom’s work. These social-political conditions have stimulated my interest of the expansion of yoga in this specific cultural context. There is still a stigma in society perpetuated through the media about yoga which conjures up images of people twisted up in pretzels, chanting Om, and exploring the unknown and feared “mystical” side. If I may say, after this research, I can now partially see why yoga is spreading in this context. In summary, as a researcher I can say that based on the data collected from the in-depth interviews and even from personal experience, yoga works for people. It works in the context of their culture, their jobs, their families, their physical and mental illnesses and in their overall lives. In the following chapters are ethnographic accounts of real people who have experienced the power of yoga in relation to their life experiences. This thesis strives to simply open the door for exploring and understanding the yoga phenomenon in the Western context.
**THE FIELD**

5.1 Description of Sample

For this brief six-week research period, my main data source came from 22 in-depth interviews to collect qualitative data. The demographics of the sample include the following characteristics in the subsequent two figures.

In summary, a bulk of the data came from middle-aged, educated, Caucasian women who have been regularly practicing yoga two times per week. The vast majority worked full-time and were married with children.

<table>
<thead>
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<th>Characteristic</th>
<th>Informant (#)</th>
<th>Informant (%)</th>
</tr>
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<tbody>
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<tr>
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<tr>
<td>Female</td>
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<td>81.8</td>
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<tr>
<td><strong>Age</strong></td>
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<td>56-65</td>
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<tr>
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<tr>
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<td>40.9</td>
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<tr>
<td>Post-college graduate</td>
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<td>Missing data</td>
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Yoga History of Interviews (n=22)

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<th>Characteristic</th>
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<td>6 months - 1 year</td>
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<tr>
<td>Frequency of practice</td>
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<tr>
<td>Seven days a week</td>
<td>4</td>
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</tbody>
</table>

5.2 Description of the Field

The yoga studio lies in an almost secluded, quiet corner of a shopping center among surrounding trees. It is 1100 sq ft (335 sq m) in area and has windows on three sides overlooking the hills. Other than an office desk, couch, and a small table by the entrance, there is mostly empty space that is, until the yoga students entered. The morning classes were typically small, ranging from as little as three people on one occasion, to about seven. The evening classes were the most full with a range from ten students to a packed room of twenty-one. As the weeks went by, the classes became larger everyday with new students interested in trying yoga. The students formed a soft semi-circle in the room, centered around the instructor’s mat at the front.

During the interviews there were many comments concerning the studio atmosphere. Informants described their space having a “safe”, “non-competitive”, “peaceful”, “secure”, “very quiet”, “nurturing and caring” environment with a community feeling. One described it as a “community outreach in a non-threatening environment.” Some informants talked about the “positive group energy”, where people come together with similar intentions to surrender, release and “search their souls physically.”

What I discovered was the most essential aspect in conducting research at this particular studio was that the instructor did not openly share her personal philosophy
about yoga to the class. When I visited other studios, some of the teachers, in a sense, preached their yoga beliefs and its perceived benefits, with the students inevitably being influenced by that input to varied extents. At my chosen field site, the teachers simply guided the class with instructions for the physical movements and little more. The meaning of yoga was left to be individually interpreted based on personal experience with his/her own practice. This aspect was key so that more diverse data could be obtained during the course of study. For background, however, I will add the general philosophy of the studio owner, for she feels that

yoga is the best type of therapy that you can do, for it includes the body with the mind. I believe the most effective psychotherapy connects the mind, body and spirit because it causes us to open up at all levels. When we’re quiet and we’re open, issues surface. It allows an opening for psychological material for us to look at and process. It reduces stress, which psychotherapy is all about as well. The yoga postures specifically help us unconsciously deal with specific psychological issues. So it’s a correlation of the poses—for example, for dealing with anxiety; for dealing with depression. This is a whole new area being looked at by the yoga community.

In fact, a yoga student informed me about a book by BKS Iyengar that was just recently published. The 416-page book is called *Yoga: The Path to Holistic Healing* (2001) and features a detailed “Yoga Therapy” section which prescribes certain poses for certain medical conditions. Just some of the ailments addressed in the text are associated with the heart and circulation, the respiratory, digestive, urinary, hormonal, immune, brain and nervous systems, in addition to skin, bones, joints, mind and emotions and specific men’s and women’s health issues.

5.3 Yoga in the Here and Now

5.3.1 Yoga in the Media

When the field research began and I delved into the topic, I was amazed by the simultaneous media attention yoga received. It would clearly be possible to write an entire thesis about yoga in the media, but for brevity sake I will simply touch upon the topic within this chapter. About two weeks before I arrived, I was surprised by the *Time* April 23, 2001 edition, of which news magazine has a world-wide audience of 27.7 million, including 20.8 million in the United States (Pearson 2001). It published a cover page article entitled “The Science of Yoga” with well-known supermodel
Christy Turlington shown in the Rooster pose (see Appendix for magazine cover). The cover states that “Millions of Americans are discovering this ancient exercise. Here’s the skinny on why it makes you feel so good.” When one opens up to the article, the name is changed to “The Power of Yoga” and examines the question, “Can it really cure what ails you?” (Corliss 2001:54). The author examines the validity of yoga and actually has an illustration on “How it Works” comparing the “The Mystical” Eastern View and “The Scientific” Western View (2001:61, See Appendix).

Then, less than a week after I arrived in the United States, The Today Show, one of the top-rated morning news programs, aired a segment on the popularity of yoga and also had Christy Turlington on the show as a guest (May 14, 2001).

Moreover, one week later yet another news program, NBC Nightly News with Tom Brokaw, featured a segment on the practice of yoga.

Lastly, a couple days before I was leaving the field to return to Amsterdam, Oprah, the number one rated and highly respected talk show in the U.S., did an entire show with yoga guru Rodney Yee (June 29, 2001). In fact, this was not the original airing of the yoga program, but was a repeat of the same show that first hit television screens on April 6. It also featured positive yoga testimonies from such celebrities as Madonna, Ricky Martin and actress Meg Ryan.

Therefore, there has been a considerable amount of media attention about yoga in the mainstream society which has certainly impacted on those in the culture. Laine informed me that any media attention on yoga, especially as found from the Time publication and the Oprah Show, unfailingly results in consequent phone calls at her studio for people interested in starting classes. Some informants also shared with me that they had read the article or seen the television programs. This behavior observed in the field falls in line with Bourdieu’s theory about how especially those in the middle classes attempt to imitate the elite. The emulation of the lower distinguishes and classifies them from others/inferiors (cf Falk 1994: 83). In congruence with Bourdieu’s theory, middle class yoga students thus emulate the yoga trend observed in print and broadcast media to identify with the elite class, as a result separating themselves from the lower classes.

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9 I assume that “science” is a key word in magazine sales, where the original article title of “The Power of Yoga” would not create the coveted sales like “The Science of Yoga” would.
5.3.2 The Quest for Credibility

Not only does yoga thrive in a cultural context, but also in a social and political one. In these aforementioned news programs there was a common thread of relating yoga with science, questioning yoga’s validity in an historically science-dominated culture where science has more or less been equated with Truth, originating from the scientific revolution in the 17th century. Even beyond the current production of the mainstream media, the yoga community itself is on a quest for “scientific” validation. One publication that I discovered while in the field was the brochure for the 6th Annual Yoga Journal Convention named “The Transformative Practice of Yoga”, being held in Estes Park, Colorado lasting through September 24-30, 2001. The convention offers Continuing Education for Teachers and for the first time, The Therapeutic Applications of Yoga which “delves into specific applications of yogic practices as healing tools and as complementary adjuncts to conventional medical treatments” (2001:2). This first-ever professional gathering of renowned yoga teachers, therapists, medical doctors and physical therapists will discuss the way to integrate yogic practices to aid healing and health in such areas as asthma, depression, cancer, chronic pain, immune deficiency conditions, heart disease, stress management, back pain and others (2001:4).

Likewise, there is a movement in India to convince the scientific community about the efficacy of yoga. The research department of the Krishnamacharya Yoga Mandiram (KYM) state that there are skeptics in modern medicine about such an alternative practice since (1) The whole approach has been prescription oriented, that is a specific asana for a specific problem; (2) Most methods used have been non-scientific; and (3) The non-objectivity of many of the research that has been done before. At KYM, these medical doctors aim to evaluate yoga for different therapeutic needs in a Western scientific manner, and have already completed such research projects. Some have examined yoga correlated with high blood pressure, migraines, cardiac health, bronchial asthma, schizophrenia, anxiety and depressive neurosis (2001:4).

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10 Yoga Journal is a highly respected publication that is circulated world-wide and features world-renowned master yoga teachers.
Another means of earning public credibility in the United States has been through the creation of The Yoga Alliance, an organization pressing for national standards for yoga teacher education. The aims are to (1) improve teacher quality; (2) give people a baseline to choose teachers; and (3) give a specific meaning and standards to teacher certification. It is hoped that standardization will enable connections with established systems like insurance companies and will create a form of professionalism. Despite the intentions, some yogis criticize the movement for creating such a “controlling bureaucracy” which is contrary to “the feeling and inner spirit of yoga” (White 1999:1-4).

With this personal, social, political and cultural background, we may now begin to examine the contextual meaning of yoga in people’s lives in this exploratory study.

**YOGA AS CURATIVE**

6.1 Physical Health: Healing from Illness

Charlotte started yoga a little over two years ago when her Indian doctor recommended it to her to deal with her chronic headaches since her anti-inflammatory medicine Naprosin® (Naproxen) was not proving to be effective. She has been a registered nurse for 28 years and was the Director of Clinical services at one of the most prestigious children’s hospitals in the country. With her high-powered job, she was responsible for 185 hospital staff members and $7.7 million in budget. Being scientifically-minded and firmly rooted in Western medicine for most of her life, she was quite hesitant to start such an alternative therapy as yoga at first. Therefore, she began in the privacy of her own home with video tapes and at present day attends class regularly, three times per week.

When I started this, my hands were 12 to 15 inches off the ground [while doing a forward fold, see Appendix]. I couldn’t touch the ground. I can get my palms flat now. I had so much tension in my shoulders and neck I could not look easily over my left shoulder for a lane change. My head turns now. I had chronic pancreatitis—I was in a real bad accident in 1994—and I had sciatica so bad that when I got fatigued, I had shooting pains down my left leg. They’re gone. Totally gone. I think I told you about the healing of my heart? Now, is it meditation? Is it yoga? Or was it just alternative methods of healing? I had a

11 Sciatica, characterized by pain radiating into one or both buttocks and descending the back of the leg, results from compression of the sciatic nerve at the base of the spine or compression of the spinal roots that contribute to the sciatic nerve (www.webmd.com).
mitral valve prolapse\textsuperscript{12} that was diagnosed by two different physicians. It’s gone now. Call it what you want, but I’m a believer. I am a believer through and through and I know that miracles happen.

When she talked to some physicians about the healing of her mitral valve prolapse, she said that

They told me that the first two cardiologists were wrong. They never asked me ‘How did it feel before?’ Well, like a floppy fish. ‘Have you had that since?’ No. ‘Do you have palpitations now?’ No. ‘Did you have palpitations before?’ Yes. They never asked me these kinds of questions.

She passed out two times and had two doctors validate it on EKG. Based on her own medical education and personal experience with the illness, she states that “I knew what it felt like—that was in ’83. Then in 2000 it’s gone.” She used to be on 80 mg of medication per day and now takes half the dose. Even though her heart is healed from the prolapse, her heart now races when she is not on the beta-blocker medication. With this change in medical condition, how does yoga work in the context of her illness?

Yoga, with its’ forward, back and side to side [motion], manipulates the chakras which Western medicine doesn’t begin to recognize that kind of interaction between a body and an internal source. You have to take a pill to make something change inside the body, when with yoga you can manipulate that. The power of the breath does so much more. Talk about learning to calm yourself and you can prove—looking at clinical things between blood pressure, heart rate, respiratory rate—you can prove those things we spot. So I believe it’s really the chakras that work simultaneously in conjunction with yoga to make it work.

Ian has another view on how yoga works. At 35 years of age he was diagnosed with the rare disease \textit{ankylosis spondylitis} (called also \textit{Marie-Strümpell disease}). “It is a form of rheumatoid arthritis that affects the spine, and is characterized by inflammation of the facet joints, and inflammatory changes of the stabilizing ligaments of the spine, known as enthesopathy. It affects males almost exclusively. There is stiffening of the spinal joints and ligaments, so that movement becomes increasingly painful and difficult. When it runs its full course, it results in bony ankylosis of the vertebral joints, which may extend to the ribs and limit the flexibility

\textsuperscript{12} A mitral valve prolapse is a condition in which part or all of the mitral valve in the heart is pushed back too far during ventricular contraction (www.webmd.com).
of the rib cage, so that breathing is impaired” (www.webmd.com).

He shared that during his whole life he always had a feeling of stiffness and soreness everywhere and recalls identifiable symptoms at the age of 28. It was not until 1997 when a knee injury was not healing as it should, that his health complications started to come together. He was sent to a rheumatologist who formally diagnosed with the rare disease in January 2000 and was told that there was no cure. Immediately following the diagnosis, he researched websites about his condition and found that the biggest recommendation for someone living with such disease to be exercise. Eight months ago, he started yoga with his wife.

I think what it does is increase circulation through deeper parts of your body and I think that circulation improves performance. I think it’s just like you can work a muscle when you’re playing a sport—you concentrate on that one part of the body. With yoga, you use greater parts of your body. It’s a greater range. It’s a wider range. I think it improves health. I was convinced so much as a child about exercise. To exercise was wrong.... I realize that now, but I recognized that 25 years ago as a child, thinking about my own body and how I felt. I think what it does—it’s all that combination of strength and stretching that are so important. Stretching opens up those parts of your body and strength increases that circulation and healing.

He continues to play sports, but mentions that what is nice about yoga is that you spend time studying your body. I feel that I spend time studying it. Well, in sports you’re not doing much of that. You spend more focus on the game. With this I get to spend time understanding how my body works and where I want to work on it.

Before yoga he was taking Pilates for six months, but “yoga took it to that next level”. What was most indicative of his healing experience with yoga was that when he began the practice, he would forget to take his Celebrex® (Celecoxib) pain-relieving medication. He says it is because he feels better and is not triggered by “feelings of achiness” as he would before starting yoga. Ian shared that his doctor, who is well-renowned and considered “the best” in the ankylosis spondylitis field, says that “I am the best patient she has ever had.... I have no symptoms at all.”

Ian described Pilates as “yoga on a machine”. It is based on Western and Eastern forms of exercise, including yoga and it can be defined as “a conditioning program that improves muscle control, flexibility, coordination, strength and tone. Pilates' work is concerned with the process itself—experiencing all movement from the inside out by focusing on the present moment instead of placing the entire emphasis upon "doing". Through continuous involvement in the process of movement, the goal is reached by a natural evolution, in contrast to a forced result.” (www.pilates.com).
Rachel has a similar healing story as a result of her devoted yoga practice. She explained that three to four years ago she had premature ovarian failure and had no estrogen in her body. This 48 year old was given a bone density test and was told by her doctor that she had osteopinia\textsuperscript{14}, thus showing signs of osteoporosis. Therefore, the physician put her on Fosamax\textsuperscript{®} (Alendronate Sodium), and then on Actonel\textsuperscript{®} (Risedronate Sodium), which the latter she has been on for a year now. Simultaneously, Rachel started “seriously” practicing yoga three times a week and walking five times a week.

One year later, she returned for another bone density test to monitor her change in condition, if any. To the shock of both the physician and Rachel herself, the test revealed that her bone density level was in the 97\textsuperscript{th} percentile, far above normal for her age and height. Rachel believes her fast recovery was due to the yoga and walking. In her opinion, yoga works since it strengthens the spine (where she says the osteoporosis is) by doing the weight-bearing yoga postures. In addition, it works because you are “taking the time to do it”; taking the time to slow down and breathe. In response to her convictions about the healing capabilities of the yoga and walking in her healing treatment, the doctor quickly asked in return, “Are you taking your medication?”

Since then, she has had three bone density tests and her results continue to soar above normal. Rachel still practices yoga, walks, and takes the medication. The doctor feels her osteopinia is gone because of the medication. Rachel strongly believes her healing is a result of the yoga and walking. Who is to say which is true?

The preceding case studies of Charlotte, Ian and Rachel clearly illustrate how yoga is perceived to serve as a healing agent for diagnosed medical conditions. Even if informants did not have a serious health ailment as with these stories, the overall belief was that yoga had the potential to cure. This opinion stemmed from the feelings of health as a result of the practice. Yoga done on a regular basis relieves built up tension in the body, especially in the shoulders, neck and back, thus curing the physical manifestations of stress on the body.

\textsuperscript{14} Osteopinia means that there is a reduced bone mass due to a decrease in the rate of osteoid synthesis to a level insufficient to compensate normal bone lysis. The term is also used to refer to any decrease in bone mass below normal (www.webmd.com).
6.2 Physical Health: Healing from Illness-Related Issues

The standard recovery time for Hepatitis C\footnote{Hepatitis C is a liver disease caused by the hepatitis C virus (HCV), which is found in the blood of persons who have this disease. HCV is spread by contact with the blood of an infected person (www.webmd.com).} is one year, but Shannon, 51, recovered from the virus in only six months and is considered a "big success story". She attributes the short recuperation time to her positive attitude and personal work in psychotherapy. However, she said that the medication made her body really weak, leaving her with a feeling of being "compressed" and "squashed". This made her want to stretch her body out and she found that "yoga was totally the answer for me and I've tried all kinds of different things".

Through the stretching, yoga successfully relieved the compression feeling she experienced as a side-effect from her Hepatitis C medication. Although, when questioned how it works, the essential part of yoga for her was not the physical aspect, but

I think that it's the self-love. I think it gets you in touch with loving yourself. For me, that's what did it...[I'm] just very much more in touch with my body. That's probably the main thing...I've never really loved my body, so it really got me in touch with myself and my body parts. We take them for granted and it got me in touch with being thankful.

In addition to the mental benefits, Olivia experienced that yoga healed her body. She has osteoarthritis in her left hip and since it is a degenerative condition, she says that she will eventually need a hip replacement operation and currently takes anti-inflammatory medication and glucosamine for her condition. For five years she has limped because of the pain in her hip, which as a result has thrown her back out of alignment. It creates sharp pain between her shoulder blades and in her neck and shoulders. This 55 year old explains that the osteoarthritis in her hip is a "lost cause", but with the yoga, she no longer has huge back pains and has more overall flexibility in her body, including in her neck and shoulders. Yoga works because it strengthens the body and "forces me to exercise all my muscles in a balanced way. Everything is worked equally."

Felicia, 64, who had two occurrences of carpal tunnel syndrome also experienced pain relief through regular yoga practice. The first time her doctor
prescribed her Feldene® (Piroxicam) that “ate a whole in my stomach” and caused an ulcer. Then, when the carpal tunnel returned for the second time about four years ago, she had surgery that did not improve her painful condition. With that previous medication experience behind her which left her in “really bad shape for a while,” after the surgery, the doctor gave me pain pills. I took a few, but I didn’t keep taking them, and I still don’t take anything. With all this nerve stuff, through the years they keep telling me to take this and take that and I tell them, ‘No, I’d rather not unless I’m really uncomfortable.’

She now goes to physical therapy every five weeks to loosen up the nerves in her shoulders, chest and down the length of her arms which has successfully decreased her pain. Because of the sharp discomfort, she explains that she was constantly in the “pain position”, with her shoulders hunched over. This posture compressed the nerves in her chest and also affected the nerves running down her arms. Felicia expressed that her physical therapists are “pro-yoga” and very enthusiastic about her three times per week yoga practice, urging her to continue. She believes that it is because they have similar theories about opening up and manipulating the body, which is healing to all parts. Her middle-eastern general practitioner is also especially enthusiastic about her yoga practice and encourages it for her health.

Likewise, Laine did not want to follow the orthodox medical treatment when she was diagnosed with ovarian cancer fourteen years ago at the age of 40. She had surgery to have the malignant tumor removed and instead of chemotherapy, became serious about yoga. After the surgery she was left with intense lower back pain and “used yoga to strengthen my back muscles and increase spinal flexibility and I live pain free today.”

Like in the previous section, the case studies of Shannon, Olivia, Felicia, and Laine demonstrate how yoga has the potential to heal on a physical level, especially concerning illness-related experiences. With those not suffering from any health-related problems, the sample commonly mentioned that yoga just “feels good”. People were not always able to clearly pinpoint the precise means by which yoga worked on a physical level, but it proved to have the capacity to alleviate unwell conditions.
6.3 Mental Health

Not only does yoga seem to have a curative dimension related to physical health, but also with the improvement mental health. Holly, 38, openly shares that I have a long history of an eating disorder. And so, during the progression of my life I’ve been through all of these sort of self-abusive behaviors, especially with exercise. You know, my body being the enemy and I used to obsessively exercise. I suffered from some anorexia for a while, and I just kept looking for the exercise that was going to make me feel good because exercise was always punishment. So I had to go out and punish myself. It had to be hard and it had to feel bad and I had to feel exhausted when I got done.

Holly started yoga about four months ago and loved the stretching experience and the use of “intimate parts of your body that you don’t think about all that much.” She also was attracted to “the quiet of it” and enjoyed the feeling of relaxation. “It’s beyond just exercise,” she says, but it expands the wealth of connecting to your body and for me it was nice because it was something that wasn’t self-abusive. It’s very self-healing and I feel like part of what’s happening to me, even though I am very early in the practice and there’s a lot that I need to learn, for the first time in a long time I feel good about, you know, feeling better about my body.

In the context of her whole life, having a physically demanding, stressful, full-time job as a pediatrician and having two children of her own to raise, she shares that her daily practice of yoga keeps her calmer and that “for my overall health, it’s been a medicine.”

At 42, Debbie also wanted to improve her mental health. Months ago she had been suffering from depression and under her doctor’s supervision, began taking Paxil. At the same time she started practicing yoga, looking for that “mental uplift”, since her usual power walking routine “wasn’t helping me ease my mind like it can do.” She now goes to class at the studio every day, even twice a day if possible because I love the increase in flexibility in my body and I love the increase in strength.... I’ve been looking at this lately—I can’t enumerate mental benefits. I can’t pull them out. I’m not seeing the dramatic kind of improvements mentally that I am physically, but I think it’s contributing to mental health, as far as more calmness. But I’m also on medication, that I’ve just completed about the same amount of time with the medication as with the yoga.
Since Debbie started both conventional and unconventional treatments simultaneously, she has found it difficult to pinpoint one clear explanation for her mental improvements, especially since it has only been one and a half months. At the six-month mark she will stop the medication and her yoga “summer camp” and see what unfolds thereafter.

Moreover, Debbie describes herself as an addictive personality, who was at one time was addicted to alcohol.

I’ve always been a seeker after things that help me mold in this world comfortably. Alcoholics anonymous was something that helped me get back to the spiritual world, to connect, reconnect with the spiritual side and it got me back to God. And that was wonderful.... I haven’t had to go to AA in years. I tend to embrace things, see the good in them and adopt them into my life and I think yoga will be that thing.

Not long ago, Josh, a 25 year old who has been practicing yoga for over a year, went to a psychologist who believed he was depressed. When Josh told the doctor that he was practicing yoga, the specialist responded

‘That’s good’ and I said, ‘well I’d rather do yoga than take medication. I think it has the same effect on me.’

What did he say?
I don’t think he really had a response for that actually. [pause] He just kept talking about my brain and my brain chemistry. [laughs]

He mentions that this mental health professional “was so motivated to medicate me.” Even as a child he vividly remembers his psychiatrist who he named “the talking doctor who liked to put me on drugs.” From the age of five to twelve he had been on medication because he was considered hyperactive and others frequently labeled him with “acting out”.

Josh practices yoga two to three times per week now while he works as an instructional assistant for students with Attention Deficit Disorder and other learning disabilities. If he has not been going to yoga classes he says that “I am off the walls” and my energy level will just keep going up and boom—it’ll just go out of my head. I’ve gotten myself into big-time trouble simply because I wasn’t able to discipline myself. And that’s something that I continually have to work on.... I need to be grounded.
Yoga is that tool that keeps him grounded. He describes that yoga is a part of who is, that it is a “rhythmic type of place to go,” where he can express his ideas and creative thoughts through the poses. As for the whole idea of the chakras, he feels that is “a little on the wild and crazy side” but explains that through yoga “you can take things that are totally external and make them internal and actually work on them through your own body.”

The previous case studies illustrate how yoga is perceived to have a curative aspect to the practice, as experienced with particular illnesses. According to them, yoga was curing on a physical and mental level since it improved, if not completely healed their conditions. In regards to the other informants who did not have a diagnosed medical condition or self-perceived health issue, the belief about the possibility of yoga’s curing potential was still a common opinion. With those without a specific illness, they discussed how yoga cured the manifestations of their stress by relaxing the muscles in the body that become tense by diverse life stresses. Even if informants did not have a curing experience with the practice, they still thought that it had the potential to serve as a curing agent.

**YOGA AS PREVENTATIVE**

Over the course of interviewing and conducting participation-observation in the field, I discovered that the general belief was that yoga had both a curative and preventative health dimension. Just as with the curative health aspect, the preventative health can be roughly divided into the physical and mental categories, for organization’s sake.

### 7.1 The Physical Dimension

Physically speaking, the number one reasons for practicing yoga was for the flexibility and strength. One informant has what she calls a weak back and therefore goes to a chiropractor. She finds that she visits him less if she attends yoga more often since “I think my muscles are stronger. I can hold the adjustments longer because of that.... It feels like I’m doing things for myself instead of having an external adjustment, if you will.” At 48, she is concerned about osteoporosis since it runs in her family, but a recent bone density test showed that she has above average bone
density. Since the results are extremely positive, she is motivated to continue her yoga practice due to its' weight-bearing poses which build the bone structure. Another female at the age of 55 also mentioned how she thought it must prevent osteoporosis due to the muscle exertion and weight-bearing exercises.

Overall, informants discussed the importance of strength and flexibility in connection with their overall health. Many commented that since beginning yoga, they rarely if ever get sick, whereas they would normally before doing their usual routine. Therefore, the muscle strengthening and stretching, boosting the immune system and also the increase in circulation experienced in yoga were seen as all-encompassing illness preventative measures.

7.2 The Mental Dimension

All in all, the most common attraction to yoga was the mental benefits lived through the practice. People mentioned how it was relaxing, calming and de-stressing. One woman added that it keeps her on an emotionally "neutral plane" which prevents the onset of her migraine headaches. She explains that these migraines began at menopause due to an imbalance of serotonin and norepinephrine in her system. Previous to that, she was an active person, but now can no longer exert herself physically with her prior activities of biking, running and aerobics, that now easily trigger her migraines.

In the open-ended interviews, almost everyone mentioned that it not only decreases stress and anxiety in their lives, but also prevents their onset. An informant said that her regular yoga practice prevents her from having panic attacks. According to many, the important key for preventative care in yoga is the power of the breath, for this is how it works and where the perceived efficacy resides. Through yoga, students learn now to breathe correctly, consciously, slowly and deeply, which stimulates relaxation.

The practice of yoga also appears to prevent self-destructive behavior towards the body since it creates a new connection with the body. There is a newly found body-awareness and body wisdom which improves body image. Sarah, 23, started yoga seven to eight months ago because

I was just so tired of hating myself. I have seen a lot of my friends go with the way of bulimia and anorexia and there comes a point when you start asking
yourself, is that good for me? Is that OK? Can I handle that? I've been very conscious about not going that way because with all the pressure of body image, especially on women.... I feel that there is a possibility for me to go that way.

With yoga, she says that she has learned to listen to her body, honor her body and is understanding the yogic philosophy of “accepting oneself and accepting everything that one’s body is saying to oneself.”

Some people compared yoga with dance, concerning its’ capacity to serve as another form of self-expression. Like in dance, it is a way to physically express emotions and thoughts, to release them from the body to prevent any possible negative psychological affects. In addition, yoga was a psychological boost for many women, empowering them in their middle age. Oftentimes they talked about doing yoga postures in front of their children, who at their younger ages, with supposedly more strength and flexibility, could not accomplish the same physical feat. There was a sense of “mom-empowerment” and self-confidence building through the physical practice of yoga.

Clearly then, these yoga students not only viewed yoga as a tool for curative purposes, but also as a means by which to prevent illness from occurring in the first place. Yoga is considered to work as a preventative measure since it is perceived to improve the physical condition of the body and promote a healthy mental state.

YOGA AS HOLISTIC: Mind, Body and Spirituality

Beyond the curative and preventative aspects of yoga, there were numerous other important reasons why the practice is so attractive. The key part of yoga is that it fits into people’s lives. It is a foundation; a box of tools. It is holistically integrated in all facets of personal, work, and family life.

8.1 The Reduction of Scientism

Lee (1998) explains that there is a world-wide movement of modernization through science. Since the scientific revolution in the 17th century, science has proven to be successful, creating a faith in it, thus emerging as a dominant ideology. Therefore, anything related to it is accepted by government and the people at large, believing that science is true and will result in progress (177-8). Scientism has led to
the technological advancement of scientific biomedicine, in addition to the acceptance of scientific biomedicine by the political authority in society. Up until now, this scientism has dominated, but has not replaced other healthcare ideologies (182-3).

What keeps these alternative methods functioning in society? One explains that

Alternative medicine can... only be understood as an answer to the basic features of modern medicine [so that the] rising popularity of non-orthodox medicine has to be related to the backlash created by inflated expectations of allopathic medicine and weaknesses in the form of delivery of that type of medicine. (Christie n.d.:1-2, cf Sharma 1992:76)

Many informants freely shared similar views concerning the dominant biomedical ideology of health. In society as a whole, the public is realizing that the pill-popping mentality does not cure all ills. The yoga students explained that Western medicine is a “quick fix” and only puts a bandage over the real problem. One adds that “the whole idea about yoga in doing those movements and breathing, is healing from within my body and not taking something from without.”

A physician who was interviewed was personally very interested in the current distrust of the medical community, as experienced in her own medical practice.

I honestly truly believe that we’ve lost that personal connection. With all the technology and the stress the doctor experienced in their training, by the time they finally get out, those humanistic qualities just get bleached out of you because you are such a toasty, crispy-critter by the time you finish your training.... Medicine over the years became so technical. We were able to get great technology, great techniques and life-saving medicines. All that was wonderful, but I think over the years we fell away from doing the emotional support or the emotional connection with your patients to where they really trusted you. I think in America we’ve created this enormous disconnect from doctors and patients.... I think that it’s our fault, it’s doctors’ fault. We’ve turned our backs on people’s deep-seeded wisdoms that people have about what they can do to make themselves better. We don’t help people turn that on.

Because of this situation, one informant feels that 50% of the popularity in yoga and other alternative practices is a sell-out, where people are taking advantage of those who are depressed and unhappy in their lives. They are searching for an answer to heal their problems and there are people who are quick to capitalize on that lucrative opportunity. He continues to add that the other 50% is that

Generally people are waking up to the fact that Western medicine is not God. It’s not the answer. It doesn’t have answers for 10% of the things that come up in our daily lives. Psychologists can’t fix our problems, because they can’t.
They can’t. Doctors, sure they’re great if you have a viral infection or you need pills or something. But even then, I would say that yoga is probably the number one thing at preventative medicine.

These changes towards the views about biomedicine are not just at an individual level, but can be seen as an entire cultural phenomenon. Alternative therapies have become popular not just because they offer a more caring approach to health than orthodox medicine but also because they correspond to, perhaps even spearhead, these changed views. Clearly people’s expectations of health, and their sense of personal involvement in it have changed. So too have beliefs about how much they can exercise conscious ‘choice’ over health and disease.... Interest in alternative therapies rarely stops at using one particular therapy to deal with an ailment when allopathic medicine has failed. The interest invariably extends into a wholehearted adoption of these philosophical concepts. (Coward 1989:196 cf Sharma 1992:86).

Thus, there is a new shift in the perception of health that diverts from the dominant scientific, biomedical ideology. How, then, are people defining their own health in their lives and how does one reach that state of optimal health?

8.2 Yoga as a Spiritual Healing Phenomenon

How is healing to be defined? In this study, yoga was also perceived to be a healing encounter of a spiritual nature. In the research completed in the context of psychotherapeutic ritual among Catholic Pentecostals, Csordas (1983:333) states that healing is of both religious and psychiatric in nature. There is a threefold process which activates and controls the healing to take place in an individual which includes the need: (1) to create a disposition to be healed, (2) to create the experience of spiritual empowerment, and (3) to create the concrete perception of personal transformation. This results in the creation of a new phenomenological world and a new self-meaning for the person as a “whole and holy person” (1983:333). For some, yoga was considered to be a time to connect with the powers that be and overall, to serve as a part of their spiritual journey.

These three stages of healing defined by Csordas can be identified in this study as well. (1) The disposition to be healed is created by the act of going to yoga class in itself. In the relaxed and peaceful atmosphere, people turn inward to spend time on oneself and separate from the perceived chaos of life. (2) Spiritual and/or personal
Empowerment in yoga is experienced through the meditation during the practice. A sense of mind over body control is achieved and that control increases feelings of individual power. Lastly, (3) students perceive a transformation as a result from their yoga practice, based on their experienced physical, mental, and/or spiritual benefits, which individually varies.

Furthermore, Wirth (1995) notes the importance of belief and expectancy within spiritual healing encounters. He found that there is a significant relationship between high expectancy in patients and healers and the effectiveness of the spiritual healing encounter. Therefore, based on the study results, high healer and patient expectancy may be important factors which can serve as predictors and facilitators of the healing process (1995:249). Josh, who described yoga as "searching your soul, physically", says that for yoga to work, "you really have to believe it. If you don't have the faith in it, you're not going to be reaping the benefits of it." People experience the various benefits of yoga on a physical, mental and spiritual level, but from the point of view of these lay practitioners of yoga, what exactly is yoga?

LAY DEFINITIONS OF YOGA

"Yoga is what you want it to be," expressed one informant. During the duration of the study, people defined yoga in such unique ways. It was viewed as a moving meditation, where one "feels something more inner". It was a "retreat," to "grab a moment of silence and calm down" so to "release" from the day's overactivity. The class is time spent solely for that individual; "it's time to do something just for me," where one can work on him/herself.

It was seen as one of many tools for coping in life; it is a foundation. A couple of the sample members stated that they felt that the yoga postures are almost organic and primitively innate that can define what it is to be human. It's not just because it's something that has such a long tradition, but because I think there's something about being human. You watch a dog, how they'll go to a wall and stretch out against the wall. You watch bears and they wrestle with each other. Animals do the same thing. Cats. Heck, all the poses are named after animals [See Appendix for Downward Facing Dog Posture and other asanas]. I think it's something that is perfectly natural, so when you're really in the practice of it and it has become part of your rhythm or routine, you start to understand, hey, this is really what it means to be human.
Lastly, for some, yoga fits into their spiritual journey. It was described as a "spiritual refuge." One informant labeled yoga as a mystery, elucidating that it is "a piece of God that we don't understand." These lay definitions of yoga can only be appreciated and understood by looking at the American body as a symbolic object that is culturally created.

9.1 Yoga and the American Body

Csordas' (1993:135) considers the body as the existential ground of culture. He highlights the work of himself and others about a phenomenology of the body that looks at embodiment as the existential condition in which culture and self are grounded (1993:136). Our bodies, then, are the products of our unique cultural contexts and our 'lived' experiences with our culturally-rooted bodies create the feeling of 'self' in the world.

In the American cultural context, the body is so important that its' care and nurturance have gone from "practicality to fetishism" (Murphy 1995:140-2). The body must be clean, young-looking and must have a certain shape to attain the 'body beautiful.' One can exercise and diet to attain this cultural ideal, of which paths have become preoccupations in the society. It is deemed that self-improvement is attained through physical fitness and "redemption of the soul has turned instead to redeeming the body" (ibid).

9.2 “Working in” vs. Working out: Yoga in the Prevalent Fitness Center Context

What is it that makes yoga attractive compared to the myriad of other forms of physical activity that are more standard in the American culture? To explain, the most commonly contrasted form of exercise by the informants was going to the gym. In the American fitness-crazed culture, gyms have exponentially flourished across the country. They have weight training facilities, exercise machines including treadmills, bicycles and Stairmasters, in addition to offering various aerobics classes. Not one interviewee mentioned that they liked the gym, but freely expressed their criticism about the gym norm that thrives in the society.

Many women commented on how they need to “get ready” and work-out before they go to gym since there is such a pressure to look good while at the image-
oriented fitness center. People often stated that “I am not a ‘gym person’” i.e. they do not prefer the strenuous exercise that is associated with such workout establishments.

“The gym is like a machine,” said one interviewee and “we’re trained to be machines.” At the gym you tell your body what it is going to do, so that you can attempt to create the unrealistic body image that is ubiquitously shown in the media. Contrasted to the gym, a woman stated that with yoga,

I think there’s an attraction that it brings about more benefits than just looking good. People definitely have their perceptions. Like you go to the gym and lift weights and get muscles and it’s very image-oriented. I think for some people it’s a stress release too; I mean any kind of exercise is a stress release too, but I don’t usually talk to people and say I go to the gym because I feel so much better. Oh, well they’re like, I want to look good or I want to build muscles. It’s very image-oriented when you go to a gym. Even the whole idea about people going to a gym is like oh, people are going to be in spandex and wearing little outfits and oh my gosh, everyone looks good because people are there to show off their bodies and work on their bodies. I think yoga is a lot less about making your body looking better, but figuring out what your body is. Actually listening to your body.

Listening to and being more gentle with one’s own body were common themes, where there is a fundamental difference in the mental intention in both of the exercises. As opposed to strictly following a set routine at the gym, the philosophy of yoga is to honor one’s body and gently and comfortably push your individual limits, but not overextend them.

With yoga, people have developed a body wisdom that they had never had before. Many discussed how yoga was an overall body workout, where one gets in touch with body parts and muscles he/she has never been aware of before. Females liked the development of upper body strength, where men appreciated the improvement of lower body muscular definition.

There were also several instances when yoga was contrasted to running (at the gym and/or on one’s own). People viewed it as hard on the body where the pounding was seen as unhealthy on the joints and back. After her first yoga experience, one person compared it with the running she frequently did at the gym where yoga was more of a release and it felt a lot better. The effects were more prolonged and pronounced health-wise.... I felt I learned how to breathe right. Before I would always just be breathing up in my chest and not even really thinking about my breath. The thing that yoga taught me was to be consciously aware of my own breath...and it brought a lot more of body awareness. In
order to do exercises and actually stretch and do the poses in yoga, I had to be
more in my body. I had to be more aware of myself. So, it helped on a physical
level and a mental level and a spiritual level. So, I was definitely coming
back.

9.3 The Disconnection of the Mind and Body

Yoga involves the mind, where the traditional gym-workouts primarily focus
on the body. Through the physical practice of yoga, one connects with the mental
aspects of the self.

I think as a society we’ve become very—American society—very
disconnected from our bodies. We don’t think about taking care of our bodies
in any kind of fashion. It’s a very neglectful society. We don’t think about
what we eat. We don’t think about what we drink. We don’t think about how
much we sleep. We just kind of exist and I don’t think we make that
connection. I think different cultures do a lot better than we do.

One Hispanic informant feels that the boom in popularity of alternative
medicine mostly with Caucasians and less in minority groups is due to the fact that
white women are detached from the earth, where in the Hispanic and black cultures,
there is more of a holism linked in their cultural fabric. The mainstream white culture
does not offer any ways of connecting to the surrounding environment.

One informant finds yoga harder than the very physically demanding kickboxing.
She clarifies that in kickboxing “you’re running around and kicking, but in yoga you
actually have to sit and make your body do different things.” Yoga is grounded in
connection between the mind and body, where body control stems from the
concentration and centeredness of the mind, of which such connection seems to be
fundamentally absent from other physical exercises like kickboxing.

9.4 The Contextual Integration of Yoga in Life

Early in the fieldwork, observing the yoga students leaving the studio in their
relaxed “yoga state” and then zooming away in their cars, back into the swift pace of
life, I was curious if the yoga students experienced yoga outside the studio’s four­
walled structure. When the interviewing process began, I quickly noticed that yoga is
not just a one hour, fifteen minute class, but it extended into all facets of their lives.
Yoga “spills over” in life where it means more than a physical exercise, to where it
transforms into an actual lifestyle.
Many in the sample said that their regular practice makes them want to eat better and take better care of themselves. Yoga creates a consciousness about the actions and decisions that one makes in life on all levels, especially with eating in a healthy matter.

I think that it must be that you become more self-aware, so you end a lot of the self-abusive practices, in more of a neglect sort of way. Now when you eat something, it really has major effects on your body to make sure that you’re eating healthier and fresh. As opposed to drinking a Coke and having a hamburger and that’s considered a meal. I think it must be that you realize that everything that you do ties into how you feel and maybe that will change some of your behaviors.

In addition to creating awareness about what one’s ingests, interviewees often added how they learned about the importance of the breath. The students have learned to connect the body through the breath, especially by using this innate technique to calm the mind in stressful situations.

Yoga is definitely infused in my life, more that I’ve actually thought about before....If I’m anxious about something, I just breathe. That’s my center—my meditation is always with me—it’s just the ability to breathe.

Informants said that yoga has impacted on their performance at work. They are more focused, flexible, and are able to multi-task more effectively. While in the office, some members of the sample would notice their hunched over bodies at the computer and instantly do some yoga poses at work to correct their poor posture.

An informant who has been practicing for about eight months, summarizes how the integration of yoga has impacted on her, remarking that

I really feel like yoga has changed the direction of my life. I really feel like if I hadn’t started yoga, I would have continued to be a nervous wreck. I was on the road of pushing, pushing, pushing myself always past a point where my body could sustain, so to finish some outward goal or to complete ten thousand things for everybody else, or do what I felt that I needed to do. With yoga, I have now integrated a philosophy of acceptance and process and breathing.... Yoga has definitely changed my life.

**DISCUSSION AND CONCLUSIONS**

Astin’s (1998) study that collected quantitative data through a survey distributed to 1035 Americans, entitled “Why Patients Use Alternative Medicine” (as referred to in 1.3) identifies the following variables as predictors of alternative health
care use: more education, poorer health status, a holistic orientation towards health, having had a transformational experience that changed the person’s worldview, any of the following health problems: anxiety, back problems, chronic pain, urinary tract problems; and classification in a cultural group identifiable by their commitment to environmentalism, commitment to feminism, and interest in spirituality and personal growth psychology. The main conclusion regarding the predictor of the use of unconventional medicine was that the respondents found these health alternatives to be more in congruent with their own values, beliefs, and philosophical orientations toward health and life (1998:1548). Moreover, the most influential or salient factor in people’s decision to use alternative health care may be its perceived efficacy (1998:1552).

How does this quantitative study about general alternative health treatments compare to this qualitative study about yoga in particular? The data does cross-validate each other to more or less the same degree. The difference in the studies is that Astin’s gives direct answers, but the anthropological research tools applied in this small piece may shed some light on the actual meanings of such findings.

Naturally, the yoga experience can only be understood within the cultural context itself. This limited Western sample consists of human beings who function on a daily basis in a fast-paced, capitalistic, modern society, that fosters and advocates the “work more, sleep less” mentality. It breeds a culture of Type-A personalities who are driven to succeed at all costs. The concept of rest and relaxation is not conceived of in the Southern Californian society. Stores are open 24 hours a day, seven days a week. Cars speed down the roads and freeways 365 days per year. Technology never stops: from office phones, fax machines, and e-mail to pagers, mobile phones and portable computers. Life has become increasingly faster and ever more demanding, creating stress and anxiety in the citizens’ lives. From this incessant working, pushing and going that is engrained in the culture, yoga swings to the other side of the pendulum and allows time for relaxing, releasing and stopping.

Going beyond the common response of “it feels good” when asked about their attraction to yoga, many layers were revealed. The benefits can be categorized into (a)
physical, (b) mental, and (c) spiritual, but most importantly it was, to various degrees, (d) all of the above.

In the beginning, people were attracted to it for a myriad of reasons such as wanting to get in shape, being fed up with the gym, hearing that it was good for the spine and back, and just wanting to relax and reap its calming benefits. No distinct similarities could be found between the sex and age factors, for yoga was each a unique and personal experience. In short, yoga went above and beyond these initial expectations for this sample. In their perceptions, it cured their medical conditions, prevents the onset of illnesses and positively affects all dimensions of their lives.

In respect to the initial research objectives, the main findings can be divided up into two main categories, which are interrelated and imply how people achieve and maintain health, according to their cultural-based perceptions.

First, what was is about yoga that makes it work? Physically, it is a total body workout, which challenges one’s body in new positions and utilizes muscles that people had never experienced before. It works by stretching and strengthening the muscles. This exercise increases circulation to all parts of the system, thus bringing in new oxygen and flushing out toxins from each intimate area. People just feel better overall and found they are not ill, as they would be if they were not practicing yoga.

Yoga did not only work on the physical plane, but was more importantly a mental exercise. It was found to be calming and relaxing, creating positive mental changes, which was accomplished through the breath. Many informants said that they connect with themselves through yogic breathing and they learned how to breathe properly, making each conscious breath full and deep instead of quick and shallow.

Most importantly, yoga is “the whole picture”. It creates a self-awareness people have never experienced before. It gets one to slow down, stop what he/she is doing to get in touch with oneself amid the fast-paced lifestyle.

Second, why do people practice yoga, especially related to their health? The reason why people practice is connected to the same reason why they think it works for them, as described above. Yoga is attractive based on their experience with yoga and their own perceptions of its health benefits, which is tied into the means by which that desired health is obtained. They believe that it works for them and improves their overall health.
Generally speaking, the ones in the sample with a more serious medical condition tended to mention the perceived physical benefits of yoga first, before they did the mental benefits. Naturally, illness experiences affect perceptions regarding the efficacy of yoga and the means by which it works. Again, the physical aspects were initially stated, but always followed by the mental and holistic benefits of the practice. Again, their lives cannot be reduced to their physical ailments alone, like medicine may do, but in the medical anthropology discipline, the illness experience is attempted to be understood with the interplay of personal, family, professional, societal and other cultural factors. Doctors focus on the disease and its technical cure (whether eventually successful or not), and in conjunction, the yoga appeared to work on the self-care, as well as on health prevention and maintenance. Just how the cases in this study cannot be reduced to illness alone if one is to fully understand the illness, the doctors cannot reduce their patients' lives only to their condition.

Not one person spoke of the dislike for Western medicine per se, but the attraction to yoga was as a complementary medicine to be used in conjunction with orthodox medicine, rather than as an alternative medicine, coinciding with Sharma (1992). Moreover, the study findings do not support such a stereotypical and over-generalized division between conventional and alternative interpretations of the concepts of health, disease, diagnosis, therapy and the patient (Aakster 1986). In actual practice, these concepts cannot be divided so rigidly.

It was found that yoga fills in the gaps that the medical community does not address. Realizing that Western medicine is not a panacea and pills are not the "magic bullets" they claim to be, people are taking responsibility for their own health. This increasingly popular health-seeking behavior towards complementary medicine clearly illustrates the lay beliefs about cultural ideas related to well-being.

In the perceived chaos of life, yoga is a way to grasp control in a seemingly out of control environment. Throughout time, the Western world values the ability to have control over external conditions. For example, in the Victorian Age there was an obsession to control the body's sexual urges. In more recent times, there has been a boom in obsessive-compulsive eating disorders like bulimia and anorexia nervosa, which center around the control over food. The West obsesses with the need to have control over the external surroundings, consequently breeding work-a-holic, sex-a-holic, shop-a-holic, and alcoholic people. Alternative medicine takes that control and
responsibility over one's health away from the physician and back to the hands of the individual. Thus, yoga as an alternative therapy and as a practice in itself can produce that feeling of mind-over-body power, which appropriately fits into the mindset of the Western culture of control.

Based on the study findings, the culture-bound view of health and well-being can be achieved in this context through the practice of yoga. Yoga is a symbol for healing and the creation of that very symbol is healing in itself (Moerman 1979). This symbolism goes further than the domain of individual health, but the popularity with the practice proves to be a social statement. It is statement that communicates to the public and to the medical community that a person is more than a physiological organism, but is a dynamic, thinking and feeling holistic being who cannot be reduced to the likes of a machine with replaceable parts. It is a symbolic statement of the change in consciousness from scientism to holism.

Astin's study found that perceived efficacy attracted people to such alternatives as yoga. Not only do people perceive its efficacy, but these informants experience its efficacy through the phenomenology of their bodies. Aligned with Csordas (1993), embodiment is the existential condition in which the self is grounded. The study findings show that the body, self, culture and the practice of yoga are all interconnected with one another.

The main conclusion: yoga works for them. It changes lives. Whether it is being practiced for this moment in time, or will extend throughout the rest of their lives, these yoga students do not need any scientific proof about its' efficacy. For them, yoga is "tried and true," having its own validity and credibility in the context of their unique life experiences, creating a personal self-culture through self-healing.

**RECOMMENDATIONS**

For further research, other sample variations could be examined. New studies can include interviews with more men, yoga students with a broader age, education, ethnicity and education range and could also expand to different yoga classes within the immediate area, as well as to other parts of the country. Since the focus of the study was on the views of the practitioners of yoga themselves, I did not deeply delve into the medical community views, but it would undoubtedly be beneficial to examine
their opinions within the biomedical context. Also, as mentioned prior, time constrictions played a highly influential role in limiting the breadth and depth of the data collection. Naturally, with more time, more is possible.

Interviewing-wise, the best recommendation is to be an attentive listener. When the list of questions and research objectives is put aside, it permits a natural freedom to expose the reality you are attempting to grasp while on the unpredictable research journey.

This anthropological fieldwork piece on yoga illustrates the importance of the complementary medicine movement which has already gained attention by the scientific community. There has been what is called the ‘technical absorption of alternative medicine’, where alternative practitioners are attempting to integrate scientific findings and obtain support from the State to create centralized professional organizations. On the other hand, there is the ‘organizational or administrative absorption of alternative medicine’, where alternative healers are incorporated into the national health network, which changes can be seen with HMO policy incorporating alternatives in their healthcare plans (Lee 1998:183). How are these changes on both of the conflicting ideological practices? What do these transformations mean for the patients? As the movement continues and gains momentum, how will the scientific medical community respond? These are anticipated questions for more relevant research in the expanding and dynamic medical anthropological discipline.
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Asana (Yoga Posture) Pictures extracted from:
The Science of YOGA

 Millions of Americans are discovering this ancient exercise. Here's the skinny on why it makes you feel so good.

Christy Turlington, shown in the Rooster pose, has been practicing yoga for 15 years.
**HOW IT WORKS**

**EASTERN VIEW**

**CROWN CHAKRA**
Intuition, spirituality

**BROW CHAKRA**
Senses, intuition, telepathy, meditation

**THROAT CHAKRA**
The ether, self-expression, energy, endurance

**HEART CHAKRA**
Air, compassion, love of others

**NAVEL CHAKRA**
Fire, personal power, storage of the life force

**SACRAL CHAKRA**
Water, sexual energy

**ROOT CHAKRA**
Earth, the lower chakras

**THE MYSTICAL**
Enlightenment and good health require the free flow of the life force (prana) and the proper balance between the seven major energy hubs (chakras). An eighth chakra, or aura, surrounds the body and encompasses the other seven. The three lower chakras serve the body's physical needs, while the five upper chakras are associated with the spiritual realm.

**WESTERN VIEW**

**BRAIN**
Regulates sensation, response

**PITUITARY GLAND**
May signal glands to secrete lower stress hormones

**THYROID GLAND**
May signal glands to secrete lower metabolic hormones

**HEART**
Strengthens circulatory system, lowers blood pressure

**LUNGS**
Improves deep breathing

**ADRENAL GLANDS**
May deactivate stress response by suppressing adrenaline

**KIDNEYS**
Enhances drainage of waste from lymphatic system

**REPRODUCTIVE ORGANS**
May influence secretion of sex hormones

**MUSCULATURE**
May improve muscle tone and prevent injury

**THE SCIENTIFIC**
Breathing exercises have been shown to decrease blood pressure and lower levels of stress hormones. Stretching the body through various poses promotes better drainage of the lymphatic vessels, the body's waste-removal system. Holding postures may build muscle tone, which enhances physical well-being and protects delicate joints against injury.