

## Alternative Therapies: Incorporating the Ancient Practice of Yoga Postures

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**Abstract:** None available.

**Full Text:** Headnote ABSTRACT: This article brings together the ancient practice of yoga, specifically the postures (asanas) and other therapeutic techniques in a holistic approach to therapy that includes understanding of birth and prenatal experiences as basic. With a focus on the potential for using yoga postures in psychotherapy, research was completed involving 22 children, ages four years and eight months through nine years and eleven months. These children were video-taped while performing a series of five, especially selected, yoga postures. Their birth stories were then collected through interviews with the child, mother, father, and/or another person who had been present at the birth of the child. Analysis of these data resulted in identifying specific elements in the performance of the yoga postures that could be perceived as clues to the child's prenatal and birth experience. The proposal is put forth that yoga postures have the potential to activate birth memory in the body and can be used both diagnostically and therapeutically in dealing with prenatal and birth issues. I call my work "Aware Beginnings," as that phrase seems to best describe my own feelings of awakening to new beginnings, as well as the bringing of awareness to our own individual beginnings in the womb of our mother. Prenatal and birth experience, as a foundational matrix out of which our unique expression of life is formed, is a vital aspect of this work. Yoga postures have long been recognized for their power to elicit emotional responses (Bates, 1986; Rhodes, 1991; Swami Radha, 1978, 1987). As a yoga student and teacher since 1982, my interest in this phenomenon led first to my master's thesis (Rhodes, 1991) investigating the psychotherapeutic applications of yoga asana, and more recently to my Ph.D. research (Rhodes, 1997) investigating the link between the yoga postures and prenatal and birth experience. Before I move into describing that research and my current application of the findings, I would like to describe the three-limbed foundation of the study. Somatic psychology contributed the foundation of understanding that all experience, beginning with conception, is stored in the body and is accessible through the body. Pre- and perinatal psychology contributed the concept that consciousness is present in utero and during the process of birth and that this experience has an impact on later development. Both of these limbs are familiar to most of you, so I will focus here on the contributions of yoga psychology. One primary contribution to my thinking came as the result of contemplating a quote from Carolyn Myss (1966), "The Universal Jewel within the (four) major religions is that the Divine is locked into our biological system in seven stages of power that lead us to become more refined and transcendent in our personal power." In this statement, Myss is referring to the seven stages of power described in the ancient literature of yoga as the chakras. I wondered how these stages of power might become "locked into" our biological processes. Reference to a book on embryology (Moore, 1989) soon presented a wonderful possibility. The first seven days after conception parallel beautifully with certain aspects of the seven chakras : First Chakra (Muladhara-Foundation): related to element earth. Psychologically its functions have to do with survival issues, the feeling of being grounded in the body. Day one-fertilization, conception-we become grounded in material being. Second Chakra (Savadisthana-Dwelling Place of the Self): The domain of libidinous impulses, issues revolving around sexuality, procreation, and reproduction. Day two-cell division-reproduction. Third Chakra (Manipura-The city of gems): Psychologically the center of personal power, self-esteem. Day three-survival depends upon making the journey down the fallopian tube. Personal power is very important. Also, we are becoming a cluster of many cells-the city of gems. Fourth Chakra (Anahata-heart center-connecting link): It is the love center, the heart center, the center of devotional connection. Connection is the key. Day four-We have entered the uterine cavity, completion of the journey now

becomes interdependent. Mother's body must welcome us. We must make connection. Fifth Chakra (Vishuda-Pure): Issues of receiving and nurturance, as well as communication. Its primary function is to see and accept things as they are, every human being just as he or she is, every individual thing just as it is. Day five-Our task is looking for a home, a place of refuge and nurturance in which to continue development. It is vital that we are able to communicate our needs and that we find a receptive audience. We must accept mother and she us.

Sixth Chakra (Ajna-third eye): It is here where polarities of left and right come together in a synthesis of the whole being. Day six-A merging into the next stage of development is taking place on the sixth day.

Implantation. William Emerson (personal communication in training sessions) teaches that individuals regressed to implantation often express this as a burrowing with the forehead. That this energetic center may be associated with the beginning of implantation provides a possible explanation for this mode of expression.

Seventh Chakra (Sahasrara-crown-thousand petaled): This step brings the realization of oneness and incorporation. We have completed our first great journey. We are united with our source of nourishment for the next stage of development. Day seven-Implantation is assured. "And on the seventh day he rested." The ancient literature of yoga has much to say about the importance of the prenatal and birth stages of embodiment. From the Upanishads (translation by Easwaran, 1987), I have selected the following quotations as representative of the respect shown in these ancient writings (originating about 1500 B.C.E.) for these stages:

Katha Upanishad II.1.8: For the god of fire, Agni, hidden between Two firesticks like a child well protected in the mother's womb, Whom we adore everyday in meditation, Is the Self indeed. For this Self is supreme. Prashna Upanishad II.7: 'O Prana, you move in the mother's womb as Life to be manifested again. All creatures pay their homage to you.' Chandogya Upanishad VI.1.6: So through that spiritual wisdom, dear one, we come to know that all of life is one. Chandogya Upanishad VI.9.1: As bees suck nectar from many a flower and make their honey one, So that no drop can say, "I am from this flower or that," all creatures, though one, know not that they are that One. In the Caraka Samhita (translation by Dash, 1994), original written about 1200 B.C.E., we find that these ancient people had very sophisticated knowledge about the prenatal and birth experience. For example, (Dash, 1994, Book 3, p. 403), the following statement is found, It is true that (menstruation and) ovulation take place only after the twelfth year of age of the child but the ovum is present in latent form in the body of the foetus from the period of pregnancy itself. [emphasis added]. This knowledge has only recently come to the attention of western medicine (Northrup, 1994, p. 196). The Caraka Samhita includes many references to exact physical processes, demonstrating a clear understanding of these processes. For example, When a man with unimpaired sperm and a woman with unafflicted genital tract, ovum and uterine bed cohabit during the period of fertilization, the Jiva (Soul) along with the mind descends into the zygote (combined form of the sperm and ovum) lodged inside the uterus. This results in the formation of the embryo (Dash, 1994, p. 366). The above description seems to imply that the soul and mind join with the combined form of the sperm and ovum (zygote) at this very early stage of development, which would support speculations regarding possible awareness or consciousness beginning at the time of conception. In fact, this is specifically stated, the Soul is directly and independently responsible for the consciousness of the foetus. (Dash, 1994, p. 374). I will return later to a discussion of the concept of the sheaths (Koshas, i.e. five levels of Being) from yoga philosophy, but, for now, would like to describe my research and present some preliminary findings. Yoga postures were chosen for this study primarily because of my previous experience and research. The inclusion of postures (asanas) in the ancient practice of yoga is often explained as necessary for the discipline of the body. Perhaps this is not their only purpose. I would like to propose two additional possibilities: 1) The postures are part of our archetypal heritage, available to inner knowing without the need of formal instruction. Perhaps this knowledge is passed along in the DNA. This possibility is substantiated by the observation via ultra sound (Lannimberto and Tajani, 1981) of a fetus in a yoga-like position (similar to the lotus posture) at 13 weeks gestation. 2) The postures are essential to physiological development, they are the movement from which form is created. Contrary to previous belief, movement does not await physiological development, but is necessary to it. One begets the other in

circular fashion. If, indeed, yoga postures are part of our universal heritage as living beings and part of our experience in building a body in utero, this would help explain the depth of emotion sometimes experienced in the postures and the feeling many have on entering a yoga class for the first time that they have somehow come home to something very familiar. My research, as stated earlier, included a sample of 22 children. The age range of five to nine was selected because children in this age range would be old enough to understand the simple instructions, but, perhaps, not old enough to be overly influenced by expectations. The five postures selected were a result of preliminary research and include basic movements of the spine (forward bending, backward bending, side bend, twist, and a modified inversion). To minimize the effect of a model, I posed an articulated figure in the postures and photographed them so that each child would have exactly the same input regarding what to do. Verbal instruction was kept to a minimum, i.e., "I would like you to do these five postures (referring to the photographs). You can do them in any order and take as much time as you like." Each child was video-taped during this procedure and the videotapes analyzed for individual characteristics prior to collection of birth information. The wealth of data collected has not been thoroughly analyzed, but two preliminary results can be shared at this point in time. 1) Each child was given a general theme, based on observation of the video-tape. These themes were later compared with their prenatal and birth experiences. In most cases, connections could be observed. For example, the two children who were labeled "confident," were found to be the result of planned pregnancies, and to have had uncomplicated births. The complete list of these themes and their reflection in birth and prenatal experience can be reviewed in Table 1. 2) Of the nine boys in the study, six were circumcised after birth. These six boys all demonstrated difficulty in placing the hips on the floor in the "Arch" (an abdominal lying backbend). The three who were uncircumcised did not have this difficulty. Further research is planned to substantiate this connection. These preliminary results indicate the possible use of the postures as a diagnostic tool. Therapeutically, this information could be used as part of an individualized treatment plan. For example, for individuals who demonstrated difficulty with the "Arch," one could work with the posture over time, playing the edges of tolerance, until it could be comfortably completed. This is true of any of the postures. One would not need to be absolutely clear on the prenatal or birth origins of the difficulty, but the holding of that reality for the client rather than stating it directly, has the potential to enhance the process. This is very similar to work in sandplay in the Kalfian tradition, where direct interpretations are avoided, but inferred realities are simply held by the therapist while the client works through the issue in the sand over a series of sessions. This "holding" becomes a part of honoring the client's reality without the need of verbalizing or over-analyzing.

**Table 1**  
**Theme Chart**

<i>Ses- sion No.</i>	<i>General Theme</i>	<i>Reflection of</i>
1	Repetition	Repetitive traumas
2	Self-protective	Abandoned by father
3	Collapsed	Abortion ideation
4	Confident	Planned/uncomplicated
5	Apprehensive	Health complication
6	Hesitation	Long labor
7	Searching	Sister missing
8	Needs reassurance	Emergency Cesarean
9	Becoming small	Growth retardation
10	Ambivalence	Dad wanted boy
11	Determination	Planned Cesarean/labor begun early
12	Disconnection	Mother not connected
13	Apprehension	Health complication
14	Planning ahead	Long stage one
15	Tentativeness	Not wanted
16	Confident	Planned/uncomplicated
17	Ungrounded	Lack of details
18	Ambivalence	Unplanned, 5 wks early
19	Fatigue	Fertility treatments
20	Ambivalence	Lack of parental accord Re: conception
21	Watchfulness	Health complication
22	Coy/zestful	Father planned conception

In my work, I have found the concepts taught in the Kalfian tradition of sandplay, to be most important in working with clients. The creation of a "safe and protected" space being the most important. Whether the technique used in a specific instance is sandplay, one of the many techniques taught by William Emerson (personal communication in training seminars), or yoga postures, keeping the sacredness of a "safe and protected" place takes precedence. Again, from the tradition of yoga psychology, I base my work on the concept of the sheaths (Kashas), the concept that we each exist simultaneously on five levels of being. Various techniques address different levels and any one may be most important for a particular client or at a particular time for a client. For the level of body I include birthwork and somatic techniques including yoga postures. For the energy level, additional work with postures and breathing techniques is indicated. For the level of mind, dream interpretation and other "talk" therapy techniques are utilized. For the level of soul, sandplay and acknowledgment of archetypes and universal consciousness are utilized. The level of spirit encompasses all. Spirit is the witness to work on all levels. When therapist and client meet in a safe, protected environment, spirit can emerge, whole and complete. Unlike traditional sources, I tend to view the sheaths as Wilbur (1996) does with the body (physical) level at the center. The addition of the energy level enlivens the body, the level of mind brings awareness, the level of soul an acknowledgment of oneness, and the level of spirit deep knowing of that oneness. Each encompasses and includes the others rather than transcending, making this human incarnation a spiritual endeavor. I have been drawn to pre- and perinatal psychology as a spiritual endeavor. I do not believe that this diminishes spirit, rather it elevates the other levels of being. Our purpose in therapy, as in life, is to "dis-cover" spirit in all that is. References REFERENCES Bates, C. (1986). Ransoming the mind: An Integration of Yoga and Modern Therapy. St. Paul, MN: Yes International. Dash, B. (1994). Caraka Samhita. New Delhi, India: Chowkhamba Sanskrit Series Office. Easwaran, E. (1987). The Upanishads. Petaluma, CA: Nilgiri Press. Ianniruberto, A., & Tajani, E. (1981). Ultra-sonographic study of fetal movements. Seminars in

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