

Defining Safe Practice

As yoga teachers, one of our prime responsibilities is to teach yoga safely. During their training, yoga teachers hone their skills and accumulate the knowledge that allows them to meet the needs of individual students and not cause injury or harm.

This approach is not only necessary, it is a defining characteristic of how properly trained teachers, like those in the British Wheel of Yoga, work to offer people yoga appropriate to their needs. This approach also springs directly from the most important of Patanjali's yamas – ahimsa. Non-violence must pervade our teaching in order to help students practice in a spirit of non-violence – first and foremost towards themselves and their own bodies so that they are non-competitive. Ahimsa is a thread that should run through the way we teach, the way we relate to our students and, as far as is possible, in the way we live our lives.

But at a very practical level, how do we define safe practice? And then how do we put our definition into effect?

The BWY sets out its own view on safety in Operating Procedures ED17 - Yoga: Safety and Exercise. These guidelines wisely avoid being too prescriptive, in recognition of the wide variety of student needs, limitations and abilities. What may be unsuitable for one student, may be absolutely fine for another. There are a few general conclusions in the operating procedures about the unsuitability of double leg raising in most yoga classes, the extra care needed for the vulnerable knee joint, the need for those with high blood pressure or heart problems to avoid inverted postures and holding the breath, and the advisability of protecting the neck by padding the shoulders in Sarvangasana. However, there is no attempt to list definitively what should and should not be taught. To do so would be impractical and unworkable.

So teachers must develop their own approach to safe practice, based on their skill as professionals and on their continuing professional development and ongoing enquiry. These three things are all vitally important. The knowledge now gained by Diploma Course students of anatomy and physiology is designed to give them the ability to understand how the body moves and works so that they can logically and methodically deduce what is safe practice in any particular pose. If you trained at a time when anatomy, physiology and kinesiology was not emphasised as much in the BWY's training, then you may have a gap in your knowledge that appropriate In Service Training Days could fill.

Until you understand how the joints, muscles and systems of the body function, it is impossible to have an in-depth knowledge of safe practice.

When you learn to drive a car, the instructor teaches you to give way to traffic when joining a main road. He or she also teaches you to steer in that curious way where the wheel is fed from one hand to another, rather than crossing the

hands. Once you have passed your test, you carry on giving way at the main road because direct experience and knowledge tells you that it would be dangerous not to do so. But do you steer in the same way? For most people, the answer is no. In the same way, the A&P you are taught has to become part of your individual understanding, tested against your own experience, and not something you are repeating parrot fashion.

Not only does the study of A&P provide the skills for yoga teachers to assess fully the needs of their students in terms of safe practice, it also should set in train a life-long path of enquiry. By offering guidelines and not prescriptive advice on safety, the BWY is in effect charging its members with the task of constantly posing the question of their lesson plans: is this safe? What effects does it have? Could any vulnerable areas of the body be injured? That requires us to work it out for ourselves, engage in debate with other teachers, keep an open mind and explore and enquire.

I have heard other DCTs make statements about safe practice which either I don't agree with or feel that the assertions are, as yet, unproven. For example, never coming up on the toes in the shoulder bow (when making the transition to supported bridge) because it can harm the lower back. I don't feel that in my own body, my students don't feel it in theirs and so for me that statement remains unproven because I don't see how a contraction in the calf muscles can potentially put the lumbar spine at risk. Perhaps it does. The enquiry continues (or perhaps someone will write to Spectrum and enlighten me).

Every student has individual needs stemming from their genetic, social, mental, physical and injury/disease histories. Dealing with these on a 1-1 basis would be manageable, but in a group of up to 25, we are dealing with a large number of unique body histories. Our challenge is to teach safely and appropriately, without reducing the class to the lowest common denominator.

Care of the knees picture caption

Taking the knee beyond the ankle in warrior loads too much weight through a vulnerable joint. But taking the knee beyond the ankle in half moon is much less risky as you have lowered the centre of gravity and take more weight through the other knee and the foot. Taking the knee beyond the ankle in a squat is virtually unavoidable – but a great hip opener! And where would preparing for birth classes be without it? Enquire, debate and then you decide!

Levers

Every DCT has his or her safety hobby horse and mine is how students enter and exit forward bends. I strictly subscribe to the view of my teacher, John Scott, that to protect the back, the spine should always be held straight and supported from within by core muscles, including the abdominals and the pelvic floor. The forward bending and standing back up is then done mainly with the leg muscles by bending the knees and folding at the hips. The quads and the hamstrings work strongly and the back is not at risk. The arms should

also always be to the side and not stretched out in front of the body. Of course once you have folded forward with bent knees and taken your hands to an appropriate foundation – the floor or blocks – you can safely work the legs towards straight to lengthen the hamstrings. Even then it is best not to round the back.

I think it is hard to argue against this approach once you understand the principles of levers. Most movements of the body are 3rd class levers, which means that the fulcrum is at one end (for example the elbow), the load at the other (a weight in the hand) and the effort must come between the load and the fulcrum (the contraction of the biceps). The length of the lever is important in determining the force or pressure on the body, which is why health and safety officers advise people carrying heavy loads to bend their knees and hold the load close to the body, thus shortening the length of the lever. If you hold a ten pound weight and bend forward with the legs straight, a force of 100 pounds is exerted on the lower back. It is a frightening 1:10 ratio. Given that the average weight of a human torso is 105 pounds, then bending forward with the same 10lb weight imposes a disc-bulging force of 1,015lbs on the lower back! If you bend the knees and work the legs, you are still lifting the same heavy weight, but the direction of the load is down through a stabilised and structurally strong spine into the hips and legs, whereas with straight legs, the force is concentrated and directed at the lumbar spine putting a dangerously uneven force on the intervertebral discs.

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