



Case Report

Yoga for carers of addicted patients: a carer's self-report

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ABSTRACT: Caring for those addicted to drugs and/or alcohol can adversely affect carers and this can manifest as stress, anxiety, depression, insomnia, substance misuse and a range of physical health problems. In most health care settings, be it primary care or secondary care, more often than not carers' needs go undetected and hence untreated. In the case report below we illustrate how weekly yoga classes helped a carer (of an addict) cope better. In light of the numerous benefits of yoga to carers of addicts (as described below) we call on drug and alcohol services to incorporate this simple and inexpensive intervention into their treatment programmes.

KEY WORDS: *Yoga; Carers; Drug addiction*

INTRODUCTION

Addiction to drugs and/or alcohol is a significant public health problem in most regions of the world. Caring for patients addicted to drugs or alcohol can be stressful, and it is estimated that for every addict there are around ten others who are also adversely affected. It is also argued that at least two are affected so badly they need help/treatment intervention in their own right¹. Addiction often being a chronic illness with ups and downs, those caring for addicts themselves suffer from distressing levels of anxiety, depression, stress and various physical health symptoms, and substance misuse. However, these carers' needs often go undetected and hence untreated.

There are some evidence-based and structured treatment interventions that can be offered to those caring for addicts to help them cope better. One example of this is the five-step intervention for families of addicts². However interventions such as this are expensive and labour-intensive.

We describe below how yoga (a simple and inexpensive intervention) delivered once weekly (for an hour) can benefit carers. In our drug and

alcohol service in Solihull, we offer yoga to patients and their carers on a once-weekly basis. It is delivered by a teacher who is qualified and experienced in working with this group, and this particular class has been running since May 2013. We practice *Hatha* yoga incorporating four key elements: *Asanas* (physical movements), *Pranayama* (breathing practices), *Shavasana* (relaxation) and *Dhyana* (meditation). As opposed to medications a significant advantage of yoga is that it has no side effects, and it can also be used alongside medications. There is emerging scientific evidence for effectiveness of yoga in addiction and mental health disorders although more needs to be done and there are theories that yoga results in changes in neurophysiological, neuroimmunological and neuroimaging measures³. We give below a brief self-report from a carer (of an addict) who has benefited from weekly yoga classes. In addition to her own account of how it helped her we also present some simple quantitative results from a questionnaire this carer completed.

CASE DETAILS

Eileen (anonymised) is a 55-year-old Black British woman. She works in a local shop and lives with her partner of many years. She is a carer for her daughter who has a longstanding history of drug

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and alcohol addictions. In the section below is a brief account of her daughter's problems, the difficulties carers face, and in the later section is Eileen's own description of how yoga has benefited her which is the main subject of this case report.

Eileen first came to a yoga class in the summer of 2013. A drug and alcohol healthcare worker had told her it could help her relax and cope better. Eileen is a carer for her 25-year-old daughter, Rena (anonymised). Rena has abused drugs and alcohol for a decade now and has also been diagnosed as autistic. In addition to her drug and alcohol issues, she suffers from depression, anxiety and insomnia. Her many run-ins with the police, drug dealers and social services mean that Eileen has lived her life in limbo, not knowing when the next distressing call will come. She has rescued Rena from potentially life threatening situations many a time.

Although Rena lives on her own in housing provided by the council, Eileen also lives close by. Rena is on government benefits. But the money goes to drug dealers as soon as she gets it. There is no money left for food and so it falls to Eileen to buy her food and clothes. Eileen's relatives feel she is fuelling Rena's drug habit when what her daughter needs is tough love. But as a mother, Eileen feels unable to do so.

Eileen also has a son, who is supportive of what his mother does for his sister but wants to play no role whatsoever in helping to care for her. Eileen's partner too, is on her side, but without getting involved in any way.

Here is Eileen's verbatim account about how coming to yoga class has helped her and Rena cope:

"I have been coming to yoga for a year now-every week without fail. It enables me to have time just for myself. As a carer of someone with addiction and mental health difficulties, it's difficult for me to turn off. In the class, we do yoga poses, breathing exercises and finish off with a 10 minute relaxation and a guided meditation. My sleep patterns are better. Also, aches and pains in my legs have gone. I think it has made me more supple. I have tried various types of exercise before but have not continued with them. I love yoga and believe it benefits me in more ways than one. Sometimes Rena also comes along. When she does, she is relaxed and this is good for me to see as it is very rare. I think it is also good for us to do something together. I have very rarely known Rena to be calm and quiet for so long. I think it stops her mind racing. She seems to be able to slow it down during yoga. I feel better after every yoga class. It enables me to be refreshed and to start again with a calmer mind."

Given in the section below is Eileen's ratings on the self-completion questionnaire we use to assess the usefulness of yoga to attendees.

Yoga impact questionnaire

Over the past 6 months, on a scale of 1-5, please rate the impact yoga class has had in the following areas of your life (1 being no impact at all; 5 being definitely improved)	
1. Physical health	4
2. Psychological health	5
3. Overall well being	5
4. Anxiety levels	5
5. Ability to cope with stress	5
6. Relaxation levels	5
7. Concentration levels	5
8. Addiction (if applicable)	NA
9. Depression	5
10. Sleep	4

DISCUSSION

Health and well-being of carers of addicted patients, in our view, is a neglected area. Hence most of the carers go unhelped resulting in a significant burden on their lives and significant morbidity. Through the account above we have illustrated how a simple and inexpensive intervention such as yoga (delivered for an hour, once a week) can immensely help carers cope better. The carer described above reported considerable benefits in multiple areas of her life such as physical health, psychological health, overall wellbeing, anxiety levels, ability to cope with stress, relaxation levels, concentration levels, depression and sleep.

Although the focus of this report is on carers, the patient in question also attended yoga classes albeit less regularly. The benefits of yoga for patients who suffer from addictions or mental health difficulties are immense but is beyond the remit of this paper for further elaboration.

We would argue, based on this case report and our experience in this field that more needs to be done to introduce yoga classes in addiction services. Such yoga classes could be open, depending on need, to carers and patients. UK has traditionally been slow in embracing yoga as a valid therapeutic intervention for patients and carers in the field of addictions. We call on addiction treatment providers to address this need.

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