

NIH Public Access

Author Manuscript

Complement Ther Med. Author manuscript; available in PMC 2014 February 01.

Published in final edited form as:

Complement Ther Med. 2013 February ; 21(1): 14–28. doi:10.1016/j.ctim.2012.11.001.

"More than I Expected": Perceived Benefits of Yoga Practice among Older Adults at Risk for Cardiovascular Disease

Gina K. Alexander, PhD, MPH, MSN, RN,

Assistant Professor, Texas Christian University, Harris College of Nursing and Health Sciences, Fort Worth, Texas

Kim E. Innes, PhD, MSPH,

Associate Professor, West Virginia University, Department of Community Medicine, West Virginia University School of Medicine, Morgantown, West Virginia

Terry K. Selfe, DC, PhD, CCRP, and

Clinical Research Program Manager, Department of Community Medicine, West Virginia University School of Medicine, Morgantown, West Virginia

Cynthia J. Brown, DNS, RN

Assistant Professor, University of West Georgia, School of Nursing, Carrollton, Georgia

Abstract

Objective—This study was conducted with participants from trials examining the effects of an Iyengar yoga program on cardiovascular disease risk. The objective of the current study was to evaluate the perceived benefits of yoga in a population of older, predominantly overweight adults participating in a gentle 8-week yoga program.

Design—This study used a constructivist-interpretive approach to naturalistic inquiry.

Setting—A total of 42 participants completed the intervention and met the inclusion criteria for the current qualitative study.

Intervention—The 8-week Iyengar yoga program included two 90-minute yoga classes and five 30-minute home sessions per week. Participants completed weekly logs and an exit questionnaire at the end of the study.

Main Outcome Measures—Qualitative data from weekly logs and exit questionnaires were compiled and conventional content analysis performed with the use of ATLAS.ti to facilitate the process.

Results—Four broad themes emerged from content analysis: Practicing yoga improved overall physical function and capacity (for 83% of participants); practicing yoga reduced stress/anxiety and enhanced calmness (83% of participants); practicing yoga enriched the quality of sleep (21%

Conflict of Interest Statement

The authors wish to confirm that there are no known conflicts of interest associated with this publication.

^{© 2012} Elsevier Ltd. All rights reserved.

Corresponding Author: Gina K. Alexander, PhD, MPH, MSN, RN, Harris College of Nursing and Health Sciences, Texas Christian University, TCU Box 298620, Fort Worth, Texas 76129, g.alexander@tcu.edu, (817) 257-6763 phone, (817) 257-4070 fax. **Publisher's Disclaimer:** This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our

customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final citable form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

of participants); and practicing yoga supported efforts toward dietary improvements (14% of participants).

Conclusions—These results suggest that yoga may have ancillary benefits in terms of improved physical function, enhanced mental/emotional state, enriched sleep quality, and improved lifestyle choices, and may be useful as a health promotion strategy in the prevention and management of chronic disease.

Background

The practice of yoga has become increasingly common in western industrialized countries.^{1–5} Core components of yoga include meditation, physical postures (asanas), and breathing exercises (pranayama) designed to promote mental, physical, and spiritual well-being.⁶ Recent research suggests that yoga may enhance health and wellbeing in healthy and clinically ill populations.^{7–13} Practicing yoga may aid in the prevention and management of multiple chronic conditions, including depression, stress, anxiety, menopausal symptoms, arthritis, low back pain, cancer, cardiovascular disease, and type 2 diabetes.^{7–9, 14–21}

In addition to the health benefits quantified in yoga intervention trials, a limited number of qualitative studies describe health-related outcomes not readily captured by conventional instruments. Individuals have conveyed experiences of life transformation and symptom relief from conditions such as cancer, diabetes, stroke, eating disorders, rheumatoid arthritis, and chronic pain.^{22–28}

To date, few qualitative studies have examined how older adults perceive yoga practice, particularly those with limited or no previous yoga experience. The purpose of this study was to evaluate the perceived benefits of yoga practice as described by older, predominantly overweight adults at risk for cardiovascular disease who were learning the practice of gentle yoga over the course of an 8-week time period.

Methods

Study Design

The current qualitative study was conducted with participants from two randomized controlled trials examining the effects of an 8-week Iyengar yoga program on cardiovascular disease (CVD) risk in older adults. The first trial, the Women's Health, Yoga and Education Study (WHYES), included sedentary, overweight, but overall healthy postmenopausal women.^{29–31} The second trial, the Diabetes and Yoga Study (DAYS), targeted older adults with type 2 diabetes.^{29, 32} DAYS and WHYES participants were enrolled concurrently and shared the same intervention protocol.^{29, 32–33}

Each participant completed a weekly yoga practice log and an exit questionnaire regarding perceptions of the study overall (See description below). These data were the basis for the present qualitative study.

Human Subjects Protection

The Institutional Review Board at the affiliated university approved the study. Written informed consent was obtained from participants prior to study enrollment.

Sample

Participants were recruited through advertisements in community newspapers, university buildings, popular local venues, medical offices, e-mail distribution lists, and the University clinical trials website. Inclusion criteria consisted of age (45 years or older), postmenopausal

status (for women), no yoga experience within the past year, and ability to complete a gentle 8-week yoga program. Additional eligibility criteria for DAYS included a medical diagnosis of type 2 diabetes mellitus for at least 6 months; for WHYES, an inactive lifestyle of exercise < 3 times per week; and body mass index [BMI] 25, waist circumference 88 cm, or a first-degree relative with diabetes or essential hypertension.

Excluded were current smokers, those with a diagnosis of major orthopedic or neurological disorders, active musculoskeletal pain hindering completion of the yoga intervention, or sleep apnea, and/or those who regularly used an assistive device for ambulation. Additional exclusion criteria for DAYS included the use of insulin, any serious chronic comorbid conditions, acute coronary symptoms within the past 6 months, and/or an artificial pacemaker; for WHYES, impaired insulin sensitivity, use of medications affecting carbohydrate metabolism, and/or any serious chronic conditions.

Eligibility for the current study included attending a minimum of six yoga class sessions and completing weekly yoga logs and an exit questionnaire. The rationale for the attendance criterion is based on the authors' prior experience in yoga research and consultation with the yoga instructor regarding the acquisition of yoga skills and associated benefits. Authors determined that a participant who attended at least six sessions of yoga completed roughly one-third of the intervention and likely attained a basic familiarity with yoga.

A total of 75 participants (38 yoga and 37 control group) were enrolled in the WHYES, and 40 participants in the DAYS (20 yoga and 20 control group). Among the 58 individuals collectively assigned to the yoga intervention group, 42 completed at least six yoga sessions and an exit questionnaire (N=30 from WHYES, 12 from DAYS).

Intervention

Daily yoga practice was the foundation of the intervention protocol. The 8-week intervention consisted of 90-minute Iyengar yoga class sessions held two days a week and 30-minute home practice sessions on the five non-class days. Iyengar yoga is a classical form of Hatha yoga focusing on standardized, precisely aligned poses (*asanas*) that can be tailored for individuals who are elderly, physically unfit, or suffer from chronic illness.^{34, 35} The use of props (blocks, belts, blankets, and chairs) offers additional support to prevent strain, overstretching, or other injury.¹

The study yoga instructor, an Iyengar yoga master and teacher trainer, developed yoga sequences in consultation with B. K. S. Iyengar, the yoga master who originally developed this specific form of Hatha yoga.³¹ Each class and homework practice included centering poses, basic standing poses (e.g., Tadasana or mountain pose), seated and forward bending poses (e.g., Janu sirsasana or one leg straight forward spinal stretch), twists (e.g., Maricyasana III or pose named for sage), supported back bends and modified inverted poses (e.g., Setu bandha sarvangasana or supported bridge pose), relaxation poses (e.g., Savasana or corpse pose) and simple breathing exercises (Pranayama). During class, the instructor demonstrated modifications of yoga postures as needed to promote safe, effective practice. To facilitate home practice, participants received a yoga mat, strap, video/DVD, and booklet illustrating the home yoga program.

Data Collection

Each week, participants submitted an unstructured yoga log, recording the minutes spent in home-based yoga practice each day and sharing perceptions of yoga practice at home and in class. At the study's end, a 10-item, open-ended exit questionnaire elicited participant perceptions, including factors affecting home-based yoga practice and overall perceptions of the study.

Data Analysis

The authors used SPSS (version 19) to calculate descriptive statistics.³⁶ Demographic differences between yoga participants, based on inclusion in the current qualitative study, were assessed using independent *t* tests and X^2 analyses.

In approaching the narrative data in the yoga logs and exit questionnaires, the authors assumed a constructivist-interpretive paradigm of naturalistic inquiry.^{37–38} To facilitate analysis, the investigators imported all documents into ATLAS.ti.³⁹ The authors used methods of conventional content analysis by reading and re-reading the text closely; key words or phrases in each participant's log or exit questionnaire were categorized by content, which generated many units of meaning, or codes.^{40–43} After an iterative process of reading, analyzing, and open coding of the textual data, the authors organized the codes into meaningful clusters or coding categories, which led to the emergence of underlying meanings, known as latent content, or themes.⁴³ In addition to describing themes that emerged from the text, the authors tabulated the frequency of subcategories among the sample. These data were used to calculate a percentage, clarifying the portion of the sample whose comments were represented by each theme.

To enhance the validity and trustworthiness of the qualitative analysis, the authors implemented two key strategies for peer review: (1) active discourse regarding the strategies for coding and organization of coding categories, and (2) consultation with an experienced qualitative researcher to review the audit trail and explore decisions regarding data interpretation.⁴¹ Threats to trustworthiness, including researcher bias, were minimized by this approach to peer review, with emphasis on researcher reflexivity and authenticity.³⁸ Another strategy to increase trustworthiness and credibility is increasing reader access to primary data.⁴² Toward that end, participant quotes are presented together with interpretative findings and also displayed in Table 3.

Results

Sample Characteristics

Demographic characteristics of the participants are displayed in Table 1. Overall, the average age of participants was 59 (\pm 7) years. Most participants were female (90.5%), non-Hispanic white (76.2%), married (59.5%), and had completed four or more years of college (73.8%). DAYS and WHYES participants shared similar demographic characteristics, with no significant differences except for gender; per protocol, there were no men in the WHYES group. In addition, DAYS and WHYES participants shared similar baseline clinical measures (BMI, blood pressure, history of anxiety/depression, and former smoking status), except for hemoglobin A1c, fasting blood glucose, and lipid profile values. DAYS participants had significantly higher hemoglobin A1c (p = 0.007) and fasting blood glucose values (p = 0.009) but lower total cholesterol (p = 0.005) and LDL cholesterol (p = 0.006) values than WHYES participants.

Comparisons between those included and excluded from qualitative analysis are depicted in Table 2. Relative to those excluded, individuals included in the current study were more likely to be married (p = 0.054) and to have higher diastolic blood pressure (p = 0.052) and HDL cholesterol (p = 0.004) and lower hemoglobin A1c (p = 0.042) values but did not differ in other characteristics.

Primary Themes

Four principal themes emerged through data analysis. DAYS and WHYES participants reported similar patterns of benefit, with slight differences noted when examining

subcategories separately by group. A detailed description of each theme follows, including a percentage of the sample whose commentary supports the identified theme. Representative participant quotes, categorized by theme and subcategory, are summarized in Table 3.

Theme 1: Practicing yoga improved overall physical function and capacity

Most participants (83% total, 100% of DAYs, 77% of WHYES) reported improvements in physical function and capacity for physical activity.

Increasing self/body awareness—Participant phrases ranging from "think of posture alignment several times a day" to "felt the pull in shoulders and knees" were common. As one participant aptly phrased, "I am especially pleased [with] the way I am able to incorporate yoga poses in the way I walk, sit, stand and go about daily activities. It has made me so much more aware."

Overall fitness—Participants used phrases ranging from "great workout for abs and quads" to "strenuous session, worked up a sweat." One participant stated, "I already know I've improved tone and lost weight." Inspired by novel experiences with yoga, another participant wrote, "I am becoming more aware of my surroundings & beginning to develop better healthy choices. For the first time in over 25 years, I am taking action to lose weight."

Stretching—Participants noted an improved capacity for stretching and renewed flexibility. As one participant described, practicing yoga was instrumental in "learning how to stretch properly." For others, yoga practice restored function or enhanced baseline physical fitness. One participant wrote, "I enjoyed the flexibility that had returned to my body. I have noticed the difference."

Strengthening body and maintaining poses—Many participants reflected on incremental increases in strength and ability to maintain poses over time. One participant wrote, "tough poses but I was determined, good class, sticking with it, gaining strength--I feel it, can go a little longer." Other individuals shared the belief that continuing yoga would "benefit in the long run," in spite of initial soreness.

Deep breathing—Several participants observed improved quality and depth of breathing with yoga practice. Individual phrases ranged from "refreshing workout, I felt easier, smoother breathing afterwards....able to breathe deeper" to "breathing is coming easily." In sharing comments such as "deep breathing throughout the day," some participants revealed an integration of deep breathing into daily life.

Enhanced energy—Participants commonly noted a sense of energy infusion through yoga. For some, yoga mitigated fatigue: "I was tired prior to class but after class I felt relaxed and [had] more energy." Other participants observed the revitalizing effects of yoga throughout the day: "Tired today, yoga warmed me up and was able to keep going, building stamina, feel good."

Symptom relief—Another reported physical benefit was symptom relief, particularly the ability to manage joint stiffness and pain. One participant wrote pointedly, ""Yoga = relief from stiffness." Participants expressed having relief from aches and pains in the back, knee, hip, and groin. Capturing the satisfaction of pain relief, one person wrote, "My body doesn't have joint pain when I do Yoga! I feel stronger and better in control of my body day by day."

Theme 2: Practicing yoga reduced stress/anxiety and enhanced calmness

Most participants (83% total, 83% of DAYS, 83% of WHYES) described an enhanced mental and emotional state.

Relaxation and stress/anxiety reduction—Some participants seemed to view yoga as a safe haven after a busy, tense day. One participant wrote, "I was pretty anxious, jittery all day until my yoga." Expressions such as "I'm not anxious; I feel good about myself" and "felt better, tense, needed to relieve stress" emphasized the anxiolytic effects of yoga, reinforced by statements regarding the "stress relief/calming influence of yoga," and "yoga as a stress reliever."

Pleasure—Some participants expressed a deep pleasure and sense of joy resulting from yoga. Subtle expressions of pleasure were common: "pleasantly surprised, enjoying the class" and "last relaxing pose is wonderful, good." For others, the pleasure was effusive: "I love this!" and "starting to feel day is incomplete without yoga... enjoy every moment!"

Increased tranquility and decreased reactivity—Some participants described a calm response to stressful stimuli, attributing this ability to yoga practice. One wrote, "car had to be towed after class but deep breathing helped me to maintain 'my cool'." Comments ranging from "noticed calming reactions to situations" to "deep breathing to keep my temper" suggest that yoga practice helped to reduce reactivity and enhance capacity to manage stress.

Theme 3: Practicing yoga enriched the quality of sleep

Several participants (21% total, 17% of DAYS, 23% of WHYES) attributed a better quality of sleep to yoga. Some simply wrote "slept well at night" or "better sleep." One wrote about "doing some breathing exercises before going to sleep," while another claimed that "exercises are less strenuous, [the] more I do the better I sleep." Relaxation-inducing effects of yoga led to enhanced sleep quality for another, who wrote of "the deep relaxation felt in class…feel more centered and am sleeping like a baby."

Theme 4: Practicing yoga supported efforts toward dietary improvements

A subset of the participants (14% total, 8% of DAYS, and 17% of WHYES) expressed the belief that yoga practice led to improved dietary patterns and habits. One individual claimed, "I seem to have suddenly lost my taste for salty and heavy food and crave vegetables." Another individual stated that practicing yoga "affected my appetite. I am able to eat less and crave carbs less." For others, practicing yoga appeared to foster a new "focus on diet," change in orientation to food, and awareness of body sensations: "[I] ate healthy meals & did not stuff when I felt full."

Discussion

The four themes that emerged from data analysis are likely interconnected and synergistic, with reciprocal relationships. The first theme, yoga improved physical function and capacity, has been noted in other studies. Individuals with chronic illness have reported relief from joint pain, improved range of motion and flexibility, and strengthening of previously unused muscle groups as a result of yoga practice.^{26, 28, 44}

The clinical implications of this finding are numerous; enhanced physical fitness leads to improved cardiopulmonary function, as well as increased muscle strength and endurance.^{8, 44–50} Furthermore, practicing yoga may increase the capacity for physical activity or restore the desire to improve physical fitness.⁵¹

Consistent with the current study's findings, individuals with chronic pain report responding to painful stimuli with intentional relaxation strategies through yoga.²⁸ Other studies indicate the potential of self/body awareness to transcend physical and psychosocial limitations.^{25, 52} These findings support the central therapeutic mechanism of mind-body intervention: a growing awareness of the body and self leads toward integration of body-self-environment.⁵³

The second theme, yoga reduced stress/anxiety and enhanced calmness, has been reported previously by individuals living with cancer or CVD.^{24, 54–56} Findings from the current study reinforce the efficacy of yoga for enhanced stress reduction, anxiety management, and calmness/tranquility, as well as decreased reactivity. These reported benefits are clinically important, given the documented negative effects of psychosocial distress on health and well-being.^{57–61}

The third theme, yoga enriched sleep quality, was reported by healthy individuals and those with cancer or osteoarthritis.^{23, 62–63} However, only 21% of participants in the current study reported sleep improvements. While evidence may suggest that yoga practice improves sleep quality, efficiency, and duration^{63–64}, the majority of participants in the current study did not report such benefits. Further research examining the efficacy of yoga practice to improve sleep quality is warranted, given the high prevalence of disturbed sleep among individuals with diabetes and CVD^{65–66} and the relationship between impaired sleep and adverse health outcomes.^{67–69}

The fourth theme, yoga improved dietary patterns, has been less commonly reported. Yoga practice is associated with improved dietary intake and healthy attitudes toward eating, according to studies among women of varying ages, some with a history of binge eating.^{25, 27, 70} However, only a small fraction (14%) of participants in the current study reported dietary benefits from yoga practice. The efficacy of yoga to influence eating behaviors and patterns, or other lifestyle factors, merits further investigation.

Limitations

This qualitative study relied on a descriptive study design with no control group; although the completion of yoga logs was encouraged, submission was inconsistent. The log format was open-ended, allowing participants the freedom to write as much or as little as they preferred. Some participants only recorded home practice times without comments. Others provided minimal commentary on exit questionnaires, in contrast to the broad range of benefits expressed spontaneously by participants during class. Future studies may benefit from a protocol that includes systematic recording of participant comments in class and a face-to-face exit interview for those who prefer verbal communication.

Another limitation of the current study is potential response bias, given the percentage of participants excluded from analysis. However, those excluded from analysis were similar overall to those included in demographics, lifestyle factors, and psychophysiological indicators (Table 2), rendering bias less likely. Among the 16 participants excluded from analysis, three did not provide narrative data in yoga logs or exit questionnaires, and 13 dropped out of the study, citing health problems (n=7), scheduling conflicts (n=2), and unknown reasons (n=4). None of the participants reported dropping out because of difficulty with the yoga program.

Another limitation of the current study is the lack of diversity in the sample; 90% of the participants were female, and over 75% were non-Hispanic white. The sample homogeneity limits generalizability of the findings; for example, men or individuals of racial/ethnic minority status may hold different values or beliefs regarding yoga.

Data were collected over an 8-week time period, reflecting short-term benefits of yoga. Several participants did not express confidence with yoga until weeks 5 and 6 of the intervention period; a longer intervention may have yielded greater benefit. To advance understanding of the short- and long-term benefits of yoga, a longitudinal study design including a longer intervention period, comprehensive evaluation, and a longterm follow-up is needed.

Conclusions

The results of this study suggest that the practice of gentle yoga provides a number of benefits that promote health and well-being among older, predominantly overweight adults at risk for cardiovascular disease. Participants reported a wide range of benefits, including enhanced self/body awareness, physical fitness, energy, symptom relief, anxiety reduction, tranquility, pleasure, and improved sleep quality and dietary patterns. These findings support the use of yoga as a health promotion strategy in the prevention and management of chronic disease, and warrant confirmation in larger controlled trials.

Acknowledgments

This research was supported in part by the University of Virginia Institute on Aging, the National Center for Complementary and Alternative Medicine (NCCAM) and the Office of Research on Women's Health (ORWH).

Financial Support: This research was supported in part by the University of Virginia Institute on Aging, Grant Number R21-AT-0002982 and 1-K01-AT-004108 from the National Center for Complementary and Alternative Medicine (NCCAM) and the Office of Research on Women's Health (ORWH), and Grant Number T32-AT-00052 from NCCAM. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the University of Virginia, Texas Christian University, West Virginia University, NCCAM, ORWH, or the National Institutes of Health. Word count = 3234 (with revisions)

References

- Garfinkel M, Schumacher HR Jr. Yoga. Rheumatic Disease Clinics of North America. 2000; 26:125–132. [PubMed: 10680200]
- Hoyez AC. The 'world of yoga': the production and reproduction of therapeutic landscapes. Social Science & Medicine. 2007; 65:112–124. [PubMed: 17428596]
- Mak JC, Faux S. Complementary and alternative medicine use by osteoporotic patients in Australia (CAMEO-A): a prospective study. Journal of Alternative and Complementary Medicine. 2010; 16:579–584.
- Michalsen A, Grossman P, Acil A, et al. Rapid stress reduction and anxiolysis among distressed women as a consequence of a three-month intensive yoga program. Medical Science Monitor. 2005; 11:CR555–CR561. [PubMed: 16319785]
- Vera FM, Manzaneque JM, Maldonado EF, et al. Subjective sleep quality and hormonal modulation in long-term yoga practitioners. Biological Psychology. 2009; 81:164–168. [PubMed: 19482233]
- Herrick CM, Ainsworth AD. Invest in yourself. yoga as a self-care strategy. Nursing Forum. 2000; 35:32–36. [PubMed: 11140067]
- Innes KE, Bourguignon C, Taylor AG. Risk indices associated with the insulin resistance syndrome, cardiovascular disease, and possible protection with yoga: a systematic review. The Journal of the American Board of Family Medicine. 2005; 18:491–519.
- Innes KE, Vincent HK. The influence of yoga-based programs on risk profiles in adults with type 2 diabetes mellitus: a systematic review. Evidence-Based Complementary and Alternative Medicine. 2007; 4:469–486. [PubMed: 18227915]
- 9. Innes KE, Selfe TK, Vishnu A. Mind-body therapies for menopausal symptoms: a systematic review. Maturitas. 2010; 66:135–149. [PubMed: 20167444]

- Kaley-Isley LC, Peterson J, Fischer C, Peterson E. Yoga as a complementary therapy for children and adolescents: a guide for clinicians. Psychiatry (Edgmont). 2010; 7:20–32. [PubMed: 20877530]
- Sibbritt D, Adams J, van der Riet P. The prevalence and characteristics of young and mid-age women who use yoga and meditation: results of a nationally representative survey of 19,209 Australian women. Complement Ther Med. 2011; 19:71–77. [PubMed: 21549257]
- Thomley BS, Ray SH, Cha SS, Bauer BA. Effects of a brief, comprehensive, yoga-based program on quality of life and biometric measures in an employee population: a pilot study. Explore (NY). 2011; 7:27–29. [PubMed: 21194669]
- Thygeson MV, Hooke MC, Clapsaddle J, Robbins A, Moquist K. Peaceful play yoga: serenity and balance for children with cancer and their parents. Journal of Pediatric Oncology Nursing. 2010; 27:276–284. [PubMed: 20639346]
- Aljasir B, Bryson M, Al-Shehri B. Yoga practice for the management of type II diabetes mellitus in adults: a systematic review. Evidence-Based Complementary and Alternative Medicine. 2010; 7:399–408. [PubMed: 18955338]
- Chong CS, Tsunaka M, Tsang HW, Chan EP, Cheung WM. Effects of yoga on stress management in healthy adults: a systematic review. Alternative Therapies in Health and Medicine. 2011; 17:32–38. [PubMed: 21614942]
- Haaz S, Bartlett SJ. Yoga for arthritis: a scoping review. Rheumatic Disease Clinics of North America. 2011; 37:33–46. [PubMed: 21220084]
- 17. Lee MS, Kim JI, Ha JY, Boddy K, Ernst E. Yoga for menopausal symptoms: a systematic review. Menopause. 2009; 16:602–608. [PubMed: 19169169]
- Marc I, Toureche N, Ernst E, et al. Mind-body interventions during pregnancy for preventing or treating women's anxiety. Cochrane Database of Systematic Reviews. 2011; 7:CD007559.
- Posadzki P, Ernst E. Yoga for low back pain: a systematic review of randomized clinical trials. Clinical Rheumatology. 2011; 30:1257–1262. [PubMed: 21590293]
- Smith KB, Pukall CF. An evidence-based review of yoga as a complementary intervention for patients with cancer. Psycho-Oncology. 2009; 18:465–475. [PubMed: 18821529]
- Uebelacker LA, Epstein-Lubow G, Gaudiano BA, Tremont G, Battle CL, Miller IW. Hatha yoga for depression: critical review of the evidence for efficacy, plausible mechanisms of action, and directions for future research. J Psychiatric Practice. 2010; 16:22–33.
- Alexander GK, Innes KE, Brown CJ, et al. "I could move mountains": adults with or at risk for type 2 diabetes reflect on their experiences with yoga practice. The Diabetes Educator. 2010; 36:965–975. [PubMed: 20847193]
- Ando M, Morita T, Akechi T, Ifuku Y. A qualitative study of mindfulness-based meditation therapy in Japanese cancer patients. Supportive Care in Cancer. 2011; 19:929–933. [PubMed: 20473691]
- 24. Garrett R, Immink MA, Hillier S. Becoming connected: the lived experience of yoga participation after stroke. Disability and Rehabilitation. 2011; 33(25–26):2404–2415. [PubMed: 21510816]
- 25. Dittmann KA, Freedman MR. Body awareness, eating attitudes, and spiritual beliefs of women practicing yoga. Eating Disorders. 2009; 17:273–292. [PubMed: 19548145]
- 26. Evans S, Moieni M, Taub R, et al. Iyengar yoga for young adults with rheumatoid arthritis: results from a mixed-methods pilot study. Journal of Pain and Symptom Management. 2010; 39:904–913. [PubMed: 20471550]
- McIver S, McGartland M, O'Halloran P. "Overeating is not about the food": women describe their experience of a yoga treatment program for binge eating. Qualitative Health Research. 2009; 19:1234–1245. [PubMed: 19690205]
- Tul Y, Unruh A, Dick BD. Yoga for chronic pain management: a qualitative exploration. Scandinavian Journal of Caring Sciences. 2011; 25:435–443. [PubMed: 21058970]
- 29. Innes, K. Potential role of yoga therapy for the reduction of cardiovascular disease risk and diabetes management. Paper presented at: North American Research Conference on Complementary & Integrative Medicine; May 12–15, 2009; Minneapolis, MN.
- 30. Innes, K.; Selfe, T.; Taylor, A.; Alexander, G.; Bourguignon, C. Effects of a gentle yoga program on perceived stress, mood, sleep, and indices of sympathetic activation in sedentary, overweight

postmenopausal women. Satellite Symposium: Controversies in Clinical Trials, 11th International Congress of Behavioral Medicine; August 2–3, 2010; Washington, D.C..

- Innes KE, Selfe TK, Alexander GK, Taylor AG. A new educational film control for use in studies of active mind-body therapies: Acceptability and feasibility. Journal of Alternative and Complementary Medicine. 2011; 17:453–458.
- 32. Innes K, Selfe T, Taylor AG, Cottingham S, Hasan S, Alexander G. Effects of a gentle Iyengar yoga program on glucose tolerance and related indices of cardiovascular disease risk in adults with type 2 diabetes. International Journal of Yoga Therapy. 2008; 18:34–35.
- 33. Innes, K. The potential benefits of yoga therapy for the prevention and control of diabetes and cardiovascular disease: evidence, possible pathways, and future directions. Paper presented at: Symposium on Yoga Therapy and Research; March 5–8, 2009; Los Angeles, CA.
- DiBenedetto M, Innes KE, Taylor AG, et al. Effect of a gentle Iyengar yoga program on gait in the elderly: an exploratory study. Archives of Physical Medicine and Rehabilitation. 2005; 86:1830– 1837. [PubMed: 16181950]
- Kolasinski SL, Garfinkel M, Tsai AG, Matz W, Van Dyke A, Schumacher HR. Iyengar yoga for treating symptoms of osteoarthritis of the knees: a pilot study. Journal of Alternative and Complementary Medicine. 2005; 11:689–693.
- 36. IBM. IBM SPSS statistics. Armonk, New York: 2011. p. 19
- 37. Lincoln, YS.; Guba, EG. Naturalistic inquiry. Beverly Hills, CA: Sage; 1985.
- Guba, EG.; Lincoln, YS. Paradigmatic controversies, contradictions, and emerging confluences. In: Denzin, NK.; Lincoln, YS., editors. The Sage handbook of qualitative research. 3rd ed.. Thousand Oaks, CA: Sage; 2005. p. 191-215.
- ATLAS.ti Scientific Software Development GmbH. ATLAS.ti qualitative data analysis. Berlin, Germany: 2005. p. 5.0
- Elo S, Kyngäs H. The qualitative content analysis process. Journal of Advanced Nursing. 2008; 62:107–115. [PubMed: 18352969]
- 41. Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. Qualitative Health Research. 2005; 15:1277–1288. [PubMed: 16204405]
- 42. Wolcott, HF. Transforming qualitative data: description, analysis, and interpretation. Thousand Oaks, CA: Sage; 1994.
- Burnard P. A method of analysing interview transcripts in qualitative research. Nurse Education Today. 1991; 11:461–466. [PubMed: 1775125]
- Raub JA. Psychophysiologic effects of hatha yoga on musculoskeletal and cardiopulmonary function: a literature review. Journal of Alternative and Complementary Medicine. 2002; 8:797– 812.
- 45. Austin, S.; Laeng, S. Yoga. In: Carlson, J., editor. Complementary therapies and wellness: practice essentials for holistic health care. Upper Saddle River, NJ: Prentice Hall; 2003.
- 46. Fan JT, Chen KM. Using silver yoga exercises to promote physical and mental health of elders with dementia in long-term care facilities. International Psychogeriatrics. 2011; 23:1222–1230. [PubMed: 21385519]
- 47. Harinath K, Malhotra AS, Pal K, et al. Effects of Hatha yoga and Omkar meditation on cardiorespiratory performance, psychologic profile, and melatonin secretion. Journal of Alternative and Complementary Medicine. 2004; 10:261–268.
- 48. Madanmohan, Mahadevan SK, Balakrishnan S, Gopalakrishnan M, Prakash ES. Effect of six weeks yoga training on weight loss following step test, respiratory pressures, handgrip strength and handgrip endurance in young healthy subjects. Indian Journal of Physiology and Pharmacology. 2008; 52:164–170. [PubMed: 19130860]
- Pullen PR, Thompson WR, Benardot D, et al. Benefits of yoga for African American heart failure patients. Medicine and Science in Sports and Exercise. 2010; 42:651–657. [PubMed: 19952833]
- Ramos-Jimenez A, Hernandez-Torres RP, Wall-Medrano A, Munoz-Daw MD, Torres-Duran PV, Juarez-Oropeza MA. Cardiovascular and metabolic effects of intensive Hatha yoga training in middle-aged and older women from northern Mexico. International Journal of Yoga. 2009; 2:49– 54. [PubMed: 20842264]

- Chen KM, Chen MH, Hong SM, Chao HC, Lin HS, Li CH. Physical fitness of older adults in senior activity centres after 24-week silver yoga exercises. Journal of Clinical Nursing. 2008; 17:2634–2646. [PubMed: 18808628]
- 52. Chukumnerd P, Hatthakit U, Chuaprapaisilp A. The experience of persons with allergic respiratory symptoms: practicing yoga as a self-healing modality. Holistic Nursing Practice. 2011; 25:63–70. [PubMed: 21325906]
- 53. Mehling WE, Wrubel J, Daubenmier JJ, et al. Body awareness: a phenomenological inquiry into the common ground of mind-body therapies. Philosophy, Ethics, and Humanities in Medicine. 2011; 6:6–17.
- 54. Ando M, Morita T, Akechi T, et al. The efficacy of mindfulness-based meditation therapy on anxiety, depression, and spirituality in Japanese patients with cancer. J Palliative Medicine. 2009; 12:1091–1094.
- 55. Gupta N, Khera S, Vempati RP, Sharma R, Bijlani RL. Effect of yoga based lifestyle intervention on state and trait anxiety. Indian Journal of Physiology and Pharmacology. 2006; 50:41–47. [PubMed: 16850902]
- 56. Yogendra J, Yogendra HJ, Ambardekar S, et al. Beneficial effects of yoga lifestyle on reversibility of ischaemic heart disease: Caring heart project of International Board of Yoga. The Journal of the Association of Physicians of India. 2004; 52:283–289. [PubMed: 15636328]
- Delahanty LM, Conroy MB, Nathan DM. Diabetes Prevention Program Research Group. Psychological predictors of physical activity in the diabetes prevention program. Journal of the American Dietetic Association. 2006; 106:698–705. [PubMed: 16647327]
- Lesperance F, Frasure-Smith N, Talajic M, Bourassa MG. Five-year risk of cardiac mortality in relation to initial severity and one-year changes in depression symptoms after myocardial infarction. Circulation. 2002; 105:1049–1053. [PubMed: 11877353]
- Mayou RA, Gill D, Thompson DR, et al. Depression and anxiety as predictors of outcome after myocardial infarction. Psychosomatic Medicine. 2000; 62:212–219. [PubMed: 10772399]
- Paschalides C, Wearden AJ, Dunkerley R, Bundy C, Davies R, Dickens CM. The associations of anxiety, depression and personal illness representations with glycaemic control and health-related quality of life in patients with type 2 diabetes mellitus. Journal of Psychosomatic Research. 2004; 57:557–564. [PubMed: 15596162]
- Rozanski A, Blumenthal JA, Kaplan J. Impact of psychological factors on the pathogenesis of cardiovascular disease and implications for therapy. Circulation. 1999; 99:2192–2217. [PubMed: 10217662]
- Atkinson NL, Permuth-Levine R. Benefits, barriers, and cues to action of yoga practice: A focus group approach. American Journal of Health Behavior. 2009; 33:3–14. [PubMed: 18844516]
- 63. Taibi DM, Vitiello MV. A pilot study of gentle yoga for sleep disturbance in women with osteoarthritis. Sleep Medicine. 2011; 12:512–517. [PubMed: 21489869]
- 64. Kozasa EH, Hachul H, Monson C, et al. Mind-body interventions for the treatment of insomnia: A review. Revista brasileira de psiquiatria. 2010; 32:437–443. [PubMed: 21308266]
- 65. Gottlieb DJ, Redline S, Nieto FJ, et al. Association of usual sleep duration with hypertension: The Sleep Heart Health Study. Sleep. 2006; 29:1009–1014. [PubMed: 16944668]
- 66. Resnick HE, Redline S, Shahar E, et al. Diabetes and sleep disturbances: Findings from the Sleep Heart Health Study. Diabetes Care. 2003; 26:702–709. [PubMed: 12610025]
- Cappuccio FP, Cooper D, D'Elia L, Strazzullo P, Miller MA. Sleep duration predicts cardiovascular outcomes: A systematic review and meta-analysis of prospective studies. European Heart Journal. 2011; 32:1484–1492. [PubMed: 21300732]
- 68. Spiegel K, Tasali E, Leproult R, Van Cauter E. Effects of poor and short sleep on glucose metabolism and obesity risk. Nature Reviews. Endocrinology. 2009; 5:253–261.
- 69. Strine TW, Chapman DP. Associations of frequent sleep insufficiency with healthrelated quality of life and health behaviors. Sleep Medicine. 2005; 6:23–27. [PubMed: 15680291]
- Palasuwan A, Margaritis I, Soogarun S, Rousseau AS. Dietary intakes and antioxidant status in mind-body exercising pre- and postmenopausal women. The Journal of Nutrition, Health, & Aging. 2011; 15:577–584.

Table 1

Sample Characteristics

	All	Women's Health and Yoga Study (WHYES)	Diabetes and Yoga Study (DAYS)	P Value [*]
N	42	30	12	
Age				0.291
M (SD)	59.1 (7.1)	58.2 (6.1)	61.3 (9.0)	
Range	50 - 76	50 - 76	52 - 73	
Gender				0.001
Female	38 (90.5%)	30	8 (66.7%)	
Male	4 (9.5%)	0	4 (33.3%)	
Currently Married	25 (59.5%)	17 (56.7%)	8 (66.7%)	0.551
Race/Ethnicity				0.909
Non-Hispanic White	32 (76.2%)	23 (76.7%)	9 (75%)	
Racial/Ethnic Minority	10 (23.8%)	7 (23.3%)	3 (25%)	
Education				0.505
<4 years of college	11(26.2%)	7 (23.3%)	4 (33.3%)	
>=4 years of college	31 (73.8%)	23 (76.7%)	8 (66.7%)	
Currently Employed	26 (61.9%)	21(70%)	5 (41.7%)	0.088
Body Mass Index (kg/m ²)				0.555
Mean (SD)	32.8 (8.4)	33.3 (8.7)	31.6 (7.9)	
Median	30.1	31.0	30.0	
Systolic Blood Pressure (mm Hg)				0.989
M (SD)	131 (21)	131 (21)	131 (21)	
Diastolic Blood Pressure (mm Hg)				0.608
M (SD)	75 (10)	75 (11)	73 (9)	
Hemoglobin A1c (%)				0.017
M (SD)	6.0 (0.7)	5.8 (0.4)	6.6 (1.0)	
Fasting glucose (mg/dL)				0.009
M (SD)	108.6 (28.7)	98.5 (15.1)	134.0 (38.4)	
Total cholesterol (mg/dL)				0.005
M (SD)	202.3 (48.5)	215.2 (45.2)	170.1 (42.5)	
HDL cholesterol (mg/dL)				0.571
M (SD)	55.0 (13.0)	55.7 (13.5)	53.2 (12.0)	
LDL cholesterol (mg/dL)				0.006
M (SD)	126.9 (41.5)	137.8 (39.5)	99.7 (34.0)	
Triglycerides (mg/dL)				0.384
M (SD)	121 (75.9)	127.5 (84.7)	104.7 (45.9)	
History of Depression	9 (21.4%)	6 (20%)	3 (25%)	0.618
History of Anxiety	4 (9.5%)	3 (10%)	1 (8.3%)	0.931

Alexander et al.

All		Women's Health and Yoga Study (WHYES)	Diabetes and Yoga Study (DAYS)	P Value [*]
Former Smoker	10 (23.8%)	8 (26.7%)	2 (16.7%)	0.706

*To assess differences in continuous variables, independent t-tests were used. For categorical variables, X² analyses were used.

Table 2

Comparison of Yoga Participants, Based on Qualitative Study Inclusion

	Included	Excluded	P Value*
Ν	42	16	
Age			0.694
M (SD)	59.1 (7.1)	58.3 (6.5)	
Range	50 - 76	48 – 73	
Gender			0.335
Female	38 (90.5%)	13 (81.3%)	
Male	4 (9.5%)	3 (18.8%)	
Currently Married	25 (59.5%)	5 (31.3%)	0.054
Race/Ethnicity			0.127
Non-Hispanic White	32 (76.2%)	15 (93.8%)	
Racial/Ethnic minority	10 (23.8%)	1 (6.3%)	
Education			0.196
< 4 years of college	11 (26.2%)	7 (43.8%)	
>=4 years of college	31(73.8%)	9 (56.3%)	
Currently Employed	26 (61.9%)	10 (62.5%)	0.967
Type 2 diabetes mellitus	12 (28.6%)	8 (50%)	0.125
Body Mass Index (kg/m ²)			0.946
M (SD) Median	32.8 (8.4) 30.1	33.0 (5.5) 30.8	
Systolic Blood Pressure (mm Hg)			0.199
M (SD)	131 (21)	123 (19)	
Diastolic Blood Pressure (mm Hg)			0.052
M (SD)	75 (10)	69 (9)	
Hemoglobin A1c (%)			0.042
M (SD)	6.0 (0.7)	6.5 (0.9)	
Fasting glucose (mg/dL)			0.064
M (SD)	108.6 (28.7)	125.4 (34.5)	
Total cholesterol (mg/dL)			0.553
M (SD)	202.3 (48.5)	193.6 (52.5)	
HDL cholesterol (mg/dL)			0.004
M (SD)	55.0 (13.0)	46.1 (8.5)	
LDL cholesterol (mg/dL)			0.658
M (SD)	126.9 (41.5)	121.3 (45.2)	
Triglycerides (mg/dL)			0.075
M (SD)	121.0 (75.9)	157.2 (38.9)	
History of Depression	9 (21.4%)	3 (18.8%)	0.875
History of Anxiety	4 (9.5%)	2 (12.5%)	0.702

Alexander et al.

	Included	Excluded	P Value*
Former smoker	10 (23.8%)	5 (31.3%)	0.384

*To assess differences in continuous variables, independent t-tests were used. For categorical variables, X² analyses were used.

Table 3

Summary of Participant Quotes by Theme*

Physical Benefits				
All	DAYS	WHYES	P Value **	
83% (35/42)	100% (12/12)	77% (23/30)	0.067	
Increasing self/body awareness All (N=22, 52%) D (n=9, 75%) W (n=13, 43%)	 "moved some unused muscles" (DM5) "good, for the first time I was sore, wrists, ankles, and neck" (DM9) "appreciation for my own bodybeginning to feel more comfortable with posesfeel unfamiliar parts of my body" (DM10) "release of tension, feeling my body respond to the poses, energy and a sense of empowermentthat there is something I can do to keep myself healthy" (DM11) "hard to breathe when at full tension" (DM13) "Legs in pain. But good pain Back of legs are sore." (DM26) "Was actually sore in shoulders the next day" (DM27) "feeling and awareness of body increasing" (DM34) "I am standing with my feet apart a lot wider than when I started Yoga is good. I've learned how to take deep breaths, lifting my toes and shifting my weight to my heel." (DM35) "more aware of postureposture much improved, feeling of well being" (10) "more aware of posture cursous advarencess of posture" (18) "felt good, muscles were in better shape for dancing" (33) "posture improved, think of posture alignment several times a day" (36) "imore aware of body through the days I han made me so much more aware." (II 02) "continuing to concentate on breathing in various activities Trying desperately to stand correctly" (II 15) "Learning to fine tune" postures to do more correctly," (II 17) "Exercises felt good, all are more natural the back 'flex' feels good on more weak back muscles." (II 20) "noticed posture improving, more aware of standing straight, less camping in feet" (43) "Trying to stand and sit with more attention to my posture and breathing has been an ongoing focus of minefelt the 'pull' in shoulders & knees; maybe I am aligning body parts bestre?" (70) "yoga posture awareness all day This session, I paid particular attention to my back and did not 'try a little harder.' Instead, I relaxed into each pose ame er			
Overall fitness All (N=8, 19%) D (n=3, 25%) W (n=5, 17%)				
Stretching All (N=11, 26%) D (n=3, 25%) W (n=8, 27%)	retching II (N=11, 26%) (n=3, 25%) / (n=8, 27%) (n=8, 27%) (n=10, 1, 27%)		eeks, good class Able to stretch g muscles that had not been worked ee." (10) 'legs today, felt results with belt and	
Strengthening the body and Maintaining poses "Strengthened legs which had gotten weak because of knee arthritis." (DM1) "able to hold poses a little longer than previously, my bad knee is getting a little strongerfeeling more strength upper legs and shoulder, new poses, felt little sore from staying in poses longer in Saturday's class but I feel better it, I know I will benefit in the long run." (DM10) All (N=11, 26%) "I wish I could do more poses- getting easier, and I feel good when finished" (DM25) D (n=4, 33%) "L side stiff, upper arms slightly sore, wonderful class - I need to work on upper arm strength" (DM41) "tough poses but I was determined, good class, sticking with it, gaining strength-I feel it, can go a little longerge class, we're building strength and comfort"(10) "Leg strength is increasing" (18) "Feeling stronger" (29)			rongerfeeling more strength in my Saturday's class but I feel better about 25) m strength" (DM41) feel it, can go a little longergood	

	"I never thought I could do yoga posesnow I plan to incorporate yoga into my life." (33) "I'm finally feeling more strength in my legs - more flexible on some positions"(II 14) "improvement in strength to over all sense of wellbeing, creation of desire to continue personal study of yoga" (II 17) "holding poses for longer periods of time" (64)			
Deep breathing All (N=7, 17%) D (n=4, 33%) W (n=3, 10%)	"refreshing workout, I felt easier, smoother breathing afterwardsable to breathe deeper" (DM10) "What I do when I practice is count breaths and try to extend holding each pose. I do each pose sometimes 3–4 times repeated, extending the amounts of breaths with each." (DM27) "breathing is coming easily" (DM34) "Great breathing - set the tone of the class" (DM41) "deep breathing throughout the day" (43) "emphasis on breathing & relaxation (legs up wall) for extended time; deep breathing exercise" (78) "15 minutes spent on breathing & trying to watch for a pattern" (II 28)			
Enhanced energy All (N=9, 21%) D (n=1, 8%) W (n=8, 27%)	"I was tired prior to class but after class I felt relaxed and more energy." (DM10) "feel really committed, doing yoga in the morning makes me feel energized" (2) "Tired today, yoga warmed me up and was able to keep going, good class, building stamina, feel good" (10) "Feeling more energetic" (29) "Felt tired before coming to class, but felt better after" (34) "I feel increased strength/ flexibility relaxed and energized!" (II 14) "the deep relaxation felt in class and the added energy. I have more stamina, feel more centered" (II 36) "relaxed and energized after practice; another great session!" (64) "following class I felt relaxed & invigoratedposes are becoming easier to get into; they are still hard work but the result is always peace and more energy ""so wonderful to do Yoga, I was tired and joints ached, indigestion, sluggish, water retentive before class. I felt relaxed and energized following class!" (78)			
Symptom relief All (N=12, 29%) D (n=2, 17%) W (n=10, 33%)	"groin hurt going in, better after class!" (DM25) "I have less joint stiffness and aches with daily Yoga practicereally helps loosen my knees after tennis like to loosen arms + fingers tootwisting poses leave upper back sore; wall exercises help" (DM34) "Getting to be part of my daily routine, very good, made me feel very relaxed, help my back muscles" (2) "yoga is helping my knees" (5) "felt sick before class but much better after" (6) "Tm noticing that my bunions do not hurt as much and that my feet are stronger and more flexible." (10) "Stretching out sore muscles from weekend gardening, felt good Back out. Good exercises to help stretch After painting, climbing ladders all weekend, I did most of the relaxation poses and stretching felt wonderful." (II 14) "After 4 hours of yardwork I needed it." (II 15) "Seems best to start day with yoga to relieve morning stiffness (right hip especially sore) Yoga = relief from stiffness. In divided doses doing postures to relieve stiff lower back, stretch hamstrings, open shoulders, stand straight Right hip is better, yoga helps." (II 17) "An ahha moment, pressing right heel mire in warrior pose relieves knee strain/ pain in right knee - duh!" (II 36) "making slight adjustments in placement of hands/wrists during poses alleviates pain from arthritis / carpal tunnel syndrome" (64) "My body doesn't have joint pain when I do Yoga! I feel stronger and better in control of my body day by dayabsence of joint pain and fatigue, renewed hope!overall joint stiffness is greatly diminished - even sciatic nerve pain is very			
	I	Mental Benefits		
All	DAYS	WHYES	P Value	
83% (35/42)	83% (10/12)	83% (25/30)	1.00	
Relaxation and stress/anxiety reduction "Last relaxing position is wonderful, good" (DM9) "felt good, relaxingstarting to feel comfortable, definitely feel more relaxedfelt relaxed and happy I was pretty anxious, jittery all day until my yogaafter a tension filled day I practiced at the end of the day and felt much more relaxed post session" (DM10) 0 (n=6, 50%) "I feel more relax[cd]" (DM26) W (n=14, 47%) "relaxing by laying on my back" (DM35) "Relaxation" (DM41) "Getting to be part of my daily routine, very good, made me feel very relaxed, help my back muscles, very good, instructor is super, makes me feel very good I like the way you are taught how to relax and to unwind" (2) "I relay looked forward to the class because it helpeed in relaxing me" (8) "focus on relaxing Nice and slow, good work out, very good-especially the leg and ankle stretches, felt rushed, relaxing after a tense week" (13) "new skills in relaxation and 'living in the moment very relaxing" (18) "concerns about knees, feet, and weight are minimized" (33) "very relaxing" (34) "The class successfully convinced me of the value of yoga as a stress reliever" (II 02) "Much better - helped me unwind from traveling. I spent more time in relaxation poses Great way to unwind after a busy week." (II 14) "Feels best to start day with yoga and do afternoon relaxations Great sense of relaxation by end of class." (II 17) "Yoga class very relaxing" (120) "				

"felt need for relaxation & deep breathing I'm not anxious; I feel good about myself" (78)					
Pleasure All (N=22, 52%) D (n=7, 58%) W (n=15, 50%)	Pleasure All (N=22, 52%) D (n=7, 58%) W (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=15, 50%) (n=16,				
Increased tranquility and decreased reactivity All (N=8, 19%) D (n=1, 8%) W (n=7, 23%)	 "felt calmer after session from a long day" (DM10) "deep breathing to keep my temper" (27) "noticed calming reactions to situations" (43) "learning calming techniques." (II 15) "Mental detachment from basement water leakGives sense of strength and calmness and control over life." (II 17) "Came in rushed - left calm" (II 19) "Car had to be towed after class but deep breathing helped me to maintain 'my cool'." (II 28) "I was calmer and more limber after each yoga session" (45) 				
	Sleep Benefits				
All	DAYS	WHYES	P Value		
21% (9/42)	17% (2/12)	23% (7/30)	0.634		
"after a tension filled day I practiced at the end of the day and felt much more relaxed post session and slept better" (DM10) "practice felt good, slept well Been sleeping great since yoga-I almost always do it just before I sleep." (DM13) "exercises are less strenuous, more I do the better I sleep" (2) "slept well at night" (10) "yoga helped relax me before sleep" (II 20) "the deep relaxation felt in class and the added energy. I have more stamina, feel more centered and am sleeping like a baby" (II 36) "better sleep" (45) "doing some breathing exercises before going to sleep" (64) "restful sleep" (78)					

Dietary Benefits			
All	DAYS	WHYES	P Value
14% (6/42)	8% (1/12)	17% (5/30)	0.486

"beneficial in helping me to think about what I was eating and how I was moving. I am still enthused about yoga and taking better care of myself." (DM11)

"I seem to have suddenly lost my taste for salty and heavy food and crave vegetables" (6) "focus on diet" (13)

"Eating habits improving.... This stuff [yoga and instructor feedback] is good for me...Back on healthy eating!" (II 02) "Ate healthy meal & did not stuff when I felt full." (II 28) "Felt a noticeable difference before and after, also affected my appetite. I am able to eat less and crave carbs less." (34)

W = WHYES (Women's Health, Yoga, and Education Study)

^{**}X² analyses

^{*}D = DAYS (Diabetes and Yoga Study)