

Shah, Visha, Boyes, Christopher ORCID  
logoORCID: <https://orcid.org/0000-0002-5149-8932>, Laver Fawcett,  
Alison ORCID logoORCID: <https://orcid.org/0000-0002-9924-1319>,  
Lacock, Lynne, Potts, Laura and Newcombe, Suzanne (2022)  
Iyengar yoga for Long Covid: Pilot study results. Project Report.  
Iyengar Yoga UK.

Downloaded from: <https://ray.yorks.ac.uk/id/eprint/7991/>

The version presented here may differ from the published version or version of record. If  
you intend to cite from the work you are advised to consult the publisher's version:  
[https://iyengaryoga.org.uk/wp-content/uploads/2022/11/Iyengar-Yoga-UK-Long-Covid-  
Pilot-Study-Final-Report.pdf](https://iyengaryoga.org.uk/wp-content/uploads/2022/11/Iyengar-Yoga-UK-Long-Covid-Pilot-Study-Final-Report.pdf)

Research at York St John (RaY) is an institutional repository. It supports the principles of  
open access by making the research outputs of the University available in digital form.  
Copyright of the items stored in RaY reside with the authors and/or other copyright  
owners. Users may access full text items free of charge, and may download a copy for  
private study or non-commercial research. For further reuse terms, see licence terms  
governing individual outputs. [Institutional Repository Policy Statement](#)

# RaY

Research at the University of York St John

For more information please contact RaY at [ray@yorks.ac.uk](mailto:ray@yorks.ac.uk)

# **IY(UK) – Long Covid Pilot Research Report**

## **Final Report**

**September 30<sup>th</sup> 2022**

Vishal Shah, Dr. Chris Boyes, Professor Alison Laver Fawcett, Lynne Lacock

with Dr Laura Potts and Dr Suzanne Newcombe

### **Abstract**

The Iyengar Yoga (UK) Long Covid pilot project ran for 10 weeks between October-December 2021. 55 adults (ranging from 22-69 years of age) suffering from Long Covid participated in the programme which saw one student having a weekly online private yoga sessions with three qualified Iyengar Yoga teachers, supervised by a senior therapy teacher. The project was supervised by Lois Steinberg and the basic recommended asana sequence available on the IY(UK) website. 115 IY(UK) teachers (with a pool of 19 cover teachers) volunteered their time in return for professional development training provided as part of the programme. It can be concluded that the programme was effective in improving both physical and mental well-being for those suffering from Long Covid.

## Table of Contents

ABSTRACT .....	1
<i>Table of Contents</i> .....	2
INTRODUCTION .....	3
PART 1: EVALUATION OF QUANTITATIVE SURVEY DATA .....	4
<i>Composite Measures Findings</i> .....	4
<i>Specific Measures Findings</i> .....	5
PART 2: EVALUATION OF QUALITATIVE INTERVIEW DATA .....	10
STUDENT PARTICIPANTS .....	12
<i>Symptom experience</i> .....	13
Sleep .....	13
Mental Health .....	14
Strength and Fatigue .....	15
Lungs and Breathing .....	16
Other Benefits Described .....	17
<i>Experience of the Yoga Sessions</i> .....	18
<i>Student Experience of Teachers</i> .....	23
<i>Differences from NHS LC clinic programme.</i> .....	27
Concluding Student Impressions .....	27
<i>Challenges and Criticism</i> .....	29
Pre and Post Session Forms .....	29
Technology .....	30
Physical circumstances .....	30
Communication .....	30
Self-Practice Motivation .....	31
TEACHER PARTICIPANTS .....	32
Motivation to Volunteer .....	32
<i>Training and Induction</i> .....	33
<i>Success and Highlights</i> .....	36
<i>Challenges</i> .....	37
DISCUSSION AND CONCLUSIONS .....	38
RECOMMENDATIONS .....	40
APPENDICES .....	41
1: <i>Student Consent</i> .....	41
2: <i>Participant Questions – Pre-Acceptance</i> .....	42
3: <i>Pre-Class Questionnaire</i> .....	43
4: <i>Post-class questionnaire</i> .....	45
5: <i>Overview of Qualitative Interview Aims:</i> .....	47
6: <i>Qualitative Interview Schedule Students</i> .....	48
7: <i>Qualitative Interview Schedule Teachers</i> .....	52
8: <i>Coding Grid Sample:</i> .....	55

## Introduction

Presented here is the final report on the Long Covid Online Iyengar Yoga Therapy Pilot Project Evaluation. The project had two parts:

1. Evaluation of quantitative pre- and post-intervention data (the intervention being Iyengar Yoga and the data being symptom self-reports). This analysis was conducted using SPSS statistical modelling and the process of training and data cleaning necessary for this analysis has begun.
2. Semi-structured interviews with intervention participants and teachers who delivered the intervention. Qualitative analysis using the industry standard NVivo software was used to review the data.

## Intervention

Prior to setting up this pilot study of Iyengar Yoga for Long Covid, a literature review had been completed by a graduate student, Sarah Mazari, supervised by Professor Nik Brown of York University and Laura Potts for IY(UK). While comprehensive at the time, a considerable peer-reviewed literature has been published subsequently. We do not refer to this literature review material in this report.

The Iyengar Yoga (UK) Long Covid pilot project ran for 10-weeks between October-December 2021. 55 adults (ranging from 22-69 years of age) suffering from Long Covid participated in the programme which saw one student having a weekly online private yoga sessions with three qualified Iyengar Yoga teachers, supervised by a senior therapy teacher. The yoga was supervised by Lois Steinberg and the basic recommended asana sequence made available on the IY(UK) website. 115 IY(UK) teachers regularly volunteered their time (with a pool of 19 cover teachers) in return for professional development training provided as part of the programme.

## Evaluation Team Members

The project team comprises Vishal Shah (employed as student researcher), Dr Chris Boyes, Professor Alison Laver Fawcett, and Lynne Lacock from York St John University, working in partnership with Dr Laura Potts from Iyengar Yoga (UK) and Dr Suzanne Newcombe, The Open University, Department of Religious Studies, and Iyengar Yoga (UK).

## Resource Allocation

Iyengar Yoga (UK) committed volunteer time (115 therapy teachers x 25 hours) as well as Working Group volunteer time (6 members x 30 hours; significantly more for some); and £4,000 of cash funds for paid administrative support of the pilot project intervention. For the evaluation, York St John University committed and funded a total of 146 hours paid student researcher time (an initial 50 hours, followed by a further 96 hours in a second tranche of funding). This ensured there was a person committed to rigorous data analysis as paid work. Being a student researcher, this arrangement also involved training (under the supervision of established academics) of the student in techniques of qualitative and quantitative analysis.

## Part 1: Evaluation of Quantitative Survey Data

Pre and post therapy session data was collected from 55 students. This was done via the <https://iyengaryoga.org.uk> website. Participants were given a direct link to a form that was built within the website and was only available to them. The software used was a WordPress plugin called Gravity Forms. A pre-session and post-session form was set up for each group. The Gravity Forms plugin had a function which allowed the user to directly export spreadsheets showing all of the entries for each form. Consent was obtained through the IY(UK) website (Appendix 1) from students before the start of the therapy programme and data collection thereof. A pre-programme questionnaire (Appendix 2) was also administered to the students, collecting information on demographics as well as pre and post Long Covid physical and mental health. The pre and post session forms collected data on the following two key parameters.

### A. Composite Measures:

Data were collected on a 7-point Likert scale pre and post each session, with 1 being excellent and 7 being extremely bad for the below two composite measures. (Appendix 3)

1. Overall Physical well being
2. Overall Mental well being

The third composite measure collected post each session was also done using a 7-point Likert scale, with 1 being easy and 7 being difficult. (Appendix 4)

3. Ease or Difficulty in undertaking the class

### B. Specific Measures:

16 symptom specific measures were collected pre and post each session. The pre session collection was on a 4-point ordinal scale, with 1 being *none* to 4 being *very strong*. (Appendix 5)

The post session data was on a 1+5-point scale. 1 being *Not applicable*, 2 being *completely resolved* and 6 being *completely aggravated*. This scale was reset to 1 to 5 for numerical statistical analysis. (Appendix 6)

## Composite Measures Findings

A paired t-test analysis was performed on each measure, comparing pre first session to post final session for the analysis on physical and mental wellbeing, and post first and post final session data for ease or difficulty in undertaking the class.

**The results below show statistically significant improvements on the physical and mental well-being scores from the beginning of the first session to the end of the last session. It can be concluded that the overall therapy program was effective in improving the physical and mental well-being of the students.**

The results also show a slight improvement on the ease in undertaking the class, but this was not statistically significant. It may be reasonable to conclude that although participant mental and physical wellbeing improved this did not mean actual participation in the class was any less challenging (or beneficial).

**Paired Samples Statistics**

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	PrePhy1	4.1636	55	1.03214	.13917
	PostPhy9	1.5818	55	1.41016	.19015
Pair 2	PreMen1	3.7091	55	1.08308	.14604
	PostMent9	1.3818	55	1.20939	.16307
Pair 3	Class1	2.4182	55	1.71800	.23165
	Class9	2.0727	55	1.93271	.26061

**Paired Samples Test**

		Paired Differences					Significance			
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	One-Sided p	Two-Sided p
Pair 1	PrePhy1 - PostPhy9	2.58182	1.82260	.24576	2.08910	3.07454	10.505	54	.000	.000
Pair 2	PreMen1 - PostMent9	2.32727	1.54026	.20769	1.91088	2.74366	11.206	54	.000	.000
Pair 3	Class1 - Class9	.34545	2.35087	.31699	-.29008	.98098	1.090	54	.140	.281

## Specific Measures Findings

### T-Test Physical Health

There was a statistically significant reduction in fatigue.

**Paired Samples Statistics**

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Fatigue_A	2.50	46	.691	.102
	Fatigue	1.85	46	.759	.112

**Paired Samples Test**

		Paired Differences					Significance			
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	One-Sided p	Two-Sided p
Pair 1	Fatigue_A - Fatigue	.652	1.016	.150	.351	.954	4.354	45	<.001	<.001

### T-Test Difficulty Breathing

There was no statistically significant reduction in difficulty breathing.

### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Difficultybreathing	2.00	19	.471	.108
	DifficutlyBreathing	1.84	19	.765	.175

### Paired Samples Test

		Paired Differences					Significance			
		95% Confidence Interval of the Difference								
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	Difficultybreathing - DifficutlyBreathing	.158	.834	.191	-.244	.560	.825	18	.210	.420

### T-Test Headache

There was no statistically significant reduction in headaches.

### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Headache_A	1.54	24	.588	.120
	Headache	1.63	24	.924	.189

### Paired Samples Test

		Paired Differences					Significance			
		95% Confidence Interval of the Difference								
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	Headache_A - Headache	-.083	.929	.190	-.475	.309	-.440	23	.332	.664

### T-Test Muscle Body Aches and Joint Pain

There was no statistically significant reduction in body aches and joint pain.

### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	MuscleBodyAchesJointPain_A	2.03	38	.545	.088
	MuscleBodyAchesJointPain	1.89	38	.649	.105

### Paired Samples Test

		Paired Differences					Significance			
		95% Confidence Interval of the Difference								
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	MuscleBodyAchesJointPain_A - MuscleBodyAchesJointPain	.132	.777	.126	-.124	.387	1.044	37	.152	.303

### T-Test Heart Palpitations

There was no statistically significant reduction in palpitations.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	HeartPalpitations_A	1.76	17	.664	.161
	HeartPalpitations	1.76	17	.752	.182

#### Paired Samples Test

		Paired Differences							Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	HeartPalpitations_A - HeartPalpitations	.000	1.173	.284	-.603	.603	.000	16	.500	1.000

### T-Test Digestive Disorders

There was no statistically significant reduction in digestive disorders.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	DigestiveDisorders_A	1.70	10	.675	.213
	DigestiveDisorders	2.10	10	.876	.277

#### Paired Samples Test

		Paired Differences							Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	DigestiveDisorders_A - DigestiveDisorders	-.400	1.506	.476	-1.477	.677	-.840	9	.211	.423

### T-Test Nausea

There was no statistically significant reduction in nausea.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Nausea_A	1.67	9	1.000	.333
	Nausea	1.78	9	.972	.324

#### Paired Samples Test

Paired-Samples T-Test												
		Paired Differences					t		df		Significance	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference						One-Sided p	Two-Sided p
						Lower	Upper					
Pair 1	Nausea_A - Nausea	-.111	1.537	.512	-1.292	1.070	-.217	8	.417	.834		



### T-Test Heartburn

There was no statistically significant reduction in heartburn.

Paired Samples Statistics										
		Mean	N	Std. Deviation	Std. Error Mean					
Pair 1	Heartburn_A	2.25	4	1.500	.750					
	Heartburn	1.50	4	1.000	.500					

  

Paired Samples Test										
		Paired Differences						Significance		
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference			One-Sided p	Two-Sided p	
					Lower	Upper	t	df		
Pair 1	Heartburn_A - Heartburn	.750	1.500	.750	-1.637	3.137	1.000	3	.196	.391

### T-Test Anxiety

There was a statistically significant reduction in anxiety.

Paired Samples Statistics										
		Mean	N	Std. Deviation	Std. Error Mean					
Pair 1	Anxiety_A	2.04	27	.587	.113					
	Anxiety	1.59	27	.501	.096					

  

Paired Samples Test										
		Paired Differences						Significance		
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference			One-Sided p	Two-Sided p	
					Lower	Upper	t	df		
Pair 1	Anxiety_A - Anxiety	.444	.698	.134	.168	.721	3.309	26	.001	.003

### T-Test Depression

There was no statistically significant reduction in depression.

Paired Samples Statistics										
		Mean	N	Std. Deviation	Std. Error Mean					
Pair 1	Depression_A	1.74	19	.653	.150					
	Depression	1.58	19	.507	.116					

  

Paired Samples Test										
		Paired Differences						Significance		
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference			One-Sided p	Two-Sided p	
					Lower	Upper	t	df		
Pair 1	Depression_A - Depression	.158	.602	.138	-.132	.448	1.143	18	.134	.268

### T-Test Difficulty Concentrating

There was no statistically significant reduction in difficulty concentrating.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	DifficultyConcentrating_A	2.15	27	.718	.138
	DifficultyConcentrating	1.93	27	.616	.118

#### Paired Samples Test

		Paired Differences							Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	DifficultyConcentrating_A - DifficultyConcentrating_B	.222	.847	.163	-.113	.557	1.363	26	.092	.185

### T-Test Cough Sore Throat Phlegm

There was a statistically significant reduction in cough, sore throat and phlegm.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	CoughSoreThroatPhlegm_A	1.95	20	.759	.170
	CoughSoreThroatPhlegm	2.45	20	.999	.223

#### Paired Samples Test

		Paired Differences							Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	CoughSoreThroatPhlegm_A - CoughSoreThroatPhlegm	-.500	1.277	.286	-1.098	.098	-1.751	19	.048	.096

### T-Test Chest Pain

There was no statistically significant reduction in chest pain.

#### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	ChestPain_A	1.92	13	.760	.211
	ChestPain	2.15	13	.899	.249

#### Paired Samples Test

		Paired Differences							Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	ChestPain_A - ChestPain	-.231	1.013	.281	-.843	.381	-.822	12	.214	.427

### T-Test Dizziness

There was no statistically significant reduction in dizziness.

Paired Samples Statistics					
		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Dizziness_A	2.00	9	.500	.167
	Dizziness	1.78	9	.972	.324

Paired Samples Test										
		Paired Differences							Significance	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	One-Sided p	Two-Sided p
					Lower	Upper				
Pair 1	Dizziness_A - Dizziness	.222	.833	.278	-.418	.863	.800	8	.223	.447

### T-Test Menstrual Cramps

There was no statistically significant reduction in menstrual cramps.

Paired Samples Statistics										
		Mean		N	Std. Deviation		Std. Error Mean			
Pair 1	MenstrualCramps_A	2.00		2	1.414		1.000			
	MenstrualCramps	1.50		2	.707		.500			

Paired Samples Test										
		Paired Differences						Significance		
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	One-Sided p	Two-Sided p
					Lower	Upper				
Pair 1	MenstrualCramps_A - MenstrualCramps	.500	.707	.500	-5.853	6.853	1.000	1	.250	.500

**In summary, there were statistically significant reductions in fatigue, anxiety, and in cough, sore throat and phlegm scores, but not in the remaining measures.**

## Part 2: Evaluation of Qualitative Interview Data

It was determined that follow-up interviews were the highest priority research area to concentrate on before the experience of the intervention faded from participants' memory. Before interviewees could be approached, we obtained full ethical clearance from York St John's Ethics Committee. This process is essential for future publication in a peer-reviewed journal as well as for correct and due process and takes some time to secure; York St John approved within three weeks which is a relatively quick turn-around time for university ethics committees in general. The rigour of interviews and analysis is always improved by this process.

The evaluation team designed two tailored questionnaires (see Appendix 7 and 8) with open-ended questions and additional optional probes depending on interviewee responses. Pilot interviews were undertaken with the supervisory team, giving Vishal an opportunity to practise and refine his interview technique, and for the team to refine the interview schedule (Appendix 9).

### Sampling

Students and teachers who participated in the IY(UK) Long Covid programme were contacted through email. Consent to participation in this phase of the research was requested by IY(UK). The contact details of those who consented were then shared with the researcher by IY(UK). The list was then anonymised using codes starting with S and T numerically for students and teachers respectively (Appendix 10). An online random number generator was employed to pick participants from within both the groups. The randomly chosen samples offer a good basis for supplementing the quantitative analysis with information on the actual experiences of participants, what they found helpful or difficult and other impressions.

11 of 28 students and 3 of 63 teachers were contacted and interviewed as part of this phase of the research for further analysis between 26<sup>th</sup> March and 14<sup>th</sup> June 2022. The upper limit to the number of interviews was chosen to make maximum use of the funded time allocated for Vishal (we subsequently secured further funding to enable quantitative analysis). Students and teachers contacted were happy to engage with Vishal and share their experiences. Vishal gathered 6 hours of interview data for analysis. Interviews were automatically transcribed as part of the recording, but transcripts also required manual cleaning (i.e., ensuring the speech-to-text was accurate) which took 18 hours.

### Method of Data Analysis

NVivo Analysis of both student and teacher interview data was undertaken. This process involves using software to determine the themes and words most frequently found in the transcripts and grouping them for further analysis. Initial codes were generated, and a thematic analysis was done to arrive at the main themes emerging from the surveys. The themes and quotes were used to add more nuance and personalisation to quantitative analysis; the final conclusions integrate both these more personal descriptions with the quantitatively drawn statistical results. In the sections on each theme presented below, quotations from participants are indicated in italics and indented.

## Student Participants

10 out of the 11 students had undertaken some form of yoga previously, at least one having 15 years' experience. A few of them had done Iyengar yoga (IY) in the past. However, most of them described that they had not been actively engaging in any yoga practices over the past year before this programme due to family and work commitments. Participants expressed the belief that yoga was good for health and overall wellbeing based on their past experiences; this favourable disposition was a key reason for participant enrolment for this programme. Several were brought to the programme through word-of-mouth through personal acquaintance with IY therapy teachers who knew about the pilot programme. Most of them did not have a fixed idea of any outcomes or expectations from the programme but wanted to give it a try.

Some students mentioned that they had tried 'regular' yoga sessions to address their Covid symptoms previously. **The students who did the regular yoga after Long Covid found their symptoms getting worse. The IY Long Covid therapy did not aggravate their symptoms. Many found there was a positive reversal in symptoms when they undertook the IY Long Covid programme. They called it a new "way" or "style" of yoga. One of them called it "special class."** Those who reverted to their normal yoga and experienced worsening of symptoms described using some of the techniques they learnt through the IY Long Covid programme to experience an alleviation of symptoms.

Several of the students found the interviews an emotional experience, sharing how **the programme made them feel special and looked after with the individual care and attention.** The high teacher-student ratio (3 teachers for each student) was highly appreciated and the students expressed sincere gratitude to IY(UK) for the opportunity to participate in the programme. **All the students mentioned that they would absolutely recommend this Long Covid Iyengar yoga programme** to others. Some went on to join regular classes and are in touch with the programme teachers. There was a broad consensus from the students hoping that IY(UK) reach out to a larger group of people as they know and /or feel there are many more like them experiencing Long Covid. All of them were eager to know about the findings from the survey. Here are some representative quotes from participants illustrating these themes:

*I obviously knew that possibly yoga would be a good thing*

*I really went with a very open heart and an open mind*

*I used to do some every day at home, but then life took over*

*Friend of mine who is a yoga teacher heard about it and he knew that I had Long Covid, so he let me know*

*It was a very simple relax kind of yoga, but then I moved on to Iyengar Yoga, which I've done for, I don't know, maybe 15-20 years*

*I would definitely recommend it as Iyengar Yoga because like I said earlier, it feels so individual it feels as if it's supporting you to develop. You and I think for many of us with the Long Covid, we're in such bad way.*

Thematic analysis identified **eight key areas** as significant in students' responses:

- Symptom experience
- Experience of the yoga sessions
- Attitude of the teachers
- Group participation
- Relationship with teacher
- Support available from LCIY Programme
- Challenges from the programme
- Differences from NHS LC clinic programme

### Symptom experience

The key improvements described by the students were lesser **fatigue, ease in breathing, gaining muscle strength** and better **sleep**. But there were a number of other symptoms included in their symptom reports, which are identified below.

Those who reverted to their normal yoga and experienced worsening of symptoms now use some of the techniques they learnt through the IY Long Covid programme. This they said helped to alleviate their symptoms.

### Sleep

**Bad sleeping pattern or no sleep came out as a major symptom that saw considerable improvement through the programme.** Many students felt that just getting back lost sleep and having a sleep pattern contributed largely to their overall health improving from the programme.

*I had really bad sleep issues.... it certainly helped me straight away to get it better to a point where it was actually manageable.*

*I was having trouble sleeping every night and the very first session we had I slept extremely well that night.*

*You know it had an impact primarily on my sleep, and I guess because I was sleeping better. I was also feeling mentally better, so you know, it was the kind of correspondence between the session and what was happening, and it was really direct for me.*

*One thing that was still hard to get under control with was insomnia. And that certainly got better with the programme,*

*You go into a pose, and they tell you to relax, and you know melt into the floor. I still use that when I can't sleep, and I literally fall asleep within 5 minutes.*

*Being able to sleep, to sleep through the night instead of just two hours and waking up.*

*Sleeping, sleeping, definitely cognitively*

*I do a lot more meditations now so like help me sleep at night and help me get concentration and things like that. So, it helped me reconnect on that level which had been lost over covid.*

*I was sleeping better. I wasn't sleeping, for like some days I could sleep for 22 hours a day. So, it's getting like normal sleep again. Well, normally about 10 hours 10, 12 hours.*

### *Mental Health*

A recurring pattern through the interviews was impact and significance of mental well-being. **Many students said that they felt emotionally far better through the programme. This was attributed to the empathy they experienced with the teachers.** They linked this to aiding improvement to their physical state. Many felt that it helped reduce fear and tension of illness which played heavily on their minds. This was detrimental to their physical well-being. Being emotionally stronger helped their mental health and in turn physical health.

*I was surprised at the mental benefits from it. I was surprised at how much it lifted me.*

*I was expecting my physical symptoms to get better, but I really wasn't expecting how much better I felt in terms of my mood and my mental state as well, and it certainly helped me there as well.*

*It was mostly on the kind of emotional sort of mental wellbeing side rather than physical.*

*I'm not so scared of my physical symptoms anymore either, so that's been kind of huge. And also like a reduction in anxiety. So, I was feeling a feeling a lot of kind of fear and anxiety around my symptoms and around the fact that I'd been ill for so long and that's really reduced a lot as well. So yeah, a lot of a lot of kind of positive benefits on that side of things.*

### *Brain Fog*

Better clarity in thought was felt by some students through the meditation techniques they underwent in the programme. The felt calmer and more composed mentally.

*I can definitely feel when this fight and flight is kicking in my body getting stressed. I can hear the signals clearer, and I can relax more so yeah. Yeah, massive difference.*

*Being able to understand things, brain fog definitely lifted.*

### *Strength and Fatigue*

Students said that before the commencement of the therapy programme their bodies had become stiff due to inactivity. Once they started the programme, their body seemed to loosen and feel more relaxed. Most described being able to start doing more routine daily activities which they had been struggling with previously. Overall, majority of the students felt the programme had a positive impact on regaining lost energy. **Fatigue alleviation was the top symptom that was mentioned by all students through the interview.**

Most of the students felt that their body got stronger through the therapy programme. Especially mentioned were legs gaining muscle which allowed them to walk without pain. **They were able to walk for longer periods and commence things like climbing stairs. Some had recovery to the extent that allowed them to leave their homes after spending months indoors.**

*I was starting to gain a little bit of strength again in my arms and legs.*

*Well, I struggle to walk just a normal walk even on flat ground. And I felt through the therapy that it became less difficult.*

*Strengthening the muscles started. I learned a few techniques.*

*Even just to be able to lie on my back. And be able to move my left side from then we managed to move on to just leaning over the table with the props and strengthening started to strengthen calf muscles, leg muscles, with my legs*

*Being able to use my arm, because I was in in a bed for so long for about six months. I was bed ridden. And I had specially on my on my left side, my muscle is just wasted*

*If you just see me walking before Long Covid before the covid study and afterwards I looked well, I couldn't walk because my legs were like so tight that they were straight when I was walking. And then after the study I was able to walk. Pretty much normally. Without being in pain.*

*After the study and a few weeks into the study because I got the flexibility in the legs again. I could go one step after the other with my legs. And I've also got the energy to do things like cut the lawn and clean the house.*

*At the beginning of the of the whole programme I was unable. I wasn't even able to go and do shopping. And you know, I was by Christmas I was the one being able to get things home. I was taking a trolley with me.*



*Gradually over the 10 weeks my condition improved in terms of fatigue and dizziness, which are the two of the main debilitating symptoms.*

*My really great symptom, my energy levels started to be better again.*

*I felt more relaxed. My body wasn't as tensed as stressed as before. Fatigue got definitely better, and I think overall my heart rate went down as well.*

*Problem with Long Covid you're very fatigued. So, you know your body becomes stagnant and doing those yoga poses lets you help stretch the muscles that you know you might not be using and it's just, overall, it's de-stressing for the body, it's really helpful.*

*The fatigue got better, and my breathing got better.*

*Less less fatigue - the fatigue Yeah.*

### *Lungs and Breathing*

The longer duration of the poses and the emphasis laid by the teachers on breathing was consistently remarked by students. **The more passive format of the yoga helped to 'soothe the nerves' and promote more deep breathing.** Several participants described having been struggling with only being able to take shallow breaths post-Covid. They described experiencing 'deep breathing' and/or a regular breathing pattern for the first time after a long gap. Some noticed this improvement from the first session itself.

*I felt breathlessness improved.*

*Gentle yoga and breathing. And that helps good health, different organs, but I know that it's just calming down my histamine level and being able to breath deep breathe. there's something wonderful, so I think it blew my expectation. I definitely gained flexibility back.*

*Being able to breathe. It was better, definitely my oxygen, so I've got an oximeter. My oxygen level got better.*

*I could barely breathe, and because I hadn't done anything for so long, and I also remember on the first, on the first class I was able to take my first deep breath. And because when you've got Long Covid, you can't take a deep breath. And I remember thinking, wow, I can actually breathe again now which is massive really on your first class, I can take a deep breath (demonstrates) and know how to do it.*

*I had covid lung and it was opening up the lungs and being able to breathe, breathe deeply into just maybe unused areas of the lung, so it was so gentle*

*I had real tension in in my chest and my arms. And I think what the sessions did was really kind of just open the chest up*

*Calming my vagus nerve had an incredible effect on different organs. I did not experience throughout the whole winter any chest infections. Normally I always had a history before.*

Interestingly, only one student mentioned reduced coughing:

*I cough a bit less since the programme.*

#### *Other Benefits Described*

Two students mentioned described **feeling their heart getting stronger** and experiencing **less palpitations**:

*My heart was getting stronger. It was just really good and it's not because of muscle strength it was other things that we were able to do.*

*It was strengthening my inner organs, strengthening my heart, my lung.*

*Less palpitations as well*

*Heart palpitations with some of the relaxation and breathing techniques and seating methods and visualizations helped with those*

One student mentioned improved eyesight

*My eyesight was better. It was definitely. I noticed this. My eyesight went really bad when I had covid and after this session I felt that my eyes are actually much, much better than before the session.*

Headache linked to chronic migraine showed improvement with one student through the programme.

*My symptoms were mainly my chronic migraine, which improved through the programme. By learning things in the programme that helped to reduce the headache.*

Three students attributed improvement in their digestive system to the therapy programme:

*The digestive issues were starting to get better because I've had six months of being very very very bad and had lost a lot of weight.*

*It was strengthening my bowel movement. You know? Just digestion. It's just incredible.*

*What surprised me is how much of an impact it has on things like my stomach.*

### Experience of the Yoga Sessions

The key differences pointed out by students from their earlier yoga experiences were the longer duration of remaining and individual specific adaptation of **asanas/poses**. Another was the innovative and helpful use of **props** through the programme. They found this programme **format** more relaxing than the normal classes they attended. The level of **customisation** to individual needs under the guidance of three teachers was a completely different experience for them.

There being just one student in the class with two teachers and one more senior therapy teacher was a new experience. Many were positively overwhelmed by that and felt special. **The amount of detail that was put behind each individual wellbeing was a marked difference from what they had in the regular yoga that they did.** One student mentioned that they felt more comfortable in the online session as they had that privacy which was not afforded in group offline sessions.

The coordination amongst the teacher team was mentioned with admiration by the students. They added value to each other and hence enhanced the overall delivery of the programme. The students felt this led them to feel more encouraged and offer their fullest cooperation to the teachers.

One student mentioned that they enjoyed knowing how the two junior teachers were also in the process of learning as much as they were and so it was a mutually beneficial journey for all. Alternatively, another student felt the multiple teachers brought in variety, but they would have preferred one approach over the other at times. That might lead to showing more affinity to one teacher over the other.

The flexibility of being able to choose from a range of different days and times for the sessions was also mentioned as important by several students:

*I had a choice of day and time that I could attend it.*

*Well, they asked me, you know what what was convenient with me and..... we chose a time of day that suits me because I'm not very good at different times of the day.*

### Poses

The poses that the students undertook as articulated by one were more “passive than active.” Many described how they felt more relaxed in the therapy sessions as compared to ‘regular’ yoga experienced previously. Many positively remarked upon how duration of remaining in poses was longer compared to the ‘regular’ yoga; it was associated with ‘gaining composure’ and ‘maintaining calm’. In few instances, the teachers gave the students poses which they knew were aimed to directly address their symptoms. This was highly appreciated as it gave them a sense of caring and individual attention.

Also, students frequently emphasised how teachers adapted the poses in response to the individual's needs. This was done with both postures as well as duration of staying in them. One mentioned how they would try and stay longer than the teacher expected to show willing participation and respond to the encouragement that was being received from the IY team of teachers. Another emphasised how minutely the teachers would observe them in their poses, constantly checking if they are comfortable. Making on the spot adjustments needed to the posture and time frame for each of them each session was experienced as a central and important part of the therapy intervention experience.

*You know there are a lot of passive poses rather than active ones, so it wasn't really that energetic, but it was relaxing*

*Trying to find specific poses to help with exactly what it was that you were having trouble with was just emotionally felt really good for me*

*I think what I noticed from it was that we stayed in the postures for longer than I would normally stay in them*

*We spent quite a long time in each pose, you know, because a lot of them were restorative poses*

### Props

The innovative use of props was mentioned as being something new to them in their practice. They appreciated the creative ideas from using cushions to blankets as props which were easily accessible to them at home. **The advantages of using props were also highlighted.** It was mentioned that it eased them into getting into the poses. One of the students mentioned that the props actually aided in getting into the poses given their state of health affected by Long Covid.

*The poses were supported with a lot of props which made them you know, doable in my state of health*

*I was making my own props to start with. I was, you know, rolling my pillows (Demonstrates)*

*I felt was really useful with the programme is, you know, with the help of the teachers finding out ways of using whatever I have at home as props and supports for the yoga practice"*

*"The teachers showed me different variants on poses I knew, but that needed a lot more, you know, support and you know made suggestions as how I could use home furnishings and whatever to be able to keep going*

### Format

The teamwork displayed by the two teachers and guidance from the senior supervisor was thought to have worked well. The students found that the coordination was good amongst the teacher group which had a positive impact on the delivery of the programme.

*So, one would be watching my posture, the other ones telling me what to do. I Set up different devices so they would see me from all angles. They kept checking in. Even the smallest things with breathing, Can I breathe? Relax if I had the slightest pain. I had loads of props and they would assist me just where to put those things, especially because I could not move my left shoulder*

*They would take it in turns to either demonstrate, or talk to you and teach you*

Many of them termed this programme format as “**restorative**.” This was a form of yoga that was new to them. They mentioned that the regular yoga classes that they undertook was not conducive to them under Long Covid conditions. It was too tiring or exhausting for them to undertake. One student mentioned that their regular teacher, who was part of the Long-Covid intervention, has now introduced some of the techniques they experienced in the intervention into their normal classes. Another key difference from the regular yoga pointed out by the students was the fewer number of poses. It was described as doing more “quality” yoga over quantity. Staying in those few poses over longer durations was experienced as being more beneficial for them with their ongoing circumstances:

*I didn't know what restorative yoga was at first*

*If you are ill then I think it's this type of yoga, restorative yoga, I think it can only help*

*The lady that teaches me..... she knows the work that you did on this study, and she's incorporated some of the yoga into the weekly sessions that we have with her*

*I was just exhausted..... yoga had helped me before, and I'm actually too tired to take part in a normal class*

*Basically, you know the format was excellent because it was one student, which means that the tutors could focus solely on that person's symptoms and response*

*I wasn't up to doing a normal yoga session because I felt so tired all the time*

*I didn't feel at all kind of self-conscious, which I felt years ago when I was doing in person classes*

*The speed at which you moved through poses in a normal class is really fast and I really struggle with that still, but in the special classes we would be holding them for like 10 minutes so that your muscles relax into it better, whereas in a normal mainstream class you haven't got time to do that*

*It taught me how to adapt poses that I was struggling with because they were making my symptoms worse and adapt them so that in the beginning when I first started on the programme, they weren't making it worse, and then by the end of the programme they were the things that I was doing were actually improving my symptoms and making me feel better*

*When I did my normal practice and worked hard, it made my symptoms worse whereas this allowed me to feel like I was working hard, but without my symptoms feeling worse*

*If I'm doing my own practice or a class now and I find that it's irritating my symptoms, then I know that I can if I break away and do some of the Long Covid poses that will help to reduce them again. And so that's been really helpful*

*A new way of practice. And that it really was very beneficial for the Long Covid, I think a combination of not doing the more strenuous yoga which I think was overdoing it. Looking back and doing the Long Covid yoga, I think was a really massive. So, the turning point for me*

*It was a whole new style for me. And the way of practice was very different*

*I hadn't maybe anticipated was that there wouldn't be many postures, that they'd just be a few, and then we'd stay there a long time. I've never really done that before*

*Getting into a position where you slightly inverted or there's a slight twist and just staying there and feeling that sensation, I think that was that was surprising. I think yeah, I just think hadn't done that before, there was a quality to it that, that was new.*

**Students noticed that teachers exemplified high levels of flexibility in their approach.** They could sense when the session was getting hard for the student, and they needed to slow down. Also, if a student was finding it difficult to get into a certain posture, they found measures to mitigate that. The students liked that approach and the leeway it provided them through the programme.

*There was so much. Space to kind of just go at my own pace*

*They went with the pace that I was able to do*

*Sometimes they said we can see you tired. Now we just want you to be in this pose, rest in this pose*

*Probably they figure people going along better, whether the pace. They did was slower so I could manage the session. Or we just finished 10 minutes earlier and we just chat and feedback how it was*

*They adapted everything and just having that connection and putting me into a relaxing pose*

*Really kind, caring, helpful, and would just if something didn't work, they'd try and find another way to make it work*

### Student Experience of Teachers

The teachers came in for a lot of praise from students. They were overwhelmed by the support they received. **The caring disposition with attention to detail was highly appreciated.** Most students described a healthy bonding between the students and teachers. It got stronger as the programme progressed; some described feeling 'as if' they had known each other for years.

Many students focused on the importance of two-way communication to the therapy intervention. They felt that the teachers were keen to receive feedback from them. One student mentioned that even if they were critical towards the teachers, the complaints were taken constructively, and the teachers worked around ways to resolve the situation. The students described detailed instructions presented in a way they could comprehend, and this aided in the conversations turning more amicable.

*Very good at instruction and they were very keen to take on a criticism that was presented in a nice way and they would try and put it right very quickly*

*The teachers you know encouraged basically feedback during the session*

**The support they received in undertaking the programme was mentioned on several occasions by all the students.** This was one of the behavioural patterns most observed by the students. It made them feel welcome, more confident and within their comfort zone.

*I really looked forward to the sessions every week, a lot of trust....it was a very comfortable supportive environment*

*Teachers showed.....support and you know made suggestions*

*I thought our relationship was very.....very supportive.... we had a fair bit of humour and laughter.....really liked them..... felt like we got on really well*

**Attention to detail from the teachers was genuinely valued by the students and created this environment of trust, communication and encouragement.** They were surprised by the fact that even in the online format so much was being picked up by the teachers. This was recognized by them as being on account of the teachers being completely involved in the programme. Some students mentioned how the teachers are still in touch with them. They are being willing to help post the programme also with any guidance or notes to the students.

*The degree of care and attention I just thought it was amazing actually. So, I wasn't expecting it to be so. Yes, so targeted to my specific needs*

*I was really, really surprised how much can be conveyed online. You know, not in person and how much the teachers could see how much they could spot what I was doing. You know, across a camera. I was just amazed by it, really*



*They would spot things like; I don't think you've got the blanket quite under your shoulders. Can you move it half an inch? Or can you fold the blanket neater? Can you have the other edge against your neck and not the ragged edge and you know just all these little things*

*A little bit of switch in my eyes or anything they would ask me back*

*They are still supportive now, you know, and (Teacher Name) even emails us ever so often says remember I am only an email away. If you need any more support*

*Go like out of her way to provide me with extra course notes and things like that which really helped and she's still in touch now"*

*There was a kind of a level of instruction and guidance that I'd never had before*

*The teaching was important. I can see why they're not just putting on YouTube as you would do. I think having the individual coaching, which would almost vary week on week, depending on how you felt because you filled out the questionnaire beforehand, how you felt actually that in that moment, about 2 hours before you started. That was really invaluable.*

Students described how the support provided from the initial interview stage itself was sincerely appreciated. **The encouragement they received from the teachers helped them regain confidence about their physical state and the process of restoration.** It helped them gain the mental strength and improved their emotional experiences. One student mentioned how she felt reassured that she was being taken so "seriously" through the entire programme, attributing this to the care and attention from the teachers. Many described how important it was that they were able to express their feelings and concerns to the teachers.

Once a student had faith in the teacher they became emotionally attached to the process and programme. **Trust was derived from the experience of empathy and attention to the details of the student's experience.**

*Teachers really gave me the confidence and trust*

*Amazing, she was great, she's so lovely.....I trusted her completely*

*I didn't feel at all kind of self-conscious*

*It was really good relationship*

*By the end you know them really, really well*

*I didn't feel at all self-conscious and I felt that I could be completely honest and open with them.....develop that rapport that quickly*

**The encouragement that the students received from the teachers was highlighted as a key element for their remaining motivated through the 10 weeks.** This made them strive harder and give their best on the programme. It made them look forward to the classes each week.

*I thought the teachers were really good and very caring and very helpful*

*The teachers really gave me the confidence and trust to do that so I can imagine it could be rolled out in so many different types of contexts and be so beneficial*

*I was really anxious about how much energy it was going to take me to be on first of all on a zoom and also just thinking about getting the equipment started and how you know set up and how I was going to follow instructions. All of that I was really worried about it. But actually, the teachers were so kind, kind and understanding*

*I would be taken very seriously*

*They were ok that I would just be in my shirt. I would not have a bra. Be kind of experimenting. Something that I would be able to do*

*Even before starting I think they made an extra mile.....one just gave me her things, the props, so I would not need to buy them and that was before them knowing me it was just this general heart of, I want to have someone to get better*

*I think that making that extra mile..... even before they started, this was the attitude. This was the hashed in. So, it was very easy to gain trust very quickly*

*They make sure that I would have blanket, that I would be covered, I would not be cold while I was resting*

*Really supportive and encouraging.....kind of like praise and encouragement really helped me*

*For me there's something about that positive relationship with the teachers, and feeling kind of supported and encouraged*

*They were lovely. I felt I always looked forward to each session*

The teacher team and students usually developed a feeling of bonding as the programme progressed. The relationship grew stronger and there was sometimes an experience that the understanding between them was becoming seamless. **The teachers were able to succinctly capture the requirements of the students and the student's response followed with the same spirit.**

There was an overall sense of gratitude towards the teachers on account of the time they dedicated and the keenness they showed in helping the student. That they had two

dedicated teachers plus one senior therapy teacher was not something they expected. They felt this was only for the initial sessions and were pleasantly surprised that it continued that way for the entire duration of the programme. That a few teachers have carried on with classes after the 10 weeks was very much appreciated by their students and many of them are still continuing with IY.

*The senior instructor was experienced, and he was showing the others supervising the others*

*Well, there were two trainees and then there was the one senior guy who kept coming between the sessions.....it was all friendly and you know we all got on. I appreciate that*

*They were both lovely teachers. Well, there was three people that that I was involved with, and they were all really lovely and caring*

*Basically, you know the format was excellent because it was one student, which means that the tutors could focus solely on that person's symptoms and response*

*Well, actually people take time to deal with my symptoms. You know, which hadn't been the case before and deal with symptoms in a way that was very effective, so yeah. Very positive overall*

*It was a really, you know, really caring environment and that felt very good too. You know, after feeling you know pretty alone with those health problems really*

*The fact that I was the only student and there were three teachers. You know two teachers there all the time and the specialist therapy teacher who pop in and out. I thought it was just extraordinary really and so that surprised me*

*I would add that I'm so grateful to the teachers who took part in the study, but also the teachers who've continued with the classes..... I've carried on and it's just so valuable to me. I don't know what I'd do without it, so I'm just really grateful*

*Wonderful that I had all these instructors. Just with me. I think they were learning what to do as much as I was learning what to do from them*

*I always found that I got on better with the one teacher than the other one, because there's two different styles in one*

*I really, you know, felt like we got on really well, thought like you know we made a good team*

### Differences from NHS LC clinic programme.

Students were extremely unhappy with the NHS support for people experiencing Long Covid. Although this was not an area targeted with the planned questions, it often was brought up by participants in the interviews. They had many complaints and were eager to use this interview as a platform to express their frustrations at the lack of success they experienced with the 'official' NHS interventions. **Students commented that NHS is not equipped with the science to help people experiencing Long Covid.** It was described as more mechanical almost like checking the boxes:

*I attend the NHS fatigue clinics as well and they don't know what to do with you (Laughs) to be honest, they don't know where to start, you know, and they give you these leaflets every week and tell you to fill them in. And we're like three months, I think their appointments are .....and tell you to fill them in, but you know it's psychologically, psychological theory on how to manage Long Covid. There's no actual practical thing, to help you do anything, but I found that the 10 weeks of doing the covid study I accelerated. So, I could walk. I could do things you know, and I felt really motivated all the way through it.*

*It has all really helped because the medical profession hasn't been able to help*

The students felt that the 6-week NHS clinic was being run more as a formality and show rather than any serious concern about them. The GPs showed no empathy and were seemingly disinterested in the programme. Many were frustrated when they were told that there are no solutions or formulas for such symptoms, and they should learn to cope with it.

*Thank you for letting me take part because the GPs aren't really interested in helping. So, we feel very alone. Trying to cope with the symptoms.*

*My GP, for example, has said there's nothing they can do. The symptom that I'm left with that's really affecting me impacting my life is chronic fatigue.*

*So, my GP's kind of said there's nothing, there's nothing they can do for fatigue. There's not a known magic answer that it's around resting. It's around pacing. It's around, you know, keeping your body calm and learning to live with it. Not having anything to grasp, hold onto or help other than just being told that this was quite difficult.*

*I was very happy that it wasn't the usual NHS you've got six weeks and that's it*

### Concluding Student Impressions

Overall, the interviewed students were extremely appreciative of IY(UK) and the opportunity to be part of the programme. **They felt that this intervention could not have come at a better time.** Many were feeling hopeless and did not know how they could

manage the Long Covid symptoms. They saw this a new lease of life and empowerment to lead normal lives.

*I was fortunate to get on the programme.*

*And I think you know you're sort of part of something bigger as well so. It's helped me feel a bit connected to the world that outside of my four walls.*

*To have a load of people who are giving their time for free to help you out. And you know. And it is really motivating to actually be taken seriously.*

*Well, actually people take time to deal with my symptoms. You know, which hadn't been the case before and deal with symptoms in a way that was very effective, so yeah. Very positive overall*

## Challenges and Criticism

The main area where students wished improvements were in the pre and post session forms. **Many students found it hard to cope with technical difficulties and the online format.** Individual circumstances related to physical health at the time of undertaking the sessions were pointed out although not commonly. A better understanding of the concept and effects of each pose could have been explained by the teachers was also mentioned. Self-motivation to undertake the yoga practice between classes was another challenge mentioned by several participants.

### *Pre and Post Session Forms*

**Most of the students found that the choices offered in the forms were limited and constrained their ability to express themselves accurately.** They wished that the scale was wider. One suggestion was to capture the post session data after a time lag. It was felt that the effects of the session were seen within couple of days and that would be a more precise capture of the student's condition. **Having to fill in personal details every time was also an irritant.** Not being able to view pre session scores input by individual students was a hindrance to not being able to reflect on the outcome. Regarding the measuring scales students commented:

*Maybe the questions being asked before and after could be tweaked well more the answer options for the questions that you get on the pre class form and the post class form. The assessments you do before and after I think should have had slightly broader range of categories.*

*I think it's the question. It would need to make sure that between modest pain and severe pain there are still in between. I think instead of asking words. They can ask where you are from 1 to 10*

*I felt with the questionnaire that it didn't always have the right question. I wasn't able to fully tell what I felt, sometimes it said pain. Would it be no pain, modest pain? And it was very difficult.*

*Perhaps you know a more accurate capturing of the impact of the session would be to complete the form the next day or two days later, or something like that. That was the only thing that I thought for me*

*The only problem was when I came to filling the form about after the session. I could have done with seeing what I put before the session because you can't, I couldn't remember.*

*The only thing that was a little bit frustrating was having to fill in all my personal information.....It would have been nice if I'd just had a log in and could have just gone straight in rather than having to fill out all my personal details every time.*

*There were some technical difficulties with them, but over and all you know I'm getting free sessions. I didn't mind filling out the forms at all.*

*It was a little bit of a hiccup at the beginning. Because we didn't have the right code or something*

### *Technology*

Several students commented that the teachers could be better equipped with knowledge of Zoom and use laptops instead of mobile phones. Online yoga sessions were new to some teachers.

*I think its instructors becoming a more proficient with zoom before they started would have helped it.*

*You can't really be the instructor on the phone. All the time, you know the tiny little picture of one person. You know you need to do it on a laptop.*

Meanwhile some students faced difficulty at looking into a screen for the entire period:

*Yeah, I found doing anything on zoom quite difficult. My main symptom of covid was chronic migraine, so looking at a screen was not helpful.*

### *Physical circumstances*

**Some students found the session intense, especially in the initial stages. They found the physical set up and movement of props challenging. Duration of individual sessions too was cited by a few as too lengthy.**

*Initially they were really challenging because all my hamstrings really tight and all the muscles are really tight and body to the point where I couldn't walk properly.*

*There were certain poses. There wasn't a lot of them, but they were certain ones where I could feel my heart rate really spike up. That was the main difficulty, really.*

*It was a lot more intense than what I was expecting to be honest.*

*I found it quite challenging with all the equipment to get all of the, like the bolsters and things moved around. They're quite heavy.*

*I sometimes found it a little bit too long. Yeah,*

### *Communication*

Some students wished for a greater dialogue on the technical aspects of the poses for self-understanding of what they were undertaking.

*I like it as a yoga teacher, maybe they explain a little bit more about the benefits of each pose and what it does.... there wasn't too much dialogue....It's just like, oh, you're*

*breathing, you're opening your lungs so. Yeah, I mean ideally in an ideal world if it had a bit more theory behind it.*

#### *Self-Practice Motivation*

**Several students mentioned that it was difficult to inculcate the practice between sessions on their own.** Some cited they were not motivated to do it by themselves without teacher supervision.

*Honest truth is the thing I found most difficult was practicing between the classes*

*I think the hardest thing was actually getting up to them to be honest. Was waking myself up. And obviously waking myself with enough time to get ready to do the class*



## Teacher Participants

Thematic analysis identified **eight key areas** as significant in teacher's responses:

- Motivation to Volunteer
- Training and Induction
- Teamwork
- Objectives of Programme
- Success and Highlights
- Symptom specific benefits
- Challenges
- Learnings

### *Motivation to Volunteer*

The first motivation for the teachers was **to upgrade their own skill level from being a teacher to a therapy teacher**. The opportunity to work along with a more senior and experienced therapy teacher was enabled through this programme. The chance to help people and make a change were other factors for teachers volunteering for the programme.

The opportunity for learning and development was appreciated, with some teachers noting that not being a qualified 'therapy teacher' there were not many opportunities to gain skills:

*I was interested in this sort of, the constructive relaxation, how, each person could really benefit, and it was enjoyable to be part of a team hoping to help people.*

### *Helping as Part of a Larger Cause*

Those who volunteered really appreciated being part of a 'larger cause' and feeling able to do something constructive and helpful during the international pandemic. These motivations often due to personal connections with those suffering from long-covid, as well as a desire to see if Iyengar Yoga therapy could have a broader, measurable impact:

*I have a couple of friends who. have had Long Covid or still got Long Covid and so I thought it would you know bring the two together.*

*it would be nice to see in a proper study whether there was a positive impact*

*I came across the COVID recovery programme on the IY(UK) website, so I thought I really ought to start practicing this because by the time I get back this might be something that's really going to be needed.*

*Well to help people because I realized how big a problem it was.*

## Training and Induction

**The teachers felt they had received adequate information about the programme.** They understood the process. They appreciated that there was a healthy dialogue during the induction which allowed them to clear any doubts about the programme.

*Yes, really good because we had at least two Zooms with one person from the States who took us through the poses, and we're allowed to ask questions.*

*The orientation was getting to understand on how it was going to work was fine.*

*We understood how it was going to work.*

*The training was very good.*

**The teachers were appreciative of the ongoing training they received through the duration of the programme from the senior teacher.** They were aware of the new methods they would be using like online and props. They felt it was a continuous learning process for the entire team given the different circumstances in which the programme was being conducted.

*The training was brilliant. Very clear. We had lots of paperwork to back it up so that we could practice it before the actual programme started.*

*She was obviously a very good teacher, and that gave me guidelines to follow. When I came to teach the following week,*

*We were learning, or I felt that I was learning from the beginning and not just the programme, because although there were some familiar poses in there, it was getting to grips with the technology and somebody that you didn't know as well.*

The teachers interviewed described that they worked very well as a pair as well as jointly with the senior teacher. They proactively held meetings and discussions about the progress of their student and sought guidance on any modifications/adaptation needed from the senior teacher.

*So myself and XXXXXX and the lead teacher we decided we would have weekly meetings before the training, before the candidate came.*

*Because there are two of us working together and XXXXX was senior to me, we tended to talk through about the student and I would take notes, so we did develop.*

*We decided that we would take it in turns to teach.*

*We are having the discussion at the beginning of the class, and you know, talking about listening to people talking about the student and the chance to ask our own questions.*

*I learned a lot from I learned a lot from the other team members.*

*Because you can often have a different way of doing things, but I just felt like we were all well.*

*It felt like we're all singing from the same song sheet.*

**The role of the senior teacher came out as a key link to the success of the programme.** The regular checks on the progress and valuable suggestion from more senior teachers was experienced as a great benefit to the junior teachers.

*We had the therapy teacher over seeing everybody and would be going between the sessions using zoom dropping into the different breakout groups that we used. And then so each of the breakout groups, we had a discussion at the beginning. We'd agreed a programme and we had a more experienced teacher.*

*Our senior teacher was popping in every now and then so if you had any questions they could easily be answered.*

*We filled out a questionnaire before the session so we could pick things up and the senior person that was in charge of us could make suggestions. And then there was an opportunity for feedback and discussion after the class.*

*I think everyone was positive. Everyone was supportive. So, if we came back and said XXXXX didn't want to do this or she decided she was going to do this in the pose XXXXX was able to say, well try this or that, yeah, so completely supported. Yeah, everything is positive, and it was great working in a team.*

**Teaching as a team was a new learning for them and it added a lot of value to their existing teaching skills.** This was the first time they could focus on just one individual student. This taught them the nuance of dwelling deeper into symptoms and then taking a holistic approach to the therapy programme. That they could get into such detail for one individual was a great value add for them through this programme.

*It was an opportunity to really focus on just one student and really look in detail at every bit of their body, whereas in a classic situation you might be looking for somebody who might have legs bent and you might just focus on that.*

*I think I learned a lot from the programme of how to help people perhaps not just with covid, but with any other respiratory problems.*

*To take any support that's there and work together as a team.*

*We could really see we got to know what would help her the most and she got notes of what would be good for her*

The teachers were happy that they were accorded leeway in the way they wished to conduct the classes. They were happy to receive guidance from the senior teacher that helped them gain knowledge and boost confidence.

*I had the senior therapy teacher who let us design the programme. Come up with suggestions. She looked at it, made some suggestions herself. But she was very much allowing us to run the sessions as we thought best and coming in to help when needed so that was all good.*

*And the teacher we were allocated to I think she recognized early on that that some of us had a lot of experience..... let us rather than tell us what we were going to do.*

### Success and Highlights

The teachers were happy seeing the progress their students made. The fact that they were starting to do the poses on their own and practising independently was seen as one of the highlights of the programme by them. Success for them was that the student was now positively inclined to get into better shape.

*So, after the session, they really enjoyed the session, felt rested and nice immediately afterwards.*

*The fact that he felt better after every session it felt like we were on the right track,*

*Knowing the poses rather than us saying do this do that, she could do them herself,*

*She did say that she practiced them during the week, so you know that was good.*

*I think helping the person to help themselves*

*I think seeing the student becoming more aware of her body*

The teachers were clear on what symptoms their students were experiencing. They directed their efforts to address those with programmes tailored to the individual. Their students showed considerable improvement throughout the programme and also were better equipped to manage the symptoms post intervention.

*Symptoms of Long Covid were fatigue, limited energy, feeling malaise and tired returning cough and returning runny nose so these all got worse when he was under stress. He said he was 80% better.*

*Things like him coughing less*

*He had bacterial pneumonia. After six months he was still very fatigued and realised that he had Long Covid. So, he's now happy.*

*Overall, her symptoms were improving, but I think she was also. giving herself more time to relax.*

*In a phase she had been very ill, and she was now in a phase where she was much better.*

## Challenges

Key challenges pointed out by the teachers were related to the online technology, the time involved and the use of props in the online programme:

*The technology was the worst thing for me.*

*Probably a bit of frustration with my Wi-Fi connection and the camera.*

*I was adding it into my week, but I still enjoyed it. You know, I still would type up the notes and send them so that was a challenge as opposed to the yoga.*

*I knew, it would be absolutely impossible to teach it completely online to people who have no experience of props.*

*It's a very subtle prop use and you have to get used to really looking carefully, hearing what the student says and giving them instructions.*

## Discussion and Conclusions

This report offers an evaluation of the LC IY(UK) programme that was delivered in autumn 2021. The research findings point to the pilot being successful from both perspectives: students and teachers.

It is outside the scope of this report to evaluate the work and role of the Long Covid Working Group, but it would be valuable to do so before future projects are set up.

Overall, the students experienced improvements in mental and physical health which were statistically significant after the intervention. There were statistically significant reductions in fatigue, anxiety, and in 'cough, sore throat and phlegm' symptom scores in the quantitative scales, but not in the remaining measures. Therefore, on the face of the quantitative survey results alone the success of the intervention is measurable and significant but does not accurately reflect the even more positive experience of many participants.

The follow-up qualitative interviews highlighted that in terms of symptom improvement, better sleep and more flexibility were key positive benefits on participants' mental and physical well-being. Some participants described the profound effects of the sessions on their sleep and mobility after a period of very limited mobility. This suggests that the relationship of flexibility to strength and need for active restorative experiences (rather than just non-movement) has been under-emphasized in existing descriptions of Long Covid or other debilitating chronic symptomatic experiences. The profound impact that being able to sleep better and recommence the normal routines of housework and shopping (for example) had on mental and physical health was vividly described in the interviews, but not captured by the quantitative questionnaires.

The importance of attention, communication and relationship between student and teacher was described in many of the qualitative interviews with those suffering from Long Covid. Feeling their symptoms were being taken seriously, and that people genuinely were investing energy into helping them feel better was very much appreciated by almost all. Although not part of the formal interview schedule, many participants compared this to the NHS Long Covid interventions which they felt gave no attention to them as individuals or provided any planning for long-term recovery beyond a 6-week programme. There is thus clear evidence of the importance of the 'therapeutic relationship' which is central to the Iyengar Yoga therapy intervention.

Moreover, the qualitative interviews described the process by which trust and communication was developed between students and teachers. This was done specifically through observation of the details of their experience, comfort and ability, and pro-active and constructive responses to complaints and criticisms (both of physical symptoms and of teaching methods). Trust in the expertise of the teacher and the ability of the student to feel better was built up, piece by piece, in each of the sessions through the movement of props, and the adjustment of poses and timings in response to what the teachers had in front of them on the day. The qualitative interviews suggest that this experience was central to the

effectiveness of the healing intervention and overall improvements in the mental and physical health seen in the quantitative scores.

Students described how the Long Covid programme differed from their experiences in 'normal' yoga classes, both within and outside of the Iyengar tradition. Normal yoga was not seen as helping their symptoms, and in some cases was described as making the participants' symptoms worse. For many participants this was the first experience of 'restorative' yoga and it came as a revelation.

Weaknesses of the programme, from the students' perspective, included the difficulty students found in practising between sessions, some technical issues with the online format, and the time and attention needed for the intervention overall. The programme seemed to implicitly be developing trust and reliance on the teachers' expertise, which to some extent might have de-motivated self-practice and understanding of how to take the programme further independently with their limited experience and ability. Students expressed gratitude to those teachers who continued to keep in touch and incorporate ways of supporting their continued practice of a Long Covid recovery programme.

Only three teachers were interviewed for their impressions of the programme leading to limited conclusive generalisations. However, it appears that this format of therapy training was very effective in facilitating the training of less experienced therapy teachers. They valued the opportunity to work and to teach as a team. Although the time commitment was very high, teachers were willing to help out in order to be able to apply their skills to issues they saw of both personal and international importance during the covid pandemic. Teachers felt they were able to develop their observational skills and discuss appropriate interventions within the team. The learning and experience they got from the programme were highly appreciated.



## Recommendations

This Long Covid Iyengar Yoga intervention should be evaluated objectively to provide a future model for best-practice of other yoga-based interventions. We have not been able to evaluate the membership, processes and responsibilities of the Working Group, its communications, its relationship to IY(UK), or to appraise with any critical depth the methodologies that were used. Due consideration of how as an organisation, in association with IY internationally, future research protocols may be devised, funded, and delivered, should be a priority before other IY research is developed.

Many of the benefits to the sessions described in qualitative interviews were not measured by the surveys, particularly those relating to improved sleep and the role that improved flexibility contributed to greater mobility, strength and an ability to engage in the normal routines of daily living. If further quantitative studies are conducted, we recommend fewer data collection points and, ideally, prior investigation of the participants' views as to which symptoms are experienced as most relevant and debilitating and therefore salient to research.

Considering that there were 16 separate symptoms asked about before and after each of the 10 therapy sessions, the questionnaires were poorly targeted to match the symptom experience of the students. The complexity of the multiple data points led to time consuming data cleansing and, ultimately, no use for quite a lot of the data collected. The extent of time students and teachers spent on the pre-and post- session questionnaires, and relevance of the questions asked to their experience, was a point of frustration for the students, as revealed in the qualitative interviews. With reflexive hindsight, it is evident that the planning stage of the project was inadequate and rushed; the Working Group was responding to expressed need, and the crisis of the pandemic led to some impatience to deliver, without sufficient care taken in the design of the research. For future research fewer quantitative data collection points, more testing of the symptom questions with the target population's experience and further triangulation with qualitative interviews would be recommended.

According to the limited teacher interviews, it appears that this online method was very effective in facilitating the development of the skills of teachers in therapy classes. Although the time commitment was high, the online model might be considered valuable for future teacher-training in therapy skills. Other aspects of the programme should be reviewed and appraised by IY(UK), in terms of teachers' professional development, the mode of delivery of therapy teaching, the usefulness of the online student chat/forum, and team teaching.

## Appendices

### 1: Student Consent



CLASS/TEACHER SEARCH

## LONG COVID STUDY - STUDENT CONSENT

Step 2 of 2

100%

The study aims to gather data for determining the effectiveness of Iyengar Yoga in improving symptoms of Long Covid. Personal information will be held in confidence by the Iyengar Yoga Long Covid Study working group, administrative staff and class teachers. We would like to publish results and will ensure that all identifying details for students are anonymized in any public-facing summaries of the study and seek permission for any photographs that might be used to illustrate the study.

Please tick to indicate your consent

☐

I consent

You can withdraw consent at any time by emailing [jess@iyengaryoga.org.uk](mailto:jess@iyengaryoga.org.uk)

Submit

## 2: Participant Questions – Pre-Acceptance



# Iyengar Yoga (UK)

Association for Iyengar Yoga in

the UK & Republic of Ireland

[MEMBERS LOGIN](#)

[CLASS/TEACHER SEARCH](#)

## LONG COVID STUDY - QUESTIONS FOR PARTICIPANTS - GROUP 1

Step 2 of 2

100%

1. Did you have any health problems before contracting Covid-19?

- ☐ Yes
- ☐ No

2. How would you rate your overall physical health before contracting Covid-19?

- ☐ 1 Very Poor
- ☐ 2 Poor
- ☐ 3 OK
- ☐ 4 Good
- ☐ 5 Excellent

3. How would you rate your overall mental health before contracting Covid-19?

- ☐ 1 Very Poor
- ☐ 2 Poor
- ☐ 3 OK
- ☐ 4 Good
- ☐ 5 Excellent

4. When did you contract Covid-19? Month/Year

### 3: Pre-Class Questionnaire

Overall how do you feel physically before the class?

- ☐ 1 excellent
- ☐ 2 very good
- ☐ 3 quite good
- ☐ 4 neither
- ☐ 5 quite bad
- ☐ 6 very bad
- ☐ 7 extremely bad

Overall how do you feel emotionally before the class?

- ☐ 1 excellent
- ☐ 2 very good
- ☐ 3 quite good
- ☐ 4 neither
- ☐ 5 quite bad
- ☐ 6 very bad
- ☐ 7 extremely bad

Submit

Today, do you have these symptoms:

Fatigue

- ☐ None
- ☐ Slight
- ☐ Strong
- ☐ Very Strong

Difficulty breathing

- ☐ None
- ☐ Slight
- ☐ Strong
- ☐ Very Strong

Headache

- ☐ None
- ☐ Slight

- ☐ Strong
  - ☐ Very Strong
- Muscle/Body Aches/Joint Pain
- ☐ None
  - ☐ Slight
  - ☐ Strong
  - ☐ Very Strong

#### 4: Post-class questionnaire

Overall how do you feel physically after the class?

- ☐ 1 excellent
- ☐ 2 very good
- ☐ 3 quite good
- ☐ 4 neither
- ☐ 5 quite bad
- ☐ 6 very bad
- ☐ 7 extremely bad

Overall how do you feel emotionally after the class?

- ☐ 1 excellent
- ☐ 2 very good
- ☐ 3 quite good
- ☐ 4 neither
- ☐ 5 quite bad
- ☐ 6 very bad
- ☐ 7 extremely bad

Overall how easy or difficult did you find the class today

- ☐ 1 easy
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7 difficult

Describe your condition after the class in relation to symptoms you were experiencing at the beginning of the class

Fatigue

- ☐ N/a
- ☐ Completely resolved
- ☐ Slightly resolved
- ☐ Same
- ☐ Slightly aggravated
- ☐ Badly aggravated

**Difficulty Breathing**

- ☐ N/a
- ☐ Completely resolved
- ☐ Slightly resolved
- ☐ Same
- ☐ Slightly aggravated
- ☐ Badly aggravated

## 5: Overview of Qualitative Interview Aims:

### **Phase 2: Interviews Outline for Questionnaire Design**

- Participants' views on any improvement in their symptoms, and management of symptoms, overall, during the ten-week course
- Participants' views on how (the means by which) the sessions may have contributed to better health
- Participants' reflections on access to the sessions
- Have they been able to continue aspects of what they were taught in any way?

#### **These will consider students' views on:**

Any changes / improvements in their symptoms since starting the yoga programme.  
ability to manage symptoms.

Whether or not the yoga the sessions have contributed to improved health.

Their reflections on 'organisation and processes' of the programme.  
their perception of the acceptability of the programme.

Whether they would recommend the yoga programme to other people experiencing Long Covid.

#### **Interviews with the yoga teachers will seek teachers' views on:**

The training they received to deliver the yoga sessions for people with Long Covid

Whether they consider the yoga programme to be of benefit to their students with Long Covid.

#### **Central Points of Interview Schedule**

##### **Students**

1. Effectiveness vis a vis expectation of the intervention. What worked well and what did not
2. What could have been different or better.
3. Experience and Relationship with teacher
4. Current personal situation – do they need to continue practising? Or IY more generally?

##### **Teachers**

1. Training and Preparation
2. Relations – Teacher – Teacher and Teacher – Student – IY(UK)/Organisers as part of the programme group

Results and Learnings both personal as well as general around programme



## 6: Qualitative Interview Schedule Students

### **Duration: 30 minutes including Introduction and Closure**

#### **Introduction and Ethics disclosure**

Good (Morning/Afternoon/Evening) Name...., Hi, I am Vishal, an independent student researcher and highly appreciate your taking time out to talk with me today. This is a general discussion on your experiences with the Iyengar Yoga therapy programme you undertook in the recent past. Are you happy to tell me more about that? The interview is likely to take us about 30 minutes, but this time will vary depending on how much or how little you feel comfortable to share with me.

Response....

Thank You

Are you comfortable with me recording this discussion along with making a transcription, which is a word for word typed record of our interview? This would help our research team understand your experience better through detailed analysis of all the interviews we do with people who undertook the Iyengar yoga programme. This analysis will help us look at areas where other people with Long Covid may benefit from your experiences. The research team will anonymise all transcripts so that you can talk to me in confidence and anything you say won't be linked back to you as an individual.

If you have any questions or concerns after the interview you can get in touch with Jess from the Long Covid Team at [jess@iyengeryoga.org.uk](mailto:jess@iyengeryoga.org.uk)

Response.....

Thank You

#### **Core Interview**

**Q1. Had you ever done any yoga before undertaking this Iyengar yoga therapy programme for people experiencing Long Covid?**

If they **reply yes**, explore:

Q1a) What type / kind of yoga had you undertaken before? Had you practiced Iyengar Yoga before?

Q1b) How frequently had you practiced yoga before?

Q1c) Had you previously found yoga to be beneficial in any way for your health and / or wellbeing?

**[if they reply yes]**

Q1d) How was yoga beneficial for your health and / or wellbeing in the past?

**Q2. Why did you decide to undertake this Iyengar yoga programme for people experiencing Long Covid?**

*Intended response – Development and Impact of Long Covid and any pre-existing knowledge/ orientation towards Yoga Therapy practice.*

Probes:

Q2a) – What have you heard / read about Yoga to prompt you to consider doing this programme?

Q2b) -Had you heard / read about any benefits of Yoga?

Q2c) Had you heard / read about Iyengar Yoga in particular?

**Q3. What was your overall impression of engaging with the Iyengar yoga programme?**

Probes:

Q3a) Was engaging in the sessions challenging or difficult in any way? **If yes**, how? / In what way?

Q3b) Was engaging in the yoga sessions tiring? **If yes**, why? In what way?

Q3c) Was engaging in the yoga sessions motivating? **If yes**, why? In what way?

Q3d) Was engaging in the yoga sessions supporting? **If yes**, why? In what way?

Q3e) How did you find doing the yoga poses?

Q3f) Was the experience what you were expecting?

Q3g) Did anything about the sessions particularly surprise you?

Q3h) How did your relationship with the teacher develop as you progressed in the programme? Positive or Negative, why? In what way?

**Q4. Did you at any point in time feel like discontinuing the Iyengar yoga programme?**

Probes:

**(Mandatory Probe)**

**Q4a) What did you find most difficult about the sessions or suggested practices?**

Q4b) What motivated you to continue?

**Q5 How did you find accessing the yoga programme sessions?**

Probes:

Q5a) How did the programme fit in with your life schedule and your usual routines?

Q5b) How was the day of the week for you?

Q5c) How was the time of day for you?

Q5d) How was the length of the sessions for you?

Q5e) Do you think 10 weeks was the correct time frame set for this programme? If yes or no, why?

Q5f) How did you find the administrative aspects of the programme? The forms to be filled before and after each session?

**Q6. During the Iyengar yoga programme what, if any, changes were there to the symptoms that you were experiencing related to Long Covid?’**

Probe:

Q6a) Did your ability to manage your symptoms change in any way during the programme?

*Probe symptoms if needed:* Breathing problems? Shortness of breath? Persistent cough? Sore throat? Headache? Pain? Fatigue? Brain fog? Ongoing fever? Etc.

*Note to interviewer, if they then offer some changes to symptoms, they feel got worse or that improved then ask the follow up question(s):*

Q6b) Why do you feel .... *[insert the symptom or thing they mention improved or was helped]*? improved / got better?

Q6c) Why do you feel *[insert the symptom they mentioned got worse]* got worse?

*Note to interviewer: if they then mention any changes to how they manage/managed their symptoms ask:*

Q6d) How did you manage your symptoms differently?

Q6e) Do you feel doing the yoga programme influenced how you managed your symptoms in any way?

**Q7. Were you able to fit any of the yoga practice into your life after the Iyengar yoga programme sessions ended?**

Probes:

Q7a) Have you kept up your yoga practice?

**If yes:** Q7b) What, if anything, has helped you to keep up your yoga practice?

**If no:** Q8c) What, if anything, has hindered you from keeping up with yoga practice?

**Q8. What, if any, benefits do you think the Iyengar yoga programme has had for you since you finished the programme?**

Probe:

Q8a) Since you finished the programme, do you feel that engaging in the yoga sessions helped you to manage any of the symptoms you experience with Long Covid?

**If yes:** Q8b) how do you manage *[symptom mentioned]* better now?

**If they reply yes to Q8 or Q8a:**

Q8c) Please can you tell me some more about the benefits you have experienced.

Q8d) Why do you feel doing the yoga programme led to these benefits for you?

Q8e) Please can you tell me if there was any part of the programme you felt did not benefit you? What? How or Why?

**Q9. Would you recommend this Iyengar yoga programme to other people experiencing Long Covid?**

**If yes:** Q9a) why would you recommend the programme others?

**If no:** Q9b) why wouldn't you recommend the programme to others?

**Q10. Related to the Iyengar Yoga programme for people experiencing Long Covid, is there anything the Iyengar yoga team might be able to do better in future?**

**Q11. Is there anything related to your experience of the Iyengar Yoga programme for people experiencing Long Covid that you wish to add?**

Probes:

Q11a) Is there anything else you think I should know?

Q11b) Is there anything you think I should have asked about but didn't?

### **Closure**

Thank You very much [person's name] We really appreciate you giving your time to contribute towards this evaluation of the Iyengar yoga programme for people experiencing Long Covid.

**Q12. Would you like to receive a summary of the results?**

If yes

Q12a) We can email you a summary of the results, what is the best email address for us to send this to you please?

Thank You once again, goodbye and have a good ...day/night

## 7: Qualitative Interview Schedule Teachers

**Duration: 30 minutes including Introduction and Closure**

### **Introduction and Ethics disclosures**

Good (Morning/Afternoon/Evening) I am Vishal, an independent student researcher and highly appreciate your taking time out to talk with me today. This is a general discussion about your experiences with the Iyengar Yoga therapy programme you carried out in the UK for students with Long Covid. Are you happy to tell me more about that? The interview is likely to take us about 30 minutes, but this time will vary depending on how much or how little you feel comfortable to share with me.

Response....

Thank You

Are you comfortable with me recording this discussion along with making a transcription, which is a word for word typed record of our interview? This would help our research team understand your experience better though detailed analysis of all the interviews we do with people who undertook the Iyengar yoga programme. This analysis will help us look at areas where other people with Long Covid may benefit from your experiences It may contribute to the Iyengar yoga programme delivery becoming more valuable. The research team will anonymise all transcripts so that you can talk to me in confidence and anything you say won't be linked back to you as an individual.

If you have any questions or concerns after the interview you can get in touch with Jess from the Long Covid Team at [jess@iyengeryoga.org.uk](mailto:jess@iyengeryoga.org.uk)

Response.....

Thank You

### **Core Interview**

**Q1. 'Why did you volunteer to join this programme for people with Long Covid as an Iyengar yoga therapy teacher?'**

Probes:

Q1a) What were your initial **motivations** for undertaking this teaching experience?

Q1b) What did you hope to gain and contribute from teaching the Iyengar yoga programme

Q1c) What experience if any did you have of teaching yoga to people with medical conditions?

Q1d) Were you aware of any evidence that yoga could be effective for people with Long Covid?

**Q2. How did you find the project orientation process and the training?**

Probes:

Q2a) Introduction and Induction procedure?

Q2b) Clearly defined Objectives?

**Q3. Following the training to deliver an Iyengar yoga programme for people with Long Covid, did you feel equipped to support the students with Long Covid?**

Probes:

Q3a) Did you feel prepared after the training to work with people who have Long Covid?

Q3b) What, if anything, could have been done to improve the training?

Q3c) Any further preparation would have helped you in better conduct of the programme?

Use of Props? Covid related Knowledge? Use of technology?

**Q4) What were your feelings before you started teaching on this programme?**

**Q5. How did you find teaching students with Long Covid?**

Probes:

Q5a) were there differences in how you worked with students with Long Covid compared to other students you have taught?

Q5b) How did you adjust to teaching students with Long Covid?

**Q6. What, if any, were your successes or highlights through the teaching process during the Iyengar yoga programme for people with Long Covid?**

**Q7. What, if any, were your challenges through the teaching process during the Iyengar yoga programme for people with Long Covid?**

Probes:

Q7a) How was the experience of working in a team for you personally? Relationship?

Positive or Negative? How? Why?

Q7b) Was teaching online any different? Any advantages or disadvantages? How?

Q7c) How did you find the administrative demands of the programme? The technological aspects?

**Q8. What, if any, benefits did you see, or were reported to you from your student, related to the Iyengar yoga programme?**

Q8a) Did you notice or hear about any changes to your student(s)' Long Covid symptoms?

*Probe symptoms if needed:* Breathing problems? Shortness of breath? Persistent cough?

Sore throat? Headache? Pain? Fatigue? Brain fog? Ongoing fever? Etc.

Q8b) Did you notice or hear about any changes to how your student(s) managed their symptoms?

Q8c) Did you notice or hear about any changes to your student(s) health?

Q8d) Did you notice or hear about any changes to your student(s) wellbeing?

**Q9. Did you're understanding as a yoga teacher benefit in any way from engaging in teaching this Iyengar yoga programme for people with Long Covid?**

If yes: Q9a) In what way?

**Q10. What learnings from this programme can be useful in the future? Individually? Overall?**

**Q11. Would you recommend Iyengar yoga to other people experiencing Long Covid?**

If yes: Q11a) why would you recommend the programme to others?

If no: Q11b) why wouldn't you recommend the programme to others?

**Q12. Is there anything related to your experience of the Iyengar Yoga programme for people experiencing Long Covid that you wish to add?**

Probes:

Q12a) Is there anything else you think I should know?

Q12b) Is there anything you think I should have asked about but didn't?

## **Closure**

Thank You [person's name] We really appreciate you giving your time to contribute towards this evaluation of the Iyengar yoga programme for people experiencing Long Covid.

**Q12.** Would you like to receive a summary of the results?

If yes

Q12a) We can email you a summary of the results, what is the best email address for us to send this to you please?

Thank You once again, Goodbye and have a good ...day/night

## 8: Coding Grid Sample:

Code	Name	Email	First Name	Last Name	Participant	happy to be interviewed	Interviewed	Transcribed	Uploaded
S1					Student	yes	14.06.2022	14.06.2022	17.06.2022
T1					Teacher	yes			
S2					Student	yes	30.03.2022	30.03.2022	06.04.2022
T2					Teacher	yes			
S3					Teacher	yes			
S4					Teacher	yes			
S5					Teacher	yes			
T3					Teacher	yes			