Two passions join to create a new one. The love of dance and the desire to help others are combined in a profession called dance/movement therapy. What a creative way to integrate these two callings! This is a career which can continue even after performance is no longer an option.

The field of dance/movement therapy is still not known by all, and those of us in the field have spent many an hour at workshops, conferences and even social gatherings explaining what we do. This work is so fulfilling that we don't mind having these conversations. We work with a wide range of people of all ages and mental and physical abilities. We use dance to remove the obstacles people have in expressing themselves, relating to others or accepting their bodies or selves.

We know how powerful dance can be. Why not share the healing potential of dance with those in need?

Many of us know from our own experience or from that of others that taking dance classes may not lead to performing. But we still crave the enjoyment of using our bodies artistically and expressively. It just feels great. That is the spark of understanding that the founders of our field drew upon.
The History of Dance/Movement Therapy

Marian Chace, a Denishawn dancer in the 1930's, opened a studio and began teaching. She found that many of her students were not planning to become performers, but they were motivated to continue taking classes. Others who entered classes feeling depressed realized that their moods had lifted because they were dancing. Chace's skill as a dance teacher became more widely known, and in 1942 she was invited to bring dance to psychiatric patients at St. Elizabeth's Hospital in Washington, D.C. She had tremendous success using dance to foster communication, establish empathy and promote social interaction with hospitalized patients who were receiving little treatment.

When Chace was working in hospitals, antipsychotic medication wasn't yet available and patients often moved with gestures that were considered bizarre. Chace would wheel her record player onto the psychiatric ward and soon a group of people would gather. By meeting people on their own terms, moving with patients in their own rhythms in their often nonverbal worlds, Chace gained their trust. Gradually a circle of movers formed and a group rhythm evolved, creating a sense of community. She was able to reach even the most isolated patients.

Other pioneers on the west coast had similar experiences combining dance and various forms of psychotherapy. Mary Whitehouse developed a practice of integrating authentic movement expression, arising from an inner awareness, with the psychological concepts of Carl Jung. Today "Authentic Movement" involves a process of moving from the inside out, often with eyes closed, to bring buried information about the self to light.

The field of dance/movement therapy officially became a profession in the 1960's, but is derived from the use of dance in healing since early times. In many cultures, shamans used dance in rituals since prehistory to cure ills of all kinds. Modern dance is especially well suited as a foundation for dance/movement therapy as it is an effective vehicle for the expression of emotions, authenticity, spontaneity and connectedness.

How Dance/Movement Therapy Heals

Dance/movement therapists work with groups as well as with individuals. Clients have claimed that "movement doesn't lie." In traditional verbal therapy, they were able to hide behind words, or else had self-insight but were not able to change. Through dance/movement therapy, they could more clearly identify and embody their problems and have breakthroughs and lifestyle changes. Dance/movement therapy is a creative art therapy that provides the opportunity to engage in an action-oriented process that encourages trying new behaviors. Dance is a powerful form of direct communication. It can be used symbolically to
represent hidden emotions, release anxiety and serve as a vehicle to integrate body, mind and spirit.

Since dance/movement therapists work nonverbally, we can treat people who have difficulties that began preverbally or people who have suffered bodily trauma such as accidents, illness, physical or sexual abuse, or post traumatic stress disorder. We are effective with infants who cannot communicate with words but are extremely expressive in their use of movement and sounds. Dance/movement therapists have had success reaching children with autism as well as women with eating disorders and body image issues.

Working With a Group of Teenage Mothers

As a dance/movement therapist, I feel a deep sense of joy by being able to reach people where they are and help them transform and grow. To illustrate how we work I will give an example of a recent group of teen parents and their children that I co-led at a local high school.

The purpose of the group was to support teenage mothers through fostering good communication skills between parent and child. We wanted to encourage the teens in the beginning stages of their new roles as parents, in their new relationship with their children. We also wanted to enhance their growth, sense of security, self-expression and confidence. Our primary goal was to help foster the early bond of parent and child using movement interactions to deepen the relationship. By providing a base of support for the teens we hoped to help them develop an awareness of their children and their uniqueness, individuality and creativity.

The teens were encouraged to play with their own and other teens’ children and to participate in all expressive activities. A feeling of community spirit was developed through sharing joy in the children's new accomplishments. As dance/movement therapists, we emphasized nonverbal interaction and the predictable stages of development that could be observed and promoted in movement. Attuning to the child through nonverbal empathy helped the teens recognize and understand their children's needs and temperaments and their level of development.

One young parent was becoming very frustrated with her child's excessive crying bouts. I tried to model an approach to her child that is a typical way dance/movement therapists relate with any client. I matched the child's crying rhythm in movement as well as sound, thus communicating to the child an understanding of his feelings, rather than giving the message that it is not okay to feel upset. I did this by reproducing his muscle tension and release in my own body. I used my breath to provide both support and comfort, hoping to convert
the crying into slower, calmer breathing rhythms.

As I held the child securely, breathed with him, and matched his tension patterns while dancing a modified waltz rhythm with him, he began to settle down. The mother was surprised, but pleased by the response. After seeing the positive results of my interaction, she tried this method herself. Later, she reported that she felt less frustrated having a proactive approach to soothe his crying.

At first, the teens tended to cut themselves off from feeling very much in the group. They seemed to have an absence of curiosity and didn't look at their babies or smile much. If they did interact with the babies, they treated them like inanimate objects, tickling them, or pulling them up in postures they weren't ready for. They sat with muted emotions that were also observable in their baby's lack of animation or facial expression. As the teens became more comfortable with the group and the leaders, they really started to open up and connect more. As time went on in the group, the teens became more empathetic in their responses to their own children and bonded more strongly to their babies.

**Careers in the Dance/Movement Field**

Careers in dance/movement therapy include work in medical settings, rehabilitation hospitals, mental health settings, nursing homes, correctional facilities, women's crisis centers, schools, day-care centers, day treatment centers, private practice and wellness centers.

Training to become a dance/movement therapist takes place at the graduate level and involves experiential learning as well as taking traditional classes. Coursework includes the theory and practice of both dance/movement therapy and psychology, culminating in supervised internships. Nonverbal assessment tools, such as Laban Movement Analysis, Kestenberg Movement Profiling and Body-Mind Centering are taught to enhance observation, diagnostic and intervention skills.

Those interested in pursuing this field must have dance backgrounds and an interest in working with others. The field of dance/movement therapy has become international and is practiced in over 30 countries. It is recognized as a specialty of counseling by the National Board of Certified Counselors.

For further information about this field contact the American Dance Therapy Association (ADTA) web site at: www.adta.org.
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