

Let The Therapy begin: An exploration of the use of dance therapy with an eight year old child with attachment difficulties.

Venita Dungey



Venita graduated as a social worker in 1991 and since then has worked in a variety of settings including adolescent residential care facilities, foster care and community welfare organizations. She has completed two pilot projects, one of which was in the public hospital system working with child protection intervention for at risk families and one within the women's prison system working with incarcerated women and their children. Venita has spent the last 15 years working as Social Worker and family counsellor, primarily in child and family services within the public health and welfare system. During this time she has become more and more interested in the intangible aspects of verbal therapy - the things that were very difficult to articulate. Prior to her social work studies she spent many years engaging in a variety of dance forms, including classical ballet, jazz, tap, creative movement and forms of movement such as yoga. She says that Dance Therapy seemed a way to combine all her experiences and as a result has completed the first year of the Dance Therapy program at R.M.I.T (2005). She is currently working in community health setting as Social Worker/Family Counsellor and has begun to explore ways of integrating traditional Social Work with Dance-movement Therapy in case work and group work.

“How to be useful is best addressed in relation to ‘last things’ - fruits, consequences, therapeutic goals and outcomes-rather than in emphasizing ‘first things’ - theories, principles and models.”
(Amundson 2001, p. 179)

I have entitled the following paper “Let The Therapy Begin”, although I wonder if it might be more aptly titled “Let The Dance Begin”. Or is it that these are in fact interchangeable notions. The above quote reflects the importance of the therapeutic process reaching some of those aims of the ‘last’ things. Which is what I would like to explore in relation to the therapy of an eight-year-old girl who shall be named Sally.

Background

Sally is currently in a permanent placement. She was removed from her mother's care due to a variety of family difficulties and placed in two different foster care placements before residing in her current placement. The contact she now has with her mother is supervised. The issues she presented with were an inability to make friends, to form attachments of any kind, troubles at school, trouble settling with her new family, difficulty in expressing her feelings in relation to the separation from her biological mother, and the rejection she has experienced through that.

The underpinning aims in my approach to working with Sally were that of engaging with her and the social system in which she lived and developing relationship building capacity, expression and meaning definition for her, as well as development of her self image. I spent time with her broader family network and established some clearer boundaries for her, ensured she had appropriate information about her situation and understood that. I also engaged the school and her caregiver in assisting her to build her social skills and develop age appropriate networks and activities.

Upon referral she was difficult to engage, would hide under desks, run away and hide within the grounds of the centre and not participate in any of the games or activities I would attempt. I had noted her interest in likening things to animals and sometimes she would engage in games around this. She would rarely engage in any games, artwork or family discussions around the issues to do with her mother and the difficulty she was having about access. This process was slow and difficult and I was struggling to know how to approach this situation.

At this point I decided I would try some movement driven sessions. I brought in my CD player and a

“girlfriend party mix” CD. What ensued was most remarkable.

The Dance-Movement Sessions

Session 1

We decided to “make up” dances, which involved each taking it in turns to develop some movements, copying each other and putting it all together. She selected the music and we began. The dance comprised standing up and floor work. She selected movements of back arching, splits, moving up and down on the spot, front steps forward and backwards with a punch, side steps, and the most extraordinary movement about letting people through and letting people in, by alternating arms and sweeping them around.

It would have to be the most relaxed she’d been in a session, the most confident and the most engaged with me. The extraordinary thing that evolved was that she developed some movements with me about letting people through and letting people in, we had to do this together. She couldn’t wait to get back for the next session, and wanted to show her dance to her caregiver at the end of the session. I was entrusted to remember the dance we made up, which I ensured by practice so I didn’t forget it.

Session 2

The next session expanded on the first, using some of the activities outlined in Thraves and Williamson’s (1994) *Now for a Dance: Integrating Dance and Movement in Primary and early Childhood Learning*. We used a large space which she entirely filled. It was a little like she couldn’t get enough of the space - using every corner, chair, wall, under and over tables and through the entirety of the floor space. She used the open floor for fast running, leaping and shape making movements, the chairs and tables for the slower movements. We used the “spin and sparkle” activity; running, spinning and making a sparkle shape (p.48), the slow fast shape expanding and contracting activity (running fast and slow, making big and small shapes) (p.54). She then took the book off me and selected her own fast running and animal shape making activity, her choice was to move fast, then make animal shapes. She made a snake, a bird, a butterfly, a kangaroo and an emu (p.72).

Observation of Dance - Movement Sessions

Use of space

Sally made good use of her space but, other than some trace-like arm movements, kept a firm boundary around herself. Her use of Space was in fact interesting. She was very aware of her own personal space and as we moved into the second

session her increased use of the general space available was very evident. Although always maintaining a keen sense of her personal boundaries, by keeping a distance from me, she explored every bit of the room in the process. She moved in relation to objects in the room, creating shrinking and folding movements behind, for example, a chair or table, and preferred to make growing and unfolding shapes whilst in the middle of the room in the available space. Here, she was able to engage in three dimensional twists and spirals and in a range of free movement. She had a preference for accelerated movement, preferring to move fast with directness. Her weight was mostly light with high intensity tension flow that adjusted with gradual, rather than abrupt, changes.

Use of fantasy and speed

She had a strong preference for fantasy movement; she enjoyed creating animal shapes, accompanied by efforts of direction in space and acceleration in time.

Interestingly, Veronica Sherborne (1990) notes the “development of emotionally or behaviorally disturbed children can be sudden, dramatic and very rewarding.”(p. 66) She also suggests that they may have taken refuge in a fantasy world and dramatic play and movement can become a step in their ability to express. (p.105) Hence Sally’s great enjoyment in the fantasy exercises about becoming shapes, becoming animals and relating through those shapes and fantasy figures.

Sherborne (1990) also notes, “The main characteristics of a child who is hyperactive are exaggerated speed, free flow, and strength.” she goes on to say, “A hyperactive child shows no interest in his or her own body and avoids relationships.”(p.65) On observation Sally certainly presents with some of these movement qualities, which were especially evident in session two. Her preference was for speed, free flow and strength, although she did show some interest in her own body. She avoided relationships in the way she used the space and contained herself in her own personal space, not relating to me in that space and often requiring the use of inanimate objects such as chairs and tables when engaging in slower and shrinking movements. Yet when engaging in speed and growing movements was less concerned with the safety of hiding part of herself in and around inanimate objects.

Analysis of Psycho-emotional Development Through the Movement Sessions

A psychological report suggested that Sally’s psycho-emotional development is arrested and she displays evidence of disturbed attachment resulting

from failure to experience adequate primary care. Unfortunately this same report also suggests that given the deep-rooted nature of these difficulties, healing may be difficult for her.

With this background knowledge it is interesting to examine some of the elements of the Kestenberg Movement Profile (KMP). It is suggested that in using the movement profiles of mother and child, information around areas of interpersonal conflict and harmony can be elicited. The concept of "Attunement" is used which states that, "The infant or young child feels comforted by those whose movement patterns 'attune' to his and thwarted by those whose movement patterns 'clash' with his. In each phase of a child's development, different rhythms become prominent and necessary for the child's mastery of developmental tasks. When the parenting figure is unable to adapt his/her personal movement preferences to synchronize and/or harmonize (both forms of kinesthetic empathy) with the child's, the child may become hampered in his/her psychodynamic growth." (Levy 1988, p.160) Sossan and Loman (1992) describe the use of the KMP in analysis of the mother and child relationship, "The rhythm and movement attunement between parent and child is examined, to determine if the mutually regulated feedback system has been distorted, possibly indicating a serious emotional disturbance." (p. 41) Clearly, one could say that this has happened for Sally. Her removal from the care of her mother and then subsequent interrupted living arrangements and changes in caregivers would have resulted in limited attunement with any primary care giver.

Sossan and Loman, making reference to the Kestenberg model, discuss how the development of trust in relationships is expressed in shape-flow, "Shape-flow design patterns reflect the individual's style of relating and feelings of relatedness." (p. 28) Interesting to note the very movement activities we engaged in were very much about shape-flow, the shrinking and expanding shapes, the shapes of animals, as was the most extraordinary movement with our arms in the trace/arc shape out and in - about letting people through and in, something that has become difficult for her, and in a sense has been getting in the way of her development.

Sossan and Loman (1992), discuss the two systems of Tension-flow/Effort and Shape-flow/Shaping as depicting "...developmentally evolving patterns of dealing with internal and external reality." (p. 29) They suggest that aggressive tension-flow/effort patterns fit with shrinking shape-flow and closed shaping, whilst pleasant and indulging tension-flow/effort patterns fit with growing shape-flow and open shaping. Sally preferred the pleasant and indulging tension-flow/effort, and, it seemed, needed

the use of objects for safety even while experiencing shrinking tension-flow/effort and closed shaping, which is more akin to aggression. The authors later go on to note, "attributes of shape-flow are expressive of comfort and discomfort". (p. 32) Thus one can make a variety of analyses from this simple observation. Movement, which evokes aggression may elicit some fear or discomfort within her and thus require the safety of inanimate objects, whilst the pleasurable or more comfortable movement preferences of growing shape flow allows greater use of the movement space for her.

Introducing movement appeared to have allowed for the development of some trust and relationship building. (Or was it, without me being fully aware, that there was some level of attunement created in the shared and mirroring movements that allowed for a way to relate, which had not occurred before?) It is interesting to note, of course, my movement preferences, which cannot be ignored if we are discussing the concept of the sessions creating attunement in a relationship for her. My preference is to use the space and move all the objects out of the way, this is where I am more comfortable and it was in this space that she related the best to me and this allowed for more expression of movement for her. There was a sense of sameness with a sense of relatedness, producing some feelings of comfort and trust. Whilst a lack of attunement or sameness and relatedness occurred during the shrinking movements, this in turn required defenses, chairs and tables, and potentially gave rise to frightening feelings. (See Sossan and Loman, p.43) Thus there was some capacity for relationship building, development of awareness of self in relation to others, a means of relating, meaning definition and self expression for Sally, a means to, in fact to achieve the goals of therapy. Through the movement there were shared experiences, ways of relating and expression of emotions that became truly indicative of what was happening for her.

Use of The Movement Sessions in The Goals of Therapy

Slowly working with the goals of relationship building, meaning definition and development of self expression with this young girl, I was initially experiencing great difficulty in even building enough of a therapeutic relationship to begin. The movement sessions created an extraordinary shift and fitted in with some of the therapeutic goals established for her. Sherborne speaks of the broad aims of relationship play with children, citing self-confidence; the development of a sense of achievement and self worth; body knowledge - an awareness of the body which helps develop a sense of wholeness, physical and emotional security; enabling a sense of developing trusting relationships

and communication; enabling a shared language. Although the structure of the movement sessions didn't strictly follow Sherborne's relationship play activities, it was, in its very essence, about using movement in the development of these broad aims. Sally had limited experiences of self-achievement and self worth, often experiencing rejection. Her life was fragmented, she experienced difficulty in developing trusting relationships, and had problems in appropriate social skills thus limiting her sense of shared communication. The movement sessions enabled her to experience achievement, be more whole, develop a relationship and communicate with some shared language. What occurred for Sally was akin to Sherborne's thoughts about sudden and dramatic change in children who have emotional or behavioral disturbances.

Once the movement sessions were under way the therapy could begin with this child. Exiner and Kelynack (1994) write of dance and therapy, "A new way of knowing is encountered. We have entered the *dance mode....*" (p. 15) Later, they go on to say that dance in therapy leads to *reflection in motion*, that this is central to the whole process of using dance in therapy. They suggest that, "This is the dance equivalent of clients in verbal therapy...."(p. 17) They then move on to say "There is no doubt in our minds, that even with minimal movement a transforming dance experience is possible, and that in this transformation lies one of dance's powerful therapeutic effects." (p. 18)

This occurred as Sally engaged with me in a way she hadn't before, something in the shared experience of what we did helped that enormously. There was an empathy and trust that was created. There was suddenly some capacity for relationship building. The dance became the catalyst for this. There was something in the sharing of the movement and space that enabled awareness of self and the other. In this space we shared movement by dancing together, we engaged in mirroring activities, and shared initiation for music selection and activities. The dance itself allowed for what Exiner and Kelynack describe as "In the dance therapeutic relationship a *bridge is formed....* It connects and at the same time *leaves a space.*"(p. 67) They also write of interaction being based on the capacity of the therapist for "*kinetic empathy*" (p.67) - identification with the client in shape and motion. This allowed for Sally to communicate with me - something I was looking for, but was unable to find until entering into the use of movement. We found some expression and relationship building that had previously been inaccessible. We found a shared language, development of relationship, expression of self (both in emotions and in the construct of self and the capacity to re-create a narrative or script about herself in the context of relationships), utilizing the

therapeutic dance space instead of the verbal office space.

Conclusion

It would be of enormous benefit to have both time and resources to explore further the use of the KMP in cases such as that of Sally. It strikes me that it would be invaluable, not only as a means of observing and describing some of her movement and relationship patterns, but also as a tool that could provide further analysis of the psychological definitions of her disturbed psychodynamic development and deep-rooted attachment difficulties. In turn providing further opportunities to develop appropriate therapeutic intervention plans for children like Sally.

As we let the dance begin so did the therapy. To me they became inseparable. Thus returning to the quote at the beginning of the paper, "How to be useful is best addressed in relation to 'last things' - fruits, consequences, therapeutic goals and outcomes-rather than in emphasizing 'first things' - theories, principles and models." (Amundson 2001, p. 179) As the dance began, the goals and outcomes of this therapeutic relationship became realised. As the dance began, so did the therapy.

References

- Amundson, J. (2001) Why narrative therapy need not fear science and other things: In *Journal of Family Therapy*, (23), 2.
- Bartenieff, I. and Lewis, D (1980) *Body Movement: Coping with the environment*. New York: Gordon and Breach
- Chodorow, J. (1999) *Dance Therapy and Depth Psychology: The Moving Imagination*. Routledge, London
- Exiner, J. and Kelynack, D (1994) *Dance Therapy Redefined: A Body Approach to Therapeutic Dance*, Charles C. Thomas, Illinois.
- Levy, F. (1988) KMP and Dance Therapy. In *Dance/Movement Therapy: A Healing Art*. p. 157-161. Reston, Virginia: The American Alliance for Health, Physical Education, Recreation and Dance.
- Sherborne, V. (1990) *Developmental Movement For Children: Mainstream, Special Needs and Pre-school*. Cambridge University Press, Great Britain.
- Sossin, M. and Loman, S. (1992) Clinical applications of the Kestenbergs Movement Profile. In Loman, S. and Brandt, R. (Eds.) *The Body Mind Connection in Human Movement Analysis*. Keene, Antioch New England Graduate School.
- Thraves, B. and Williamson, D. (1994) *Now for a Dance: Integrating Dance and Movement in Primary and Early Childhood Learning*. Phoenix Education Pty Ltd, Australia.