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Dance and Movement Therapy

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Alyssa Heter is a second-year Apparel Merchandising and Product Development student with a minor in Marketing at Bowling Green State University. The essay “Dance and Movement Therapy” discusses how to improve the wellness of a certain type of individual, primarily individuals with physical, behavioral, and mental disabilities. The essay argues that medicinal treatment is not always more beneficial than dance and movement therapy for these types of disabilities. If given more time to expand the essay, Heter would include ways to get involved in dance and movement therapy in order to guide readers in the right direction in case they feel this could be beneficial in their life.

Alternative therapies for children with behavioral disabilities, those who struggle with mental illness, and those with pediatric cancer are being researched thoroughly now more than ever. The most common therapy of these alternatives is dance and movement therapy. Many studies have proven that medicinal treatments are less effective compared to DMT in most cases and prove that it should be considered more often. Although dance and movement therapy may not have enough basis in science, it is still shown to improve physical, mental, and behavioral disorders by reducing stress, strengthening social skills, and reducing symptoms of mental illness.

The review of literature discusses the most common alternative therapy: dance and movement therapy. Some literature focuses on children with behavioral disabilities. In “‘We Dance and Find Each Other:’ Effects of Dance/Movement Therapy on Negative Symptoms in Autism Spectrum Disorder,” Malin K. Hildebrandt, Sabine C. Koch, and Thomas Fuchs analyze the treatment of people with autism and schizophrenia in social interactions. Also in “Dance/Movement Therapy as an Alternative Treatment for Young Boys Diagnosed as ADHD: A Pilot Study,” Erna Gronlund, Barbro Renck, and Jenny Weibull analyze whether or not dance/movement therapy has any effect on children with similar disorders and if it could be used as an alternative treatment. Similarly in “Dance/Movement Therapy’s Influence on Adolescents’ Mathematics, Social-Emotional, and Dance Skills,” Alida Anderson analyze the impacts of dance and movement therapy on students with behavioral disorders in the classroom. Other literature focuses on mental illness. One example, in “Movement and Mindfulness: A Formative Evaluation of a Dance/Movement and Yoga Therapy Program with Participants Experiencing Severe Mental Illness,” Emma Barton focuses on the Movement and Mindfulness Program, a program that helps reduce stress, coping skills, and prosocial behavior for those struggling with severe mental illness using dance/movement and yoga therapy. Similarly, in “Dance movement therapy improves emotional responses and modulates neurohormones in adolescents with mild depression” by Young-Ja Jeoung, Sung-Chan Hong, Soo Lee Myeong, Min-Cheol Park, Yong-Kyu Kim, and Chae-Moon Suh assess the psychological health and neurohormones of adolescents after 12-weeks of dance/movement therapy. In addition, in “The effect of dance over depression,” M. Akandere and Banu Demir analyze whether or not dance decreased depression. Some literature focuses on children with cancer. In “Dance/Movement Therapy for

Children and Adolescents with Cancer,” Susan O. Cohen and Gary A. Walco say dance/movement therapy is a holistic and innovative therapeutic approach that addresses the comprehensive needs of children with cancer. Similarly in “Time out of time: Dance/movement therapy on the onco-hematology unit of a pediatric hospital,” Marcia Plevin and Leonella Partelli point out how traumatizing it can be for the patient and his/her family when in the onco-hematology unit of a hospital and how dance and movement therapy can be used to reduce the stress and fear. The collection of literature all discuss dance and movement therapy and how it can benefit individuals both physically and mentally.

The first way dance and movement therapy improves physical, mental, and behavioral disorders is by reducing stress. During traumatizing times in an individual’s life, it is easy to be bogged down with negativity and stress. Dance and movement therapy is a great way to reduce stress because it allows an individual to feel energized and releases endorphins in the brain that cause happiness. One specific example of a traumatizing time that has been treated with dance and movement therapy is pediatric cancer. This is a stressful time for both the parents and the children. The children are confined to a bed in a room for long periods of time while parents and other family members are constantly coming and going, witnessing their loved one in constant pain and discomfort. Cohen and Walco assert, “Dance movement therapists offer a perspective that encompasses key elements of development, coping, and adaptation by using an approach that goes beyond verbal concepts, thereby adding an important dimension to the holistic care of cancer patients” (41). Exemplifying this point, Plevin and Partelli are two dance movement therapists who went to an onco-hematology unit of a hospital and met with a few children with cancer individually to see how they responded to dance movement therapy. Plevin and Partelli note a few patients were close-minded to the idea because they believed that life was outside of the hospital and nothing could make them feel better about the fact that they were stuck living their lives in the hospital. While there are only a few patients like this, there are many who were open to the idea and even if they are not feeling well they still want to participate as much as possible. Plevin and Partelli conclude, “Movement interventions may be proposed to liberate the child’s focus on the illness and therefore augment a sense of well-being” (244). They continued by saying, “Interventions may contain, hold, or organize in an appropriate way a child’s fear, confusion, or sadness by simply being present with these emotions or interventions can aid in comprehending and accepting a new reality” (244). By re-instilling the energy these patients had lost due to being in the same small space for long periods of time, the important dimensions that Cohen and Walco mention are re-established. Exercise and movement release dopamine which increases happiness therefore the patients enjoyed dance and movement therapy because it made them feel happy while going through a traumatizing experience.

A second reason dance and movement therapy is beneficial is it helps strengthen social skills. This is especially useful with behavioral disorders, such as autism and ADHD. Autism is a mental condition that impairs an individual in communication and forming relationships with others. Many people with high-functioning autism are verbal but have a hard time socializing because they are unaware of proper social cues. Sensory motor problems cause them to be slower in connecting their thoughts to their movements. In other words, their brain says to do one thing but the physical act of actually doing it takes them some time. There is a decreased connection between the thalamus and the cerebellum in children with autism making it difficult for them to mimic the movements of others. Those with autism are unable to understand the emotions of others and their mental states. Children with behavioral disorders have trouble in classroom settings and Anderson lists some of the issues they face stating, “Students struggled

with social-emotional skills such as maintaining personal space and controlling impulses while participating in classroom activities” (231). Therapies such as speech pathology have been researched to try to improve these issues. An alternative therapy that has been tried and proven to have a positive effect on children with autism and other behavioral disorders is dance and movement therapy. Hildebrandt, Koch, and Fuchs provide evidence to support this point by stating, “Devereaux describes teachers’ comments on children’s improvements after a year of weekly DMT sessions that included increase in eye contact, verbalization, self-awareness, and empathy” (4). Hildebrandt, Koch, and Fuchs argue that the reason for these improvements is because dance and movement therapy practices the bodily aspects of the process, emphasizes one’s own and others’ mental states therefore the connection of bodily and mental states is strengthened. The poor connection between the mind and the body is the main struggle and cause of the issues those with autism face. Dance and movement therapy works to improve this connection and has been proven to be successful.

Another behavioral disorder other than autism that is benefitted by dance and movement therapy is Attention Deficit Hyperactivity Disorder (ADHD). ADHD is a disruptive behavioral disorder in which its symptoms include the inability to pay attention and stay focused as well as being hyperactive and impulsive. This disorder affects the behavior of children in public settings and their ability to pay attention and act appropriately in school. Gronlund, Renck, and Weibull quote Barkley who states, “Children with ADHD benefit the most—more than any other disorder—from regular exercise, because movement exercises increase dopamine in the human brain, just like the stimulus does” (qtd. in Gronlund, Renck, and Weibull 64). Gronlund, Renck, and Weibull conducted this study and focused on two young boys with ADHD and the effects dance/movement therapy had on them, if any. After the dance and movement therapy sessions with one of the boys, Gronlund interviewed the mother and asked if she had noticed any changes in which she responded, “Tom has learned to be more patient and listen...he has learned to wait. I think that dance therapy has been very good for him. He is not quite as angry as before. He has become friendly” (75). Gronlund, Renck, and Weibull observed another boy, Peter, after a few dance/movement therapy sessions and stated, “Peter’s mother tells us that before DMT, when playing Peter wanted to be the leader all the time. Now he can play more constructively with other children. Peter is not as tense or as stressed as before” (77). Both parents note the positive impact they have seen in their children since their involvement in dance and movement therapy. Dance and movement therapy helped the children become more patient, friendly, and less angry than before which will help them act more appropriately in public and in the classroom. They will have an easier time paying attention in class because of their patience and focus. They will be able to create friendships because of their positive attitude and friendliness making them easy to be around. Dance/movement therapy is unarguably an impactful alternative in children with ADHD based on the results from this study.

A third reason dance and movement therapy is beneficial is it reduces the symptoms of mental illness. Depression is caused by the brain not producing the normal amount of dopamine resulting in the feeling of unhappiness. Barton discusses a specific program that involves people with mental disorders taking dance and movement therapy classes to see if it reduced the symptoms of their disorders. After the study was over Barton notes, “All of the participants confirmed that the work of this program had improved their ability to relax” (167). Being part of a group who share similar struggles and to be able to express oneself through dance affects the symptoms of mental illness. Barton also notes, “Some participants described the ability to identify, as well as to shift potential emotional states through the use of music, movement, and

mindfulness” (170). The ability to be creative is therapeutic for those with mental disorders, and dance and movement therapy allows this. Those with depression suffer from feelings of sadness, irritability, changes of sleep and appetite, feeling worthless, and unable to enjoy enjoyable activities. Jeoung et. al. agrees and makes the point that dance and movement therapy helps improve these symptoms by “redefining and strengthening body image; clarifying ego boundaries, providing an outlet for relief of physical tension, anxiety, and aggression; reducing cognitive and kinesthetic disorientation; increasing the capacity for communication, pleasure, fun, and spontaneity” (1713).

Depression is a predator that distorts the minds and feelings of its prey. It makes the simplest of tasks such as getting out of bed in the morning an impossible feat. Victims of depression have low energy and their movements are slower than normal meaning activities are either gone unfinished or taken extra time on. Depression often leads to suicidal thoughts, failure at school and/or work, feelings of worthlessness, negative behavior and attitude, distancing oneself from friends and family, and sometimes involvement in drugs and alcohol. Dance and movement therapy has been used for centuries as art rehabilitation. Akandere and Demir argue dance movement therapy as a reliable alternative treatment for depression by stating, “Dance movement therapy combines with music, low exercise, and sensory stimulation that could provide a non-drug cure of mild depression” (652). Dance allows an individual to express him/herself and allows creativity, reducing the effects of anxiety and depression. Akandere and Demir conducted a study which is discussed in “The Effects of Dance Over Depression.” The study consisted of 12 weeks of dance training and Akandere and Demir conclude that, “In the research, the depression level of males and females before training has meaningfully decreased after 12 weeks of dance training” (654). Akandere and Demir note that twelve weeks of dance training positively affect the psychological development of young people suffering from mild depression. Overall, dance and movement therapy reduces symptoms of mental illnesses such as depression and anxiety because it helps release the normal amount of dopamine in the brain which increases happiness. Dance allows these individuals to express themselves and be creative in their own way which is therapeutic and has a positive effect on their mental illness.

Some may argue that dance and movement therapy is not better than medicinal treatment. Gordon argues in “Focusing on Positive Affect in Dance/Movement Therapy: A Qualitative Study” dance and movement therapy is an alternative treatment for mental illness, stress, and behavioral disabilities but not based in science. In “Can You Really Dance Away the Pain?” Harris mentions a list of dance and movement therapy sources and whether or not they provide enough scientific evidence for their recommendations. Harris understands that it can be tempting to trust these sources because they specialize in dance movement therapy but argues, “Because they did not provide specific examples of research that supports their claims, it is necessary to continue looking for evidence.” These dance and movement therapy organizations conducted their own research and came to the conclusion, based on their results, that dance and movement therapy is beneficial. Gordon and Harris argue that the only way dance and movement therapy can be a fully trusted alternative is to have scientific research and evidence supporting it.

Akandere and Demir argue that it is based in science by providing studies which examine the chemicals in the brain that are released reducing stress and depression. Gronlund, Renck, Weibull, Hildebrandt, Koch, and Fuchs show how DMT trains the brain to work in ways it could not before due to the symptoms of disabilities (ADHD, autism). The brains of those with these

behavioral disorders are different than normal in terms of sensory motor functions and, for example, a lack of connection between the thalamus and cerebellum making it difficult for them to move the way their brain is telling them to (Hildebrandt, Koch, Fuchs). For example, these participants were unable to mimic movements made by others. After participating in dance and movement therapy, teachers and loved ones explained the improvement they saw in the child's behavior, social skills, and eye contact.

Based on the articles discussed, dance and movement therapy is a solid approach to treating children with behavioral disorders, stress in traumatic situations, and mental illnesses. Cohen, Walco, Plevin and Partelli prove dance and movement therapy reduce the stress and fear levels in children with cancer in the hospital and their families. Hildebrandt, Koch, Fuchs, Gronlund, Renck, and Weibull show significant improvement in the social and behavioral skills of children with autism and ADHD after participating in dance therapy sessions. Barton, Akandere, Demir, Young-Ja Jeung, Sung-Chan Hong, Soo Lee Myeong, Min-Cheol Park, Yong-Kyu Kim, and Chae-Moon Suh show a decrease in depression in participants after weeks of dance movement therapy because of the energy released and being able to put their creativity to use. Saying dance and movement therapy is not based in science is false and these studies listed are proof. Because of the success dance and movement therapy has had on mental, behavioral, and physical disorders, the future looks bright for this type of therapy. It has high chances of becoming a more popular option of treatment due to its significant impact on these disorders.

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