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## Dance Movement Therapy, Past and Present: How History Can Inform Current Supervision

Yifat Shalem-Zafari<sup>a\*</sup>, Prof. Emilia Florina Grosu<sup>b</sup>

\* Corresponding author: Yifat Shalem-Zafari, s.z.yifat@gmail.com

<sup>a</sup>Babes-Bolyai University, Cluj-Napoca, Romania, s.z.yifat@gmail.com

<sup>b</sup>Babes-Bolyai University, Romania Faculty of Physical Education and Sports Pandurilor 7 Street, Cluj - Napoca  
<http://sport.ubbcluj.ro/>

### Abstract

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**Background:** In looking at the history of dance movement therapy (DMT), three stages of professional focus are identified: Emotional body/movement; verbal processing as it relates to body/movement; and movement analysis and observation tools. Models of supervision for young DMT therapists appear to have paralleled two of these stages, and not the third.

This article aims to address a need in the field of DMT in the area of therapist-supervision.

**Sources of Evidence:** A literature review covering the history of DMT, and the existing supervision models in DMT and their effects, provides support for the author's argument.

**Main Argument:** The author proposes to parallel the third stage of focus in DMT's development. Namely, it suggests integrating movement-analysis and observation tools into the existing models of supervision. While many existing models benefit from experience-based supervision, there is a need for a professional distance from the supervision material. This could be achieved by using methods of movement observation and analysis, developed in the field of DMT. One of these methods would be combined with the experiential aspects of supervision, and thus provide both inner understanding, and outer perspective, leading to greater therapeutic insight.

**Conclusions:** This article is of importance to DMT supervisors and therapists, as well as to other professionals who view supervision as an integral part of training. It clarifies the importance of structured analysis approaches when using verbal and nonverbal work in supervision, to create an appropriate distance from the supervision material.

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**Keywords:** Dance Movement Therapy; Supervision; Authentic Movement; Movement-analysis tools.

## 1. Introduction

This paper introduces a fresh perspective on the history of dance movement therapy (DMT). It will make use of this insight to shed light on the existing practices of DMT supervision, and suggest how supervision in this field might be improved. The need for a new stage in DMT supervision will be presented, one that involves using analytic, professional language, in addition to the personal, emotional language that is dominant in many experiential supervision models. This will allow supervisees a measure of professional distance from the material, and add an important and clarifying dimension to the supervision.

In reviewing the development of this profession, three main stages of professional focus were identified:

1. The significance of the body and its movement as actors in generating emotional change, as well as reflecting emotional changes that occur (Motion-Emotion).
2. An emphasis on words as revealing information stored in the body/movement, as well as playing a role in creating the body/movement (Form-Information).
3. The development of movement analysis and observation tools, which bring conscious attention to implicit and explicit information, and to revealed and hidden layers (Gabron, 2014; Shahar-Levy, 2015 Stern, 2013).

These three stages of focus find certain parallels in the sub-field of DMT supervision. In contemplating the development of supervision in this profession as it appears in the literature, the two initial stages can be seen. One is movement-based, or embodied, models of supervision, in which supervisees are invited to do body-movement work; and the other is verbal models of supervision, in which the central way of processing the therapist's work is through verbal discussion. There are also models that combine these two focuses, using both verbal and nonverbal modes of working (Panhofer, Payne, Meekums, & Parke., 2011). However, while movement analysis tools may be incorporated into student-training, or used as descriptive or quantitative tools in research, a literature review on this subject found no supervision models employing movement analysis tools. This is striking due to the significant professional attention that these tools and approaches have received over the course of the development of DMT.

### 1.1 Problem Statement

As it parallels the three identified focuses in DMT over its historical development, it seems that the sub-field of DMT supervision is lacking a third stage in developing its focus: Namely, the inclusion of movement analysis approaches into supervision models. These methods, each with their own terminology, outline a number of movement qualities, forms, or rhythms, explaining the significance of each one in a psychological context. Practitioners use the system of movement characteristics in order to notate the movement they observe. This information can then be analyzed using the developmental and psychological information implied by the presence or absence of various movement qualities.

It is possible that these tools, which comprise the third stage in DMT, have yet to become a part of supervision, because DMT is a relatively new field, and supervision is even more of a recent topic of contemplation. The first book on DMT supervision was published in 2008 (Payne) and, as of the

writing of this article, it is the only book available on the subject. This article hopes to contribute to the body of knowledge and consideration of this area.

Including a focus on movement analysis in supervision may address a problematic issue that has been identified in DMT supervision: The potential for confusion between supervision and therapy in the supervision setting. One of the things demonstrated in a study by Ko (2014) was an increase in this type of confusion as a result of using movement in supervision. While I maintain the importance of movement-work in supervision, this paper proposes that including analysis tools in supervision has the potential to create a healthy distance from the supervisee's therapy work that could reduce the confusion between supervision and therapy.

### *1.2 Purpose of the Study*

This paper's aim is to use the existing knowledge on the history of DMT to inform the development of supervision in this field, from a historical/anthropological perspective.

This article is relevant to all professions in which supervision plays a role in training, and especially to those that relate to both verbal and nonverbal communication in the supervision space, such as body-oriented psychotherapies and other creative arts therapies. It emphasizes the need to contemplate ways in which emotional-metaphoric language may not provide enough distance from the experiential process in supervision and proposes that analysis tools can address this issue.

## **2. A Review of Dance/Movement Therapy and Three Main Areas of Focus**

DMT is one of the creative arts therapies: psychotherapeutic modalities that also include art, music, and drama therapy. DMT uses movement and dance for psychotherapeutic purposes, utilizing aspects of body-movement expression, creativity in dance, and insights of psychotherapy. This medium can enhance the integration of an individual's physiology and psychology (Weiner & Craighead, 2010). DMT emphasizes creativity as a source of change, while maintaining the importance of the relationship between therapist and client (Wengrower, 2009). It is based on the insight that processing one's unconscious begins with awareness of the body and its movement.

DMT is based on a multi-disciplinary knowledge of the body and the psyche, integrating theories and methods from individual and group psychotherapy (Weiner & Craighead, 2010); nonverbal communication (e.g. Davis, 1982); body-motion development; and developmental psychology (Kestenberg, 1975; Shahr-Levy, 2015). DMT analyzes qualities of movement, and utilizes systems of movement analysis (Laban, 1974; Kestenberg Amighi, Loman, Lewis, & Sossin, 1999; Shahr-Levy, 2015). However, within the multitude of influences underlying DMT practice and theory, it is possible to identify three central focuses. The three areas of focus that were identified did not develop linearly over the course of DMT's development. Rather they were explored, in parallel or at different times, by DMT pioneers. Integrated and interwoven, they create the basis for the complex tool that is DMT.

The first stage of focus is the mutual influence between body, motion and emotion. The second stage involves the use of words, which reveal the information "held" in the form of the body and in its movement; as a result of integrating psychological theories into DMT, it is possible to relate to the existing connections between form and information (Stanton-Jones, 1992; Wengrower, 2009). Lastly,

there is the area of movement analysis and observation models, which allow therapists to relate to the implicit and explicit information in an objective manner. DMT relates to emotive body-movement, to verbal language, and to cognitive processing of the information presented.

Panksepp (1982), in his psychobiological model shows the mutual influence between emotion and physical and motor processes, and also the mutual influence between emotions and perception, thought, and cognition (Northoff et al., 2006). The similarity between the foundations of DMT and Panksepp's description of the relationship between emotion, body-movement, and cognition in his psychobiological model strengthens the importance of all three focuses in DMT; they are each significant, and interact with one another in complex and important ways that optimize the therapeutic process.

Sherborne (1990) argued that movement serves, at its core, as a tool that enhances emotions and serves as a basis for cognitive learning and development. Koff (2000) claimed that movement is the most basic form of experience and communication, allowing people to connect their senses and actions, with self-awareness and emotional response. Movement often invites social interaction, and provides practice and advancement in this sphere (Shuval, 2006). Movement is essential to survival, to understanding one's environment, to adapting to it and controlling it, and to connecting with others (Gilliom, 1970).

Thus movement impacts a person's functioning in the three areas of body-movement, emotion, and verbal-cognition, all of which support development and are necessary for human existence. These insights are incorporated into the foundations of DMT. This approach to movement sets the stage for the DMT perspective, which combines the three stages of focus delineated above. All three focuses are of equal importance.

### *2.1 DMT Pioneers and Their Exploration of the Three Areas of Focus*

The origins of this field are in modern dance, and this is an important part of its history. Modern dance is based on direct expression. The first generation of dance movement therapists consistently distanced themselves from the formal nature of dance towards varying degrees of 'spontaneous movement' in order to allow for an expression of the client's inner world, rather than strive for aesthetic standards. They found various ways to teach patients to move, so that they could express themselves, and also found ways to allow the patient's inner state to influence the movement, and for the movement to influence the psyche.

For Chace, movement was a communication tool. She developed 'mirroring' movement, which allows unconscious content to arise (Chodorow, 1991). In Hawkins' work, she emphasized movement that comes from an unconscious, inner place, such that the therapist accompanies and guides the patient in seeking self-realization (Stanton-Jones, 1992). Another DMT pioneer, Boas, focused on 'primitive' movement. Her approach used psychomotor free-association and used psychoanalytic perspectives to understand the images, fantasies, and emotions that arose in movement (Stanton-Jones, 1992; Levy, 2005). Whitehouse sought to make space for the authentic, through the use of movement. She was a pioneer of the 'Authentic Movement' technique. Her theory supports the use of spontaneous movement expressions that reflect unconscious processes, and serve as important elements of DMT (Chaiklin, 2009).

These pioneers saw the power of emotive movement to affect people. They also recognized that imagery and the imagination can be therapeutic forces. They established the technical foundations and theories that facilitate psychotherapeutic work that combines movement and words. One might view them as a product of their time, in which cultural ideas about dance as a direct expression merged with new psychological theories of the time. Some of these women were in psychoanalytic treatment, which was widespread in the mid-twentieth century. They were influenced by the theories developed in and after Freud's time, including psychoanalytic theory. This background provided them with an understanding and curiosity about human development and behavior and helped form the basis for the verbal-nonverbal connections in DMT.

In time, practitioners organized the connections between movement and the psyche by building systems for coding movement, connecting specific movement qualities with specific psychological meanings. Once recorded, the data about the movement could be analyzed and interpreted based on the theoretical understanding of the movement-psyche connections. Two of these methods that are central in DMT are the Kestenberg Movement Profile (KMP) (1975) and Laban Movement Analysis (LMA) (1974). KMP was developed after years of observing children and adults, and emphasizes human development. LMA incorporates knowledge from anatomy, kinesiology, psychology and other fields, and is used both in DMT and in dance, acting, athletics and more (1975). Both techniques are taught and used widely in DMT. Epimotrics' is a newer technique that was developed in Israel and is now used in all DMT training programs in Israel, and in several European countries. It provides a comprehensive paradigm for understanding 'emotive movement', i.e. the interwoven expression of emotions, drives, perceptions, and interpersonal relations through motor behavior (Shahar-Levy, 2004). All of these techniques give practitioners a language for analysis, and a vocabulary with which to speak about it. This focus that developed in DMT parallels Panksepp's concept of 'cognition'.

The pioneers of DMT began their work with the recognition that body-movement holds power as an essential form of nonverbal expression of emotion and identity. The integration of psychoanalytic theory helped develop verbal processing and understanding of the movement experience. As observation tools developed for analyzing and diagnosing movement, practitioners were able to analyze the movement in a structured way. These three aspects enabled the creation of beneficial therapy models.

One of the important conclusions of DMT is that deep understanding occurs through the body (Panhofer et al., 2011). On the basis of this insight, the work of 'Authentic Movement' was established. It will be elaborated upon here, because of its unique impact on DMT theory and practice, as well as its presence in DMT supervision.

## *2.2 Authentic Movement*

Authentic Movement is a model of movement used in DMT. It involves the movement of one person (client/patient/supervisee), the 'mover', in the presence of another person (therapist/witness/supervisor), the 'witness' (Chodorow, 1991; Whitehouse, 1979). It can occur in both individual and group settings. The mover moves in an open studio space with their eyes closed, listening inwardly and finding movement that arises from an internal impulse. A relationship is formed between the body of the mover and the body of the witness (Best, 2003). Following the movement

work, there is verbal dialogue between mover and witness. Each describes their experience, their images and sensations. The movers thus explore their relationship within themselves as well as their relationship with being seen by the witness. The moving is direct experience, which gradually is given form.

Verbal and nonverbal communication are essential parts of Authentic Movement, firstly in the dynamic process occurring in the mover, and also in the relationship between mover and witness. The theory, practice, and impact of Authentic Movement accompanied the development of DMT and effect the development of supervision in the DMT field. The technique is used in therapy, with the client as the mover and therapist as the witness, and in supervision, with the supervisee(s) as the mover(s) and supervisor as the witness.

### **3. DMT Supervision**

DMT and supervision in DMT are two different kinds of professional meetings, whose goals and characters are different. However, they are similar, in the way the verbal and body/movement communication occurs among the participants. Over the years, as a result of broad changes in clinical analytic theory and practice, in art, and shifts in perspective about the essence of therapy and its goals, shifts have occurred in body/movement-oriented supervision. The developmental changes that occurred in body-movement theory in DMT are reflected in supervision, based on the assumption that one cannot separate the way in which supervision is conducted and the way the therapy sessions, brought to supervision for discussion and processing, are conducted.

Adapting supervision to the changes that occurred in the DMT approach is crucial, since in most cases, the supervisors serve as role models with whom the supervisees identify, and the most important learning occurs through this identification process. Adapting supervision includes the changes that were discussed in the 'three stages', and implementing the active principles that they include as essential elements in supervision. Integrating them in the way supervision is conducted, and in the messages to the supervisees, allows the latter to internalize these ways of acting and responding, on the path to forming their professional identity (Young, 2012). Supervision is considered essential in order to learn to function effectively as a therapist. It serves as a place of professional training and of building a therapeutic identity (Watkins, 1997). It has been proven to improve the professional skills of the therapist (Fiedler, 2008; Jones & Dokter, 2008; Panhofer, 2008). One of these skills is the acquiring of professional language, which is a necessary skill; a shared language also provides a sense of belonging and security (Panhofer et al., 2011).

The main goal of the supervision process is to help the therapists build the skills necessary so that their patients receive beneficial therapy (Young, 2004). In the context of the supervision process, a space is created for thinking, reflection, and insight, in which the supervisors and supervisees create, together, a picture of the patient and a picture of the therapeutic relationship (Case, 2007). Supervision is a relationship that supports a different relationship, that of the therapist and client (Brown, Meyerowitz-Katz, & Ryde, 2007).

Payne (2008) suggested relating to supervision as necessarily allowing a safe space for exploration, so that the supervisee can examine difficult emotions such as anxiety, confusion, and uncertainty in an emotionally supportive environment. Mollon (2000) also writes that supervision should provide a space for contemplation, feeling, and mirroring. The supervision must be a place in which logic and emotion receive space to exist simultaneously, such that the supervisee is able to bring the clinical work in a conscious way. Consultation, advice, and learning are provided to the supervisee according to his need (Barnett, Goodyear, Cornish, and Lichtenberg, 2007).

There are many varied and creative methods of supervision in DMT, as well as in other modes of creative arts therapies (Ko, 2014). Mollon (1989) argues that supervision that focuses on art fosters professional and personal growth in the supervisee since the art fosters self-understanding, and its place in therapy. A significant position in the area of supervision in the creative arts therapies is that the most appropriate supervision for arts therapists uses the artistic medium used by the supervisee in his work (Durkin, Perach, Ramseyer, & Sontag, 1989; Marion & Felix, 1979; McNiff, 1986). Studies that examined the effect of using art in the supervision process showed how it improves self-awareness and the process of understanding counter-transference (Turry, 2001). Using art in the supervision space even reduces tension (Deaver & Shiflett, 2011); improves the relationship between supervisor and supervisee (Scheiby, 2001); increases self-awareness in the supervisee (Austin & Dvorkin, 2001); and increases empathic attunement (Cooper, 2001). The importance of using the body and its movement in therapy and supervision, as a way of understanding and knowing, has been mentioned by a number of dance movement therapists (Federman, 2011; Meekums, 2007; Panhofer et al., 2011; Payne, 2008).

Payne (2008) emphasized the contribution of using writing, moving, or visual art to gain new perspectives on the supervision material. Panhofer et al. (2011) even suggested a new method of self-supervision involving movement. Meekums (2007) uses the body as a central listener in DMT supervision, who is waiting to absorb information, bypassing the logical area of the brain and activating the body's wisdom. This embodied approach to supervision is similar to Authentic Movement, in the sense that it uses symbolic processing, and speaks to unknown places of body knowledge, and wisdom that may be accessed beyond the logical mind (Ko, 2014). While this approach has significant advantages (e.g. supervisee self-knowledge, accessing other perspectives on the therapy), the entire process is dependent on an appropriate relationship between the supervisor and the supervisee(s) (Ko, 2014).

Ko (2014) raised a difficulty encountered when using movement-based supervision. His study found that the movement serves to reduce the sense of authority in the supervision context and increase verbal sharing, thus creating a more intimate supervision space. While this is beneficial in many ways, it also appears to have the effect of confusing the supervision with the intimate space of therapy. This challenges the efficacy of the therapists' training. It seems, therefore, that there is a need for more distance and objectivity in the supervision space.

In light of these insights, the author suggests that there is a need for a supervision model that combines the use of Authentic Movement with a model of movement analysis and observation. This need arises from fieldwork and from the professional literature. It is important to maintain the unique contribution of the embodied approach in DMT supervision, however movement analysis and

observation would provide an appropriate amount of emotional distance from the supervision through the use of structured analytic language (Shahar-Levy, 2004). The ability to separate between the therapist's world and the patient's world facilitates greater attunement in the therapist for the patient, and enhances the ability to actualize empathy.

In the history of DMT, methods of movement observation and analysis have been used for precisely this purpose; they allow one to understand, classify, and interpret human movement (Davis & Markus, 2006; Levy, 2005). Used together, observation, analysis, and interpretation enhance the ability to provide therapeutic insight (Specktor, 2015). The methods outlined above (KMP, LMA, and Epimototics') are all used in this way in DMT. They have the potential to play a larger role in DMT supervision.

In embodied or arts-based supervision, there tends to be a use of personal language. I would like to suggest that adding methods of movement observation is an important step in the development of embodied supervision. It parallels the focus that these techniques receive in DMT theory and clinical practice, but it has yet to receive attention in the literature on DMT supervision. I believe it also addresses the confusion that may arise out of embodied supervision, which creates an intimate space that can invite confusion of the supervision space with therapy.

#### **4. Conclusion**

DMT integrates insights from nonverbal experience, from verbal discussion, and from cognitive observation analysis. These all have their place in comprising this complex profession, and contribute to a certain balance within the practice of DMT. This balance allows both for deep self-expression, rooted in the body and movement, and for the ability to understand this expression.

As in many other fields, supervision in DMT contributes greatly to the young therapist's development. DMT supervision can often provide the unique and moving experience of processing their work with clients through the experiential use of movement. This is a truly important part of the supervision. However, even these supervision models, which generally also include verbal discussion of the personal movement process, can be too close to therapy for some supervisees. They require guidance in creating space from their own personal, emotional reflection, in order to build therapeutic insight about their clients and the therapist-client relationship.

The structured analytic vocabulary of movement observation systems, while perhaps less intuitive and more demanding in certain ways, would provide order in the supervision context. This is precisely what it does in DMT theory and practice. It leads to more knowledge and information about the therapy, not only from the up-close experience of movement work, but from a cognitive processing of that same emotional-movement work.

The combination of embodied supervision with techniques for classifying and interpreting those experiences is an important step in the development of supervision in DMT. It may be relevant, as well, to other fields that employ embodied or experience-based methods in supervision. Perhaps they could also benefit from the use of techniques that provide objective professional language. Further research

can establish and specify potential models of supervision that utilize movement analysis and observation.

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