

The background of the slide is a complex, abstract pattern. It features a dense network of thin, gold-colored lines that resemble veins or a web. These lines are set against a background of vibrant blue and purple hues. The colors are layered and blended, creating a sense of depth and movement. The overall effect is reminiscent of a microscopic view of a biological structure or a stylized, organic pattern.

SOCIAL WORK, TRAUMA, & THE ARTS



DR. MEAGAN
CORRADO



CLASS 7: DANCE/MOVEMENT

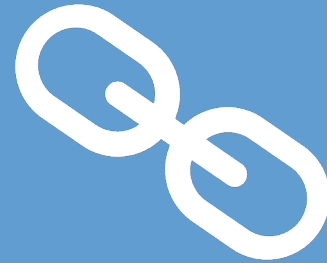
SOCIAL WORK, TRAUMA, & THE ARTS

COURSE DASHBOARD

VIRTUAL ASYNCHRONOUS CONTENT



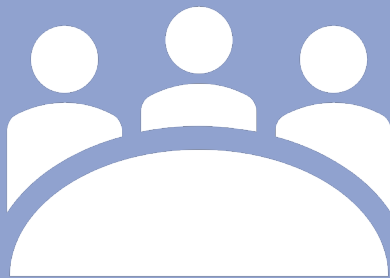
WEB LINKS



COURSE READING



"LIVE" VIRTUAL CLASS SESSIONS



WRITTEN ASSIGNMENTS



STUDENT PROPOSALS



Social Work, Trauma, & The Arts

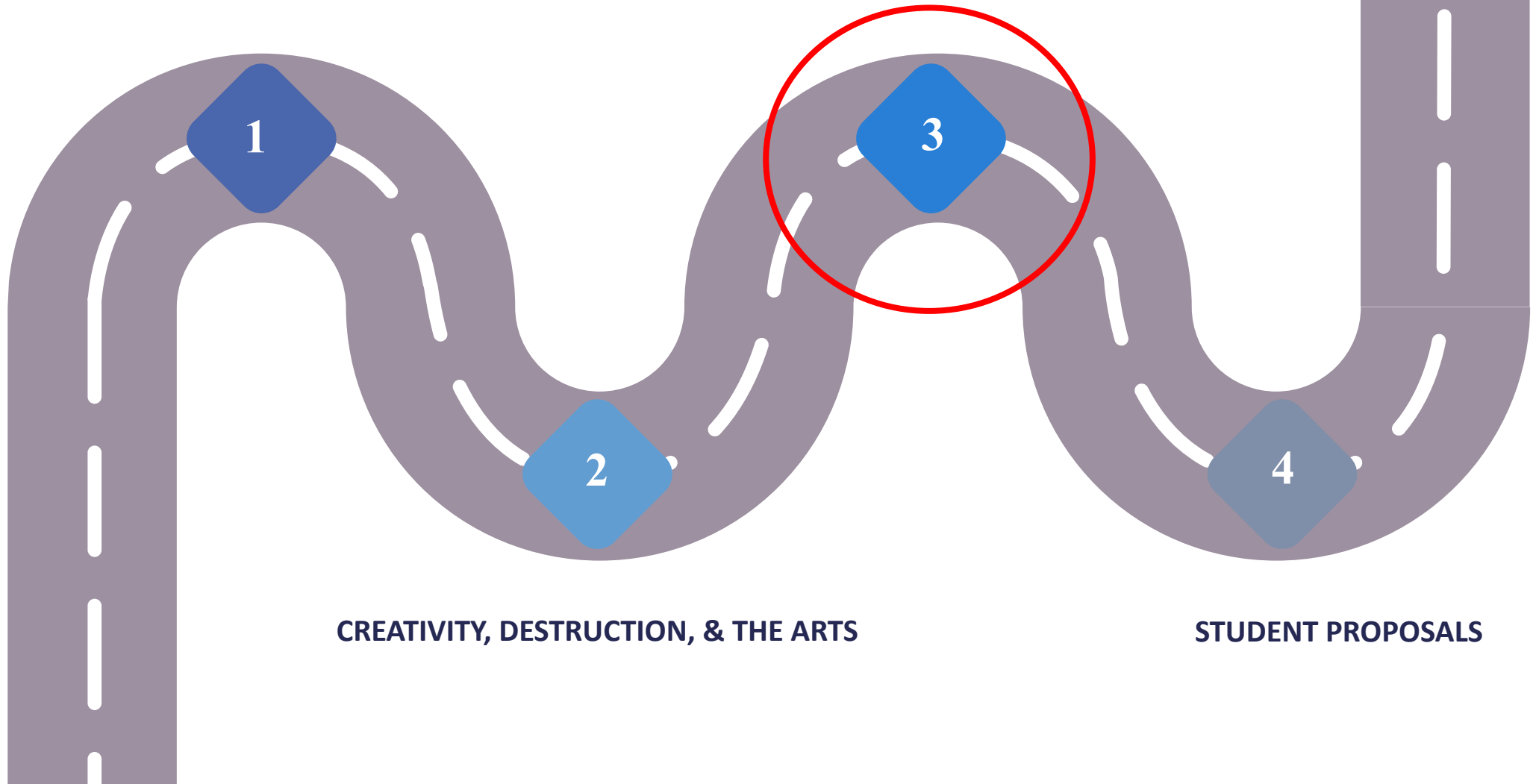
Course Roadmap

INTRODUCTION TO TRAUMA


EXPLORATION OF CREATIVE
ARTS APPROACHES

CREATIVITY, DESTRUCTION, & THE ARTS

STUDENT PROPOSALS



AGENDA

- 
- 1 The origins of movement
 - 2 The social worker's approach
 - 3 Therapeutic use of dance
 - 4 Dance and movement therapy



THE ORIGINS OF MOVEMENT

THE ORIGINS OF MOVEMENT

- “It was long ago and we can’t remember, but we were born into an alien world in which the first movement was breathing- that sharp inflation of the lungs that brings the first cry. From then on, we struggled and grew into movement, learning on our own, without being taught, how to stretch out and double up, how to hold up our heads, roll over, sit up, creep, crawl and, one triumphant day to stand, walk...We were busier moving than anything else in the world, and long before we had words we communicated how we felt through our bodies” (Whitehouse, 1999)

MOVEMENT

- Movement is an integral part of our survival
- Movement is an indicator of our attitude/view of ourselves
- Through movement, “we can discover a great deal about ourselves. We can explore sensations and feelings that we did not know we had. We can extend the range and freedom of our physical gestures. We can learn to trust and express our own spontaneous reactions. We can allow our movement to be creative” (Whitehouse, 1999).
- Movement is an indicator of our relationship with our environment

MOVEMENT

- “Kinesthetic sense” describes the experience of “feeling one’s body move” (Whitehouse, 1999)
- Some of us have a highly developed kinesthetic sense and others have one that is “never developed, or seldom used [and] becomes unconscious” (Whitehouse, 1999)
- “Working with movement is an initiation into the world of the body as it actually is, what it can do easily, with difficulty, or not at all. But it is also, or can be, a serious discovery of what we are like- for we are like our movement. People discover what parts of their bodies are not available, do not move, are not felt” (Whitehouse, 1999)

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THE SOCIAL WORKER'S APPROACH

THINGS TO REMEMBER

- Everyone's relationship to their body is different.
- Every client works at a different pace.
- Meeting clients where they are sometimes means meeting them in a place of disconnection and disempowerment.
- Body works takes time, patience, and awareness.

CONSIDER THE FOLLOWING:

How connected/disconnected are you from your own body?

What non-verbal messages are you communicating to your client?

Are there certain areas of the body where your client is more sensitive/reactive?

How can you create safety while also supporting your client in gaining mastery over parts of the body that have been traumatized?

How do you know when to back off and when to push a client a little farther?

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DANCE AND MOVEMENT THERAPY

DANCE AND MOVEMENT THERAPY

- “Dance movement therapy is defined as: ‘the psychotherapeutic use of movement and dance through which a person can engage creatively in a process to further their emotional, cognitive, physical, and social integration’ (Admtuk 2002). DMT, also termed movement psychotherapy or dance therapy, is a form of psychotherapy in which the creative use of movement and dance play a fundamental role within the therapeutic alliance” (Singer, In Ed Payne, 2006).

DANCE AND MOVEMENT THERAPY (PAYNE, 2006)

- Dance and Movement Therapy...
 - Views “spontaneous movement...as symbolic of unconscious processes”
 - “Increases self awareness and self-esteem, providing for growth, change, and healing within the therapeutic relationship”
 - Use emotions “as expressed through the client/patient’s movement” to “provide content and a framework which influences the direction of the therapy”

Table 1.1 *Comparison of DMT and Therapeutic Dance*

Field	DMT	Therapeutic Dance
Facilitator is an artist	Yes	Yes
Boundaries	Start and finish times, group rules, private space, confidentiality, limits to relationship (no socialisation).	Start and finish times and privacy of space may be more relaxed. Group rules may be relaxed or strict. Relationships may extend beyond the group.
Use of structure offered by leader	Probably, but in response to therapeutic goals and client's own contribution. Likely to be flexible.	Probably. Not necessarily responsive to the client's contribution. May be rigidly adhered to, or flexible.
Use of props	Probably. May be used as 'transitional objects' (Winnicott, 1971).	Probably. Used to stimulate creativity.
Performance to outside audience	Unlikely	Possibly
Performance to other members of group	Possibly	Probably
Use of choreographic structures	Possibly	Possibly
Use of improvisational structures	Definitely	Probably
Use of rhythm	Yes. To structure and contain. Also to develop certain psychological/developmental states.	Yes. To structure and contain, and to develop skills.
Use of mirroring (rhythm, quality and shape of movement)	Yes. Conscious use to develop therapeutic relationship and group interrelationships.	Yes. May be used as a choreographic device or to develop group interrelationships.
Use of costume	Limited	Possibly
Use of theatre lighting	Unlikely	Possibly
Typical group size	1 to 8 or 10 individuals	4 to 30 or more individuals
Emphasis on aesthetic components	No	Possibly
Aims	Targeted to the therapeutic needs of the client group.	Broadly therapeutic and sometimes educational/artistic.

(MEEKUMS,
2002)

Field	DMT	Therapeutic Dance
Theoretical underpinnings	Include psychological theories.	May or may not include psychological theories.
Client groups	Just about anybody, but may be subject to assessment.	Just about anybody, but may be targeted.
Competencies required	Experience in facilitation of groups and range of movement styles. Additional competencies including ability to work with distress.	Experience in facilitation of groups and in the movement form offered.
Own therapy required	Yes	No
Clinical supervision required	Yes	No
Level of academic training required	Post-graduate diploma minimum	No formal qualifications required
Work with group dynamics and interpersonal relationships	Definitely	Probably
Work with the internal imagery and symbolism of clients	Definitely	Probably
Integration of spiritual components	Possibly	Possibly
Distress versus fun	Actively work with distress, but fun is allowed and used to balance. 'Rescuing' by therapist avoided.	May avoid distress and emphasise fun. Alternatively, facilitator may act as shaman, 'rescuing' through the use of self.
Verbal evaluation of sessions	Usually	Not necessarily
Use of touch between therapist and clients	Rare	Occurs as part of normal interaction
Diagnostic or psychological formulation based on movement observation	Yes	Not necessarily

(MEEKUMS,
2002)