



**“Use of Dance Movement Therapy to Uncover Dissociation in
Sexual Abuse Survivors”**

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Use of Dance Movement Therapy to Uncover Dissociation in Sexual Abuse Survivors

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Introduction

Throughout the years, expressive therapy has gained popularity among therapists. Particularly, expressive therapy can be known as “creative art therapies (CATs) or arts interventions” (Martin et al., 2018). In this paper, dance movement therapy (DMT) a type of creative art therapy will be addressed. This paper will focus on addressing the question, “How effective is dance movement therapy (DMT) in helping those dealing with sexual abuse?” The process of DMT allows for different ages to portray emotions, ideas, and thoughts through the act of dance movements. Some health experts and psychologists believe that this type of therapy is very beneficial, however, others argue against this. The effectiveness of DMT is highly debatable due to lack of evidence. Although, I chose to address this topic of creative art therapies because health psychologists pinpoint that DMT could be a treatment plan for “psychological trauma” (Koch & Weidinger-von der Recke, 2009). In contrast to regular therapy sessions, DMT evokes a sense of creativity that is attributed to the release of suppressed emotions. During DMT, the individual can enter a “play space” framework, portraying unconscious feelings. “Effect of Dance/ Movement Therapy: A Meta-Analysis” by Meredith Ritter and Kathryn Graff Low, exemplifies the link between the process of DMT and healing (1996). Through case studies, DMT applied to non-disordered subjects, children, and adult psychiatric patients. In children, DMT could help “regain a sense of control and ownership of their bodies...” (Ritter & Low, 1996, p. 250). A sexual abuse survivor can be the “leader” in DMT and portray what she is feeling through her own perspective. In contrast to a regular therapeutic session, the individual, rather than the therapist, is leading the discussion through expression of the body. Additionally, “Dancing the Demons Away: Dance/ Movement Therapy as a Tool in Counseling Sexually Abused Children in the Philippines”, Dinghy Kristine Sharma, a psychologist who works with

children in therapy, reported a case study of five girls between the ages of 6-9 who attended DMT sessions over the course of two months (2006). The girls could integrate physical and emotional aspects into the dance therapy session. Through a space of being able to “let go”, the “girls’ body awareness increased, certain repressed memories about the sexual abuse were evoked, and were eventually shared...” (Sharma, 2006, p. 6). DMT allowed for a sense of freedom due to no restrictions from the therapist. The individual could describe her experience through spontaneous emotions which the therapist used as a tool in the “healing” process. Thus, I argue that dance movement therapy is indeed effective in the process of healing an individual who has experienced sexual abuse. The process of dance movement therapy awakens a sense of “aliveness” in the body and mind that leads to healing within the sexual abuse survivor. Dance movement therapy is effective for sexual abuse survivors through the use of body movements because it creates a safe space for connectivity and intimacy that leads to new-found ownership of the body.

Overview

This paper focuses on the effectiveness of dance movement therapy (DMT) on sexual abuse survivors by using the individual’s creativity. To prove how DMT works on sexual abuse survivors in contrast to “regular” therapy, the paper will address multiple factors such as emotion, interactions, and spontaneity. However, before effectiveness of DMT can be proven, key terms should be defined. The principle key terms such as sexual abuse, DMT, and “play space” theory will be defined. Following the definitions, research regarding the creative aspects of DMT resurfacing repressed memories in the sexual abuse survivors will be presented. Later, the research will present factors in the “play space” such as connections, spontaneity, and creativity that will lead in favor of DMT as effective therapy for sexual abuse survivors. The

paper will conclude with the overall creativity evoked during DMT in relation to the “play space” theory, demonstrating how DMT is effective for someone who was or currently is a sexual abuse survivor.

Igniting the process behind DMT

Henceforth, the term “sexual abuse” needs to be defined along with the long-lasting effects. Sexual abuse can be defined as physical violence towards women, men, and children (Long & Messman-Moore, 2000). Sexual abuse survivors deal with physical violence that creates life lasting psychological trauma. The trauma endured results in constant feelings of fear, shame, and guilt to be present. Some of the characteristics of being sexually abused results in “intrusive thoughts, avoidance of trauma related stimuli and numbing of responsivity and hyperarousal...” (V. Wolfe, Gentile & D.Wolfe, 1989). These characteristics can also lead to oppressed feelings in the individual that are difficult to discuss. The trauma endured can be evoked through the process of creativity during the therapeutic “play space” giving the individual the freedom to express the deep- rooted trauma in a safe environment.

The underlying thoughts, actions, and feelings displayed through the process of DMT can be connected to the theoretical framework of “play space”. Russell Meares within the developmental theory established a “therapeutic ‘play space’” (Eisdell, 2005, p.5). During “play space” the individual, “... transforms the objects in his [the individual’s] environment into symbols of his [the individual’s] own imagination...” (Eisdell, 2005, p. 5). The body movements act as the objects, the environment is the therapy session, and through the body movements symbolism of emotion can be depicted. The individual can use imagination to foster the underlying emotions behind the trauma. For example, dance movements produced with aggression or anger can depict a symbol of the feeling of trauma that had to be endured. After the

movements, the individual has a self-realization. The individual can come to terms with the event of the sexual abuse. Thus, she can see an outside perspective of what she truly endured. The overall goal of “play space” is for the individual to create a feeling of “aliveness” whose “sense of ordinary living is one of ‘deadness’” (Eisdell, 2005, p.6). The “deadness” is the sense of feeling nothing. Due to the sexual abuse, the individual can become numb or dissociate herself from true feelings or emotions that are positive. Thus, the “play space” framework allows for both the individual and therapist to achieve a sense of relief. The individual gains a sense of “healing” by evoking hidden or untapped emotions. There is a sense of realization of the true emotion that has re-surfaced. The individual can grow. The therapist gets to discover the unspoken emotions the individual has been battling through the act of creativity. Imagination during DMT or one’s “play space” can establish a healing effect for sexual abuse survivors because it gives the individual the opportunity to observe other people who have been in similar situations. The individual can interpret the therapeutic “play space” in her own way and connect to the unspoken feelings of the other women portraying movements that symbolize the psychological trauma.

In this paper, the creative art form discussed is dance movement therapy (DMT). DMT can be defined as “the use of movement as a process which furthers physical and emotional integration of an individual” (Ritter & Low, 1996, p. 249). The application of rhythm and movements allows the individual to go beyond the confines of the trauma. The application of the movements can be expressed through a form of “mirroring” in DMT. “Mirroring in Dance/ Movement Therapy: Potential mechanisms behind empathy enhancement” by Lucy McGarry and Frank Russo, showed mirroring as an exercise practiced in DMT that enhances the therapist’s understanding of the individual (2011). The act of mirroring occurs “when two people make

similar body movements that are coordinated or slightly echoed in time” (McGarry & Russo, 2011, p. 178). Essentially, mimicry of the patient leads the therapist to put themselves in the headspace of the individual. The therapist can mirror the patient to evoke a sense of empathy and emotional intention behind the movement. Through case studies, the mirror aspect of DMT developed an important element that resulted in “... the clients were engaging in mirroring of their own” at the end of the mirroring exercises (McGarry & Russo, 2011, p. 182). The initial therapy “mirroring” sessions during DMT lead with the therapist initiating the unspoken conversation through a simple movement. However, as the survivor became more connected with the therapist, the individual felt comfortable to initiate the tone of the therapy session. The client could guide herself through the process of movement. The patient could enter her own “play space”. The environment of the therapist observing the patient allows the individual to enter her “own world” in a sense. The symbolism in the gestures and body movements indicate the underlying feelings that occur in the individual’s mind. The creative mirroring of oneself within the “play space” allows for imagination to flow through the form of body language. In other words, the movements flowed freely because the individual could mimic the suppressed emotions and come to terms with the underlying memories. The process of mirroring during DMT acts as the leading step to regaining self- control.

Setbacks during the process of Dance/ Movement Therapy

Nevertheless, some critics argue that dance movement therapy can cause a negative impact on the sexual abuse survivor. DMT uses the body during the therapeutic process, however, the body is a reminder for some sexual abuse victims of the traumatic event that occurred. In “The Body Remembers: Dance/Movement Therapy with an Adult Survivor of Torture”, Amber Gray, a mental health professional and dance movement therapist, discusses the

effects of DMT and the treatment impact on torture survivors (2001). Essentially, DMT can pose complications on the individual regarding her body that will cause a negative outcome for both the individual and the therapist. Gray (2001) describes DMT as a wrong approach in the instance that “symptoms of torture survivors live in the body” (p. 33). It may be difficult for a sexual abuse survivor to use her body to express harbored emotions for a positive outcome because previously the body of the individual has been seen in a negative light due to the imprint of the traumatic experience. The act of entering “play space” would pose difficulty as well if not relinquishing the control of the restraints that the body has felt. The individual may have difficulty portraying unconscious images through the dance movements if the use of the body is being re-traumatized. The “play space” can also be inhibited by the individual’s thoughts. The reminder of the trauma does not allow the individual to be “carefree”. Additionally, in “Traumatized refugees: An integrated dance and verbal therapy approach”, Sabine C. Koch and Beatrix Weidinger- von der Recke, both specialists in dance movement therapy, focused on a similar implication of trauma on refugees in Germany (2009). DMT was used in group and individual settings to release suppressed emotions through acts of movement regarding the women’s culture and religion. Through the individual and group setting, DMT can be “difficult for rape survivors due to the retraumatizing effect of being asked to inhabit the body” (Koch & Weidinger- von der Recke, 2009, p. 293). The woman should let her body be “free” during DMT to express the emotions and experience of the traumatic event, however, it is difficult for someone to “free” a part of themselves that has been damaged. Therefore, some people oppose using DMT with sexual abuse patients because individuals believe that previous experiences regarding the body will prevent a “healing process”.

It may be true that the use of the body during DMT resurfaces previous images and thoughts that can hinder an individual from healing during DMT. However, it is also true that establishing intimate connections during DMT creates a carefree space for the individual to be comfortable to use her body as an expressive form. “Her Body Speaks: The Experience of Dance Therapy for Women Survivors of Child Sexual Abuse” by Letty J. Mills and Judith C. Daniluk, explores a study done on five women who were sexually abused as children and put into a dance therapy group (2002). The women participated in DMT that involved physical integration and aimed to develop physical, mental, and emotional growth. The women at the end of the study reported, “...this connection and intimacy added greatly to their growth and healing through dance therapy, because they felt supported by others and accepted both physically and emotionally...” (Mills & Daniluk, 2002, p. 82). The observation of other women in the group being vulnerable provided a sense of relief. The women who believed they were by themselves dealing with the experience, essentially, found comfort knowing there were with other women who dealt with the same experiences and emotions. The ability to use the body in place of unspeakable words allowed for realization of the suppressed emotions and incidents that have been dissociated within themselves and others. The body movements expressed all the emotions that have been hidden because it was a lot easier for the woman to display how she was feeling rather than explain in words. Similarly, another instance that exemplified a new-found self through DMT was the case of Leo. “Dance and Expressive Movement Therapy: An Effective Treatment for a Sexually Abused Man” by Zvika Frank, described a patient, Leo, going through DMT as a sexually abused survivor and the impact the therapy had on him (1997). Essentially, Leo turned to DMT to “break free” of the shame, guilt, and depression. However, to participate in DMT, the therapist had to gain a connection with Leo. The therapist established Leo’s

background as well as greatest problems he had to endure on an everyday basis. Leo and the therapist established a sense of trust. However, Leo still had difficulty expressing himself verbally. Thus, the non-verbal session aspect that evoked creativity in Leo allowed him to no longer be ashamed of his body and he “started to accept it [body] and the compliments he received on it [body]” (Frank, 1997, p. 55). By breaking down the barrier of shame, the spontaneous movements brought out a positive side of Leo’s body that he could embrace. Although Leo was revisiting his experience using his body, he was comfortable enough to accept and re-order his body image (Frank, 1997). In short, establishing a sense of trust between the therapist and group members during the application of DMT allows for a breakdown of one’s repressed emotions that leads to a sexual abuse survivor feeling confident and “free” in his or her body.

A Different View on Therapy: Effectiveness

Nevertheless, some critics argue that dance movement therapy can be the wrong type of therapy choice for sexual abuse victims. Cognitive emotional therapy, a “mainstream” type of therapy is argued to be the better alternative for allowing the survivor to fully interpret and process the situation encountered. “How Well Does Cognitive- Behavioral Therapy Treat Symptoms of Complex PTSD? An Examination of Child Sexual Abuse Survivors within a clinical trial” by Patricia Resick, Pallavi Nishith, and Michael Griffin discuss the cognitive-behavioral treatments that provide prolonged results for sexual abuse victims dealing with posttraumatic stress disorder (PTSD) (2003). The Cognitive- behavioral therapy (CBT) approach allows for a conceptualization of the wide range of symptoms that the individual is experiencing. This study tested the effectiveness of cognitive- emotional therapy, which is a typical treatment approach to trauma, by dividing a sample of 121 participants into groups based on previous

sexual abuse history (Resick et al., 2003). The daily tasks for the individuals in therapy included “daily homework and two sessions of exposure by means of written account of the worst rape...” (Resick et al., 2003). In contrast to DMT, cognitive-behavioral therapy provided an exposure to the experience. The individual had to enter a different “play space”. The play space was less focused on the outcome of imagination but on the account of recall. Through repetitive conversations regarding the sexual abuse encounters, the individual was able to recover from the effects of the trauma. The consistent exposure to the trauma allowed the individual to overcome the negative voices within themselves. The individual was focusing on interpretation and thoughts that had initially caused the trauma to be sparked by minor instances such as intimate connections in relationships. The repetitive routine of re-living the trauma through verbal and written assignments had a positive impact on the individual. The therapist knew exactly what the individual was thinking. Contrastingly, DMT requires the therapist to interpret subtle details based on body movement. However, the therapist could have a different interpretation than the individual. Thus, CBT was proven to be highly effective in reducing “... dissociation, impaired self-reference, dysfunctional sexual behavior, and tension reduction behaviors” (Resick et al., 2003). Therefore, some critics could argue that a regular therapeutic verbal approach such as CBT provides an effective interpretation of the individual’s feelings in the case where DMT does not.

It may be true that CBT allows the individual to interpret more of the trauma encountered through the process of recall. However, it is also true that through the process of embodiment during DMT, an individual can establish her own guide for interpretation that allows for connectivity beyond herself. The survivor can connect to herself as well as a loved one, friend, or any person that she encounters. In “Dance/ Movement Therapy with Clergy in Crisis: A (Group)

Case Study” by Sabine C. Koch, DMT is explored by being integrated into therapy sessions for nuns and monks who faced sexual abuse (2008). Essentially, the therapy sessions allowed for verbalization through movements to free the group of nuns from past restraints. Through the process of DMT, Sister Eva, describes the therapy session to have “allowed others to experience her pain and feeling states with her, to non-judgmentally walk in her shoes...” (Koch, 2008, p. 80). DMT provided more than interpretation of the situation encountered and created an intimate bond with others through the pain, suffering, and vulnerability. The connection of others using dance allows the individual to find relief within herself and other woman present during group therapy. There is no need for the therapist to uncover what the individual is saying through dance because the women can come together to verbalize what they feel from the movements. The movements evoke a sense of security that allows the women to feel comfortable to verbalize all the thoughts the individual has dissociated. The “play space” the woman creates for herself is more than the process of recall. The woman can let imaginative thoughts guide the discussion. In turn, the discussion through movements allows for observation within the individual that triggers similar emotion as the other women experience in the therapy session. The women are able to “pass imaginary things around the circle” (Koch, 2008, p. 79). This demonstration of “play space” creates improvisation and mirroring effect that the other women can benefit from. The other women in the group have a sense of understanding and can further allow for healing in oneself. The improvisation moves beyond interpretation but goes on to acceptance and relaxation with one’s body and the events that occurred. In order to “heal” from the trauma endured, the individual has to be centered and connected to the process. “Therapeutic attunement: A transpersonal view of expressive arts therapy” by Mitchell S. Kossak, focuses on the integral aspects of therapeutic interaction established within the individual and the therapist (2008).

During the process of DMT, the interactions established create a self-awareness that comes from spontaneity, imagination, and willingness to uncover repressed emotions. DMT as an expressive art form allows the therapist to enter the world of the patient. In contrast, “the artist enters into the intimate world of material, space, sound, and deep connection with other participants” (Kossak, 2008, p. 13). The individual who dealt with the sexual abuse is able to enter a space of freedom. The creative freedom allows the individual to develop her own “stage”. The individual can lead the events in the way that she interpreted them, in contrast, not the way that the therapist interprets the events that are described by the individual. The individual during her “play space” can guide impulses and images through the process of dance in a way that fosters a connection between her other counterparts and the therapist. The other individuals observing are able to feel the same sense of emotion that is evoked from the individual during the “play space”. Essentially, DMT through the use of gestures and movements establishes a connection that allows healing in the individual and the other women a part of the group therapy.

Conclusion

Overall, the research provided establishes the effectiveness of DMT on sexual abuse survivors. Specifically, the effectiveness can be accredited to the framework of “play space” and the ability to uncover deep-rooted trauma. Dance movement therapy was proven effective for sexual abuse survivors in the process of establishing intimate connections with the body, the therapist, and others in the group settings. DMT acts as a support system in a way that other types of “mainstream therapy” cannot provide through the establishment of “connection and intimacy” using one’s body (Mills & Daniluk, 2002). DMT allows the survivors to connect in a carefree space on the establishment of trust. The trust initiated by the therapist gives the women a sense of freedom to non-verbally disclose the pain that has been felt throughout the years. The

observation of others allows the individual to see that she is not alone. The connection to others during the process of dance allows an individual to find relief within herself. DMT acts as an outlet for spontaneous feelings. The individual entering the therapeutic play space provides more than a recall of events. The play space engages a side of the individual that is new. The women can uncover a new self- image based on the movements expressed during DMT. The women and men that have been subjected to the painful violence of sexual abuse often view the body, other people, and relationships as frightening. However, the process of imaginative thoughts and scenarios that arise during the dance movement therapy sessions builds a new confidence. The individual is slowly able to make improvements. The process of DMT significantly gives the woman a newfound way to love herself and her body. Evidently, self- recovery brings acceptance for new relationships and intimate connections that previously would have been dismissed. As a result of DMT, embodiment and intimate connections evoke creativity through body movements that is effective for a sexual abuse survivors in the process of healing.

References

- Eisdell, N. (2005). A conversational model of art therapy. *Psychology and Psychotherapy: Theory, Research and Practice, 78*, 1-19.
- Frank, Z. (1997). Dance and expressive movement therapy: An effective treatment for a sexually abused man. *American Journal of Dance Therapy, 19*(1), 45-61.
doi:10.1023/A:1022323401222
- Gray, A.E.L. (2001). The body remembers: Dance/ movement therapy with an adult survivor of torture. *American Journal of Dance Therapy, 23*(1), 29-43.
doi:10.1023/A:1010780306585
- Koch, S.C. (2008). Dance/Movement therapy with clergy in crisis: A (group) case study. *American Journal of Dance Therapy, 30* (2), 71-83. doi: 10.1007/s104665-008-9053-z
- Koch, S.C., & Weidinger- von der Recke, B. (2009). Traumatized refugees: An integrated dance and verbal therapy approach. *The Arts in Psychotherapy, 36* (5), 289-296. doi: 10.1016/j.aip.2009.07.002
- Kossak, Mitchell. (2008). Therapeutic attunement: A transpersonal view of expressive arts therapy. *The Arts in Psychotherapy, 36* (1), 13-18. doi:10.1016/j.aip.2008.09.003
- Long, P.J., & Messman-Moore, T.L. (2000). Child sexual abuse and revictimization in the form of adult sexual abuse, adult physical abuse, and adult psychological maltreatment. *Journal of Interpersonal Violence, 15*(5), 489-502. doi:10.1177/088626000015005003
- Martin, L., Oepen, R., Bauer, K., Nottensteiner, A., Mergheim, K., Gruber, H., & Koch, S. C. (2018). Creative Arts Interventions for Stress Management and Prevention-A Systematic Review. *Behavioral sciences (Basel, Switzerland), 8*(2), 28. doi:10.3390/bs8020028

- McGarry, L.M., & Russo, F.A. (2011). Mirroring in dance/ movement therapy: Potential mechanisms behind empathy enhancement. *The Arts of Psychotherapy, 38*, 178-184. doi: 10.1016/j.aip.2011.04.005
- Mills, L.J., & Daniluk, J.C. (2002). Her body speaks: The experience of dance therapy for women survivors of child sexual abuse. *Journal of counseling and development, 80*(1), 77-85. doi: 10.1002/j.1556-6678.2002.tb00169.x
- Resick, P. A., Nishith, P., & Griffin, M. G. (2003). How well does cognitive-behavioral therapy treat symptoms of complex PTSD? An examination of child sexual abuse survivors within a clinical trial. *CNS spectrums, 8*(5), 340–355. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2970926/>
- Ritter, M., & Low, K. (1996). Effects of dance/movement therapy: A meta-analysis. *The Arts in Psychotherapy, 23*(3), 294-260. doi: 10.1016/0197-4556(96)00027-5
- Sharma, D.K. (2006). Dancing the demons away: Dance/movement therapy as a tool in counseling sexually abused children in the Philippines. *DTTA Quarterly, 5*(2), 2-9. Retrieved from https://www.researchgate.net/publication/255172850_DTAA_Quarterly_Volume_5_No_2_2006_2_Dancing_the_Demons_Away_DanceMovement_Therapy_as_a_Tool_in_Counseling_Sexually_Abused_Children_in_the_Philippines.
- Wolfe, V. V., Gentile, C., & Wolfe, D. A. (1989). The impact of sexual abuse on children: A ptsd formulation. *Behavior Therapy, 20* (2), 215-228. doi: 10.1016/S0005-7894(89)80070-X

