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# A Community That Dances Never Dies: An Ethnographic Study on People of the African Diaspora Within the African Dance and Drum Community in Chicago

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A Community that Dances Never Dies: An Ethnographic Study on People of the African  
Diaspora within the African Dance and Drum Community in Chicago

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## **Abstract**

This ethnographic study explored the possible innate healing properties and therapeutic aspects of West African dance within a public community setting for people of the African diaspora, specifically the African dance and drum community of Chicago. The study was conducted to identify a possible means for preventative work, explore the unique mental health needs of African Americans and expand the understanding of dance/movement therapy concepts outside of the clinical setting. The study revealed the usefulness of West African dance as a means to connect African Americans to their heritage of physical, mental, and spiritual healing. A narrative analysis of informal interviews, in-depth interviews, and participant observations established seven major categories in which West African dance was influential. The categories were condensed into three unique healing and therapeutic properties: emotional regulation, maintaining presence, and addressing diasporic stressors. The results suggest for the integration of West African dance, dance/movement therapy, and preventative programming for African Americans, as well as implications for future studies.

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## **Chapter One: Introduction**

In recent years, there has been an increased interest in the degree to which racial and cultural influence can promote “over-diagnosis” and “under-diagnosis” of mental illness in African Americans (Wilson & Williams, 2004). It was suggested that researchers and mental health professionals “consider unique categories of mental health problems that may reflect the distinctiveness of the Black experience in the United States” (Wilson & Williams, 2004, p. 376). No definitive conclusions to these concerns were made, however research has shown within the mental health field there is a significant probability of misdiagnosis among African Americans possibly due to differences in mainstream symptom presentation, popular misconceptions, inaccuracies, biases and stereotypes (UC Davis Center for Reducing Health Disparities, 2009). As a result of these popular misconceptions, inaccuracies, biases and stereotypes, distrust of the health care system and stigma associated with therapy exists within the African American community.

Consequently this has led African Americans to initially seek mental health support from non-medical sources or not at all. Many African Americans turn to sources like family, friends, neighbors, community groups and/or church and religious leaders during times of difficulty and to maintain optimal mental health (American Psychiatric Association, 2014). However, it is unclear if these resources can actually aid African Americans with maintaining optimal mental health without clinical training and/or collaboration with professional mental health service providers. It is my goal to examine the use of community as a means of mental health support for African Americans and to explore its possible value as a feasible platform for mental health professionals such as dance/movement therapists to use as preventative interventions. It has the

potential to help bridge the gap between the mental health of African Americans and effective preventative treatment through a community framework.

Historically, African Americans have sought to connect to their African ancestry and identity as a means to counteract negative stereotypes and indoctrination as well as to procure pride in what dominate culture tried to negate, such as pro-Black and civil rights movements. As a result various cultural components were explored and have become popularized, two examples are West African dance and drumming. Due to the large influx of people brought to the United States from the Western region of Africa during the African slave trade, West African culture specifically has been promoted and studied in the United States. As a result West African dance and drum transitioned from exclusively being done in villages and towns in Africa to being performed, taught and celebrated in modern settings of both Africa and the United States. Along with the unique movement and musical characteristics of West African dance and drum these cultural components also brought the West African history, traditions, healing rituals and customs they were based in. Communities of followers were established for West African dance and drum, especially among those of the African diaspora who sought connection to their African heritage.

Motivation for this study came from my exposure to the African cultural following described in the previous paragraph. From a young age I witnessed what I thought were restorative properties of African culture that uplifted my community and me personally. These properties served as buffers against obstacles of isolation and low self-esteem due to negative cultural stereotypes. The supportive, inclusive nature of my community allowed me to feel accepted unconditionally and provided relief from those obstacles. The community members used West African culture, specifically the movement and musical components, to establish a



deeper connection to their African heritage and the benefits that are carried from being grounded in who you are (Community Tool Box, 2014). I am taking an ethnographic approach to examine the community beyond my experience and to explore the potential for developing dance/movement therapy (DMT) concepts for preventative work, multicultural counseling and community psychology as a way to focus on the unique mental health needs of African Americans. I used my research questions as a guide: if any, what are the innate healing properties and therapeutic aspects of West African dance for people of the African diaspora, specifically within the African dance and drum community? Furthermore, if West African dance is determined to be therapeutic, then in a community setting, could it: assist in accommodating the unique mental health needs of African Americans, be used as a preventative intervention, and contribute to the understanding of dance/movement therapy concepts outside of clinical settings?

Dance/movement therapy (DMT) carries a holistic framework that acknowledges the connection between the mind, body and spirit and uses it to promote the emotional, cognitive, physical and social integration of individuals. Due to its recognition and inclusiveness of the whole self, understanding DMT concepts outside of the clinical setting maybe beneficial in assisting individuals to establish and maintain wellness prior to pathology. DMT has the flexibility and adaptability to meet the needs of various populations. Developing its concepts outside the clinical setting provides an opportunity to meet individuals where they are and provide a safe space for healing in an environment and context one is familiar with.

Dance is defined as “moving rhythmically to music, typically following a set sequence of steps” (Oxford dictionaries, 2012, para.1). However, through more in depth research it could be concluded that the definition of dance has expanded to include a multifaceted experience, involving a distinctive use of multiple senses, emotion, cognition and somatic features. These

features can also be affected by stress and illness. Thus, it could be presumed that when dance is used as a means to promote healing, some ailments or stressors that affect emotion and cognition may be relieved or prevented. In American culture, dance holds far less significance and is not really thought of as a means to heal (Hanna, 1973). Rather, dance has been set aside for performances, dance classes, nightclubs and sometimes weddings. However, the relationship between dance and healing is recognized and used by many cultures of the world, including those in Africa.

Healing means, “to make sound or whole,” (Oxford dictionaries, 2014, para.1) it is the personal experience of restoring health or wholeness through the “transcendence of suffering” (Egnew, 2005, p.258). Healing comes in various capacities whether it involves transformation, reconciliation, loss, or transcendence. It goes beyond the curing of illness; it is finding harmony, understanding and, at times, acceptance of things you cannot change (Egnew, 2005). Dance has the ability to access these capacities of healing through non-verbal communication that engages physical, mental, and at times spiritual aspects of an individual. This in turn can improve mood, heighten positive feelings, foster creativity and reduce anxiety and stress, overall positively affecting an individual’s mental health.

Mental health is the psychological well-being of individuals. It is composed of an individual’s emotional well-being, ability to enjoy life and maintain a balance between life activities and managing stress and adversity (WHO, 2014). It requires an individual to develop the capacity for being flexible and adapting to various life challenges or changes, while maintaining an enjoyable, satisfying life (WHO, 2014). Culture is an important factor in defining what is mentally healthy due to the beliefs, values and experiences of their members (WHO,

2001). For example, in African and African American cultures spiritual or religious beliefs and practices are often included as part of their mental health regime.

It is the intention of this study to explore and promote further research on the unique mental health needs of African Americans. As stated earlier, it was suggested that researchers and mental health professionals “consider unique categories of mental health problems that may reflect the distinctiveness of the Black experience in the United States” (Wilson & Williams, 2004, p.376). The unique mental health needs of African Americans are based on the influence of past and present racism, discrimination, poverty and low socioeconomic status (SES) due to inequalities in access to education, employment and health care. Strong social, religious and family connections have assisted many African Americans in overcoming adversity, however research suggest that SES, institutional racism and discrimination affect mental health in a multitude of ways. Williams and William-Morris (2000) suggested, that racism can negatively affect one’s mental health status in at least three ways:

First, institutional discrimination can restrict socioeconomic mobility. This has led to racial differences in SES and exposure to poor living conditions that can adversely affect mental health. Second, experiences of discrimination are a source of stress that can adversely affect mental health. Third, the acceptance of the stigma of inferiority on the part of some minority group members can lead to impaired psychological functioning (p. 243).

African Americans within this societal and institutional construct encounter racially distinctive stressors and experiences that affect their internal and external beliefs, behaviors, reactions and coping skills. Thus in order to address the unique mental health needs of African Americans “a greater acknowledgment of the presence of racism” needs to be established and a

“new commitment to investing the resources needed to document and alleviate its pathogenic consequences” needs to be made (Williams & William-Morris, 2000, p.262). As a means for examining and broadening the knowledge base of effectively addressing these unique needs, this study aims to identify any potential mental health benefits derived by African Americans who utilize and maintain a connection to their African heritage in a community setting.

To shape the theoretical framework of this thesis, I integrated concepts from community psychology theory with concepts from Marian Chace’s dance/movement therapy (DMT) theory. This integration of theories and techniques may possibly have potential for becoming an influential intervention for community empowerment, healing and preventative care.

Community psychology theory is concerned with exploring the relationship between social systems and the well-being of individuals within a community context. It is understood that social systems and environmental influences are a significant point of concentration for enhancing wellness. Community psychologists attempt to address various social and mental health issues, both through research and interventions in community settings. Some of these issues include social regulation and control, and the development of positive characteristics and coping skills of relatively powerless social groups, such as the poor, minorities, children, and the elderly. Levine, Perkins & Perkins (2005) suggested that,

One important area of theory and research is the human stress process, its environmental causes (and how they can be prevented), how individuals and groups vary in how they cope with it (including the use of family, friends, and others for social support), and what kinds of negative, and even positive, outcomes can occur (p.13).

Community psychology connects social movements with professional or scientific discipline, while highlighting community and personal strengths and capabilities, as opposed to

weaknesses and pathologies. The Society for Community Research and Action (SCRA) is the division of the American Psychological Association that serves community psychology among other different disciplines that focus on community research and action. SCRA is based on the idea that healthy environments prevent pathology and support the well-being of people. Thus, they promote health, empowerment and the prevention of problems in communities, groups, and individuals. Overall, it is the aim of community psychology to “achieve the goals of providing humane, effective care and less stigmatizing services to those in need while enhancing human psychological growth and development” (Levine, Perkins & Perkins 2005, p.13).

Using concepts similar to community psychology, Marian Chace emphasized the importance of highlighting individuals’ strengths, by focusing on what is healthy instead of labeling pathological problems. Known as the founder of dance/movement therapy, Marian Chace has written and worked under the premise that “dance is communication and thus fulfills a basic human need” (Chaiklin & Schmais, 1993, p.77). This philosophy led to the development of the four core concepts of Chacian theory that support my theoretical framework. These concepts include: Body Action, Symbolism, Therapeutic Movement Relationship, and Rhythmic Group Activity. Marian Chace understood that the power of dance supports individual expression and group well-being, based on the idea that the human body is the freest and most readily available means of healthy self expression and emotional release (Sicherman, Green, Kantrov, & Walker, 1980). Chace suggested that,

Dance, in particular is perhaps more potent than any other of the art forms. Man lives his life in rhythm and expressive body action, and these are elements that are involved in dance, whether the primitive religious forms or the social dances of today (Sandel, Chaiklin, & Lohn, 1993. p. 325).

While most of her work was done in clinical setting, her writings highlighted that through movement and group rhythmic activity, connection and the creation of community can occur. Chace thought of herself as a dancer first, and from her own experiences of integrating the art form within herself, she utilized those concepts and principles to facilitate therapeutic change. Some of the goals and treatment outcomes included: assisting individuals in improving their self-esteem and body image, developing effective communication skills and relationships, expanding their movement vocabulary, gaining insight into patterns of behavior, as well as creating new options for coping with problems.

By conducting this research, I explore the possible innate healing properties and therapeutic aspects of West African dance within a community setting for people of the African diaspora. The operational definitions of (a) an innate healing property, (b) therapeutic aspects, and (c) West African dance are as follows: (a) an inherent quality that provides a means for the restoration of health, wholeness or wellness, (b) a particular feature that contributes to a positive effect on the body or mind and (c) dances native to the Westernmost part of Africa, characterized by the body moving in a multi-unit fashion, the dancer(s) interpreting the rhythmic nature of the music through movement and the "call-and-response" movement pattern.

This ethnographic study was conducted as an effort to identify possible avenues for preventative work, explore the unique mental health needs of African Americans and expand the understanding of dance/movement therapy (DMT) concepts outside of the clinical setting. The idea that African dance and DMT can be integrated in order to create a method of healing for African Americans came to me as a result of my personal knowledge and experience within the African dance and drum community of Chicago (ADDCC). This study attempts to discover whether West African dance could be used as a means to connect African Americans to West

African cultural practices which contain elements of physical, mental and spiritual healing, thus potentially de-stigmatizing the participation in mental health services.

## **Chapter Two: Literature Review**

I begin with a discussion about the mental health disparities between Caucasians and African Americans. Thereafter I explore: ethnography, the cultural purposes and healing aspects of dance in West Africa, ritualistic uses of dance for healing in West Africa, African dance as an intervention, the role of dance/movement therapy, benefits of community dance, and finally the application of wellness models and preventative programming with other cultures.

### **Mental Health Disparities and African Americans**

Originally, mental health research and theory was based on Caucasian and European populations, which neglected to incorporate an understanding of the beliefs, traditions and value systems of other racial and ethnic groups (American Psychiatric Association, 2014). As a result, biases and stereotypical beliefs were often used in the decision making process to diagnose and treat members of diverse communities. For example, it was once believed that high rates of hospitalization for the treatment of select mental disorders among African Americans was due to an “inherent racial susceptibility” to certain kinds of psychopathology (Gordon et al., n.d., para. 4). It was also assumed that “the failure to accurately diagnose symptoms of depression, manic depression and other disorders among African Americans sometimes resulted from preconceived notions that Blacks are “happy-go-lucky” people or some other stereotype” (Gordon et al., n.d., para. 4). Cultural insensitivity, prejudice, and a lack of cross-cultural studies by mental health professionals, concerning people from diverse cultural backgrounds, contribute to the risk of misdiagnoses and inappropriate treatment planning especially, but not exclusively, in the care of African Americans with mental disorders (Gordon et al., n.d.).

Currently evidence in the literature suggests that minority groups, including African Americans, Hispanics, and Asian Americans, continue to be underserved and inappropriately



served by mental health practitioners. “It could also be the case that minority groups have differential mental health needs” (Rawal, P., Romansky, J., Jenuwine, M., & Lyons, J, 2004, p.243). For example, the conditions in which Africans initially came to the United States, through their capture and enslavement, poses a unique and traumatic diasporic experience. This experience, according to historian Kim Butler, has continually subjected their descendants (African Americans) to increased exposure to racial, class, and gender discrimination based on its establishment within the societal construct of the United States (Butler, 2001). This has led to trauma, disempowerment, and distress and has played an influential role in problematic Black mental health and overall health outcomes (Margai, 2009; Butler, 2001). Although culturally competent care has improved and thus has the effectiveness of treatment for these communities, research has shown that differences in the types and severity of needs, depending on race still needs to be taken into account (American Psychiatric Association, 2014). For some disorders, such as schizophrenia and mood disorders, there is a high probability of misdiagnosis because of differences in how African Americans express symptoms of emotional distress (UC Davis Center for Reducing Health Disparities, 2009; American Psychiatric Association, 2014). However, no specific differences in symptom presentation among African Americans were described. Consequently, more research needs to be conducted to better identify and understand mental health disparities, while also developing culturally competent interventions to address the unique mental health needs of African Americans.

### **Ethnography**

Ethnography is a qualitative research method used for the understanding and analysis of cultural phenomena. With its foundation in cultural anthropology and sociology, ethnography is also generally utilized in marketing, communications, and education. As a result ethnography is

not limited to the study of ethnic groups, but used to answer questions involving social phenomena and communities. Dick Hobbs suggested that ethnography is:

A research method...which should be regarded as the product of a mixture of methodologies that share the assumption that personal engagement with the subject is the key to understanding a particular culture or social setting. Description resides at the core of ethnography, and however that description is constructed it is the intense meaning of social life from the everyday perspective of group members that is sought (p.101).

The data collected for an ethnographic study usually contain an extensive and detailed description of the cultural phenomena, meant to capture the “social meanings and ordinary activities” of the people in “naturally occurring settings,” in which the researcher “imposes a minimal amount of their own bias on the data” (Brewer, 2000, p.312). Ethnography thrives under the assumption that everything we observe is determined by the culture in which it is located. A phenomena doesn’t just exist, it exists due to the culture around it (Whitehead, 2004). Ethnographers explore these cultural phenomena and generate theories to better understand and assist in various fields. For example, mental health practitioners and other health field professionals have begun to utilize ethnographic research in order to understand public health challenges and identify possible solutions.

### **Healing Aspects of African Dance & Cultural Purpose of Dance in West Africa**

In recent years, within West African countries like Guinea, Mali, and Senegal, dance was used as a means of entertainment; however traditionally it takes on the function of healing within the society. The movements of West African dance, when used as a means of entertainment within the culture, embrace a grander and more elaborate nature; where as when performed for

the purpose of healing, the movements are more purposeful, basic and subdued in comparison (Diallo & Hall, 1989; Monteiro & Wall, 2011). Overall, West African dance qualities incorporate full arm usage, controlled, but rhythmic and fluid mid-body movements, a grounded center, and a low and stable posture (Diallo & Hall, 1989; Monteiro & Wall, 2011). Although this unique movement signature may slightly vary depending on the specific country and ethnic group, it nonetheless generally represents many West African culture's values and ideals about the connection of self to the environment, ancestors and community. West African cultures recognize the usefulness of dance and its implications for healing and the prevention of illness. This can be observed by how movement is utilized within the traditions and practices. Specifically, dance is intertwined within the spiritual (religious) and social framework of the cultures and used to instill balance and correct imbalance (Diallo & Hall, 1989; Hanna, 1995; Monteiro & Wall, 2011). Thus, in order to fully explore and understand how dance is used for its therapeutic properties within the many West African cultures, one must recognize the dynamics and worldview of the people.

For clarity, there are a variety of African cultures, beliefs and traditions due to the extensive amount of countries and ethnic groups in West Africa, however there is a general premise or worldview that encompasses these many West African cultures in relation to the self, health and the surrounding environment. The self is viewed as an integrated holistic being that is not separated into parts that have unique illnesses, such as mental or physical illness (Diallo & Hall, 1989; Monteiro & Wall, 2011). Monteiro and Wall (2011) suggested, "in the African worldview, humans' spiritual root is thought to govern and be responsible for various manifestations of health and illness" (p.235). An individual's overall health is based on the balance and connection maintained within their spirit. However, this does not mean that all

aspects of the self go unrecognized for their distinct qualities. It is more so that the harmony of those qualities are highlighted and valued. Thus, when illness or distress occurs it is the whole self that is affected not just a distinct part. This can involve the mental and physical self as well as the relationship to the community. The whole system is affected and through devices like dance, the ability to restore balance and preserve a spiritual connection is thought to be possible.

In essence, it is serving as both group and individual emotional release and healing. In Minianka culture, an ethnic group in Mali, “dance is a medium for honoring work, for celebrating community, for affirming individuality and for preventing mental illness” (Diallo & Hall, 1989, p.116). Dance allows individuals to experience and face stressful events, ideas, and feelings, symbolically, without the impact of real life making them less threatening. Allowing an individual to access the therapeutic properties of dance released through movement, rhythm, self-expression, relationship, and cathartic release resulting in shifts within emotional states (Diallo & Hall, 1989; Hanna, 1995; Monteiro & Wall, 2011). In short, dance specifically West African dance fosters and stimulates the healing energy of movement to promote wholeness within the mind, body, spirit and community.

### **Dance in West Africa used as Rituals for Healing**

Throughout West Africa, various ethnic groups and cultures have established their own belief systems based on the values and traditions of that community and within these systems, rituals have been developed to address various issues. However, what connects them is the use of dance in community life and ritual. Due to the large extent in which spirituality and movement is rooted in the many West African cultures and traditions, the practice of rituals using dance is an integral part of the society. Ritualistic dance (dances used within a ritual) is used to heal illness, and focus on restoring an individual’s connection to the spirit world, with the goal of

reestablishing them to the role they previously maintained within the community. Monteiro and Wall (2011) suggested:

Given the importance of the body in diagnosing various symptoms and disease through traditional African healing methods, it would be essential for rituals to incorporate movements to not only access conscious and unconscious processes, but to offer a direct vehicle to address and transform their underlying causes (p. 238).

This belief is based on a holistic health paradigm, which includes a social and cultural component as well as a psychological and spiritual component. As stated previously, incorporating dance and movement into the ritual system serves as a means to integrate these two components of the culture. Monteiro and Wall argued (2011), “in particular, rituals involving dance play an essential role in relieving and treating symptoms of psychological distress, as well as neutralize and lessen the impact of psychological trauma” (p.235).

In Guinea and other West African countries, the people come together in large gatherings to acknowledge and celebrate important life events, such as birth, baby naming, circumcision, marriage, initiation, rites of passage, etc. The atmosphere involves several elements including: community and group participation; shared experience of carrying out cultural values; freedom of expression within a structured setting adhering to implicit rules; dynamic individualism; and participants, particularly dancers and musicians, operating in the present and losing themselves in the moment (Monteiro & Wall, 2011, p. 244). “These gatherings may be used more explicitly as part of healing rituals and incorporate symbolic markers such as use of masks, introduction of initiates, and demonstrations of respect for ancestors and elders” (Monteiro & Wall, 2011, p.245). In essence, these healing rituals serve as gatherings for both community and individual cathartic release, in which a mindfulness of dance and other traditional art forms such as music

and storytelling operate as devices for sharing and healing (Diallo & Hall, 1989; Monteiro & Wall, 2011).

The power and integration of spirituality within the holistic health paradigm of West African culture is substantial. Dance is a valuable device within that paradigm, which fosters, “emotional release and catharsis; empathic focus; support of community and family; giving symbolic voice to the previously unspeakable; and the witnessing by participants who act as a container for the patient’s distress” (Monteiro & Wall, 2011, p.243). These healing properties of various West African dance forms give way to its application within a contemporary context or setting. Providing a source of value to the mind, body, spirit and community connection, as a means for treatment and intervention not just for the traditional African culture but also for a variety of diverse patient populations.

### **Uses of West African Dance forms as an Intervention**

West African dance, whether viewed as a means of self-expression, social practice, process or product, is an occurrence worthy of cultural exploration (Desmond, 1997). Yet, only in recent years has research surfaced that investigates the ideology, application and social meanings of African dance practices outside of their traditional settings. Thus the literature is limited as to its practice within various settings and institutions. However, the use of West African dance as a therapeutic intervention for depression, trauma, stress and prevention of pathology and illness has the ability to be fostered and integrated into a larger-scale healing process (Banks, 2010; Tyson, 2006; West, Otte, Geher, Johnson, & Mohr, 2004). Evidence of this was seen in its application within educational and independent research settings in which beneficial psychological and physiological effects were recognized (Banks, 2010).

Within an educational setting, literature suggests that the use of traditional West African dance specifically for youth moving into adulthood has the ability to promote a sense of self-respect, enthusiasm for life, and empowerment within the students (Banks, 2010). Evidence was shown that not only does the kinesthetic experience of West African dance offer individuals a new orientation into their bodies, but it also supports emotional and spiritual maturation, giving the participants strength and courage, which generates community and class cohesion and a shift in negative mental states (Banks, 2010). Furthermore, in an educational setting West African dance has the ability to significantly decrease perceived stress, negative affect, and significantly increase positive affect (West, Otte, Geher, Johnson, & Mohr, 2004).

From a research perspective the literature suggests the use of West African dance as a mental health service intervention which can allow the process of therapy to deepen and make it possible for healing to take place (Tyson, 2006). Tyson stated that, individuals reported a positive connection towards others; a decrease in negative energy, stress and pain; and an increase in autonomy and openness (2006). Moreover, the use of West African movement appeared to enhance the therapeutic outcome of descendants from the African diaspora specifically (Tyson, 2006). This outcome provides a unique perspective, which needs further investigation, into the relationship between cultural dance and its therapeutic significance to the descendants of that corresponding heritage. As a device of intervention many West African dance forms focus on the body as a method of reducing stress and improving well-being (West, Otte, Geher, Johnson, & Mohr, 2004). Its sometimes unconscious symbolic impact recovers the spiritual purposes of dance for healthy development thus revealing the qualities it has to facilitate corrective experiences, prevent exhaustion, increasing self-esteem and improve coping (Banks, 2010; Tyson, 2006; West, Otte, Geher, Johnson, & Mohr, 2004).

## **The Role of Dance/Movement Therapy (DMT)**

**African Dance as a DMT intervention.** In recent years, studies related to African dance being used as a potential DMT intervention were conducted in both the United States and abroad. With DMT being a form of psychosocial support and transformation, it may have the ability to parallel how African dance forms also endorse psychosocial support and transformation. Although this is a fairly new focus in DMT research, African dance appears to be especially useful when engaging people of African descent.

The Tyson study, in particular, integrated African inspired healing movements with DMT for African Americans. Incorporating the DMT concepts of mind/body/spirit connection and African inspired healing movements, the study explored whether DMT could be made more acceptable to “therapy resistant African American clients”. It was reported that the participants “enjoyed the physicality of the African movements as well as their ability to be used in a dance therapy mode to elicit images, feelings, and spiritual revelations” (Tyson, 2006, p.53). Using the structure of a DMT session, an assessment of the participant’s movement patterns as well as their self-reporting journals, it was concluded that DMT and African dance techniques complement each other and the use of African movements can enhance the therapeutic process and outcome for African Americans (Tyson, 2006). The complimentary components of DMT and African dance techniques included the “use of movement to relieve stress, anxiety, depression, etc. freeing the body, freeing the mind and allowing healing to take place” (Tyson, 2006, p.53).

In many African cultures abroad, dance and movement are recognized and used as a basic mode of communication. This cultural connection to movement in conjunction with dance/movement therapy’s holistic approach may offer evidence of trans-cultural applicability for dance/movement therapists who work in these settings. For example, dance/movement



therapy was introduced among a group of African adolescent torture survivors from South Sudan and Sierra Leone and implemented within an African sociocentric environment. It was thought that the ability to design DMT interventions in such a way to promote cultural relevance and community ownership might enhance healing. Using a culturally relevant and community-based practice of dance/movement therapy, cohesion was established among the groups of young refugees, who presented with diagnosable disorders, sub-clinical mental health concerns, or no psychosocial problems at all (Harris, 2007). Through creative means like gatherings for traditional African dancing and drumming, that reconstituted a central culture-of-origin ritual, the youth were able to discharge aggression and restore interpersonal connection. They were effectively mobilizing the empowering and restorative functions of dance through an integrated, holistic approach to psychosocial support and transformation (Harris, 2007). These culturally relevant psychosocial interventions emphasized group cohesion as a vehicle with both preventive and reparative capacities.

**DMT and Community.** The idea of relationship and community as important parts of the healing process was highlighted in various DMT theories, literature, and research. Using different perspectives pioneers like Marian Chace and Claire Schmais established that community and group dance holds a valuable role in the healing of an individual and/or community.

Marian Chace recognized therapeutic movement relationship and rhythmic group activity as two of the four major concepts that surround the most fundamental idea of DMT. These two concepts speak to the “interactive nature of social relationships in an organized way and puts value on healing through relationships with others rather than through individualism” (Mulcahy, 2011, p.18). Chace’s Therapeutic Movement Relationship is focused more on the communication

between a client and the therapist, however in a community dance setting the social relationships and interactions on a movement level may serve as a similar connection and benefit. The support, fellowship and cohesion of a community environment can foster relationships of empathy and reflection. In Chace's writings she explains that Rhythmic Group Activity can provide individuals with a means of relief from lonely feelings and a connection with other group members (Sandel et al., 1993). The exploration of rhythm and movement in a group setting can result in a feeling of well-being, relaxation, and good fellowship.

Claire Schmais promoted the power of dance/movement therapy as a means to foster cohesion through movement and the rhythm of music, while supporting self-expression and community. She assisted her patients in taking the first step towards breaking down barriers of communication, with rhythmic synchrony being the initial bond (Mulcahy, 2011). Furthermore Schmais recognized a connection between movement symbolism and the development of community. She indicated that "being a part of the dance by sharing and repeating simple steps and rhythms builds a sense of community...[it is when] people actively participate in each other's symbolic statements that group cohesiveness takes root" (Wittner, 1996, p. 80).

With a foundation laid by pioneers like Chace and Schmais other DMT practitioners use their experiences and research to develop these theories a step further. For example, Wittner, further explored the importance of community in the mental health field and how dance can provide a sense of strength for a community (1996). She argued that due to a lack of ritual in Euro-American society individuals experience alienation and isolation. However, if ritual and community dance were established, for example in "communal celebrations it would potentially provide positive social conditions that allow individuals to engage with one another in a celebration of life through dance and creative expression" (Mulcahy, 2011, p.13). Wittner also

stressed the idea of dance being used as a preventative therapy. She stated “in cultures where dance is an integrated part of life, where it is viewed as a healing art, where it supports individual expression and community, dance is also often viewed as preventative therapy” (Wittner, 1996, p.56). As a result dance, community dance in particular has the capability to heal and prevent the development of mental health issues.

### **Benefits of Community Dance**

Based on the premise that dance is universal and everyone can do it, community dance was developed as a means to serve the needs of all (Houston, 2005). Community dance is an engagement in the art of dance, providing opportunities for ‘untrained’ people to experience the world as artists do and to have critical engagement with their own dance as well as the dance of others (Foundation for Community Dance, 2002). It is recognized that a sense of belonging and ownership of the artistic process are valued in community dance, provided that accessibility, participation and relevancy to the people in the community is the main focus (Foundation for Community Dance, 2002). This type of dance fosters community development, where people are able to come together and share in a common cause or interest and promote social and creative outlets to help strengthen the collective. Community dance can also serve as a form of social advocacy within the community, empowering the participants through artistic expression. For instance, dance can develop an individual’s creative process allowing them to identify and develop inner resources and strengths that may not have been apparent before. These inner resources may assist in solving general life challenges in a creative way, allowing the individual to build confidence and gain a sense of control.

In the 2002 research report from the Foundation for Community Dance it was suggested that, “community dance provides a safe, healthy outlet for frustrations and for overcoming barriers to

participation” (pg.14). A participant explained that community dance takes the negativity, depression, and aggression held internally (self) and externally (environment) and redirects it onto the dance floor as a means of release (Foundation for Community Dance, 2002). This release allowed the participant to let go of physical and mental tension as a mean to restore a sense of well-being and essentially heal. Some of the benefits and outcomes identified in the report included: greater social bonds between people, the development of perceptual skills, creativity, insights into different cultural traditions, greater sensitivity in working with others, development of self-confidence and self-esteem, the promotion of collaborative learning strategies, greater overall fitness, stamina, and flexibility (Foundation for Community Dance, 2002). Community dance provides people with healthy ways of relieving stress and managing overwhelming feelings, while connecting with others.

Community dance also allows people to express their creativity in a safe environment. It promotes social interactions that foster creativity and teamwork, resulting in a strong sense of accomplishment. The qualities of creativity and teamwork are often used to solve local issues and make positive differences in the community (Foundation for Community Dance, 2002). Participants are able to explore their community heritage, increase their social activity and reap the many health benefits. Research suggests that having strong social ties, like those obtained in community dance contributes to a sense of well-being, positive outlook and improved self-esteem (Houston, 2005). Participants are offered new ways of relating to each other based on respect and valuing difference.

### **Wellness Models & Preventative Programming with Other Cultures**

There is existing literature that has explored the use of wellness models as a means to prevent illness within minority communities. One study in particular explained the development of a

culturally based wellness and creative expression model for Native American communities. The model allowed the communities to utilize their traditional art and cultural expression as a means of integrating the spiritual, emotional, and physical aspects of health and empowerment (Gray et al., 2008). The model focused on wellness, rather than illness, and participation was open to all who wanted to attend. As a result the wellness focus reduced the stigma generally associated with problem-based mental health programs in the Native American community (Gray et al., 2008). This study and others like this provide a basis for exploring the inclusion of a community's culture, specifically African culture, in wellness and prevention.

Creative expression used in this model included poetry, video, art, dance, storytelling, crafts and music. These devices may have been valuable because they were not all verbally based. Visual and non-verbal types of creative expression like dance and music allow individuals to express their feelings and thoughts without the burden of finding the "right" words. This may include a connection with traditional art forms from their original culture that strengthens their identity and sense of meaning in their lives (Diallo & Hall, 1989; Hanna, 1995; Monteiro & Wall, 2011). Overall this model emphasized that if a creative or artistic context is added to health and prevention programs some communities may be more receptive to them and enjoy them more, leading to higher retention rates and more lasting outcomes (Gray et al., 2008).

Another model that focuses on wellness, rather than illness is the Indivisible Self: wellness model. This model involves "a superordinate holistic wellness factor, the self, that cannot be divided into its component parts" (Gregoire & Jungers, 2007, p.633). Its foundation is based on the idea that in order to maintain optimal wellness, attention to all aspects of one's functioning is necessary. Wellness refers to a holistic approach in which the mind, body and spirit are integrated and maintain a healthy balance that results in an overall feeling of well-

being. The goal of the model is to promote a way of life that is directed towards optimal health and wellness, where the mind, body and spirit are completely integrated with the intention of living life more fully (Myers, Sweeney, & Witmer, 2000). Wellness is more than the absence of disease or illness, but rather a state of health that focuses on optimal functioning. In order for an individual to function in a healthy manner all the components of wellness (mind, body and spirit) must be deemed necessary and important (Gregoire & Jungers, 2007). The Indivisible Self: wellness model is unique in that it has both a multidisciplinary focus and theoretical basis in theories of human growth and behavior. This model is not culturally specific. However, it takes a strengths-based approach to mental health that can be applied to any cultural entity by its establishment of holism as the foundation of human wellness.

### **Summary**

Wittner (1996) stated “in cultures where dance is an integrated part of life, where it is viewed as a healing art, where it supports individual expression and community, dance is also often viewed as preventative therapy” (p. 56). African dance is an art form used for emotional and spiritual development, it not only reveals physical information; but theoretical, emotional, aesthetic, and spiritual information as well (Banks, 2010). As a result I am inspired to explore the potential of dance/movement therapy, serving as preventative work within the African American community using African dance as the primary instrument for therapeutic intervention. As a member of the African dance and drum community of Chicago (ADDCC) I would like to explore whether dance/movement therapy has the potential to be used as a more focused application within my community and to extend the research so that other cultures and communities may possibly utilize their traditions for preventive work. To assist me in this exploration I used my research questions as a guide: If any, what are the innate healing

properties and therapeutic aspects of West African dance for people of the African diaspora, specifically within the African dance and drum community? Furthermore, if West African dance is determined to be therapeutic, then in a community setting, could it: assist in accommodating the unique mental health needs of African Americans, be used as a preventative intervention, and contribute to the understanding of dance/movement therapy concepts outside of clinical settings?

## **Chapter Three: Methods**

### **Methodology**

This study utilized an ethnographic methodology. Ethnography is a qualitative research method used for the understanding and analysis of cultural phenomena. Researchers often immerse themselves in the communities they are studying, or spend a significant amount of time with the people being studied. This is called a participant observer role, in which researchers participate as much as possible, while also carefully observing everything they can. The primary objective is for ethnographers to gain an emic perspective, or a native's point of view, without imposing their own conceptual framework or bias (Whitehead, 2004). Using the participant observer method along with multiple other methods of data collection like field notes, interviews and surveys, researchers are better able to facilitate a relationship that allows for a more personal and in-depth portrait of the participants and their communities (Hoey, 2013).

Ethnography is a beneficial method to use for this study in particular, due to its heavy emphasis on the exploration of a particular cultural phenomenon, rather than setting out to test certain hypotheses about it (Reeves, 2008). This allows for a more open and flexible approach to the data beyond my assumptions or theories as the researcher, into the way the group of people see the world through first hand observations and interviews. Within ethnography, I can focus on social interactions, behaviors, and perceptions of the community members. Essentially, taking an in depth look into how and why dance and drum were founded, integrated and promoted within the community.

### **Participants**

The population was comprised of African American participants from the African dance and drum community of Chicago (ADDCC). The study included approximately fifty causal



participants and ten formal participants: two elders (55 years old +), two middle aged adults (between 30-54 years old), two young adults (between (18-29 years old), two dance instructors and two drummers, whose ages varied. Participants were selected based on their specified age, role or involvement within the community as a dance instructor or drummer, and identification as an African American (member of the African diaspora). This information was gathered during observations and causal conversations with participants.

### **Demographics and Settings**

African dance and drum community events and classes occur multiple times a week throughout the city. I attended various community dance classes, unity dance events, award ceremonies, public practices, community send-offs, Kwanzaa celebrations, and dance marathon benefit events. They are hosted by the various African dance and drum companies in Chicago. Participants usually come in and are greeted with a hug and/or a warm hello by the staff of the company, volunteers and/or other participants. Bottles of water, juice, and healthy or traditional African food are sold in support of the community event and/or local business owners. Local vendors, who are also member of the community, set up a marketplace which sells African jewelry, art, instruments, clothing and handmade items.

**Classes.** Usually the weekly community classes start with a warm-up, where everyone comes together with live music to stretch, warm-up the body and bring everyone to the same accord. Following the warm up and a short water break, everyone comes back together as the instructor greets everyone, introduces the class and talks about the history and purpose of the African dance to be highlighted that day. This usually includes the country, region and ethnic origins of the dance. The instructor provides information about the drums that are being played, the relationship or “marriage” between the drummers and the dancers and the concept of the

“break”, which communicates to the dancers when to start, stop and change the movement.

From that point, the class begins as the instructor breaks down the steps, creates a combination, and has the participants move the steps down the floor. Close to the end of the class, the instructor signals for everyone to come together for a “solo circle.” The solo circle is a time when the floor is open for anyone to come out onto the floor and express themselves.

Participants are able to freestyle, showoff and/or try out the movement combinations from class by themselves or with a partner. The solo circle is the culminating event and a time for fellowship, unity, support and creative expression. To conclude the class, everyone joins together in one final review of the dance taught that day followed by a cool down. Once the class has ended the dancers give thanks to the drummers by going down the line one by one, touching their hearts and then the floor where the musicians have played, to show gratitude.

**Events.** If there was a special event or occasion, such as a unity dance event, community performance, rites of passage ceremony, funeral, wedding, extra rituals would take place. These rituals often involve asking permission from the elders to proceed and the pouring of libation. Before an event can proceed, permission from the elders is asked for in order to pay recognition and respect to them. This act allows the elders an opportunity to speak and share wisdom. The pouring of libation, which is a ritual pouring of liquid, is seen as an offering to the Creator (God) and the ancestors. Drum circles and “solo circles” also occur during these events and are not just exclusive to classes.

## **Procedure**

All the research took place at the African dance and drum community events and classes, with the exception of the off-site interviews. The participants in this study were African Americans who regularly attended ADDCC’s classes and events, and were willing to sign an

informed consent form authorizing the researcher to publish the findings. I recruited 10 participants for the interviews, including seven females and three males of different age groups and roles in the community.

**Participant observation.** As principal researcher in this ethnographic study, I was also a participant observer and wrote detailed field notes based on observations of my own personal responses to the behaviors of African dance and drum community of Chicago. My observations were focused on the way people related to each other, how people engaged within the movement and music, and my own personal feelings while participating within the community.

**Informal interviews.** I engaged in casual conversations with other participants at the various classes and events in order to collect data for this study. These informal interviews took place before, during, and after the event for eight consecutive months. These were casual conversations and were not recorded. I had approximately fifty such casual conversations, which gave me a general idea of people's opinions about the dance, music, community or event. When talking to people I usually asked questions such as, why do you come to these classes and events and what do you like the most about them and the community?

**In-depth interviews.** I selected 10 participants with whom to conduct a one on one in-depth interview at a public location agreeable to both parties. This group consisted of two elders (55 years old +), two middle aged adults (between 30-54 years old), two young adults (between 18-29 years old), two dance instructors and two drummers, whose ages varied. The participants were chosen based on different age groups in order to gain various perspectives about the experiences of the community. Each individual interview lasted about one hour, and was audio recorded directly on a laptop to facilitate its transcription and subsequent narrative analysis.

**Data collection.** Field observation and notes are a primary part of the data collection process for ethnographic research. Consequently, I attended African dance and drum community events and classes with a small notebook and wrote my observations and feelings about each event. I gathered information from the community atmosphere and took notes about my own sensations, thoughts and ideas about what I was experiencing. I spent a large amount of time interacting with members of the community and experiencing the present moment of each event and class. I observed the way people related to each other and their movements, how people engaged in creative expression, and my own personal feelings and intuition while participating. This was done during a 10-month period during which time I also recruited participants for the in-depth interviews.

The participant selection process was gradual and consisted of me initially engaging with the members of the African dance and drum companies that hosted the classes and events. This was followed by me meeting and talking to people I frequently encountered at various events and finding those who were interested in my study. I composed a list of open-ended questions to guide the in-depth interviews and asked follow-up questions that came about naturally. The idea was for the interviews to flow as much like a natural conversation as possible. The primary focus of the interviews was to find out how the participants experience the African dance and drum community socially, emotionally, mentally and spiritually. Before setting up an interview, I provided each potential participant with a consent form and time to review it and ask questions before they were scheduled for an interview. The consent forms were signed at the time of the interview and all participants were provided with a copy.

**Ethical Concerns.** It is my belief that there were no known risks, personal or otherwise, associated with this research study. Only those who were able to provide a formal written

consent were considered for the study. Those who were only occasionally involved within the community or who displayed difficulty in understanding concepts of the study were excluded from the study. Due to my involvement and connection to the community and the positive intention of the study, there was minimal risk that I would be ostracized or segregated from the community; or that revealing my observations to the community will alter the behavior of the members. Nevertheless, because I did not use identifiable information or focus on any one particular member, my field notes will remain anonymous. One potential point of concern was my positive experiences within the ADDCC influencing the data. However, this was managed through the use of ethnographic methodology and the manner of data collection.

### **Data Analysis**

The data was examined through the thematic data analysis process. Within the thematic analysis model there is an emphasis on the content of what is being said rather than how it is being said. The steps of this process include deconstructing the data; reviewing it for possible categories, meanings, or themes; and finally reorganizing and reconstructing the experience. Following this model, I coded the information into themes that correlated with how the participants experienced the African dance and drum community of Chicago, emotionally, socially, and/or spiritually.

The data analysis progressed as follows:

- Transcription of interviews, noting emotional intensity levels
- Word frequency calculation
- Coding of social, emotional, mental and spiritual categories
- Sorting of categories, identifying connections between categories, and searching for new categories

The data analysis process began with the use of transcription services, which transcribed each interview word for word. I then checked the transcripts of each interview against the recordings for accuracy. By reviewing the transcripts myself I realized when participants were speaking about their experiences within the community, some seemed more engaged and committed to the topic than others. Thus, I attempted to gauge and record participants' emotional intensity during their responses by noting the participant's tone of voice, body language, and facial expressions. I tallied these responses and then created three categories under which each participant could be placed based on their engagement during the interview process. Eight people were fully engaged, two people were somewhat engaged, and no one was somewhat disengaged. I acknowledge that this part of the analysis process was subjective, however I believe it was an important source of information. Tone of voice, body language, and the way we speak about certain topics carry a lot of meaning and can convey how we feel about a certain topic.

The next step in my data analysis was to record how many times certain words were used throughout the text. I deleted the interview questions, including my own responses from the text and only conducted the word search among the responses given by the participants. Deconstructing the data accentuated the kind of language that was used when participants spoke of the African drum and dance community of Chicago and helped me begin to make sense of participants' experiences. Once the interviews had been transcribed and reviewed, I continued with the coding process. I color-coded the transcriptions using the four categories of social, emotional, mental health and as well as the informal interviews into these same categories.

Within this data analysis process, triangulation was used to aid in the validation of the study. Cross verification of the data from two or more sources gives the study more credence. Simply put, if a number of different methods lead to the same result, one can be confident in the

conclusion based on the results. The sources from this study include the in-depth interviews, informal interviews, and finally field observations and notes based on the participant observer role.

## Chapter Four: Results

The primary purpose of this research study was to examine the potential innate healing properties and therapeutic aspects of West African dance within a public community setting for people of the African diaspora, in an effort to provide a means for preventative work, explore the unique mental health needs of African Americans and expand the understanding of dance/movement therapy concepts outside of the clinical setting. The main question that guided the research was: if any, what are the innate healing properties and therapeutic aspects of West African dance for people of the African diaspora, specifically within the African dance and drum community? This question was answered due to the emergence of certain categories based on the findings established during the word frequency phase of the data analysis process.

The words that appeared with the most frequency were: community, collective, fellowship, camaraderie, unity, social, spirit /spiritual, healing/heal, creativity/creative, freedom/free, emotional /emotion, safe/safety, feeling, expression/expressive/express, therapeutic, support etc. These words fit into four categories: social, emotional, mental health and/or spiritual. These categories reflect aspects of the self beyond the physical that may be affected in an African dance and drum community setting.

Using the highlighting feature in Microsoft Word, I highlighted statements about social, emotional, mental health, and spiritual experiences. In the process of doing this, two new categories emerged: creativity and safety. The statements describing moments or thoughts about self-expression, creativity, and the creative process as it related to the African dance and drum community were all part of one category, creativity. The safety category included psychological safety as well as physical safety; also included statements about feelings of non-judgment under emotional safety.



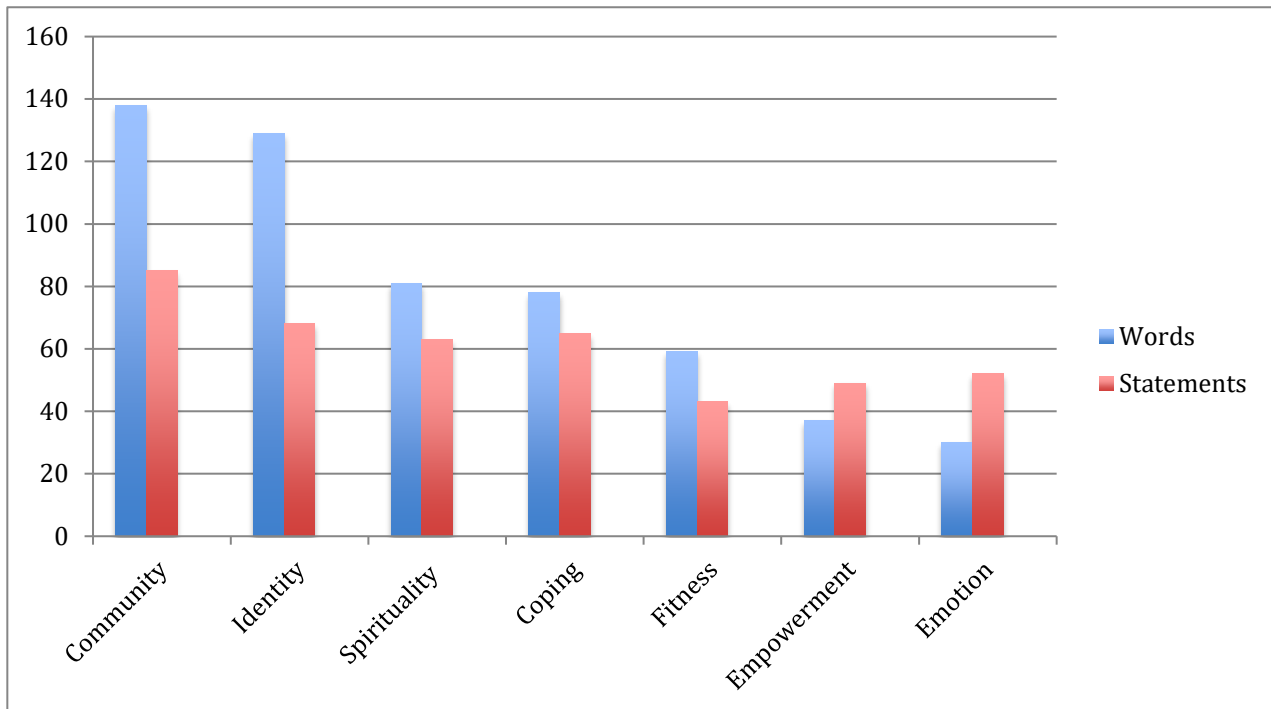
Once the transcriptions and informal interview statements were color coded into the six different categories of social, spiritual, emotional, mental health, safety, and creativity statements, I proceeded with my final step of compiling the statements and sorting them into the established categories. I created a diagram of the statements based around their category, which enabled me to see the relative strength of each category supported by the amount of statements. When I completed this step I noticed some of the categories could be dissolved into others. New distinct categories were emerging and some of the categories became more specific based on the themes of the statements within them. For example, categories such as social and safety were combined into community and the mental health category was changed to a more specific aspect of mental health and renamed coping. I made creativity, self-expression and freedom all part of the empowerment category, and the final two categories of identity and fitness were established.

Due to the emergence of these two new categories I went back to the transcripts and conducted another word search to include the categories of identity and fitness. The additional words that occurred most frequently included: health, physical, self, body, character, gender, individual, culture, heritage, womanhood, manhood, masculine, feminine, and identity. This process refined the data into seven categories: community, identity, empowerment, fitness, spirituality, coping and emotion. I then proceeded to adjust my original diagram of statements (see Appendix C) based around each category, again looking at the relative strength of each category supported by the amount of statements and their descriptive nature. What I also found during this process was that some categories overlapped. I noticed that some statements about community experiences overlapped with statements about identity and the self, so I included those statements under each category. This concluded the coding, sorting, and sifting of the data. In the end community, identity, and coping emerged as the defining elements for members of the

African drum and dance community of Chicago (ADDCC). However spirituality, fitness, empowerment and emotion overlapped these categories and potentially contributed to their strength.

The community category yielded the highest number of responses from all categories, with 138 related words and 85 statements for a total of 223 responses. Following the community category was the identity category, which closely followed with 129 related words and 68 statements for a total of 197 responses. The spirituality category had very similar responses to the coping category with a total of 144 and 143 respectively. The fitness category had 59 related words and 43 responses for a total of 102 responses. The empowerment and emotion categories had the least number of responses. The empowerment category had a total of 86 responses, while emotion had a total of 82.

Figure 1. Comparison of Quantitative Results



*Figure 2. Quantitative Breakdown of Related Words and Statements*

Category	Related Words from the in-depth interviews	Statements from the informal interviews	Total responses
Community	138	85	223
Identity	129	68	197
Spirituality	81	63	144
Coping	78	65	143
Fitness	59	43	102
Empowerment	37	49	86
Emotion	30	52	82

### **General Findings**

After reviewing and re-reviewing each diagram of statements belonging to each category, I understood that the overall experience of the participants in this research in relationship to the African dance and drum community of Chicago (ADDCC) was a positive one. The majority of the participants believed that ADDCC was a safe community that fostered mental, physical and spiritual well-being. The participants also believed that the environment promoted emotional healing, cultural discovery, self-discovery and healthy social interactions.

### **Specific Findings**

**Identity.** The identity category emerged as one of the three most important categories and laid the foundation for the surfacing of most of the other categories. All participants spoke of some sort of search for self and/or search of self within the ADDCC through cultural, character, and gender (masculine/feminine) exploration. The participants shared a similar perspective around African centeredness as part of their self-concept. Answering the questions of “where do

I come from?” and “ who do I come from?” to establish a foundation, for a cultural legacy beyond slavery and the oppression of people of the African diaspora. Building upon their identified African heritage, participants also spoke of searching for self as a person, as a male, as a female and/or a world citizen. They were able to find acceptance, balance, and security in self in order to move forward towards well-being.

**Community.** For many participants the exploration of identity specifically cultural identity gave way to a need to connect with others who share the same desire for exploration, experience and growth within African culture and arts. Thus this common thread of seeking a greater connection to cultural identity created a community in which individuals and families share in their cultural heritage, in a safe space beyond judgment, restriction, and fear. The community and general atmosphere around the various ADDCC events and classes was described as welcoming and enjoyable, which created a sense of belonging and acceptance among the participants. This evoked an environment that promoted collaboration, a sense of respect, understanding of others, empathy, sympathy, fellowship and rapport.

Many of the participants spoke of life long bonds and friendships that were established through the community. Describing the ADDCC as an extended family, where the community serves as a container to release pain and provide the ability to touch and teach others emotionally. For many of the female participants a valuable attribute of the ADDCC was the development of a supportive womanhood or sisterhood networks. This connection between the female participants provided relief from what they described as, the typically disconnected and competitive nature of women they generally experienced in society.

A sense of safety within the community, both physically and emotionally, was also another important highlighted characteristic for many participants. Physical safety was described

in the sense that families and children were looked after by the whole community; much like in a “village” setting. Thus it became no one person’s responsibility, but the duty of all to look out for one another especially the youth. In terms of emotional safety, many participants spoke about the community providing a space where you could come as you are, without restriction or judgment. They spoke of an environment where you have the support of the collective and people you can talk to in order to receive help or assistance even outside of the class or event.

Another valuable aspect of the community was the power of unity, specifically when participants were on the dance floor. The participants spoke about the power of moving as a collective. Specifically, they defined how the synergy of moving as one with the music/drums created a harmony among the many participants that fostered a cathartic release.

**Spirituality.** In addition to a cathartic response, the participants also described a spiritual connection they felt while dancing, listening to or playing the drums. While religious practices varied among the participants, connecting with a higher power and their ancestors through African drum and dance was a common theme. The rhythms from the drum were described as a calling for the spirit and acted as a boost to heal the soul, give thanks, and/or facilitate acceptance of things like death and loss. One participant in particular referred to her experience as a form of church or worship that “grounded her”, “cleansed her”, and helped her to “see the God in others”. The synergy of the music and the dance created a spiritual platform for peace, centeredness, and rejuvenation among the participants.

**Coping.** Along with the development of a spiritual connection participants also reported that African dance and drum provided mental relief and/or an escape from internal and external stressors. These stressors included loss, death, interpersonal conflict and disappointment, resulting in feelings of anxiety, anger, depression, and worry. The movement and music

facilitated communication between the body and mind, bringing the participants into the present moment and making it easier to accept, release and move forward from these stressors. A type of emotional safety was established due to the support of the collective and the “village” atmosphere that allowed for the release of pain, fear or worry. Many addressed how West African dance and music had a rejuvenating quality that provided balance and maintained their sanity.

**Emotion.** As mentioned in the community category, many participants spoke about experiencing a cathartic release, brought on by the synergy of the movement with the drums. This release of emotion was described as providing relief, an alleviation of fear, and a release of pain. Participants went on to express how African dance was a source of peace and balance in their lives, leaving them feeling energized, alert, and calm. The participants most frequently described feeling: joy, happiness, empathy, confidence, love for self, love for others, and love for the culture. One particular participant described dancing to the rhythms of the drums as a type of “salvation on an emotional level,” that brought forth confidence, strength, control and acceptance. The participants who identified as musicians spoke of how different rhythms evoked different emotions.

**Fitness.** The fitness category was established based on the participants’ accounts of a body/mind connection emerging when engaging in West African dance and its effect on their physical health. West African dance provided full use of the body and muscles, as well as promoted tension release, flexibility, fortitude, and core strength. Keeping the participants physically and mentally active, the movements developed stamina, encouraged mental discipline and focus, but also encouraged the expression of personal style. Participants described the dance as a holistic means for cleansing and rejuvenation, which often eases physical discomfort. One

participant described instances in which they suffered from physical ailments, like headaches, that were alleviated once engaged in the community dance and drum class.

**Empowerment.** The category of empowerment stemmed from the participants feeling uplifted and confident due to their experiences with ADDCC events and how it positively influenced their sense of community, identity, emotions, coping skills, spirituality and overall fitness. Participants spoke of it invoking a “personal power” within them that brought clarity, transformation, increased self-acceptance and further development of their core self. Core self can be defined as an image of the self that reinforces certain qualities that one deems important based on your culture, experiences and core values (Stosny, 2011). They were able to leave the class or event feeling centered, secure, and capable of taking on daily obstacles. One participant expressed that the power of moving as a collective with other “like-minded” individuals helped to overcome ego, an idealized conception of oneself, and encouraged patience, graciousness and giving within them. Overall, participants saw their experiences as promoting a sense of self-determination, freedom, humility, fortitude and a connection to self and others.

### **Participant Observer Findings**

As the principal researcher I embedded myself in the various events and classes to better understand the community and the role West African dance plays in the lives of the participants. In my initial experience at an ADDCC event I felt a sense of safety and warmth from the atmosphere and people. The energy was positive and welcoming as I was met with friendly words and smiles. I distinctly remember having no worries or fears while entering the dance space and interacting with the other participants. Everyone was friendly, open and greeted each other with a hug. One aspect of the classes and events that stood out for me was the passing on of wisdom by the elders of the community during these events. On multiple occasions I observed

elders in the community sharing their cultural knowledge of the dance and drum history, and the importance of unity, self-determination and love. The teaching of these values may be an expression of psychosocial support, due to the promotion of resilience. Members of the community were encouraged and supported in their methods to maintain a positive self-concept, seek support, and follow through, with problem solving.

Another aspect of the classes and events that really stood out for me was that everyone was supported by each other. I felt comfortable enough to let go both physically and mentally due to the give and take of support from the other participants. This was demonstrated by how the classes were structured, in such a way that there was space and freedom to highlight people's talents, achievements and growth on the dance floor. Those on the sidelines would cheer, clap, and vocalize encouragement and approval, as the dancers went across the floor or danced in the solo circle.

As I started going across the floor, I was able to really let the movements settle in my body, feel the rhythm of the drums and the energy of those around me. As a result my affect changed from neutral to happy, my energy increased and I felt noticeably better overall, than when I first entered. I danced across the floor and in the solo circle, paid respect to the drummers and socialized with the other participants. I was able to connect with the community, support the events and better understand the dance, while truly enjoying myself. Many of the experiences I collected in the informal and in-depth interviews resonated with me personally. I felt empowered, healthy and whole, grounded in the music, the heritage, the people, the lessons and the spirit.



## Chapter Five: Discussion

The overarching research question that guided this study was if any, what are the innate healing properties and therapeutic aspects of West African dance for people of the African diaspora, specifically within the African dance and drum community? Furthermore, if West African dance is determined to be therapeutic, then in a community setting, could it: assist in accommodating the unique mental health needs of African Americans, be used as a preventative intervention, and contribute to the understanding of dance/movement therapy concepts outside of clinical settings? What I found after conducting this study was that West African dance is seen as carrying unique healing and therapeutic properties that in the community setting was naturally beneficial to the members of the African diaspora. These properties include: maintaining presence, emotional regulation and addressing diasporic stressors. Furthermore, I have found that by itself West African dance has the ability to assist in accommodating the unique mental health needs of African Americans in a limited way. However, if a more direct intention was brought to the dance to hone in on these qualities, programming could be enhanced for preventative work within the community setting.

Maintaining presence, emotional regulation and addressing diasporic stressors are the identified innate healing aspects and therapeutic properties of West African dance that were perceived by participants in a community setting. These properties can benefit members of the African diaspora by providing the opportunity to explore being in the here and now, releasing past and/or future stress, establishing stability and regulation of emotions, and procuring cultural and personal pride in order to counter act racism and discrimination. These properties access healing and promote well-being within the whole self as a result of connecting, mind, body, and

spirit. I personally experienced the healing connection to self, other, and West African culture through dance and drum, in my role as the primary researcher and member of the ADDCC.

### **Maintaining Presence**

The present moment is the link between the past and the future. It is sometimes referred to as the “here and now”. According to some humanistic psychological theories such as Gestalt theory, maintaining presence is important because one can neither change the past nor control the future. What can be changed and controlled are ones actions, reactions and perceptions in the present. If heavy emphasis is placed on the past or future, then progress will be hindered in the present. Maintaining presence affects individuals’ physical and mental health, as well as their overall well-being. Maintaining presence allows one to release concerns of the past or future that may be causing physical and mental tension and “remain open to the wisdom that arises” (Rowe, 2013, para. 21). Within many West African cultures, dancing and drumming are used as means for connecting and healing in the present moment. West African dance can foster an internal balance and harmony with life experiences by exercising both physical and mental components that are primarily accessed in the here and now (Rowe, 2013). Due to the power of the drums, the movements, the social environment and being in the here and now, many participants in the study spoke about being able to let go of worry, daily stresses, and tension while on the dance floor. One participant said,

This is my church. I get a high. It brings me into the present moment. Like the Buddhist religion practices...it grounds me into the present moment. Releasing thoughts of worry or focus on past or future, only the here and now. There is something so powerful about moving in unison as a collective with other dancers, but also with the live music. Each aspect can stand alone but in this collective of dancers and

musicians there is a powerful relationship and interconnection that is my church, my healing, my connection to a higher power...

Through the use of drum and dance, the community's ability to activate the senses and allow participants to be in the time and space of the moment, stands out as a powerful intervention for healing the whole self. The community allows the participants to experience and develop their ability to maintain presence in a safe and supportive environment. This also provides participants with the opportunity to access the ability to maintain presence when facing life experiences that may be uncomfortable or distressing. When one is in the here and now, control of the circumstances may not always be possible. However, the way in which one can interpret and respond to the present moment can be controlled. An increased awareness of one's emotional experience could also make it easier to mindfully respond to the present moment with clarity, intention, and the ability to regulate one's self.

### **Emotional Regulation**

Emotional regulation is the ability to be aware, understand, manage, and modify one's emotions and emotional reactions (Thomas, 1994). Developing the skills to regulate emotions can boost one's mental health, well-being, performance, and relationships. Many participants spoke about West African dance providing them with a sense of joy and connection through the stability and regulation of their emotions and/or the release of negative energy. As mentioned in the literature review, individuals are able to access the therapeutic properties of dance released through movement, rhythm, self-expression, relationship, and cathartic release, which results in shifts within emotional states (Diallo & Hall, 1989; Hanna, 1995; Monteiro & Wall, 2011). These shifts helped to maintain the participant's emotional balance and centeredness.

One participant stated,

African dance has touched every emotion in my body, soul, and spirit. It makes me cry, I laugh from it. I get amazed from it. I get thrilled with it, disappointed and so sad sometimes. But it's given me so much strength...

Another participant supported this in saying, "It's a release of negative energy that happens to me...It has been the force to help me move on. Move forward, from certain past situations...just clearing out that negative energy." The release of energy and/or promotion of positive emotion through African dance helped to eliminate stress and worry, both mentally and physically; thus increasing the participants' sense of well-being. African dance provided participants with a sense of pride and connection to their heritage as members of the African diaspora. This may also help to relieve the affects of emotional stressors experienced due to an individual's culture or ethnicity, such as racism and discrimination.

### **Addressing Diasporic Stressors**

In this work I use Butler's definition of diaspora,

A diaspora is more than the dispersal of people. It is a complex historical process whose contemporary dynamics of culture and power are related to ... [conditions of relocation, relations with the home country, relations with other expatriates] and complex struggles over identity, belonging, acculturation, and separatism (Butler, 2000, p. 225-226).

A diasporic stressor is one that is shared by an entire culture of people and implemented by a society. The mere fact that one is a member of a particular ethnic group or culture means that they are susceptible to this stressor. For African Americans, racism and the effects of white supremacy are examples of diasporic stressors due, to the history of relocation and slavery in the

United States. The general oppression of members of the African diaspora and the historical staging of self-hatred within the African American community has led to various pro-Black and civil rights movements that have occurred over the years. As a result, many African Americans have sought to connect to their African heritage and identity through the exploration of traditional art forms like drum and dance.

Communities like the ADDCC were established in support of embracing and connecting with African culture and traditions. One participant stated,

Those of us who have went through that whole experience of the slave trade and being descendents of those people. We have trauma that still deals with us to this day that has not been addressed. I find that the dancing and drumming are therapeutic for addressing that trauma that we've received for that.

Another participant supported this in stating,

It's an ongoing process to bringing that understanding (of self) to the light; the African-ness that exist in you and how to love it. How to love it and how to balance what we have here with what we seek to gain from the continent from the diaspora.

Partaking in the community drum and dance events was a means for participants to achieve mental, physical, and emotional integration into African cultures, values and traditions.

Participants were able to release shame and promote love and unity, while also gaining a sense of identity and pride for who they are and where they come from.

### **Strengths and Limitations of the Study**

The main strength of this study was the use of triangulation throughout the research process. As mentioned in chapter four, triangulation is a technique used to facilitate the

validation of data through cross verification from two or more sources. Given the subjective nature of qualitative data analysis I felt it was important to put in place a process that could increase the validity of the data. This allowed me to feel comfortable in presenting my findings. The informal interviews provided the opportunity to validate the information collected from the in-depth interviews. The participant observations allowed me to further understand and endorse some of the processes that go on in the ADDCC and identify the concepts that were described in the interviews, both informal and in-depth. Using a qualitative approach also helped produce more in-depth, comprehensive information.

The limitations of this study included a small sample size and a limited time frame. The results of this study may not reflect the overall feelings and opinions of the majority of its African Americans members of the African diaspora within the ADDCC, due to the narrow sample size and demographics. The aim of qualitative data analysis is to provide a detailed description of phenomena that cannot necessarily be extended to wider populations with the same level of certainty that quantitative data analysis can. Only ten participants of the ADDCC were included in the study's in-depth interviews out of the sizeable amount of people that attend the various events and classes on a weekly basis. This only represents the opinions of a small sample size, and even though the results may give insight into the experience of the ADDCC, it cannot be applied to the entire community. Furthermore, the African American members of the ADDCC may not be representative of the entire African diasporic culture. It is a small cross-section.

Data collection took place during a ten-month period, which was a limited amount of time considering the various events and classes that take place through out the year, the many years in which the community has been established and the fact that people's opinions can

change over time. The time structure of the study resulted in the data analysis process being completed in a short amount of time. Thus, additional exploration of the data could provide further value.

### **Implications for the Future**

This study answered many questions by validating and expanding the information from similar past studies. Future studies could, benefit from incorporating youth of the community as participants. Children represent a significant part of the community's make up and their exclusion resulted in a large portion of the community being unrepresented. Some of the participants I interviewed were members of the community when they were children. A longitudinal study focused on obtaining the perspectives of community members when they were children and contrasting their perspectives as adults could offer fresh insight. However, I feel many of the concepts and aspects of the community I asked about in the interviews may prove difficult for children to fully grasp. Even so, including children in my observations and informal interviews which would permit me to ask basic questions, such as why they like or do not like coming to class, would be a simple way to gain their perspective and have the children represented in the data, if I were able to obtain consent from their guardians. In addition, by interviewing more participants and extending the data collection process for a longer period of time, I may have gained further information. Seeking out members of the community who at some point considered themselves apart of the community and left would also provide valuable data. The additional point of views would add another layer of complexity or meaning to the study.

## **Personal Insight and Experiences**

As I am also a member of the ADDCC, I held a unique role in the process of this study. In order to address the problems implicit with this dual role, I brought intention and awareness to my experiences as a researcher and aimed to reduce or remove my bias. This removal of bias was accomplished by taking extensive field notes, which included reflections about my subjective point of view; using broad definitions of healing aspects and therapeutic properties to expand my scope concerning these topics and by using triangulation in my data collection and analysis. I found that being a member of the community was in some ways helpful too and appeared to reduce feelings of discomfort and reduce the possibility of members altering their behavior due to a foreign presence. As a result of my experiences in the community, I understood the intricacies and nuances of the classes and events, in addition to the names and terms the participants used. My understanding of the rhythms and the dance allowed me to be aware of the non-verbal communication that was taking place between the dancers and the drummers. Participants seemed enthusiastic and willing to share with me.

As part of my role as researcher, I was able to bring intention and value to some of the things I had witnessed in the past as a youth but was unable to fully understand at that time. For example, the supportive and accommodating nature of the community, allowed me to feel accepted unconditionally. The dedication to uplifting African culture and passing down values and traditions to the youth allowed the community an overall positive collective experience of unity and oneness. Essentially the ADDCC resembles a family, by providing a multi-faceted support system and like family nothing is perfect. It was not the intention of the study to be subjective and/or overlook the struggle(s) and drama that can arise within the community setting. The focus of this research was to increase my understanding of the potential value and purpose



of West African dance and drum events for African Americans as a means to heal, and gain an understanding of what sustains connection to the community. As an insider I can acknowledge that mistakes are made and hurt happens in the ADDCC, however it is also my observation that the perceived healing energy of the movement and music, has allowed the community to survive and thrive. The results indicate that West African culture and essentially the discovery of self through the medium of the arts holds healing and therapeutic value for individuals but also allows a community to help and heal itself from the inside out.

### **Preventative Programming**

As stated previously, the follow up question to the main research question, asked: if West African dance is determined to be therapeutic, then in a community setting, could it: assist in accommodating the unique mental health needs of African Americans, be used as a preventative intervention, and contribute to the understanding of dance/movement therapy concepts outside of the clinical setting? It is my understanding that West African dance, in a limited way, has the ability to assist in accommodating the unique mental health needs of African Americans. Yet, if West African dance was practiced with a more direct intention to hone in on its healing qualities, programming could be developed in which it used as a preventative intervention and a connection could be established between African dance and DMT in a community setting.

**Program Idea Development.** As stated previously, within the ADDCC, African dance carries unique healing properties naturally that are being utilized and developed. Most of the participants had similar positive experiences and insights about what the culture and community has done for their self-development and well-being. However, dialogue between members that could help intentionally foster these qualities in community classes and programs has occurred only minimally. My thesis and similar works offer a steppingstone to creating preventative

programming within African American communities. This programming could foster the healing qualities that come from developing a cultural identity and cultural community using West African music and movement.

Similar programming was developed for other minority groups such as the Native American community, in which a culturally based wellness and creative expression model was created to enhance personal and community resiliency. As discussed in the literature review, this model promoted effective communication and life skills, substance use resistance, and dealing with discrimination, through the incorporation of creative expression. Traditional Native American art and cultural expression were used as a means of integrating the spiritual, emotional, and physical aspects of health and empowerment. This mode of expression gave an individual the ability to voice one's identity and feelings through a personally empowering process while encouraging community involvement and positive change. (Gray, Wolf, Mays, Equihua, Gomez, Tellez, Tellez, Rappa, Jirsak, &Nye, 2008).

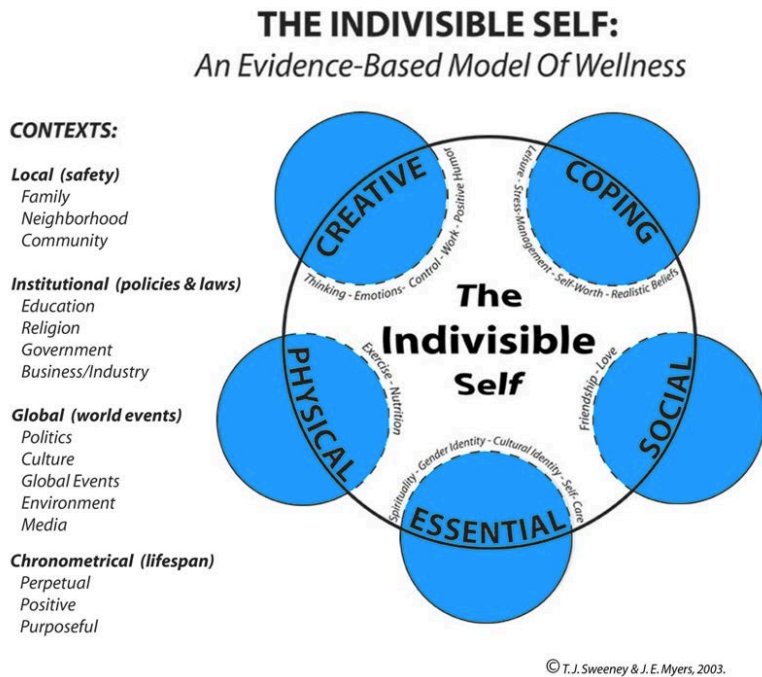
It is my desire to see similar programming developed in which preventative interventions use African cultural components to provide culturally based wellness and corrective experiences for healing on both an individual and community level. It is my belief that African dance and music for members of the African diaspora carries the essence of who we are and where we come from. This artistic connection to our culture can provide creative opportunities to explore and address the various unique mental health needs of African Americans and diasporic stressors in a nonverbal and nonthreatening manner. These unique needs include the acceptance and re-patterning of thoughts and behaviors that reinforce shame, self-hatred, anger, and emotional deregulation, that may stem from consistent exposure to diasporic stressors like institutional racism, discrimination, stereotypes and poverty. This use of African culture as a therapeutic art

form to address these needs promotes transformation, empowerment, self-expression, harmony, and love, which are necessary for healing.

**Supporting Elements.** The ADDCC due to its lack of intention and structure cannot meet the unique mental health needs of African Americans, address diasporic stressors or replace clinical work. As a result, I propose to expand the limits of African dance in a community setting by introducing therapeutic intention to hone in on its healing aspects and qualities. By incorporating elements of the Indivisible Self: An Evidence Based Model of Wellness, community psychology and dance/movement therapy (DMT) while maintaining African culture and community values, a framework could be established to bring structure and fluidity to the development of a culturally informed therapeutic approach for preventative work.

As described in the literature review, the Indivisible Self Model is a strengths-based approach to mental health care that embodies holism as the foundation of human wellness. It can be used to help individuals understand the components of wellness, the interaction of those components, and the manner in which positive change can be created through a focus on strengths as opposed to weaknesses (Myers & Sweeney, 2004). The model identifies five factors that make up the indivisible self: Essential Self, Social Self, Creative Self, Physical Self, and Coping Self. These factors are broken down further into more specific sub-factors that can be seen in figure 3.

Figure 3. The Indivisible Self: An Evidence Based Model of Wellness



The Indivisible Self Model was developed using Adlerian theory’s proposed three major life tasks: work, friendship and love. In addition, the tasks of self and spirit were added to further support the ideals of the theory (Myers & Sweeney, 2004). Adler suggested that holism (the indivisibility of self) and purposiveness were essential to understanding human behavior. Such understanding required an “emphasis on the whole rather than the elements, the interaction between the whole and parts, and the importance of man's social context" (Ansbacher & Ansbacher, 1967, p. 11-12). In many ways these ideals are similar to the worldview and values of West African cultures. These ideals also support the African American concept of community. In many West African cultures, the self is viewed as an integrated holistic being that is not separated into parts. An individual’s overall health is based on the balance and connection maintained within their spirit and when illness or distress occurs it is the whole self that is

affected. For many African Americans the value and influence of community is an important social and cultural component. Healing often occurs in the context of community as African Americans turn to community groups, organizations and churches to maintain mental health and bestow support. The value placed on community by West African and African American culture could assist in formatting a program that promotes wellness in a culturally connected manner. This value could also establish an ability to meet the community where they are in terms of accessing that cultural component of community healing and community support. Similarly, community psychology maintains some of these same ideals in regard to looking at the whole self and its connection with one's environment, community and society.

Community Psychology is the study of how an individual relates to the surrounding environment and society. It concentrates on political, cultural, and environmental influences, as well as institutional and organizational factors, in order to promote individual growth and prevent social and mental health problems. This focus aims to enhance the positive characteristics and coping skills of social groups, thus addressing the relationship between stress and social support, with the practicality of prevention and self-help (Perkins, 2011). Elements of community psychology could assist in maintaining a program's focus on preventative practices that would reach beyond individual care into that of the community. This is an important factor in African and African American cultures. It would provide a context in which African dance could be used as a community intervention for African Americans to release negative feelings like shame and helplessness brought on by diasporic stressors, while promoting unity, collective work and responsibility within the community. Individuals would be able to engage in corrective experiences that promote the reclamation of personal power, self-determination and identity in a way that heals the whole self and the community. Comparably, dance/movement therapy (DMT)

endorses similar ideals and concepts as the Indivisible Self Model and community psychology. However, due to DMT's holistic approach to healing, on an individual and community level and its use of movement and dance as a unique platform, DMT could incorporate African dance as well as African culture and community values.

Dance/movement therapy (DMT) is the psychotherapeutic use of movement to further the emotional, cognitive, physical and social integration of the individual, based on the premise that the body, mind, and spirit are interconnected (American Dance Therapy Association, 2014). It operates through non-verbal communication to connect to the self and others through the use of the body, movement, and creative expression. West African dance provides a similar mode for communication and connection to the self and others that can impact an individual's physical functioning, mental functioning and spirit. Based on my experience as a member of the DMT community and the ADDCC, I was able to identify and label several shared characteristics between West African dance and DMT concepts. For practitioners of West African dance in a community setting, these concepts and characteristics may not be the primary intention as they are in DMT, however, they promote psychological benefits for individuals that can be fostered and synthesized to further develop a culturally informed preventative therapeutic approach.

One of the primary characteristics that these modalities share is the promotion of healthy coping. Coping can be viewed as the essence of DMT, while African dance can be utilized as a means to cope with various internal and external stressors. DMT highlights breath, being grounded, and connecting to a group rhythm as a means to bring individuals into the present moment and establish feelings of safety. The characteristics can also be found in West African dance, as the majority of the movements are of a grounded quality, where breath must be engaged in order to take on the movements and connect to the rhythm. These characteristics of

West African dance along with the drum/music facilitate communication between the body and mind that brings people into the present moment, grounds them to establish feelings of safety and develops the ability to accept, manage and release stress.

Other characteristics that both African dance and DMT share are the balancing of inner connectivity with outer expressivity and stability with mobility. Irmgard Bartenieff, based on Rudolf Laban's movement analysis, developed the concepts of inner connectivity with outer expressivity, stability and mobility, with the goal of establishing movement fundamentals that activate connections to facilitate integration and enrich life (Bartenieff & Lewis, 1980). The lively interplay of inner connectivity and outer expressivity is essentially the striving for connection to the inner self in order to strengthen the outer self. The balancing of stability and mobility is the establishment of permanence so that the self can then move with confidence outward and with the ability to activate and motivate the self.

In my experience as a participant observer and member of the ADDCC, I noticed that inner connectivity/outer expressivity and stability/mobility were activated within the self due to the movement, music, and the collective environment. I was able to connect with my self/identity by becoming immersed in the culture, dance and community. This in turn helped me to develop an internal support of knowing who I am and where I come from. This perspective was expressed outwardly in movement and confidence (inner connectivity/ outer expressivity). I was able to establish a sense of stability and groundedness in my identity and character in order to then become mobile. I was able to move through the space and through life in general, feeling motivated and empowered (stability/mobility). I observed this lively interplay in others as well. Many participants were able to expand their window of tolerance or step out of their comfort

zone, in a safe and supportive atmosphere in order to cope with stress, stabilize emotions, connect with a higher power, empower themselves and exercise their body and mind.

**Program Structure and Format.** The Indivisible Self: An Evidence Based Model of Wellness, community psychology and dance/movement therapy (DMT) all possess ideals and concepts that complement the healing aspects and therapeutic qualities of West African dance in a community setting. Although historically the mental health field has lacked inclusion and understanding of the beliefs and value systems of other racial and ethnic groups, I believe that an integration of these theories address this problem. I believe that in order to establish a culturally informed therapeutic approach for African American communities, to be used outside of the clinical setting, one must maintain the egosyntonic framework of the African dance and drum community. Sustaining a connection to the community and possessing a thorough understanding and commitment to the African dance and drum community's principles can maintain this egosyntonic framework. This would ensure that a genuine and knowledgeable connection to the culture was made and that the members of the community would be comfortable and open enough to participate.

The approach of this preventative programming would incorporate the dynamics of a community dance class, with the ideals of community psychology, the holistic framework of the Indivisible Self Model, and the structure and processing of a DMT group. A dance/movement therapist would lead the programming. However, it would not function like many DMT groups that only incorporate culturally based movements. Furthermore, the programming would not be promoted or facilitated like a typical group therapy session, due to the distrust and stigma surrounding mental health treatment and therapy in the African American community. It would introduce African dance as an intervention for holistic healing and well-being, where African-



centered beliefs, healing rituals, and values are highlighted with intention. These African-centered beliefs, rituals, and values are based on the idea that the self is connected not only to the body and mind, but also to the environment, ancestors and community as a venue for establishing balance and harmony. In African culture, dance is intertwined within the spiritual and social framework of the culture and used to instill and correct imbalance. It would be the role of the facilitator to provide a detailed introduction of the African dance being done, its history, background and purpose. The facilitator would ask the participants to explore the movements' possible connection to themselves, their beliefs and their community, while also highlighting the distinctive movement characteristics of the dance and why those characteristics are important to the values and traditions of the culture.

A space to process the movement experiences and develop insight into the self would also be included. Unlike regular community dance classes, processing would provide the participants an opportunity to reflect and share their observations concerning their interactions and relationships with each other, explore their unique movement signatures or increase their body awareness in relation to the dance. Essentially participants would have the opportunity to process the connection between their West African dance experience and the feelings evoked by it. The participant would be able to align different movements with certain images or emotions and also resolve feelings, as their emotions would be processed on both an internal and external level.

The facilitator would be able to lead the participants through emotionally enhancing movement, as well as identify certain themes in the West African movements, the historical purpose of the dance and the participants' feelings. This would allow the participants an opportunity to resolve and process certain emotions that may have come up that a regular

instructor could not address, including emotions surrounding culturally specific topics like stressors related to racism, discrimination etc. Furthermore, it allows for the exploration of participants' movements to further their understanding of the body/mind connection, as well as potential re-patterning. Overall, the structure and intention of this culturally informed preventative therapeutic approach and programming would create an atmosphere where the sharing of various ideas, feelings, emotions and movements in a safe space can in turn strengthen the connection between participants and allow them to heal and support each other.

### **Summary**

The purpose of this study was to explore if West African dance had the potential to connect members of the African diaspora to their heritage of physical, mental and spiritual healing. The main research question that guided this study was: if any, what are the innate healing properties and therapeutic aspects of West African dance for people of the African diaspora, specifically within the African dance and drum community? Furthermore, if West African dance is determined to be therapeutic could it, in a community setting: assist in accommodating the unique mental health needs of African Americans, be used as a preventative intervention, and contribute to the understanding of dance/movement therapy concepts outside of clinical settings? This study offers suggestions for bridging the gap between the mental health of African Americans and effective preventative treatment, using a culturally based approach.

It appeared that West African dance was influential in seven major categories: community, identity, spirituality, coping, fitness, empowerment, and emotion. These categories were condensed into three unique healing and therapeutic properties: emotional regulation, maintaining presence, and addressing diasporic stressors. Many of the participants believed that the African drum and dance community of Chicago (ADDCC) was a safe environment that

promoted emotional healing, cultural discovery, self-discovery and healthy social interactions as well as promoted mental, physical, and spiritual well-being. However, the data also indicated that there was little dialogue among community members about ways to intentionally foster these qualities in community events, classes and programs, thus the full potential of the dance and drum events could not be reached.

The mental health benefits of West African dance discovered by this study align with the current literature on health and African dance, as it relates to African Americans, prevention of mental illness and dance/movement therapy. However, this study can be distinguished from other studies on the topic due to its ethnographic structure, non-clinical community setting, concentration on the unique mental health needs of African Americans and the recommendation for using an integrated approach utilizing community psychology, the Indivisible Self Model and dance/movement therapy, for preventative programming.

Implications of these results for the field of DMT were discussed in regards to the integration of African dance with DMT for preventative work. The shared elements that were identified included coping, inner connectivity with outer expressivity and stability/mobility. These elements, along with community psychology and the Indivisible Self Model, were used to recommend a culturally informed preventative therapeutic approach and program, which could be used by clinicians outside of clinical settings. The preventative program would utilize West African dance as an intervention for holistic healing, by not only highlighting African-centered beliefs, rituals, and values, but also activating DMT components through intentionally processing the movement experiences and developing insight into the self.

Further research needs to be conducted on both DMT and culturally based interventions as forms of preventative care and community development for diverse populations. Research

questions that can help guide future research concerning these topics are: How can the healing aspects of community dance be brought into a clinical setting for culturally sensitive DMT with African Americans? What are the benefits and or disadvantages of using a culturally based approach, like West African dance, for individuals with mental illness?

Based on the results of this thesis, my own experiences as a member of the ADDCC and a budding dance/movement therapist, I suggest that more dance/movement therapists, specifically ones of African heritage, look to their communities to enhance, complement, and support the work that is done in clinical and non-clinical settings from a cultural focus. Hopefully, this thesis will provide a foundation and inspiration for other therapists to research, explore and solidify this type of therapeutic approach in the ADDCC and other dance communities as well. I believe through the study of communities similar to the ADDCC, we may gain a better understanding of the impact of community dance and thus be better prepared to design programs for the application of DMT in diverse community settings. I believe it is the establishment of hope in times of strain, the celebration of life, and the promotion of unity and love that allows communities and individuals to flourish and heal themselves.

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## **Appendix A**

### **Definitions of Terms**

#### **African diaspora**

The communities throughout the world that have descended from the historic movement of people from Africa, specifically the descendants of West and Central Africans who were enslaved and shipped to the Americas by way of the Atlantic slave trade.

#### **African American**

An ethnic group of citizens or residents of the United States with total or partial ancestry from any of the native populations of Sub-Saharan Africa. (African American, Black and member of the African diaspora will be used interchangeably for the sake of this thesis.)

#### **Core-Self**

An image of the self that reinforces certain qualities that one deems important based on your culture, experiences and core values (Stosny, 2011).

#### **Dance/Movement Therapy**

Based on the empirically supported premise that the body, mind and spirit are interconnected, the American Dance Therapy Association defines dance/movement therapy as the psychotherapeutic use of movement to further the emotional, cognitive, physical and social integration of the individual (ADTA, 2014).

#### **Egosyntonic**

Refers to behaviors, values, feelings that are in harmony with or acceptable to the needs and goals of the ego, or consistent with one's ideal self-image.

## **Healing**

Healing means, “to make sound or whole.” But beyond that healing is the personal experience of restoring health or wholeness by the “transcendence of suffering”(Egnew, 2005). Healing comes in various capacities whether its transformation, reconciliation, loss, transcendence etc. It goes beyond the curing of illness; it is finding harmony, understanding and at times acceptance of things you cannot change. (Egnew, 2005)

## **Innate Healing Property**

A inherent quality that provides a means for the restoration of health or wholeness.

## **Libation**

A liquid offering, usually water, poured into a plant, dirt or some aspect of the earth to give thanks and honor to the ancestors.

## **Mental Health**

Mental health is the psychological well-being of an individual. It is composed of an individual’s emotional well-being, ability to enjoy life and maintaining a balance between life activities and managing stress and adversity (WHO, 2014). The ability to be flexible and adapt to various life challenges or changes, while maintaining an enjoyable, satisfying life. Culture is an important factor in defining what is mentally healthy due to the beliefs, values and experiences of the society of people (WHO, 2001).

## **Therapeutic Aspects**

A particular feature that contributes to a positive effect on the body or mind.

## **Unique Mental Health Needs of African Americans**

The unique mental health needs of African Americans are based on the influence of past and present racism/discrimination, poverty and low socioeconomic status (SES) due to

inequalities in access to education, employment and health care. The conditions in which Africans initially came to the United States, through their capture and enslavement, poses a unique and traumatic diasporic experience. An experience according to historian Kim Butler, that has continually subjected their descendants (African Americans) to increased exposure to racial, class, and gender discrimination based on its establishment within the societal construct of the United States (Butler, 2001). This has led to trauma, disempowerment, and distress and has played an influential role in Black mental health and overall health outcomes (Margai, 2009; Butler, 2001). Although culturally competent care has improved and thus the effectiveness of treatment for these communities, research has shown that differences in the types and severity of needs, depending on race still needs to be taken into account (American Psychiatric Association, 2014).

### **West African Dance**

Refers mainly to the dances native to the Westernmost part of Africa, specifically Senegal, Mali, Guinea, Guinea Bissau, Burkina Faso, Ivory Cost and Liberia. West African dance is characterized by the body moving in a multi-unit fashion, the dancer(s) interpreting the rhythmic nature of the music through movement and the "call-and-response" movement pattern.

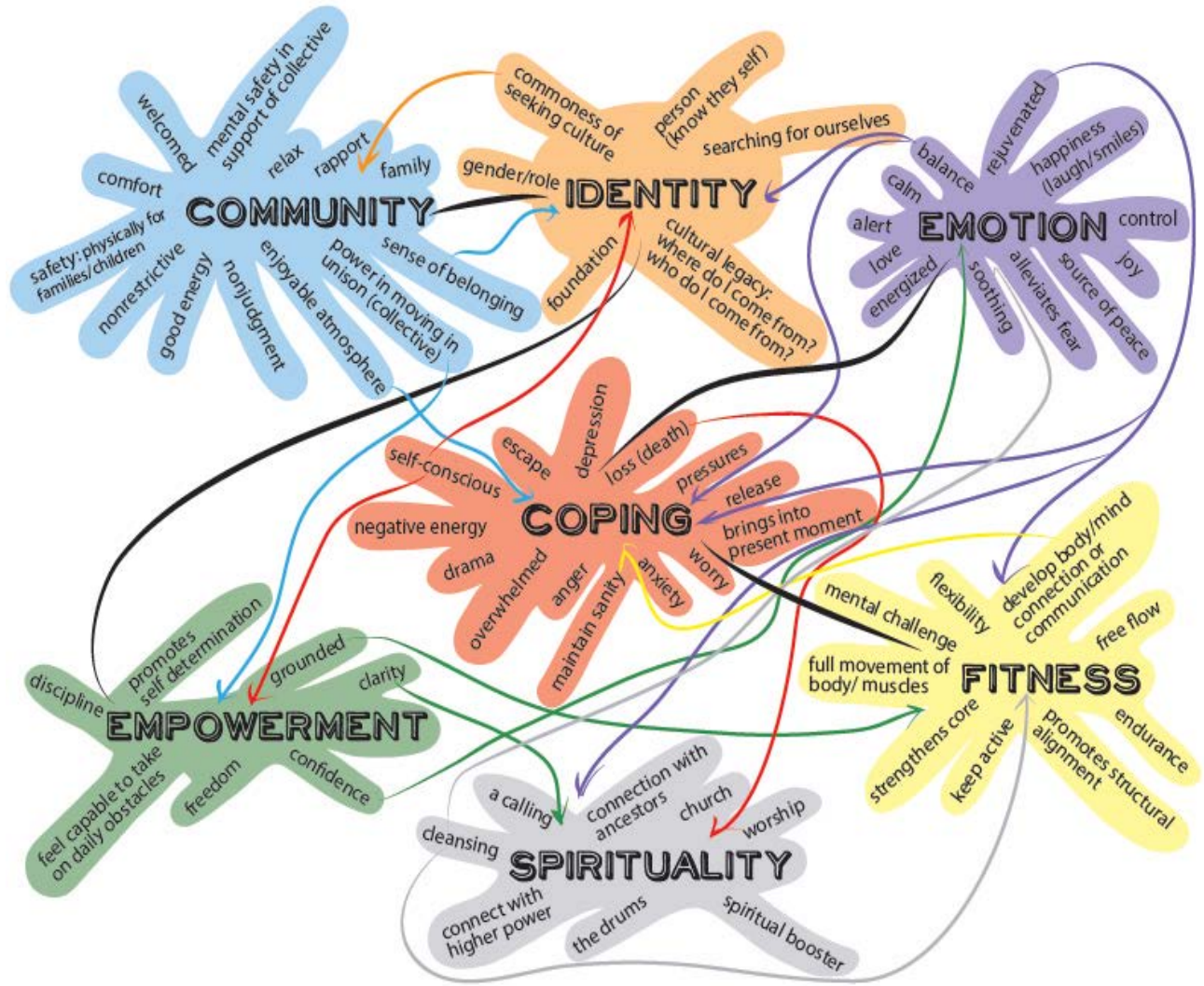
## **Appendix B**

### **Questions used to guide the interviews**

1. How did you find out about the African dance and drum community of Chicago?
2. Why do you come to the various African dance and drum community events?
3. How long have you been coming and how often do you attend?
4. What does the African dance and drum community of Chicago mean to you?
5. What are your thoughts about the dancing that takes place at the different events?
6. What are your thoughts about the drum circle?
7. Does participating in African dance within a community setting influence your spiritual beliefs? If yes, how?
8. Does participating in African dance within a community setting influence your emotions? If yes, how?
9. Does participating in African dance within a community setting influence your mental health? If yes, how?
10. Can you recognize any healing properties or therapeutic properties within the community or within the dancing (mental or physical)? If so, what are they?

# Appendix C

## Data analysis diagram of categories and statements





## Appendix D

### Informed consent form



### Informed Consent Form

#### Consent Form for Participation in a Research Study

**Title of Research Project:** A Community that Dances Never Dies: An Ethnographic Study on People of the African Diaspora within the African Dance and Drum Community in Chicago

**Principal Investigator:** Ifetayo Kitwana (773-936-3498, [Ifetayo.Kitwana@loop.colum.edu](mailto:Ifetayo.Kitwana@loop.colum.edu))

**Faculty Advisor:** Andrea K. Brown (312-655-7449, [akbrownadr@aol.com](mailto:akbrownadr@aol.com))

**Chair of Thesis Committee:** Laura Downey (312-369-8617, [ldowney@colum.edu](mailto:ldowney@colum.edu))

### INTRODUCTION

You are invited to participate in a thesis project to explore the innate healing properties of West African dance for African Americans, specifically within the African dance and drum community of Chicago. This consent form will give you the information you will need to understand why this study is being done and why you are being invited to participate. It will also describe what you will need to do to participate and any known risks, inconveniences or discomforts that you may have while participating. You are encouraged to take your time to think this over. You are also encouraged to ask questions now and at any time. If you decide to participate, you will be asked to sign this form and it will be a record of your agreement to participate. This process is called 'informed consent.' You will receive a copy of this form for your records.

You are being asked to participate due to your involvement and connection to the African dance and drum community in Chicago and your identification as an African American or a person of the African Diaspora. Your participation in this study will include partaking in an in-depth interview.

### PURPOSE OF THE STUDY

The purpose of this research study is to investigate the therapeutic qualities of West African dance for African Americans within a community setting. This study will attempt to reveal the usefulness of West African dance as a means to connect African Americans to their heritage of physical, mental and spiritual healing.

### PROCEDURES

- You will participate in one in-depth interview lasting approximately one hour.
- The interview will be semi-structured, including open-ended questions and the freedom for natural conversation.

- The open-ended questions will ask you to express your thoughts and feeling about the African dance and drum community of Chicago, community in general, African dance in general, and your emotional, physical and spiritual connection to the community.
- The interview will take place in a convenient public location agreed upon by you and the principal investigator.
- You may be contacted in the future if necessary, if any further information is needed.
- The interview will be audio recorded, lasting approximately one hour.

### **POSSIBLE RISKS OR DISCOMFORTS**

I believe there will be no known risk associated with the study. The interview will be audio recorded on the principal investigator's personal computer that will be password protected and not used by anyone else. You will not be asked to do anything beyond your level of safety and the interview location will be in a convenient public location, on a day and time convenient for you. The interview should last approximately one hour.

### **POSSIBLE BENEFITS**

The possible benefits of being in this study include the ability to identify the underlying positive reasons for attending the community dance and drum events beyond physical exercise. Society will possibly benefit by becoming more aware of the impact and benefits of African dance and its ability to develop a sense of community among its participants.

### **CONFIDENTIALITY**

In writing and speaking, the investigator will change all information that may identify you, except possibly your age and role within the community.

The following procedures will be used to protect the confidentiality of your information:

1. I will keep all electronic records/data password protected if on the computer and/or locked in a secure location if in paper form.
2. Collected data (or other sensitive material) will never be exchanged via e-mail.
3. Any audio recordings will be destroyed after two years.
4. Personal study notes that I create may be kept indefinitely, however, no personal information, identifying the participants will be used, to ensure confidentiality. The notes will also be kept in a locked secure location.
5. Information about the participants that will be shared with others will be unnamed to help protect identities (unless explicit permission is granted for disclosure of identity).
6. No one else besides me, the investigator, will have access to the original data.
7. I, the primary investigator, will only transcribe the audio data collected.
8. The data will only be synthesized and analyzed by me, the primary investigator.
9. I (primary investigator) and you the participant will be the only individuals aware of location, dates and times for interviews.
10. At the end of this study, I may publish my findings. If so, the participant will not be identified in any publications or presentations, unless explicitly granted.
11. If the participants grant the use of direct quotes, they will be provided with the first draft of the thesis in order to review the use of their quotes within the context of the thesis.

**RIGHTS**

Being a research participant in this study is voluntary. You may choose to withdraw from the study at any time without penalty. You may also refuse to participate at any time without penalty.

Take some time to make your decision. I will be happy to answer any question(s) you have about this study. If you have further questions about this project or if you have a research-related problem, you may contact the principal investigator Ifetayo Kitwana at 773-936-3498 ([Ifetayo.Kitwana@loop.colum.edu](mailto:Ifetayo.Kitwana@loop.colum.edu)) or the faculty advisor Andrea K. Brown at 312-655-7449 ([akbrownadr@aol.com](mailto:akbrownadr@aol.com)). If you have any questions concerning your rights as a research subject, you may contact the Columbia College Chicago Institutional Review Board staff (IRB) at 312-369-7384.

**COST OR COMMITMENT**

- There will be no compensation for participating.
- The time commitment will be approximately an hour at a predetermined agreed upon public location.
- As a research participant you are required to supply your own transportation to and from the interview location at your own cost.

**PARTICIPANT STATEMENT**

This study has been explained to me. I volunteer to take part in this research. I have had opportunity to ask questions. If I have questions later about the research or my rights as a research participant, I can ask one of the contacts listed above. I understand that I may withdraw from the study or refuse to participate at any time without penalty. I will receive a copy of this consent form.

\_\_\_\_\_  
Participant’s Signature

\_\_\_\_\_  
Print Name:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Principal Investigator’s  
Signature

\_\_\_\_\_  
Print Name:

\_\_\_\_\_  
Date