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# An Annotated Bibliography of Creative Interventions Within Dance/Movement Therapy

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# AN ANNOTATED BIBLIOGRAPHY OF CREATIVE INTERVENTIONS WITHIN DANCE/MOVEMENT THERAPY

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in partial fulfillment of the requirements for

Master of Arts

In

Dance/Movement Therapy & Counseling

Department of Creative Arts Therapies

May 13th, 2017

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#### Abstract

This annotated bibliography explores how creativity is integrated in dance/movement therapy (DMT) interventions. The central question guiding this research was: How is creativity explicitly implemented in DMT interventions, approaches, and/or theoretical frameworks? Literature was gathered from journal articles, books, book chapters, and online peer reviews; a total of fifteen sources were annotated. During the research process, several challenges emerged when searching for explicit explanations of creativity used within DMT. This included annotations from sources which described creativity used within DMT interventions, approaches and theoretical frameworks that did not explicitly define creativity. This bibliography uncovers several themes related to the concept of creativity used in DMT, along with multiple perspectives and descriptions of the term. The final chapter includes findings and limitations from the collected sources, and considerations for the future of DMT.

# Acknowledgements

I would like to thank my family, friends, and the faculty and staff of Columbia College Chicago for their continuous encouragement and positive support.

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#### Introduction

Dance/movement therapy (DMT) started to emerge in the 1940's and 1950's (Levy, 2005), and continues to grow. "DMT draws upon the wisdom of the body, its expressive movement, and the creative process of dance to cultivate emotional, cognitive, social, and spiritual health, well-being, and healing" (Young, 2016 p.179). The American Dance Therapy Association (ADTA) defines DMT as the "psychotherapeutic use of movement to promote emotional, social, cognitive and physical integration of the individual" (ADTA, 2017). Definitions of DMT prior to present day have evolved; however, a premise of DMT—to support healthy functioning—has remained the same. Historically, DMT has been recognized by the U.S. government as an important treatment modality. DMT sessions are practiced in mental health and rehabilitation facilities, hospitals, and schools amongst other counseling programs by way of individual or group sessions.

Body movement is the main component of DMT and is used as the primary mode of assessment, communication, and expression within each intervention. DMT interventions can help heal participants with developmental, social, physical or psychological hardships. "The dance therapist is not teaching dance in order to develop performing artists, but is using technical skills and personal creativity and spontaneity to enable people to become more aware of themselves on a human, realistic level" (Chace, 1964, p. 46). DMT is classified by the Federal Service Act as a Creative Arts Therapy (Malchiodi, 2005). Although categorized as a creative arts therapy, the term *creativity* is scarcely described within DMT literature. Sources available are limited in which *creativity* is explicitly defined and described within DMT interventions, approaches, and theoretical frameworks. A brief overview and history of background information on creativity and DMT is included to provide a context of the content in the

evaluated annotations. Operational definitions of broadly discussed concepts, like creativity, are included, as they informed the identification of sources to include in this annotated bibliography. Other considerations of common themes and findings that emerged in the description and evaluation of the sources are included in the final discussion.

#### Creativity

Since the 15th century, philosophers, scientists, and psychologists have undergone much debate regarding the various ways to describe and define creativity. The word *creativity* is derived from the English word, to create, meaning to bring something new into being (Runco, 1990). Creativity is defined in the dictionary as the ability to make new things or think of new ideas (Merriam-Webster, 1828; Sternberg, 1988). Rollo May and Carl Rogers both discussed creativity as a mental state, a common quality that is buried within every individual (May, 1975). May explained that creativity occurs not only when an individual is in a mental state void of insecurities, but also when the individual is able to acknowledge those anxieties and can continue to move forward despite them (1975). May discussed that originality is merely producing something unusual or out of the ordinary, which is not the same as creativity (May, 1975; Rothenberg, 1979).

Psychoanalysis and creativity have long been associated with access to unconscious thought (Campbell, 1968; Csikszentmihalyi, 1990; Koch et al., 2013). Several psychoanalysts like Sigmund Freud, Carl Jung, and Rollo May believed that the unconscious plays a remarkable role in creativity (Koch et al., 2013; Rothenberg, 1979; Sawyer, 2006). Rothenberg explained that strongly repressed unconscious drives "tend to influence all conscious thought and behavior" (1990, p.51), and this type of unconsciousness is responsible for creativity (May, 1975; Rothenberg, 1979). This is reflected in the ability of creative people to better control regression and use it in service of a conscious goal (Koch et al., 2013; Rothenberg, 1979; Sawyer, 2006). Maslow (1943) viewed creativity as one of the highest forms of expression of one's potential. Expressive therapists, such as McNiff and Malchiodi, stated that the continuous healing through art is appearing more and more within the mental health field, and creative arts therapies, like DMT, have an increasingly recognized role in rehabilitation and medicine (Malchiodi, 2005). The concept and definition of creativity has been widely debated throughout the centuries and continues to evolve. My opinion of creativity has also continued to evolve. Throughout my life, this research process, and my clinical experience emerging into a professional dance/movement therapist my perception of creativity has shifted. Although influenced by several of the psychoanalysis and philosophers mentioned previously, the first two people who influenced my opinion of creativity are my mother and father. I believe creativity may be developed in the beginning stages of the human developmental process. At an early age of my childhood I was constantly encouraged to "get creative" I can recall my mother's tone of voice telling me to use my imagination and creativity. I was fortunate to experience creativity from my parent's positive modelling through storytelling and inventive games as well as spontaneous sibling challenges. I soon discovered imagination. I learned how to play alone and be happy with what I had. I developed stories, invented games, choreographed dances, and made up imaginary names.

Creativity is learning how to use the imagination. Growing up in a low-income family there were limited options and being creative was one of the only ways of survival. Creativity is discovering how to be resourceful. I experienced that creativity can be fun and rewarding. Being creative provided me with a positive warm inner sensation and feeling of pure happiness, which eventually led to parental approval and praise, which often increased my self-esteem and provided me with a sense of self-satisfaction. Creativity provides opportunities for self-

discovery and growth. The concept of creativity is a continuous changing phenomenon, however in my opinion it can be discovered within every individual. Like Maslow (1943), I believe that creativity is one of the highest forms of expression for experiencing one's own potential. I also believe that creativity incorporates both the conscious and the unconscious thoughts and feelings from past developmental experiences, which then serves an individual to be inspired, resourceful, and expressive. Creativity can be used to enhance an individual's process of healing as well as development of new ways of feeling, expressing, and resourcing. Being creative or experiencing creativity is one of the most impactful aspects I have learned throughout my life and has provided me with new insights and opportunities for growth.

#### Purpose

The purpose of this annotated bibliography is to examine the existing literature that explicitly references *creativity* within DMT interventions, approaches, and theoretical frameworks, to discover common themes and illuminate the similarities and differences in how the term is applied. Several factors were examined before selecting each suitable source to be included within this thesis. The term creative was an essential component when researching and examining the literature. Creativity was scrutinized within the content of each source, and the phrase *creativity implemented in DMT interventions* was thoroughly searched for within the DMT literature. Columbia College of Chicago's library provided access to various online research databases and relevant research material which is incorporated in this thesis. Literature which only implied creativity used within DMT interventions, but did not state the term itself, was discarded. In addition, due to the nature of the broad concept of creativity, an ample amount of irrelevant material surfaced, and the process of examination and elimination was time consuming. Another challenge was the title of the field in which DMT is categorized, the

creative arts therapy field. The term creative within the title provided a plethora of material related to creative interventions, however sources which did not explicitly discuss creativity specifically implemented within DMT interventions were not included in this thesis. The possible argument that all DMT interventions are creative was considered, however only sources which implemented the term creative and/or creativity clearly and explicitly within the content were included, and sources which only implied DMT interventions, approaches and/or theoretical frameworks as creative were excluded. Of the 35 sources reviewed, only 15 were pertinent to the central question: How is creativity explicitly implemented within dance/movement therapy interventions, approaches, and theoretical frameworks? This was a surprisingly small number of sources, considering how vital creativity is to the field. The purpose was to avoid projecting assumptions of how DMT interventions are perceived. Literature that precisely and clearly expressed the term *creativity* within DMT interventions, approaches, and theoretical frameworks was limited. Each annotation is presented in accordance with APA guidelines (2010): listed alphabetically by author information, source summary, and other considerations. Dates of sources range from 1972 to 2014. Author information is included to establish qualifications and credibility within the DMT field, and to address reliability in examining how creativity is implemented in DMT.

This organized database can help serve dance/movement therapists, counselors, mental health professionals, emerging practitioners, and graduate students identify where in the literature creativity is explicitly addressed and how it is implemented within DMT interventions, approaches, and theoretical frameworks. A summative evaluation of the findings is elaborated in the discussion chapter.

The significance of these findings can benefit the DMT field, providing insight towards facilitating interventions, inspiration for treatment, and clarity around the complexity of how creativity is implemented within DMT

#### Annotations

Espenak., L. (1972). Body-dynamics and dance in individual psychotherapy. In F. Donelan (Ed.), American Dance Therapy Association writings on body movement and communication.

Monograph No. 2. Columbia, MD: American Dance Therapy Association.

#### **Author Information**

Liljan Espenak was a pioneer and major influence on DMT. Born in Bergen, Norway, she studied with Mary Wigman in the late 1920's. As the director of the Division of Creative Therapies, Institute for Mental Retardation at the New York Medical College, Espenak was also a dance/movement therapist at the Alfred Adler Mental Hygiene Clinic (Levy, 2005).

#### **Summary**

Espenak's DMT approach combined theories of Adler with Blanche Evan and Alexander Lowen, in which she used structured movement sequences to help strengthen the body, relax constricted parts of the body, and help the patient experience new consciousness and personal awareness. The entire volume focuses on her integration of Adlerian concepts into her theory of DMT. Espenak's theory emphasizes the use of sequenced movements to build creative emotional expression. The creative emotional expression aims to use nonverbal and free improvisational movement to gradually strengthen and unlock numb or stuck areas of the body. Discussed in detail are elements of her theory and approach, as well as the movement diagnostic test she developed. Espenak used the diagnostic test to assess an individual's strengths and weaknesses as well as components of personality. The tests were administered during the beginning of treatment and throughout three month intervals. Diagrams and forms are illustrated in her volume, as well as case studies to explicitly show the creative use of her approach towards treatment applications. The diagnostic tests were then used to form a treatment plan. Espenak's DMT approach included relaxation techniques, improvisation, imagination, imagery/symbols, free interpretation, and music to encourage creative movement. However, Espenak does not define creative movement throughout the discussion. A discussion of contraindications for DMT and appropriate applications were presented.

#### **Other Considerations**

This volume is well-organized and provides a brief, but comprehensive, amount of information regarding Espenak's approach to DMT theory and application. The case studies included in this collection illuminate creative approaches used, and provide a good example of clinical practice when working with those with mental disabilities, autism, and schizophrenia. Espenak integrated various techniques inspired from Adler through her developed diagnostic testing. The literature emphasized approaches towards individual evaluation and treatment; however, this may be less applicable to group settings. The volume included training and course work for dance/movement therapists and an appendix is also provided. Future reading, dance films, and music selections are also included. Although this source lacks clarity towards the definition and term of creative when used, Espenak's ingenious creation of diagnostic tests are an example of inspirational development within the creative arts therapy field. This literature is a great source for DMT students and teachers.

Evan, B. (1945). *Packet of pieces by and about Blanche Evan*. San Francisco, CA: Blanche Evan Foundation.

#### **Author Information**

Blanche Evan, a founder of dance/movement therapy and practitioner for over thirty years, developed her original approach focusing on dance as therapy for the neurotic urban adult (Levy, 2005). She also specialized working with children using "creative dance", and published over ten articles related to this subject.

#### Summary:

Evan discussed her major interests and initial inspirations as she emerged from a dancer to a performer to a choreographer using dance for education and therapy purposes. Evan's major interest was using dance improvisation as a way to draw out emotional and creative potential. Although she does not define the term creative itself, Evan used the concept of "creative dance as therapy" to describe her developed approach. Evan's career path, academic work, and various areas of experience/specialization within dance, creative movement, and dance as therapy were discussed. The differentiation between structured modern dance and her development of using "creative dance as therapy" was distinguished. Evan's theory was heavily influenced by Bird Larson, as well as concepts from Adler, and inspired by the overall connection of mind and body. Evan's "creative dance as therapy" interventions incorporated techniques which involved a body warm-up, body postural work, coordination, rhythm, improvisation, spontaneous body actions, and verbalizations. Evan found ways within her methodology to help her participants express individual creativity through dance and creative movement. Central to Evan's creative DMT approach was the use of in-depth improvisation through expressive movement.

#### **Other Considerations**

The combined material on Evan's techniques provides clear support towards her "creative dance as therapy" method and system. Evan believed that dance was a natural intervention for humans to integrate to reunite the body and mind. She described her approach as useful to the normal neurotic urban adult to adhere to the natural ways of expression and explore the supressed/repressed feelings and emotions through the use of creative dance. The resource provides explicit discussion towards her approach in using "creative dance as therapy". The nature of the discussion included various case-examples, personal communications, interviews and structured information of examples of her method and techniques. Students, teachers, and emerging professionals will benefit from this collection of work. This collected work lays a groundwork for the professionals in the field of DMT. As a founder of the field, Evan developed this source which will remain a reliable resource towards the history and beginning development of DMT. Gordon, A. J. (2014). Focusing on positive affect in dance/movement therapy: A qualitative study. *American Journal of Dance Therapy*, *36*(1), 60-76.

#### **Author Information**

Amanda Gordon, MA, LPC, R-DMT, CACII, completed her Master of Arts in Somatic Counseling. Along with her background in DMT, Gordon is also a level 2 Certified Addiction Counselor and has training in EMDR and Sensorimotor Psychotherapy.

#### Summary

This was a qualitative research study, which included semi-structured interviews with three dance/movement therapists who conduct DMT sessions with adults while consciously and unconsciously addressing positive affect. Gordon addressed several different sources of literature and background research that explained different ways therapists have tried to help clients achieve not only a reduction in symptoms, but also an increase in frequency of positive states in their lives. The literature review addressed positive affect, trends in DMT, body psychotherapy, and effectiveness of various interventions. Thirteen themes were discovered within the data collection under four categories: therapeutic interventions, therapeutic intentions, goals, and client/therapist attributes.

Interventions incorporating both verbal and nonverbal techniques seemed to directly encourage positive affect. Many of the creative movement interventions included humor, play, and light teasing. For example, the therapists intentionally used silly movements, such as pretending to fall or making "goofy" faces. Other interventions were facilitated to evoke a positive movement memory, using sensory experiences, props, and embodiment. Movement interventions included broadening range of movement, expanding kinesphere, and exploring efforts and shapes. The findings within Gordon's data collection showed that therapeutic

interventions and intentions provided the foundation for positive affect. One theme discovered within an intervention revealed that creative relationship building can help clients develop self-compassion and increase self-knowledge, while developing an ability to creatively self-reflect. For example, co-creating a dance, art work, or play (tossing a ball or sharing a jump rope) connected clients through collaborative creative experiences in the development of relationships with self and others. Although creating is a theme highlighted most in the interventions and intentions, the term creative does not appear explicitly present in the attributes of the therapist.

#### **Other Considerations**

This qualitative research study sought to understand how three dance/movement therapists intentionally implement different interventions to address the expression of positive affect within adult DMT group sessions. The authors identified significant limitations to the study as small sample size and lack of diversity with each participant. Gordon's research question was influenced by the literature provided within the article based primarily on the theoretical framework of positive psychology and dialectical behavior therapy. The author addressed a variety of themes that emerged from the interview data. Gordon thoroughly explained several different therapeutic interventions that have been shown to evoke positive affect. However, although the article explained the data collected through the interviews, including a description of interventions, attributes, and intentions, the author did not explicitly discuss the dance/movement therapists' perspectives on the actual development of the innovative interventions; they were described explicitly as unique and creative. Overall, this study speaks to the effectiveness of a qualitative methodology for building an understanding of DMT interventions used to help evoke positive affect.

Jorba-Galdos, L. (2014). Creativity and dissociation: Dance/movement therapy interventions for the treatment of compartmentalized dissociation. *The Arts in Psychotherapy*, 41(5), 467-477.

#### **Author Information**

Laia Jorba-Galdos, PhD, MA, R-DMT, has over 10 years of combined experience in creative movement and counseling with group facilitation and teaching.

#### **Summary**

This research article explored the clinical implications for treatment of compartmentalized dissociation (CD), while investigating the relationship between creativity, DMT, and CD. Jorba-Galdos addressed the relationship between creativity and CD, and attributed the use of DMT interventions to help when working with children. The author presented several benefits of using DMT approaches, and proposed that creativity used within DMT interventions can help reverse functional impairment as a result of CD and trauma. The author discussed that creative movement interventions which incorporate nonverbal and authentic movement techniques can provided a means for the expression of what was not able to be verbalized. Jorba-Galdos explained the benefits of using the body and improvisational movement, and provided examples of DMT interventions when working with this population. Creative DMT approaches were implied in the following ways: anatomical functionality and body integration, grounding and regulation techniques, and re-enactment of traumatic memories through the use of symbolism and metaphors. Jorba-Galdos stressed that creativity (although not clearly defined) can facilitate the healing process-improving body image, children's communication, and self-expression-for those who experience CD.

### **Other Considerations**

The article thoroughly explored the connections between creativity and CD, discerning both subjects and providing insight from additional researchers. The author focused on DMT interventions to address specific tasks in the treatment of CD, and expanded support by referencing trauma informed frameworks integrated within the DMT interventions. Among those interventions, the author delineated the use of creative dance and movement approaches such as using body action techniques, imagery, and metaphors to identify changes. The article also provided a detailed way to adhere to building a trusting therapeutic relationship and facilitating the therapeutic process within specific settings. Additionally, this article described different approaches, techniques, and DMT interventions that were identified as creative to help restore unfulfilled needs for those experiencing CD, and is a strong reference due to the multidimensional lens of the author as well as the referenced support within the context. Kashyap, T. (2006). *My body, my wisdom: A handbook of creative dance therapy*. New Delhi, India: Penguin Books.

#### **Author Information**

Tripura Kashyap, MA, is a creative movement therapist, dance performer, teacher, and choreographer based in Hyderabad, India. Kashyap received a degree in classical dance, and an MA in psychology. She has training in martial arts, yoga, and DMT. She is co-founder of the Creative Movement Therapy Association of India (CMTAI), and has written books, articles, regarding dance, culture, and creativity.

#### Summary

The book is divided into three sections focusing on theoretical, philosophical, and practical aspects of dance and creative dance as a therapeutic discipline. An overview on structured movement activities and a step-by-step guide of creative dance therapy interventions are included. The author highlighted various definitions of dance therapy, and provided examples and illustrations of assessments and questions to consider when facilitating creative therapy interventions with various populations in group settings. The author also included creative activities and approaches from Indian movement traditions along with a list of suggested music options, although she did not clearly define the term creative. Kashyap discussed the therapeutic aspects of dance, creative dance therapy, and the act of creating one's own movement. Case examples regarding specific populations using dance as a therapeutic modality are included in the second section. Structured sessions, movement props, and music suggestions are included. Kashyap also suggested trainings for facilitators and offered resources to further DMT research.

#### **Other Considerations**

The content throughout this book is largely related to creativity due to the explicit references describing the activities as creative. Kashyap provided a multitude of topics related to interventions that can be useful to people of various ages and levels of functioning and abilities, which is a major strength of this book. Layered in the content is the author's multicultural lens, which can broaden the reader's knowledge about how creativity is discussed within different settings and traditions. This book incorporates detailed descriptions of hundreds of movement activities and games, which are described by the author as creative. The illustrations readily support the detailed dance therapy interventions described within the text. Kashyap also identifies creativity when providing examples of DMT groups, and describes with full detail various ways to set and start a group session. The descriptions of interventions include creative ways to facilitate introductions, warm-ups, and the session goal. The examples include techniques that relate to: breath, movement, body awareness, body scans, body rhythms, spatial awareness, and the use of props. Hundreds of different examples are presented. The case examples are cross-referenced throughout the book, offering readers an easy method for identifying what activity is recommended for specific populations.

Another strength of this book was the detail regarding assessment. The author provided questions and considerations when making individual and group assessments. Also, included in the book is a list of current global training programs and further readings on DMT. While the author appears to present knowledgeable information regarding dance, creative movement, and dance therapy throughout the entirety of the book, there is not a clear distinction between DMT and creative dance as therapy. The author stated having DMT training; however, does not claim any type of DMT credentialing, which limits the credibility of her work when referencing DMT.

Kornblum, R., & Halsten, R. L. (2006). In-school dance/movement therapy for traumatized children. In S. Brooks (Ed.), *Creative arts therapies manual*. 144-155.
Springfield, IL: Charles C. Thomas Brooke, S. L., & Kornblum, R. (2006).

#### **Author Information**

Rena Kornblum, MCAT, BC-DMT, DTRL, is a dance/movement therapist with over thirty-five years of experience, specializing in prevention work in elementary schools. She serves as the Executive Director of the Hancock center for Movement Art and Therapies where she has developed violence prevention programming for families and children. Kornblum has published multiple books, training manuals, and peer reviewed articles, as well as produced activity videos.

Robyn Lending Halsten, M.A., BC-DMT, DTRL, has been working in the DMT field for over 20 years with adults, adolescents, and children dealing with trauma. Halsten published *Disarming the Playground: Violence Prevention through Movement* with Kornblum, and has presented her work nationally.

#### **Summary**

The chapter discusses the impact of DMT with students in a school setting dealing with trauma. An overview of trauma and DMT are provided, along with specific therapeutic techniques that are used, which are described in detail and illustrated in photos. An overview of the theoretical background of DMT, the effects of trauma on children, and the integration of DMT in a school setting are discussed. The authors highlighted details of collaborating with a school, which included identifying who might need DMT services the most, addressing confidentiality, establishing an intake process, and developing requirements for a successful group. The principal, social worker, school psychologist, and other staff decided who may need

the services the most. The concept of confidentiality was emphasized, along with the process of disclosure regarding therapy. The authors discussed the process of intake, which included gathering information from the parent and child regarding problem areas, past trauma, strengths, and weaknesses. The DMT groups were closed, and met once weekly for 60-90 minutes throughout the entire school year, ranging in size from two to eight children. Details of the general group format and goals were listed and described in bullet format. Case studies of children experiencing symptoms of trauma, such as disassociation, hyperarousal, attachment issues, depression, and anger, provide explicit examples of interventions used within sessions.

The authors discussed how when working through DMT interventions, facilitators must create a strong foundation in order for students have the opportunity for spontaneous and creative responses to emerge. Although the authors did not go into detail in defining or expanding the phrase *creative responses*, it can be implied from the context that creative responses emerge when the DMT interventions are provided. Authentic movement and emotional responses can emerge; however, the authors fail to define and clarify descriptions of the term. However, they include examples such as active fantasy games, which helped explore matching posture and mood; body attitude (concave or convex); use of breath; level of physical energy; self-touch; eye contact; facial expression; and spontaneity. Using a strengths-based approach, Kornblum and Halsten explained that when the therapist is fully present while facilitating an intervention, original and spontaneous responses emerge in therapy from the clients. The authors discussed that there is no wrong way to be creative, as long as it is safe. Group guidelines for safety and confidentiality are discussed and created by the children attending the groups. Halsten and Kornblum elaborated on the concept of the collaborative relationship between the therapist and clients as an important way for the clients to unfold their trauma and create their own bonds with

themselves and others during the DMT interventions. The authors pointed out that the children depend on predictable routines. Generally, five parts are included within each of the DMT sessions: (1) opening ritual; (2) verbal/nonverbal check-in; (3) movement warm-up; (4) theme, creative movement story; and (5) snack and verbal processing. Several creative treatment approaches are bulleted at the end of the chapter, which provide the reader with a clear and vivid understanding of specific ways to approach movement and therapeutic techniques ranging from acting out feelings to devising dances of resilience.

#### **Other Considerations**

This chapter was strong in the sense that readers can understand the essentials a therapist must consider when working with children in school settings dealing with trauma. The creative interventions were explicitly described within the case examples, illuminating ways to address various issues, such as depression, as well as finding safety through creativity. Although the authors touched on the healing process as non-linear, the creativity aspect was not explicit throughout the entire chapter. In the conclusion of this chapter, the authors explain how creative responses can emerge, as well as frequently use the term creative; yet, they do not explicitly define creativity/creative responses. Kornblum and Halsten emphasized that there are unlimited techniques and approaches that can be used to evoke creativity within DMT interventions.

Levy, F. J. (1988). Dance/movement therapy: A healing art (2nd ed.). Reston, VA: National Dance Association, American Alliance for Health Physical Education, Recreation, and Dance.

#### **Author Information**

Fran Levy, PhD, BC-DMT, is a dance/movement therapist, artist, dancer, writer, and psychodramatist. Her work, of over 30 years, focuses on releasing the creative process in individuals. She has authored and edited DMT books that have been translated into Korean and Chinese, and are used as textbooks for graduate and undergraduate programs in DMT throughout the US and abroad.

#### Summary

In chapter 6, *Alma Hawkins: Humanistic Psychology, Imagery and Relaxation*, Levy shared the theory and methodology of dance/movement therapist pioneer Alma Hawkins, along with her major contributions within the field of DMT, as well as her primary influences. Hawkin's influences included therapists, artists, choreographers, actors, and movement educators. Hawkins used components of movement—energy, space, and time—and incorporated different ranges of flexibility and patterning to provide opportunities for new experiences and perception. Hawkins believed that various relaxation techniques are highly significant factors to perception. According to Levy, Hawkins felt that achieving total relaxation enables a release of anxiety and tension. Hawkins discussed that relaxation can result in discovery of one's personal creativity (which was not defined) and natural flow, which she described as authentic movement. Hawkins' theory states that if a person can get in touch with various levels of consciousness, he or she can respond with more imagination and spontaneity; thus, more creativity.

Hawkins described her theoretical model as a "growth model" (p. 75), and believed that growth happens differently for each client. Hawkins' growth model incorporates creative movement experiences, which are described as basic movements such as polarities of different levels in space, speed of time, and form of energy flow. Hawkins discussed how this creative experience can lead to an enriched life of harmony. Hawkins included creative interventions within her methodology, incorporating guided movement experiences, verbal and/or nonverbal support, and breath. Her interventions involved movements which were mostly motivated by abstract, concrete, or personal imagery. Hawkins integrated these concepts of personal thoughts with elements of dance and imagery into her formal healing experience along with humanistic psychology. She facilitated interventions using verbal discussions, imagery, and movement. Hawkins never interpreted or described the client's movement, but provided support towards each aesthetic and authentic movement. She encouraged individuals to connect with their innerfelt sensations, feelings, and emotions. Hawkins supported the revelations of the clients during the movement experiences, and believed that the process of connecting to inner felt sensations and emotions leads to self-realization and new insights, resulting in a more integrated individual.

#### **Other Considerations**

The chapter is written for DMT practitioners, but the content is also useful for the larger therapeutic community as well as educators, students, and anyone interested in expanding their knowledge of DMT. Overall, this chapter is strong and useful for educational and research purposes pertaining to the creative process, humanistic psychology, concepts of mind-body integration, and the roles of imagery and relaxation in influencing creativity.

Levy, F. J. (1988). Dance/movement therapy: A healing art. (2nd ed). 73-76. Reston, VA: National Dance Association, American Alliance for Health Physical Education, Recreation, and Dance.

#### **Summary**

In Chapter 8, Pioneering Literary Contributions, two important pioneers of DMT Franziska Boas and Elizabeth Rosen are introduced, and the first literary contributions to the DMT field are discussed. The chapter is divided into three parts: Franziska Boas seminal concepts, Elizabeth Rosen, trial and error, and dance therapy study. Each section summarized the work and articles related to dance therapy in 1941. Franziska Boas published an article in 1978 titled "Creative Dance" which discussed her dance therapy techniques with children. Although a creative dance teacher, she was also practicing dance therapy at Bellevue Hospital in New York. Boas creative approach towards dance therapy was influenced by the environmental changes. She integrated psychological concepts and therapeutic goals and used music and sound to guide original self-expression. Techniques discussed within this chapter, which Boas' deemed creative, are movement improvisation, dramatic play, role playing, verbalization, and projective technique was influenced by Bird Larson, along with Wigman's approach. However, Boas was also inspired by her father and eventually developed her own approach from the integration of her life experience and inspirations and her original roots in modern dance. Boas believed dance was an expression of the human spirit. The second section included Rosen's research findings towards patterns of reactions towards her patients in dance therapy. The details of findings were listed and explained within the section. Her study was created long before DMT was recognized profession since 1952. Her technique included collaboration with professionals, willingness to experiment, and improvisation, free association. The final section included a dance therapy

study conducted in 1957. The findings identified 5 uses of movement. Movement as creative expression was discussed as helpful.

#### **Other Considerations**

This chapter provides insight towards how Boas described creativity, and explained how "Creative Dance" emerged from the integration of her experience of modern dance into a psychotherapeutic modality. Creative movement and creative dance started to merge at first through research and then through working with dancers. A new form of expression through creative dance was integrated through "the art of dance and the science of mental health" (p.94). Boas saw dance-as-art and dance-as-therapy with no separation. Boas' influences towards changing the view of creative dance and dance in psychology is explicit within the text. Rosen's research contribution to the discipline is essential to the influences towards the development of the DMT field. The study included insight towards the creation of the historic research, although created, creativity was not explicit discussed throughout the chapter. This chapter is a lasting reference for the history of DMT, and provides a solid resource for exploring creative dance integrated both as an art and a science for mental health.

Lewis, P. (1993). *Creative transformation: The healing power of the arts*. Wilmette, IL: Chiron Publications.

#### **Author Information**

Penny Lewis, Ph.D., ADTR, RDT, was a dance/movement therapist and drama therapist with a private practice. She was trained in Jungian analysis, taught graduate courses in the arts in psychotherapy field for over twenty years, and authored several books related to creative arts therapies.

#### Summary

This book is a compilation of theories of analytical psychology, creative arts therapies, developmental object relations, and Gestalt and Jungian analysis. Examples and applications of these theories are explicitly described throughout the text. Lewis provided picture illustrations, several models/tables, and personal experiences depicting therapeutic interventions. The book is divided into three sections and twelve chapters, all of which are layered with the influential work of Jung, Mahler, Winnicott, Masterson, and Salant-Schwarts. Through these inspired theorists and their theoretical frameworks, Lewis described how creativity and expressive art can be utilized within therapy. She explained her psychotherapeutic technique as simple and nonrestrictive to allow for full expression. Included in her approach is a technique which involves healing through the embodied experience using a "creative imaginal realm" (p.174). Lewis described the creative imaginal realm as a key component that guides the therapist's and patient's journey towards transformation, healing, and connecting. The creative techniques that she described as useful to patients as well as herself include: authentic and improvisational movement, sound, drama, embodiment of dreams, re-enactment of past experiences, rechoreography of that which heals, and expression of the imaginal inner journeys.

#### **Other Considerations**

Lewis stated that the purpose of this book was to "stimulate your liminal space, your creative process in service to healing and transforming others" (p.174), which she successfully accomplished within these twelve chapters. Creative process is implied in the literature as the process in which an individual becomes resourceful and inventive towards healing and transforming. The book includes life experiences and examples of approaches that are culturally relevant; its content has served as an enduring foundation for study in this field for over two decades. Each theoretical framework provides a distinctive quality towards the creative transformation process in therapy. Lewis described the process of facilitating therapeutic interventions itself as having creative qualities. Each approach to healing implements creativity. Lewis provided strong references from notable theorists across several psychotherapy approaches, and included historical stories, myths, and personal experiences, which support her creative approaches towards therapy. This strongly written text is a powerful tool for anyone who is searching for a clinical treatise. The expansive index and ample amount of illustrations strongly serve to organize and visualize the content of the text. Her experience and stories helped illuminate her approach towards therapy and the creative healing process. Overall, this book is a valuable resource.

Loman, S. T. (2005). Dance/movement therapy. In C. A. Malchiodi (Ed.) *Expressive therapies*, 68-89. New York, NY: The Guilford Press.

#### **Author Information**

Susan T. Loman, MA, BC-DMT, NCC serves as director the Dance/Movement Therapy Program at Antioch New England Graduate School. She has co-authored books, published book chapters and peer reviewed articles, served on the editorial board of The Arts in Psychotherapy and the American Journal of Dance Therapy, and presents on the Kestenberg Movement Profile and DMT nationally and internationally.

#### **Summary**

In this book, Malchiodi collaborated with nine leading authors who specialize in different modalities related to expressive therapy. The beginning of the book includes a brief history of expressive therapy and emphasizes the positive impact of the creative spirit on the mental health field. Malchiodi shared the term "creative space," however failed to explicitly elaborate on the phrase and left it for interpretation. Malchiodi implied that "creative space" involves every form of expressive therapy, and it is the primary commitment of each expressive therapist to engage emotions in a direct and physical way, generating creative energy (which was not defined) as a form of healing. In each chapter, the authors provided a comprehensive description of the expressive arts modality, clinical and theoretical approaches, assessment and evaluation methods, case studies, and descriptions of how to implement interventions.

In her chapter, Loman discussed the importance of DMT as a "creative and actionoriented way to help remove obstacles, encourage new behaviours, symbolically communicate hidden emotions, release anxiety, and serve as a vehicle to integrate body, mind and spirit" (p.68). Loman discussed creativity within DMT as a means of helping individuals capitalize on

strengths and feel a sense of connection. Loman discussed how DMT techniques that utilize creative action-oriented interventions involve spontaneity and movement interactions. Furthermore, clients can discharge feelings using creativity, in the form of improvised movements, within DMT sessions through developmental movement and non-verbal approaches. The case studies in Loman's chapter draw upon various approaches to inform the work of DMT, including Chace, Kestenberg, Kornblum, and Laban. Loman emphasized that clients will grow and change when working through creative action. Therefore, Loman implies that creative action—improvised, spontaneous movement interventions—will cause change within the therapeutic relationship and/or healing process.

#### **Other Considerations**

This chapter clearly outlined topics of history, theoretical approaches, assessments, and case studies. It was a condensed version of how DMT can help individuals reconnect with their bodies. The explicit examples and references included provide strong support for future research and readings. This chapter explicitly discusses creativity within the case examples. This reference is a great source for exploring how creativity can impact individuals through the use of expressive therapy, such as DMT.

Meekums, B. (2000). *Creative group therapy for women survivors of child sexual abuse: Speaking the unspeakable*. London, UK: Jessica Kingsley.

#### **Author Information**

In addition to this book, Bonnie Meekums, MA, also authored *Dance Movement Therapy: A Creative Psychotherapeutic Approach*. Meekums has published many articles in peer-reviewed journals and is co-editor for the British Journal of Guidance and Counselling. As a dance/movement therapist, Meekums has taught DMT at Bretton Hall College in West Yorkshire, England, and spent 12 years practicing DMT at the National Health Service (NHS) in the UK.

#### Summary

In this book, Meekums presented, but did not define, creative interventions, techniques, and movement exercises for trained and qualified dance/movement therapists, psychotherapists, and other creative arts therapists and mental health professionals. Meekums mainly focused on the presentation of practical strategies for working with groups of women who have experienced sexual child abuse. Meekums considered theoretical issues, patterns of recovery, false memory syndrome, and the overall nature of the abuse before she presented her creative interventions. She outlined how to facilitate and manage different types of groups and provided a full detail of creative exercises for various sessions. Each intervention was successfully trialled in multiple professional settings and used as a cross modality of therapy approaches for those working with trauma and sexual abuse survivors.

#### **Other Considerations**

Meekums described in detail the structure of various movement exercises. Creative approaches were explained when working within sessions with those who have survived the experience of child sexual abuse (CSA). Meekums described in detail various modalities within the creative arts therapies. She incorporated successful techniques along with charts evaluating existing group therapy approaches for women survivors of CSA. Meekums provided research studies, case examples, and literature sources that lend support to the benefit of creative dance therapy sessions for women survivors. Although the interventions were labelled creative and the approaches towards CSA were informative, application towards this very specific population can be viewed as a limitation towards the generalizability of the techniques and approaches provided. Nathan, A. A., & Mirviss, S. (1998). *Therapy techniques: Using the creative arts*. Ravensdale,WI: Idyll Arbor.

#### **Author Information**

Ann Arge Nathan, a clinical therapist, educator, author, and consultant obtained a degree in Recreational Therapy, taught at San Jose and San Francisco State Universities, and practiced at Langley Porter Neuropsychiatric Institute at the University of California.

Suzanne Mirviss, MA, obtained her master's degree in Recreation with an emphasis in Therapeutic Recreation, and has received training in drawing and painting. She has taught at both San Jose State and San Francisco State Universities, and has over 20 years of experience working in the creative arts, therapy, and recreation fields with the elderly and those with physical disabilities.

#### Summary

This book can be viewed as a manual or fundamental guide for therapists and educators who are interested in learning practical interventions and activities using the creative arts in both therapeutic and educational settings. The book has two main sections and is comprised of 15 chapters related to the concept of creativity within the creative arts. The authors define creativity as elusive and similar to concepts of love and justice. The definition is described by citing a well-known psychology professor, Mihaly Csikszentmihalyi, who explained that creativity involves the concept of novelty. The first section focuses on providing therapists with creative art fundamentals when facilitating a therapy group. This includes the elements of creativity; the processes, personal qualities/traits that foster it, the nature of the flow of creativity, and the blocks of creativity. Other fundamentals are the expression of creativity—playfulness, removing attitudes, and having fun—and the roles of the therapist. The second section includes a plethora of what is described as creative art activities/interventions, which have been used with both clients and students. This section describes the modality used, considerations and suggestions for therapists, and in-depth descriptions of the interventions. The authors provide a six-page list of activities in the beginning of the book, which allow for easy referencing when searching for specific approaches. The benefits of the creative arts are bulleted and explained.

In chapter 13, the authors specifically explained goals of DMT, the process of assessment and observation, and included detailed descriptions of what the authors described as creative activities and approaches used in DMT. The authors explicitly explained how the creative experience using DMT can help clients gain a greater sense of physicality and control. The authors explained how assessments and observations are used to evaluate those in a DMT session, and provided bolded examples. Warm-up ideas and activities are discussed within this chapter including nonverbal and/or verbal techniques, improvisational movement, contact partner explorations, mirroring, eye contact, locomotive movements, stretching, and gestures. The authors noted that creativity is used within each activity to help the participants express their inner feelings.

#### **Other Considerations**

The development of this book initially started from Ann Arge Nathan's creative ideas and notes, which comprised the bulk of this book. Although it is clear that there are two authors, it should be reiterated that Nathan's teaching partner, Suzanne Mirviss, filled in the missing information after Nathan's death. Both Nathan and Mirviss received education and training in the creative arts, therapy, and recreation from an accredited university; however, the publisher acknowledged that several unnamed people contributed to the material which helped complete this book. This aspect alone may be viewed as a concern, because it calls into question the credibility of some of the sources and therefore, the validity of the content. This is a notable concern, which crosses an ethical boundary. Without proper education and experience within the clinical field, contributing to content outside of one's scope of practice can be viewed as unethical, not to mention the harm it may cause within therapy. If incorrect information and/or misleading suggestions is interpreted as valuable and reliable, there is potentially a higher risk towards damaging the overall process of therapy. The authors clearly explained how creative experience, when using improvisation and novel activities, can help clients gain a greater sense of physicality and control. The authors provided bolded activity examples, but failed to address and explicitly distinguish what examples are useful towards therapy versus processing activities.

The publisher addressed this concern through disclaimers, stating that they are in no way responsible for any adverse effects from the information and/or recommendations provided in the book nor are they responsible for undetected errors or misunderstanding of the content. The text also revealed that the information and knowledge discussed in the book is not universal or absolute. Although the authors explained several benefits and values of experiencing the creative arts, this can be viewed as a generalization of all creative arts, which can be seen as a weakness, considering the content is not rigorously supported or cited. The authors also listed several specific benefits related to DMT, but failed to explicitly relate the concept of creativity to each of the goals/benefits separately. This generalization offers little validity of this source.

Payne, H. (1990). *Creative movement & dance in group work*. Bicester, Oxon, United Kingdom: Speechmark.

# **Author Information**

Helen Payne developed the first nationally validated training for DMT in the UK at St. Albans. Payne was the co-founder and served as chair for the Association for Dance Movement Therapy. She is a senior registered dance movement psychotherapist with the Association for Dance Movement Psychotherapy/DMP, and is based at the University of Hertfordshire in London.

## **Summary**

This book is comprised of 180 activities for creative movement and dance. The book is a thorough reference guide to assist practicing professionals, teachers, counselors, and therapists in developing inspirational ideas when working with groups. Most of the content focuses on activities and techniques, described as creative, which may be used for professionals who work with difficult, disturbed, or disabled people within group settings. Payne's writing describes tested and tried techniques that are both practical and imaginative. She emphasized that the book was not intended to be a "how to manual," but a helpful reference guide for the development of new innovated approaches. According to Payne creative movement aims to help an individual make decisions on how to proceed, decisions about which one feels good and uses one's own creativity, described as a healing process. Throughout the text, she emphasized that there is no one way to practice as a therapist.

Payne organized her book into four sections relating to DMT: historical/background information, practical and theoretical issues, activities, and information/training. Layered throughout the sections, she provided illustrations, charts, and referenced work from previous

content within the book or recent research. In the first section, creativity is explained as a concept interrelated with growth and health. Payne declared her belief that all human beings have the potential to be creative. Most of the book referenced activities and creative techniques that can be used in DMT work relating to human relations, self-awareness, and developmental processes. Payne stressed that movement as a medium is the fundamental form of DMT. She also highlighted non-verbal communication, creative dance improvisations, and unconscious free association movement as the significant techniques used when working in DMT. Throughout the book, she integrated theoretical approaches, developmental movement processes, non-verbal communication, and the facilitation of expressive dance using creative activities. Payne described action and reflection as two main approaches that can be help clients grow and function in healthier ways.

# **Other Considerations**

One strong aspect of this book is the author's ability to distinguish the difference between dance as an art form and dance as movement in therapy. It is an important aspect to include within the material due to the misconceptions of the concepts. Dance as an art focuses on performance, educational concerns, or exercise purposes. Dance as therapy ignores aesthetic and form, and focuses on psychological, sociological, and historical aspects. This clear distinction can provide the reader with a greater sense of knowledge when using the information provided regarding group facilitation. The layout of the book is formatted in an organized structure and the listed index provides a quick guide to help accommodate the topics of interest regarding different approaches.

Overall, this book has strong content that is related to the concept of creative interventions; however, the language used within the text implies interventions as activities.

This term is less formal when considering the professional clinical field. In today's clinical setting, the term activity can be seen as reductionist, instead of a therapeutic intervention. Although the author provided many suggestions when implementing the activities within practice, the term activity itself appears less clinical with more emphasis on team building. However, one potential strength of this book is that many of the activities can be used as just that, activities as well as intervention ideas, and the scope of the book is geared towards a larger audience than just those working in a professional clinical setting. The difference between an activity and intervention is not described within the content, but it can be inferred that this manual provides activities that involve processing and reflection. The overall organization of the book supports ease of application. Each activity is divided into four sections (warm up, introduction to theme, development of theme, and warm down), and includes safety guidelines, titles, populations, equipment suggestions, and additional outcomes. This information was displayed throughout the section clearly and organized in a visually easy to read chart.

Philpott, E. (2013). Moving grief: Exploring dance/movement therapists' experiences and applications with grieving children. *American Journal of Dance Therapy*, *35*, 142-168.

## **Author Information**

Ellen Philpott, MA, R-DMT, is a marriage and family counselor and a dance/movement therapist who has worked in hospice, hospital, and community settings.

#### Summary

This article discussed how creative art therapy interventions, such as DMT interventions, may provide several benefits towards the healing process with children who are suffering from grief of a death loss. The literature review included topics such as: children's grieving processes, creative arts therapy with grieving children, skill sets of a dance/movement therapist, somatic symptoms of grief, and DMT suggestions for working with grief. It is a qualitative grounded theory study, which used semi-structured interviews to explore the experiences of three dance/movement therapists who worked with children grieving a death loss and how their experiences informed their choice of expressive clinical interventions. All interviews were recorded, transcribed, and coded through a multi-layered data analysis process, including a summary of themes regarding both experience and choice of interventions. The results yielded four categories, each with their own set of themes. Category one focused on the emotional and somatic responses of the dance/movement therapist relating to countertransference. Category two focused on the grieving child relating to the feelings/expressions. Category three focused on the therapeutic relationship and containment (space, safety, and support). The final category focused on movement interventions towards grief, which were identified as creative.

The results of the study found that dancing in honor of the loved one often incorporated the use of props, play, rocking, and singing in interventions. The therapist's body awareness and

self-regulation were highlighted within the results as common themes. Creative interventions were discussed, and the description implied that techniques such as compassionate self-talk, using breath, coming to stillness, attuning to body sensations, and grounding were common themes that were evident in the interventions. Lastly, the study discussed the importance of a knowledge and skill set used within DMT sessions: observation skills, knowledge of developmental movement needs, understanding the expression of grief and its impact on the body, and a new way to self-regulate.

# **Other Considerations**

One of the strengths of this article is the presentation of specific DMT techniques for those suffering from grief or loss. These include witnessing, active imagination, fantasy, education of bodily experience, and a variety of other movement techniques. Another strength was the presentation of themes and categories that were found within the DMT interventions with children suffering from grief and loss. The article goes into detail to discuss each category and theme and its relation to the research questions presented. However, several weaknesses were also present in this study. First, it lacks literature specifically addressing work with grieving children within the specific age groups. Even though the study incorporated early childhood and adolescence, it did not consider grouping interventions developmentally given that grief and bereavement are processed in a multitude of ways based on different developmental stages. Another weakness of this study is the sample size. The breadth of this research was limited due to the number of participants, minimizing the generalizability of the results.

Scharoun, S. M., Reinders, N. J., Bryden, P. J., & Fletcher, P. C. (2014). Dance/movement therapy as an intervention for children with autism spectrum disorders. *American Journal* of Dance Therapy, 36(2), 209-228. doi:10.1007/s10465-014-9179-0

## **Authors Information**

Sara Scharoun has a PhD in kinesiology and neuroscience and has studied and researched topics such as developmental psychology and neuropsychology, psychomotor behavior, motor development, and physical activity. Nicole Reinders, PhD candidate for kinesiology and neuroscience, has research expertise in performing arts, abnormal psychology, and behavioral science. Pam Bryden, PhD, is Chair of the Kinesiology and Physical Education Department at Wilfrid Laurier University, West, Waterloo, ON in Canada. Paula C. Fletcher, PhD in Health Studies and Gerontology and faculty at Wilfrid Laurier University, Waterloo, has expertise in public health, pediatrics, and allied health science.

# **Summary**

This journal article provides published literature surrounding the topic of DMT as a creative intervention for children with Autism Spectrum Disorder (ASD). Although the authors state DMT as a creative intervention, a definition is not included. The authors discuss ASD as one of the most common developmental disabilities in children. They include various sources explaining findings and research on the diagnosis and etiology of ASD, along with information discussing the various abilities of children with ASD. The authors discussed limited research concerning the physical activity for children with ASD and mention only some of the interventions that have been used or observed to help improve behavior. The article includes the work of historic DMT founders and their various techniques and interventions used with patients with ASD, highlighted within case studies. For example, sound, locomotive movements, body

actions, rhythm, mirroring, and patterning of rhythms are described as creative within the article. Several assessments and measurements were also described within the article. Various components of DMT approaches were evaluated in the article, including the implementation of the Kestenberg Movement Profile (KMP), analysis and observation of movement and characteristic behaviors, and the clinical score for the Evaluation of Autistic Behavior (ECA-R).

The authors described DMT as one of the more practical and feasible options for therapy for children with ASD based on individual and group case studies presented within the literature. The DMT interventions for children with ASD illuminated are detailed in sections throughout the article and thoroughly described. The authors examined interventions created from dance/movement therapists. The literature presented shows that DMT interventions can have a positive effect on self-adaptive behaviors, enhancing empathy, sharing emotion, and imitating. However, the greatest effect that was observed was the regulation of behavior.

# **Other Considerations**

The strengths of the study include the large amount of literature reviewed as well as the various case studies utilizing DMT interventions, which incorporate imagination, resourceful thinking, and novel ideas with group and individual work. The study included both qualitative and quantitative research findings. Although the information was helpful, one weakness is the lack of connection between the proof of effectiveness, specifically within this population, and incorporating creativity in DMT.

#### **Chapter 3: Summary of Findings**

This thesis seeks to provide dance/movement therapists, emerging professionals, and students with an organized database which examines the existing literature related to creativity explicitly implemented in DMT interventions, approaches, and theoretical frameworks. The main findings from this research revealed many challenges, complications, common themes, personal insights, new information, and future considerations for the field of DMT.

Challenges arose during the process of collecting information regarding creative DMT interventions. Compiling resources for this annotated bibliography proved to be difficult and complicated. The literature revealed equivocal concepts and interchangeable terms, which added confusion to the applicable nature of each resource. Concepts and terms such as approach, technique, method, activity, modality, session, and intervention were often indistinguishable across various resources. This lack of consistency was an obstacle while researching and reviewing resources specifically related to interventions, which was the initial focus of this annotated bibliography. Therefore, three DMT components (interventions, approach, and theoretical frameworks) were included in the central question to provide a deliberate scope of survey during the compiling process. References that included a subject index, table of contents, and list of keywords were helpful in this search; those which included the term creative and/or creativity were considered. Searching for the word *creativity* explicitly within the literature was pertinent to this research in order to survey how professionals in the DMT field implement creativity and interpret DMT interventions as creative.

Resources relating to DMT within the expressive therapy and creative arts therapies fields were limited. Literature that did not describe interventions, approaches, and theoretical frameworks as creative were discarded. Any sources that suggested, but did not directly discuss

creative approaches, frameworks, or interventions were not included. The purpose was to avoid projecting assumptions of how DMT interventions are perceived. Investigating common themes for the delineation of creativity and creative DMT interventions within the literature was arduous and extremely time-consuming. However, after the collected resources were selected, assessed, and reviewed, the findings revealed that creativity is implemented in DMT interventions, approaches, and theoretical frameworks in innumerable ways. Findings revealed that creativity explicitly implemented within DMT literature was inconsistent when referenced in context and increased difficulty and confusion when searching for common themes. However, after multiple weeks of reviewing the literature and analyzing the annotations, several commonalities were discovered.

In the mid-20th century many of the early founders of DMT were influenced by different psychological perspectives. Humanistic psychology emphasized an individual's drive towards self-actualization, and the overall process of realizing and expressing one's own capabilities and creativity. Theoretical frameworks of DMT founders like Hawkins, Espenak, Evan, and Boas were influenced by this new approach and incorporated creativity as self-actualization within their DMT approaches. However, dance/movement therapists Lewis and Payne were influenced by Jung's work when implementing DMT interventions, while Rena Kornblum and Halsten were influenced by a strengths-based approach in the early 21<sup>st</sup> century. The evolution and development of psychological perspectives throughout history appears to have influenced how dance/movement therapists describe and discuss creativity within their DMT approach.

Through analyzing the literature, reoccurring concepts relating to creativity were found. Overall, spontaneity, imagination, and improvisational movement were three common aspects throughout this research. Hawkins, Kornblum and Halsten, and Loman all described the use of

spontaneity as a part of their creative process in developing and facilitating DMT interventions. Philpott, Hawkins, Lewis, and Payne discussed the concept of imagination as a key factor of creative DMT approaches. Malchiodi (2005) noted that creativity impacts clients in more memorable ways than traditional interventions, such as those that do not classify as creative or expressive. The use of art, play, music, movement, enactment, or creative writing empowers clients to use creativity through imagination in more productive ways than other treatment approaches. Mirviss, Nathan, and Lewis discussed improvisational creative movement as a component of their DMT intervention.

Furthermore, creativity in DMT is often related to the therapeutic relationship and establishing a safe space. Halsten and Kornblum discussed finding safety through creative space, and stated that a strong foundation through collaborative support is a way to implement creativity within the therapeutic relationship. Malchiodi (2005) also described how the creative space unites every form of expressive therapy, within which the therapist engages emotions of the client in a direct and physical way as a means of generating creative energy for healing. This creative energy can help individuals capitalize on strengths and feel a sense of connection (2005).

While creativity in DMT can be understood through the incorporation of spontaneity, imagination, and improvisational movement within the therapeutic relationship and a safe, creative space, it is important to note that there are numerous contexts for implementing creativity within DMT. Within these contexts, the term creativity is often interchanged with other terms and defined differently, which can cause confusion. However, from the literature included in this bibliography, it can be concluded that creativity is implemented in multidimensional ways across DMT interventions, approaches, and theoretical frameworks, and

it is instrumental to the work of a dance/movement therapist as well as other creative arts therapists.

Carson and Becker (2003), along with Malchiodi (2005), described expressive therapies as part of the larger realm of creativity in counseling. They proposed that creativity in counseling involves being able to flexibly respond to clients with a variety of techniques and, as such, they encourage creativity within therapy. This speaks to another theme that arose creativity is flexible. One way of fostering this flexibility is for practitioners to cultivate and nurture their own creativity (Carson & Becker, 2003).

The implications that emerged from this analysis emphasize the need for future quantitative and qualitative research on the topic of creativity in DMT. As more practitioners share their experiences specific to their use of creativity, greater understanding of the concept itself and its applications to DMT will be gained.

As an emerging dance/movement therapist my understanding of creativity has evolved and deepened through the process of gathering the literature within this annotated bibliography. The literature demonstrates that experience of others can provide positive change and create new knowledge and opportunities for growth, healing, and self-discovery. When exploring the concepts of creativity and creative interventions within DMT, I examined my personal perspective. I knew how creativity made me feel, what it looked like, but it was difficult for me to explain and define. My main influencers towards learning the concept of creativity evolved from an early age. It was the playful humor that emerged from a curiosity during my exploration of the use of my imagination. Play and humor were frequently both associated with creativity within interventions throughout my research. In addition, spontaneous improvisations and authentic movement are important aspects when defining creativity that appeal to me, and were

also supported in the literature.

I considered theories of the subliminal mind and unconscious thought to be components of the creative aspect within DMT approaches. I reflected on my perspective, and I believe that creativity involves discovering, imagination, resourcing, being open and honest, incorporating playfulness and humor, and having spontaneous action-oriented fun. Creativity is a form of expressing and experiencing self-discovery and self-satisfaction. My definition of creativity has expanded to understand it's multi-cultural perspective and descriptions, shedding new insights on what influences my personal and professional growth and knowledge as well as the similarities and differences within the DMT field that are still difficult to define.

The universal definition of creativity is ever changing and still widely debated. However, it is after this research process that this knowledge provides a sense of understanding the various perspectives of the explicitly used term *creativity* within the field of DMT. Although there is lack of clarity and consistency towards a common definition, defining the term and understanding similar components and new insights toward perspectives of creative interventions will only continue to emerge. Dance/movement therapy is a growing field, and discussions and growth for future research will help strengthen the field. Further research with this topic will help provide dance/movement therapists with new avenues to discuss interventions and new ways to describe their interventions and approaches to those within and outside the field.

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