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Therapeutic Use of Mudras in Dance/movement Therapy with Children in a Partial Hospital

Program: The Development of a Method

Capstone Thesis

Lesley University

May 2, 2020

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Dance/Movement Therapy

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Abstract

Mudras are a codified set of gestures from different parts of the body in Indian Classical Dance and Yoga. Mudras in literary sources often refer to specific hand gestures. The thesis includes research on the use of mudras (hand gestures) from Indian classical dance and yoga in dance/movement therapy (DMT) to yield expressive and healing benefits. The research question explored “*the extent to which mudras enhance self-expression and aid in building coping skills for stress, with children in a Partial Hospitalization Program.*” An intervention was developed by considering the therapeutic implications of mudras and drawing parallels to elements of DMT, narrative therapy and projective techniques. The method was implemented with children between 7-11 years in a partial hospital program in expressive therapy and psychoeducation groups. Expressive therapy aimed at using mudras as a movement-based tool for storytelling and psychoeducation directed participants to build body-based coping skills for stress through mudras. Qualitative data was collected and compared to the existing literature. The themes that emerged from this research included participation, self-expression, comprehension, postural changes and regulatory effects on the body. While this research explored the use of mudras with children in a partial hospitalization program, the use of this method with different populations in different settings are also discussed.

The literature shows need for culturally diverse, codified, movement-based interventions. This study attempted to bridge that gap by exploring the use of mudras in a therapeutic setting and developing a protocol for their use in different settings and with different populations.

**Therapeutic Use of Mudras in Dance/movement Therapy with Children in a Partial
Hospital Program: The Development of a Method**

Yatho Hasta thatho Drishti, Yatho Drishti thatho Manah

Yatho Manah thatho Bhaava, Yatho Bhaava thatho Rasa

—Natyashastra

The journey of training in Indian Classical Dance goes beyond movement and promotes expression and health and celebrates important moments in life. As an Odissi dancer (an Indian classical temple dance from Orissa), my training began with learning introductory movements and observing *Abhinaya*—a dance from the repertoire where a dancer depicts stories using facial expressions and mudras. When I started practicing *abhinaya*, my ability to emote through *mudras* (hands gestures) and facial expressions was challenged. However, the information referenced in the epigraph helped me overcome this challenge. The epigraph translates to “Where the hands go the eyes follow, where the eyes go the mind follows, where the mind goes emotions follow, where the emotion is sentiment is created.” The experience of using mudras to meet expressive needs of the story was not only beneficial for my development as an artist but also served a therapeutic goal for the expressive and emotional parts of self. While I attempted to find the meaning of dance/movement therapy (DMT), I realized the importance this technique from Indian Classical Dance literature, in serving therapeutic means. My intrigue in this technique was reinforced by Vonita Singh (a DMT from India) who uses mudras to sustain mobility in clients with Parkinson’s disease. While concepts from Indian Classical Dance and Yoga are being explored in therapeutic settings, the use of mudras in DMT-related literature is unexplored. Through these enlightening moments and my educational journey, I realized the need for culturally diverse interventions and research in the field of DMT.

Recent years have shown a revived interest in 10,000-year-old practices like Yoga and Indian Classical Dance. Mudras, a technique from these schools of movement has received secondary attention in research. Mudras are gestures of the eyes/neck, hands, torso, feet and the body that are crucial part of these schools of movement. Traditionally, all parts of the body are given importance. However, *hasta mudras* (gestures of the hand) have gained more prominence. The theoretical framework behind the use of mudras in both practices is interchangeable. However, they serve different purposes in application. Indian Classical Dance uses mudras for aesthetic purposes and to depict stories in *abhinaya*. In Yoga, mudras are used with *asanas*, *dhyaan* (meditation) and independently to serve health benefits. Trends have shown a pattern of exploring therapeutic elements in Indian Classical Dance through qualitative research and the effects of mudras on physical health through quantitative research.

Thus far, the majority of research related to DMT has aimed to comply with Western standards of research, causing a lack of DMT research that meaningfully incorporates Eastern traditions. As a result, mudras are examined mostly in relation to yoga and its aesthetic value and are, therefore, under-researched as a therapeutic tool. Mudras have been viewed as a small component in a large framework, indicating a lack of research. Mudras are mentioned in relation to its healing benefits in yoga and its aesthetic and expressive value in India Classical Dance. Further, health is fragmented into physical or mental health, while the roots of Yoga and Indian Classical Dance do not believe in this dichotomy. It is important to bridge the gap between traditional theories and practices to sustain therapeutic nature of mudras. Since the practice aims to serve physical and mental health benefits, it is crucial to mention them in a wholistic manner.

In this thesis, I have attempted to bridge the gap between traditional theories and modern-day practices by exploring the roots and honing on the benefits of practicing mudras in mental health.

The practice has been described through the lens of acquiring a skill. However, I have attempted to derive its use in therapy. Through the research, I have suggested a movement-based intervention to address mental health needs in DMT. The intervention enhances self-expression and aids in building body-based coping skills for stress.

The paper consists of a literature review, exploring the current research on mudras in Yoga and Indian Classical Dance. It further addresses the parallels between mudras and existing modalities of therapy like narrative therapy and theories of mental health counseling. The method describes the intervention, that is designed using the research synthesized in the literature review. The method is followed by the results section, indicating the qualitative observations made when the method was implemented. Lastly, the discussion highlights benefit of the intervention and its shortcomings and proposes ways of adapting the intervention to different settings and populations.

Literature Review: Mudras

Mudras are gestures of the hand, feet, eyes, neck, torso and the body “that facilitate certain energy flows” to enhance wholistic wellbeing (Mohini, 2015, p. 32). The word *mudras* in Sanskrit means “attitude,” “gesture,” “lock” or “seal.” The roots of the word can be traced to the word *mud*, “to delight in,” and *dru*, “to give” or “draw forth” (Carroll & Carroll, 2013). Hirschi (1998) explained mudras or gestures as “an unconscious way of sealing something” (p. 3). “Sealing” often refers to the information that is not communicated verbally but, however, appears in the form of gestures originating in different parts of the body. Meadow and Alibali (2013) stated, “when speakers are explicitly asked to communicate specific information to their listeners, they sometimes express some of that information uniquely in gesture, and not in speech” (p. 5). Mudras are instrumental in non-verbal communication.

When viewed as a movement technique, Indian Classical dance and Yoga have schools of practice dedicated to the use of mudras. They aim to serve aesthetic, expressive and healing purposes in both practices. Mudras can be made using singular parts of the body or involve the whole body. Each mudra has specific meaning or therapeutic value, but when the term ‘mudra’ is used in literature, it often refers to hasta mudras. Mudras of the hand are called *hasta mudras* and are an important tool for aesthetic depiction, communicating and healing.

Therapeutic and Healing Elements from Yoga

Historically, the *rishis* (sages) drew a scientific connection between practicing mudras and one’s physical and mental wellbeing. They theorized the presence of the five natural elements fire, air, ether, earth and water in our bodies in certain proportions. Each finger is representative of one element. The thumb is for fire, index finger for air, the middle finger for ether, ring finger for earth and little finger for water. Carol and Carol (2013) stated, “They taught that any disorders in the body or mind indicates an excess or deficiency in one or more of the Elements” (p. 18). Based on this theory they developed a school of Yoga called *Yoga Tattva Mudra*, which aims at balancing these five elements in our body. There are 72 mudras in Yoga that navigate the balance of these elements present in 72,000 *nadis* (neural networks) in the body. The endings of the *nadis* are present in the fingers. Mudras can be made by pressing fingers in different combinations, which navigates prana (life source) in our bodies (Mohini, 2015). Each mudra activates 1,000 *nadis*, which terminate at the seven *chakras* (centers of nerve endings). There are mudras that directly activate the chakras, hence activating multiple *nadis* at the same time. The Yogic sciences believe that the nuanced act of pressing fingers can heal several ailments of the body and mind as they balance the five natural elements to their supposed proportions.

Recent research confirms science from 7,000 years ago. Ilavarasu, Kumar, Mondal, Nagendra and Srinivasan (2018) conducted a study on the effect of maintaining *prana* mudra during meditation. The experimental group received the intervention on three consecutive days, and the effects were recorded using electro photonic image (EPI). The EPI parameters were higher for the experimental group, showing glowing activity in parts of the brain. Further, the EPI parameters increased within the experimental group from the first day of receiving the intervention as compared to the last day of receiving the intervention. While only the immediate effects were measured, it did highlight the effect of *prana* mudra within our body.

Amba and Muniyandi (2017) aimed at establishing the presence of meridian ending using the electro dermal activity (EDA) method. The results revealed:

“Each fingertip is a terminal of one meridian channel and each fingertip is mapped to a different function. Stimulating the fingertips in the form of mudras has different physiological and psychological effects because each finger on stimulation activates a different neural pathway and thereby activates a different center in the brain” (p. unknown).

The studies indicated biological changes that took place within the body. However, the qualitative changes that are visible to the naked eye were not recorded. Since mudras aim to cause a change in the body and mind, regulatory changes like transitioning to deeper breaths and alignment in posture take place that can be observed in the outer body. The external changes are reflective of changes in the mental state. Laban's (1953/1980) theory of 'humane effort' is reflective of this change. Humane effort is the capability inherited by humans to makes changes in their movement to adapt to the environment, relate to people and avoid adverse effects (Laban 1953/1980). Young (2012) further highlights humane effort as a distinctive quality making

humans different from animals. This phenomenon highlights the human ability to consciously make body-based changes for self-enhancement. Mudras are also a body-based tool that influences changes in the body and mind. The principles of mudras and humane effort have similar effects as they exercise one's ability to create body-based changes voluntarily for enhanced physical and mental functioning.

Expressive Elements of Mudras

Mudras exist as a form of skill in schools of movement from India. Their use for healing has been discussed in the section above. However, they are used for expressive purposes in India Classical Dance. Further they are used in religious practices, as a communicative tool in various cultures and in with children in clinical settings. While mudras specifically belong to Indian Classical Dance and Yoga, they bear resemblance in the form of hand gestures with different people and settings.

Indian Classical Dance

The history of mudras is rich and dovetails well with its use in Yoga. Acharya and Jain (2016) described Indian Classical Dance as a form of Yoga by indicating postural/gestural similarities and spiritual involvement. Mudras are a crucial part of that similarity in creating a union of both the practices. Additionally, mudras from Indian Classical Dance have expressive benefits while continuing to provide therapeutic benefits.

Bajaj and Vohra (2011) describe the emergence of the Sanskrit treatise on stagecraft called the *Natyashastra* by Bharat Muni. The *Natyashastra*, includes extensive literature about uses and meaning of different mudras in *natya* (drama), *nritta* (dancing that carries no meaning) and *nrtya* (dancing with miming and gesticulation) (Vatsyayan, 1967). A dancer uses mudras in the entire repertoire for aesthetic purposes to maintain focus and provide direction for the upper

half of the body. *Abhinaya* is a part of the repertoire that comes from *nrtya*, dedicated to the use of *hasta mudras* in combination with *rasa* (emotions) to commemorate “the significant moments of human life: birth, death, courtship, marriage, victory, defeat and so on” (Carroll and Carroll, 2013, p. 23). The dancer depicts the stories by using mudras, which further facilitate emotional expression and embodiment. They undergo extensive training to gain emotional awareness and learn to externalize this awareness through the practice of *abhinaya*. This practice can be cathartic in nature for various dancers to explore and externalize complex emotions through all stages of life. Vatsyayan (1976) stated, “The gesticulation of the hands is indeed the focal point around which everything else revolves” (p. 236). The literature is indicative of the narrative nature of mudras and its prominence while training to perform *Abhinaya*.

Since mudras take a communicative and expressive form, they are like gestures used in everyday conversation. However, in dance, “this human phenomenon has been uniquely observed, codified, structured and refined into both a science and an art” (Khafizou, 2016, p. 3). According to Bharata Muni’s *Natyashastra* (200BCE- 200CE), there are 67 mudras in Indian Classical Dance, which are divided into three categories. Each mudra has a *nama* (name) and a *rupa* (form) holding more than one meaning and is used to depict objects, people, elements of nature, and mythological figures. More nuances are added to the above-mentioned elements by depicting emotions, which are also facilitated through mudras. There are specific mudras used to portray *rasas* (nine main emotions), thirty-three sub-categories of these emotions and the nine primary physical manifestations of emotions, that are felt universally by humans. Vatsyayan (1967) stated, “each of the hands mentioned under these categories has endless possibilities of movement and is the vehicle of an entire language of gesticulation” (p. 236). The following verse

in Sanskrit from Nandikesvara's *Abhinaya Darpana* further describes the psychological importance of mudras in India Classical Dance:

Yato hasta tato drishtih Yato drishtis tato manah

Yato manas tato bhavo Yato bhavas tato rasah

Translated as:

“Where the hand goes, the eyes follow. Where the eyes go, the mind follows.

Where the mind (awareness) is, mood or emotion is created. Once emotion is created, sentiment arises.”

The art of *Abhinaya* is mastered when the dancer can communicate the story to the audience. Before performing for the masses, the dancer must learn to embody emotions and characters from the story along with learning the appropriate mudra. The process of this movement-based mastery helps the dancer establish a connection with the inner self as they train to feel and depict emotions. The training is psychoeducational in nature which influences the dancer's ability to communicate with the audience. Mudras are instrumental in this process as they are a bridge between the story dancer is depicting and the audience. Mudras are a codified language that are instrumental in educating the dancer about the variety of emotions and manifestation of these emotions in different situations. The application of this nuanced knowledge helps the dancer be emotionally aware and portray it in the dance.

The Yogic sciences establish the healing benefits of mudras within the body. Indian Classical Dance further highlights the expressive benefits of mudras as it enables depiction and embodiment. Acharya and Jain (2016) stated, “Their (Yoga and Indian Classical Dance) effectiveness as healing arts is based on the fact that mind and body are a gestalt, and any change in one will be exhibited in the other too” (p. 409). The study indirectly establishes a definition of

health through the lens on Yoga and Indian Classical Dance, viewing physical and mental health as a solitary unit. Recent research has also continued to establish the health benefits of Indian Classical Dance. Bajaj and Vohra (2011) state, “there is an enhancement in the dancer's power to bring about neural integration thereby involving both the physical and the neurological halves of the body” (p. 56) through the practice of abhinaya (storytelling dance piece in Indian Classical Dance). Considering the definition of health, which includes physical and mental health, the study was successful in establishing psychological and physical benefits of practicing the form as it enables emotional expression and taps a wide variety of physical manifestations of these emotions. Acharya and Jain (2017) conducted a study to “compare the psychological well-being and self-esteem” between Indian Classical Dancers and non-dancers. The results showed significant difference in perceived self-esteem of dancers as compared to non-dancers. While the dancers are trained in all domains of the repertoire, it is the practice of abhinaya that helps them embody several emotions and build the skill to communicate with their soul and the audience. The communication primarily takes place using mudras and facial expressions.

Communicative and Religious Presence

Hand gestures take the form of a codified movement technique in Indian Classical Dance and Yoga; however, hand gestures are used as a form of communication and expression in various cultures. An example similar to Indian Classical Dance, in terms of its specificity is use of hand gestures along with verbal language in Italy. There are specific gestures used as a part of Italian to convey non-verbal messages along with speech. Kendon (1995) mentioned *Mano a borsa*, a gesture used for asking questions. This gesture is called *sandhamsha* in Indian Classical Dance literature, used to make a request. Along with similarities in various gestures, the writer establishes the presence of gestures as a codified communication tool in Southern Italy. These

gestures are used with verbal communication or independently and their interpretation is same across the region.

When seen from a religious or mythological point of view, Mohini (2015) suggested there is evidence from 1500 BC showing an Egyptian God Ra as sunburst with each ray terminating in the hands. The Hindu god of beginnings, Lord Ganesh, is depicted as making the *pataka* mudra, used to depict the large ear, and *singhamukha* to show the trunk. In Islam, hand gestures are used to produce altered states of awareness, and Sufi dervishes use their right hand to trace the 99 gods on their body. Christ is often shown using the *prithvi* mudra and *prana* mudras. *Prithvi* mudra is called the ‘earth mudra,’ which is beneficial in grounding and adjusting to change or disruption, and *prana* mudra is ‘life mudra,’ which is beneficial for concentration and immunity (Carroll & Carroll, 2013). Other than making gestures, hands also serve functional purposes, making them of dominant utilitarian value across the human species. The presence of mudras in various cultures can be indicative of its healing and expressive qualities being recognized by humans as a species. Considering their functional, expressive and therapeutic essence, practicing mudras can be of great value in dance/movement therapy.

Emotional Regulation with Children

Hand gestures are taught to infants to communicate needs before they develop verbal capabilities. Karsten and Vallotton (2018) stated, “Gestures are a form of symbol that allows difficult concepts to be accessible to preverbal children” (p. 745), hence creating a platform for emotional regulation. Further, the concrete and physical nature of gestures makes them an accessible tool for communication for many infants (Werner and Kaplan 1963; Karsten and Vallotton 2018). Froese and Gallagher (2012) further state, “gesture and action in everyday contexts shows that as adults we continue to rely on embodied interactive abilities to understand

the intentions and actions of others and to accomplish interactive tasks” (p. 447). Hence, hand gestures are a form of language that is appropriate for all ages in communicating and expressing. Mudras are also beneficial in tapping into the inherent need of communicating nonverbally which all humans possess.

The functional presence of hand gestures further solidifies the communicative and expressive strength mudras hold. As it is a codified language used in dance to narrate stories while also holding a universal presence as a functional tool, it is highly adaptable for use as an instrument to serve self-expression.

Mudras and Western Theories of Mental Health

The therapeutic elements of mudra have commonalities with mental health theories from psychology and other treatment modalities. The expressive nature of mudras has commonalities with narrative therapy and projective techniques from psychodrama and play analysis. Further, the healing benefits highlighted in Yoga dovetails with DMT theory. The parallels between theoretical orientation of mudras and mental health theories can make mudras a worthy addition for movement-based intervention.

Narrative Therapy & Projective Techniques

Therapeutic benefits encouraged by storytelling through mudras resembles the larger theoretical orientation of narrative therapy. Ghasemi, Kamali, Tonawanik, Yoosefi (2013) stated, “Narrative approaches postulate that reality is not directly recognizable and that people live on the basis of meaning they attribute to their experience of the world around them” (p. 16-17). The study addressed the effectiveness of narrative therapy in children with social phobia in Tehran/Iraq which, “allowed them to safely identify and externalize their problems and begin to experience themselves separately from the problem saturated narratives that dominate their

identities and behaviors” (p. 19). Mudras can be used as a movement-based tool for facilitating externalization of one’s internal narrative. Cunningham, Duncan and Eyre (2017) conducted a study with children that highlighting better effects of using movement with storytelling, rather than storytelling or movement as solitary interventions. The study is analogous to the premise behind the art of performing *abhinaya*. The participants, like dancers, were engaged in movement to narrate stories. Externalization of emotions and thoughts through the medium of storytelling can be a psychologically appropriate instrument for children. Further, the specific nature of mudras can help facilitate a structure within which the externalization takes place, helping participants create an internal dialogue with oneself and communicate it to the observer.

Narrative approaches resemble psychodrama when applied as a projective technique. Bauman, Harrower, Roman and Vorhaus (1960) describes projective counseling as a preventative technique used to assist clients in externalizing contents of their unconscious and help gain insight to cope with difficult situations. Based on this principle, several projective techniques have been developed through various modalities. Psychodrama and Play Analysis are the prominent tools in the realm of expressive therapies. Melanie Klein, Anna Freud and Issacs created projective techniques from play for children and adults (Cornyetz and Torto, 1994). The formulation of these techniques helped in “expression of the unconscious in place of verbal associations” (p. 360). *Abhinaya*, is also considered a form of psychodrama where mudras are used as a projective tool, since it helps externalize complex information and nuanced emotions. Psychodrama exercises one’s imagination based on their personal experience, “as in life, the subject moves, perceives, and uses objects at the same time” (p. 364). The use of imaginative objects is reflective of behaviors exhibited in real life situations. Further, the themes developed can be indicative of the emotional states, or the coherence of theme can be indicative of gaps in

cognitive development. Lastly, there is a platform created for real or imaginative social interaction, which can be developmentally appropriate and enhance expression in some cases.

Abhinaya has similar qualities like psychodrama where the dancer reflects real life situation, navigates the stage like real life and depicts a variety of emotions, objects, characters and things of nature. The mastery of using mudras or psychodrama influence emotional awareness. Given the similarities in narrative therapy, psychodrama and use of mudras in abhinaya, it can constitute as a way of facilitating emotional expression in mental health settings.

Dance/Movement Therapy

Dance/movement therapy (DMT) parallels the concepts from Yoga and Indian Classical Dance by viewing body and mind as a gestalt. Deekshitulu (2019) stated, “Dance therapy is based on the idea that body and mind are co-relational, that the physical state of the body can affect the emotional and mental wellbeing both positively and negatively” (p. 2). DMT as a field and theoretical orientation stand parallel to the discoveries of Yogic science and its derivation in Indian Classical Dance. DMT and the principles of mudras aim to give rise to psychological changes using movement. While the alterations they aim to create are not conspicuously identical, mudras and intervention from DMT ultimately lead to physical changes, that in turn promote changes on a mental level. DMT’s primary aim is to facilitate emotional expression, processing and healing on a mental level through movements. This aim is fulfilled by practitioners of Indian Classical Dance through their artistic journey. Bajaj and Vohar (2011) state, “pent up and clogged anger, depression, guilt or unexpressed gratitude, any kind of extreme emotion can cause physical and/or mental discomfort. With dance these emotions can be released” (p. 56). Participation in structured improvisation like authentic movement, mirroring, and contact improvisation also facilitate the eventual release of pent-up emotions. Eventually, the

repetitive participation leads to a feeling of freedom and safe accommodation of various emotions within one's psyche. Since mudras also facilitate communication, expression and healing, mudra use can be considered a beneficial movement-based intervention utilized within D/MT.

A similar parallel can be drawn to mudras with Hirschi's (1998) statement, "Through its [mudras] variety of interpretive possibilities, the rich symbolism of the dance's language of gestures gains a greater significance for the mind than words could express" (p. 6). Mudras and DMT aim at expression through movement in nuanced ways words cannot express. The primary and only stark difference is that DMT is a form of providing mental health and the other is a form of acquiring a skill that in turn gives therapeutic benefits.

Method

The purpose of this inquiry was to suggest the use of a centuries-old movement-based intervention in mental health treatment to promote psychological healing. The method was conceived based on the use of mudras in Indian Classical Dance and Yoga. While the literature highlights its use traditionally, the method furthers the derivation of these practices for mental health settings to serve expressive and psychoeducational purposes. The rationale behind the derivation of the movement-based practice is supported by theories of mental health. The method aims at proposing the use of this technique to serve different purposes of therapy like processing emotions through self-expression and building skills to cope with emotional distress. Since mudras primarily use hands, its adaptation to a dance/movement-based intervention make it more accessible for clients who are reluctant to move during treatment.

The research question explored “*the extent to which mudras enhance self-expression and aid in building coping skills for stress, with children in a Partial Hospitalization Program.*” The study is based on the theory that the body and mind are connected, and changes in one will cause changes in the other. Further, application of specific mudras for specific emotions supports self-expression, and practicing mudras for stress reduces stress. It was assumed that the facilitator was aware of the diagnostic and mental health treatment history of the clients present in the room, and the population present was between ages 7 and 11 years.

Setting and Population

The study was conducted in a Partial Hospital Program for children and teenagers presenting with emotional or behavioral concerns. The National Association of Private Psychiatric Hospitals (NAPPH) and American Association for Partial Hospitalization (AAPH) (1990) define partial hospitalization as an “outpatient program specifically designed for the diagnosis or active treatment of a serious mental disorder when there is a reasonable expectation for improvement or when it is necessary to maintain a patient's functional level and prevent relapse or full hospitalization.”

For the children and adolescent PHP, the clients attended the program for 10 days. Each day included a “Check-in” in the morning, followed by “Expressive Therapy,” “Feelings Group,” “Psychoeducation,” and finally a “Checkout.” The focus of the program was on emotional processing and building coping skills to maintain the effects of the treatment after termination. The clients were present in the same group room throughout the day, and the clinical staff went to the assigned rooms to run therapy groups. While there are four therapy groups at the facility, the “middle room” hosted the youngest population, between the ages of 7 and 11 years. This study was conducted during “Expressive Therapy” and “Psychoeducation: Stress.” Both the

groups were held twice, making four groups in total. Each group had 6 participants and I was the therapist.

The room included three tables; each table was pushed against a wall in the room. The clients were seated on the chairs that were placed around the tables, leaving empty space for movement in the middle of the room. The fourth wall had a large white board, which was used for writing the directives by the facilitator to include participants who prefer visual form of learning.

Intervention

The intervention implemented during “Expressive Therapy,” which promoted emotional processing, and “Psychoeducation” to teach coping skills. The intervention was implemented through two different groups to accommodate the structure and clinical rationale of the program. Both groups were based on the use of mudras to serve different therapeutic purposes. What follows is a description of the method implemented.

Expressive therapy

At the start of the method my material included cue cards related to the expressive meaning of mudras, all-media paper, lined paper, writing utensils and oil pastels. After setting the material on the facilitator’s cabinet, I greeted the group and introduced the title of the activity as “Finger Dance Story Telling”. I started a discussion about the structure of a story that I designed. After verbally engaging their thoughts, the group collectively established that a story has a beginning, middle and end. The group then discussed the nature of events that unfold in each section. For example, in the beginning, one gets introduced to the setting and characters and identifies themes; in the middle, one gets to know the climax; and in the end, one resolves the problems presented in the story.

After this discussion, the group was introduced to the idea of creating a group story and was invited to the open space to assemble in a circle. I introduced them to the first step, which was to create the beginning of the story. Each person would contribute a word as their turn approached to collectively create and build the setting, character and themes of the group story. I started the beginning of the story by contributing a word and passed my turn to a client sitting next to me. Once everyone had enough turns to create the beginning, I paused the story and summarized the main events by verbally narrating the story and writing them on the white board. I then asked the participants if they wanted to add or remove something from the story. After the adjustments were made to the beginning of the story, I introduced the use of mudras in creating the middle section of the story. After a participant added to the story using hand gestures or a mudra I share, the group would collectively echo the movement. This section of building on the story was influenced by use of mudras and emotions in Abhinaya. I demonstrated the use of mudras by choosing a cue card and dancing the appropriate mudra to contextually add to the story. I then set a lens for the group by re-introducing the concept of using hands as a way of expression to add to the story and that each cue card can be depicted with an action. I passed the cue cards to the participants in the circle, and they continued building the story using mudras whose meaning were reflected in the cue card they chose. After everyone echoed their movement, they passed the cue cards to the child sitting next to them to further build the middle section of the story. While everyone took turns to build the story, the focus was still on using mudras to express self. I put a hold on the story when themes related to the presenting problem emerged and started an open discussion about them. When the middle section of the story was developed enough for the participants to work on resolving a problem, I decided to pause the story and summarized the events of the story. I wrote the main events of this section and asked

the group if they wanted to make any amendments. After the suggested adjustments were made, the participants were introduced to the process of creating the ending of the story. They were directed to move out of the circle and return to their seats to create their own individual endings. They were given preparation time and could use art material or writing material to draft their endings to ultimately perform it using mudras and words in front of the rest of the group. They were also directed to keep their ending to three to five lines to be mindful of time. I also reminded them I am available for support while they create their endings. This step was essential to individually resolve the problems they projected in the story and use body-based expression to enhance their verbal experience. I then invited each participant to the space in the middle of the room to perform their ending. After all the participants had performed their brief ending, I opened the space to share how participants related to different characters in the story. Due to the nature of treatment at a partial hospital, it is important to highlight the therapeutic gains from the activity that was conducted in the room. Engaging the group to share how they found reflections of themselves in the characters was essential. After the group finished sharing their culminating thoughts, they were directed to inhale positivity and exhale everything they embodied from the characters to close the group.

Psychoeducation

After going through the process of using mudras for an expressive purpose, the participants learned about using mudras as a form of body-based coping skill. This group was implemented with participants after they had attended “Expressive Therapy.” I entered the room with the material and greeted the participants, who were seated by the tables pushed against the walls. I introduced the group titled “Psycho-education: Stress” and started a discussion about individual stressors and the body-based experience of stress. This discussion was supported by

statements I made about the connection between body and mind and how change in one can reflect change in another. The discussion was then diverted to exploring relation between sleep and mental health. The participants processed their dominant sleep patterns and how those impact their mood and functioning during the day. To draw an end to this discussion, I drew a bridge between the importance of good quality and quantity of sleep in reducing stress. I introduced them to the ritual of practicing mudras before sleeping to expand their tolerance in presence of stressors. I then directed the participants to gather in a circle on the floor and sit cross legged. If the participants required accommodations like sitting in a chair or moving the chair to be a part of the circle, those adjustments were made. Before we started learning the mudras, I set a lens for them to approach the practice by explaining the following:

- a) Mudras are a technique of hand gestures that bring subtle awareness in our body through hands. They send healing energies to the part of our body that correspond in the specific mudra.
- b) When we make a mudra, we are pressing different nerves in our body to obtain the optimum amount of activation, so those parts of the body get less stressed when we feel stressed.
- c) When we make the mudra, the fingers might undergo some muscle pain, however, it is not a cause of concern. It is our body's way of conveying its need for an element.
- d) Mudras work overtime and require constant practice for the effects to truly start reflecting in our lives. However, the initial practice may be uncomfortable for some people, so participants should notice that discomfort and not indulge it. If that seems difficult, participants can break away from the mudra gradually.

- e) The handout that was shared, had directions on assuming the mudras, pictures of the mudra, their names in Sanskrit and English, the way to practice them and what is their specific function.
- f) Finally, I requested the participants to maintain silence during the process to maintain the oneness of body and mind.

I led them through the warm-up verbally and kinesthetically. First, we rubbed our hands together and felt the warmth and vibration. We then parted our hands gradually, continuing to feel the remnants of the vibration and warmth and placed the hands on our knees. I asked the participants to inhale and exhale three times, each time asking to feel the connection between the body and mind along the spine through the head. I invited them to make any body-based adjustments during these breaths. I then directed them to assume the mudras indicated in the table and directed them to close their eyes and take three deep breaths. While they were breathing, I told them the purpose of the mudra and what the intention behind balancing these elements in our body is. Participants were introduced to seven mudras that balanced elements of fire, air, earth, water, emptiness, knowledge and life. The participants were directed to feel any sensations between the fingers that were in contact and feel excessive energy flow out of ones that were that were elongated.

After I led the participants through the practice, I asked them to take three deep breaths and gradually open their eyes. I then started a brief discussion on what the participants felt in their body and if they felt subtle energies in their fingers. After having a brief discussion on the effects felt in their body, I asked the participants to transition back to their chairs as a way of closing the group.

Materials Used

The primary goals of both the expressive therapy and psychoeducation group are different. Both the groups do not require elaborate materials since the main focus of the group is on using hasta mudras. However, there were certain materials used to make the use of mudras a smooth process. The materials differed in both the groups.

Expressive therapy

I used cue cards that had multiple meanings of the twenty-eight *asamyukta* hasta mudras printed on them. These cue cards were used to create the middle section of the story or an initiation point to add to the story using movement. I also carried all media paper, lined paper, pencils and oil pastels for the participants to create the ending of the story. They had the option of using visual arts to draft their ending or writing material to hand write their ending before they performed it.

Psychoeducation

The first half of the group was discussion-based and hence did not require any material. There was a three-page handout used, which had directions related to assuming the mudras and then pictures, names and relevance of the seven mudras the participants were exposed to. Each participant received their own copy, and I carried a copy for myself.

Processing Information

Before facilitating the expressive therapy group, I practiced the *asamyukta* and *samyukta* *hastas*. This step helped establish attunement with my hands and recall the various meanings each mudra. I also practiced the mudras of all the five natural elements, life and knowledge before conducting the psychoeducation group. After conducting the groups, I maintained process

recordings to keep a record of facilitation, creative responses of the participants and a personal analysis of several moments during the expressive therapy and psychoeducation groups.

Result

The purpose of developing this method was to gauge if mudras can be used therapeutically for expressive purposes and create an opportunity to build coping skills in therapy. The method aims to highlight multiple purposes of mudras which can be implemented at different stages of therapy. To make this method approachable for children I introduced it through the medium of story making in expressive therapy groups and as a ritual to be practiced before bed in psychoeducation groups.

Through the implementation of the method in expressive therapy groups, I expected to see if mudras enhance the level of participation and self-expression. I hoped to see more involvement from the participants who were reluctant to treatment and increased projection from the ones who were receptive to treatment at the PHP. Instead of making the process individual which would create room for lack of participation, the design was a collaborative one to keep all the participants involved. I was hoping to see more willingness to try the mudras, since it involved using a very small part of the body for movement. I expected projection of unconscious thoughts through the process of creating a story and see themes emerge which are related to the presenting problem of the participants. The connection established between their hands, eyes, mind and emotions would enhance their self-expression. I also aimed at seeing the participants use mudras to perform the ending of their story and find some resolution in the climax the group created collectively.

While introducing the participants to the use of mudras as a form of long-term coping skill during psychoeducation, I anticipated gradual postural change and felt sensations between the fingers that were in contact while making different mudras. Since this practice is nuanced, I did not expect all participants to feel sensations between their fingers, however, I did expect to see stability in posture and establish oneness between body and mind so the body can prepare for sleep.

The wholistic goal was to see one movement-based technique enhancing self-expression and ability to build skills throughout treatment. Based on the assumptions and implementation of the method different results were observed in expressive therapy and psychoeducation. The following are the qualitative results observed:

Expressive Therapy

The participants were engaged during the expressive therapy session since they could respond verbally or kinesthetically. Some participants felt more comfortable responding with gestures which increased the level of participation. The idea of sitting in a circle and the method requiring codependency led to verbal participation in the beginning phase of creating the story. The participation remained steady for some and increased for others during the middle phase of creating the story. This was applicable whether the participants were contributing a mudra, were echoing another group member or were responding to the facilitator.

Further it was observed that the participants were engaging with the characters and setting of the story to project unconscious thoughts and feelings. The development of the characters and their traits were reflective of the presenting problems and personal incidents of the participants. They used verbal methods in the beginning phase to develop the characters and setting which were closely related to their personal life. During the middle section the focus

shifted to kinesthetic means to add emotions and events that subtly reflected emotional states and behavior patterns of the participants. The use of mudras helped the participants get introduced to various detailed nuances that enhanced their experience and refreshed their emotional experiences.

The use of mudras not only furthered their capacity to project but also enhanced their ability for self-expression. For example, when the cue card 'conflict' was introduced to the story, I demonstrated two different kinds of mudras to show conflict between equals as opposed to people with power dynamics. *Kartakimukha* was used to show the general concept of conflict. To further the discussion, *padmakosha* and *mushti* were used to show the relation between a bully and victim, however, *hamsapaksha* was used to show banter or argument between equals. All the participants identified which kind of conflict they were referring to and processed incidents from their personal life. Further there was also a moment where the group collectively differentiated between felt kindness using *pataka* and verbally expressed kindness by using *prana* mudra and *hamsasya*. The participants were given a choice to use mudras to perform their individual ending as a way of resolving the climax created in the middle section of the story. Most of the participants chose to create their own hand gestures to share their ending.

A distinction that I observed was the difference between use of mudras as a movement-based technique and hand gestures. When a participant asked for my assistance, the group collectively echoed a hasta mudra used traditionally in Abhinaya. However, when the group was creatively using hands gestures to express, the hand gestures closely resembled hasta mudras but were not in the realm of mudras anymore. However, in both the situations therapeutic premise behind the use of mudras was applied to serve expressive means.

Psychoeducation

The session did not involve emotional processing. The participants went through a process where they learnt how to practice mudras. There were several body-based observations since the experiential itself did not involve using verbal facilities. After having a discussing about the sleeping patterns and improving the quantity and quality of sleep, the participants were led through the practice of using mudras to build coping skills for stress. The practice was introduced as a bedtime ritual.

There were several postural changes observed during the process; some were subtle changes and some very concrete visible changes. The participants were not directed to close their eyes considering the possibility of trauma history, however, gradually most participants were able to close their eyes. There was also a gradual alignment in the spine where the head was in line with the rest of the spine. In yogic literature the gradual attainment of this posture often means alignment of the body and mind. Although the participants were directed to not participate verbally to attain better body-mind alignment, there was initial verbal engagement. However, the verbal engagement gradually declined as more elements were balanced in their body.

As the experiential progressed there were more calming effects observed. The breathing patterns became more visible through the subtle movement of the shoulders and chest. The breathing patterns became slower and more evenly paced out. There was also a gradual change in face muscles relaxing. Following the practice, the participants and I discussed how the muscles of the upper half of the body relaxed gradually.

Lastly, after practicing the first three elements I brought the attention of the participants to the felt sensation between the fingers. For example, when making the *gyan* mudra (the meditation mudra) there is a felt sensation between the tips of the index finger and thumb. I was able to feel this nuanced sensation. Several participants reported feeling warmth and vibration

when connecting different tips of the fingers to balance elements. However, these sensations were felt after the participants were non-verbal and had made attempts to align their body and mind which was visible in their posture.

Discussion

The primary purpose of writing this thesis was to investigate the use of mudras in Indian Classical Dance and Yoga and integrate the theories for application in mental health settings. Research has presented a trend of writing about mudras from the perspective of Indian Classical Dance or Yoga. The two forms of movement have not been mentioned collectively. The aim of this thesis was to broaden the view by integrating both the theories. I addressed the gap by including the therapeutic benefits of the mudras, and I drew parallels between these benefits and existing mental health theories and creative arts therapies. Further, the paper explored the use of mudras with people who are not trained in either school of movement but can use it for expressive and psychoeducational benefits. Approaching these goals required conducting research about using mudras. I then developed a method by integrating the therapeutic benefits of mudras along with mental health and creative arts therapy theories. The implementation of the method yielded qualitative observations from two different therapy groups. The study can be categorized into arts-based research since my experiences as a dancer and yoga practitioner were instrumental in developing and implementing the method. The research question anticipated the method to produce expressive and psychoeducational benefits. The primary findings indicated use of mudras for self-expression and as a body-based tool for projection. Participants explored psychoeducational benefits by exercising body-based regulation facilitated due to balancing natural elements in the body. Mudras are a body-based tool that can be adapted to serve mental

health needs in treatment. Their adaptation serves expressive and psychoeducational needs that align with the foundational treatment purpose of most mental health facilities.

Findings

The findings were recorded through two different therapy groups: expressive therapy and psychoeducation. While the same movement technique was used in both groups, expressive therapy facilitated goals related to self-expression and psychoeducation led to exploration of body-based regulation.

Observations made during the expressive therapies group included more participation, self-expression and contemplation. Gibbson (2015) described mudras as accessible, writing that people are more willing to try them as the use of mudras involves a small part of the body. They are also easy to learn and do not require larger movements that are expected in Indian Classical Dance or Yoga. In this study the option of building a story through mudras increased avenues for participation beyond verbal means. Participants who were reluctant to contribute verbally could convey their thoughts through mudras. This also complies with Mohini's (2015) description about using hand gestures as a naturalistic part of conversation. Further, mudras have "endless possibilities of movement and are the vehicle of an entire language of gesticulation" (Vatsyayan, 1967, p. 236). The participants in this study were able to explore a myriad of objects, emotions, personality traits, animals and parts of nature to convey their internal thoughts through the safety of a story. The implementation of the method is like projection and narrative therapy since the participants were contributing surface thoughts to create a story. They were not only able to project their feelings on the characters of the story, but also able to draw connection between emerging themes and their life. Further, the participants were able to enhance their understanding of detailed concepts like "bullying" and "conflict" based on the differences in mudras used to

convey the two. This observation further explains the nuanced nature of mudras, which parallels a form of communication.

When viewed from the lens of psychoeducation, the mudras were used to balance the five natural elements in the body. The nuanced practice of pressing fingers in different combinations and modulating it with breathing leads to a balance of the five natural elements (Hirschi, 1998; Mohini, 2015). There is neural activation and brain activity, which has been explored in quantitative studies using EPI and EDA. However, there are also qualitative changes in posture, breathing, alignment in the upper half of the body and felt sensations between the fingers which are justified by concepts like “humane effort” in DMT. In this study, the changes were introduced through *agni mudra*, *vayu mudra*, *shunaya mudra*, *gyan mudra*, *prithvi mudra*, *varuna mudra*, and *prana mudra*. Indian Classical Dance and Yoga is based on the connection shared in between the body and mind. Change in one will cause change in other. This change was approached through mudras with the participants, and the postural change, deeper breaths and felt sensation between the fingers influenced internal changes in the body. Hence, the method aimed at noting the qualitative changes that take place as a result of the changes taking place internally

Implication

Mudras are an approachable tool for the client as the use of mudras does not involve large movements. Hands are the most functional part of the body. Therefore, hands are an easy part to initiate movement with. People who face amotivation as a part of their mental health diagnosis would potentially be open to using mudras. Further, mudras are also an accessible tool for DMTs as the primary prop are one’s hand, and they are an easier movement technique to learn. The two primary benefits of mudras comply with the purpose of mental health treatment across theories and different mental health modalities. There are various DMTs from the Indian diaspora who

use mudras therapeutically in DMT. However, its use has not been formalized in academic literature. I aim to bridge gap by integrating the literature and developing a method to highlight its therapeutic qualities.

While the method was developed for children in a PHP, the method can be applied with different populations and treatment settings. For example, mudras can be used in outpatient treatment with adults to design personal stories over multiple sessions, and patients can learn an embodied choreography using mudras. Traditionally, mudras have been used to narrate stories from *Jataka Tales*, which impart moral lessons specific to Indian culture. However, the model of this form can be used in community settings with children for expression and building values that comply with the educational institute they are a part of. Since there are different mudras that can be practiced for different physical and mental health problems, specific mudras can be practiced based on the diagnosis of clients. The mudras can be practiced within sessions and independently.

Limitations

The primary limitation of the study was implementing the method with a small sample size. Since, the Partial Hospitalization Program has clients for two weeks, the method could not be implemented more than once until a variety of topics had been covered with clients. Further, the findings included observations, however, I did not have instruments to record their internal experiences which might have been caused by mudras. The body sensations and effects felt which may have been caused due to activation of neural networks while practicing mudras for psychoeducational purposes would have enhanced the findings. The ability to quote direct experiences in the form of case studies could have further highlighted the strengths or limitations of the method. Due to the short-term nature of the program, I had to implement the method with

a different group of participants each time, which did not leave any scope to revisit the use of mudras and explore its effects beyond its initial exposure. Exposure to the method more than once could have made participants more familiar with different mudras. The rich history of mudras can be a limitation when viewed from a therapeutic lens. Various mudras carry religious and cultural meanings. Therefore, the facilitator of the method must be cautious in eliminating certain mudras when they are used to serve expressive benefits.

Future Research

Mudras have been viewed as a movement-based technique that serve therapeutic benefits. However, there is a need for research that focuses on its therapeutic benefits. Since current academic standards view physical and mental health as two separate domains, it is necessary to conduct research that highlights the benefits of mudras in serving mental health needs. Most of the research calls attention to the physical health benefits of mudras. The quantitative research records brain activity or neural activation of participant. However, it is crucial to record the qualitative changes as well as this thesis exemplifies. Doing so will help legitimize the body-mind connection and prove the broader theory of DMT. It is also important for DMTs to publish their work about the use of mudras in academic journals to bring legitimacy and address the need for more culturally diverse DMT interventions.

Conclusion

Mudras are a body-based tool that are viewed as a skill. However, they can be adapted to meet mental health needs in DMT. The expressive and healing capacity of mudras are relevant explanations in establishing the connection between body and mind. Further, their presence in the form of hand gestures highlight the inherent need to use hand gestures. The theory on

connection between the body and mind, and its expressive quality, make it an essential movement tool in DMT. The findings support its use in a clinical setting with children.

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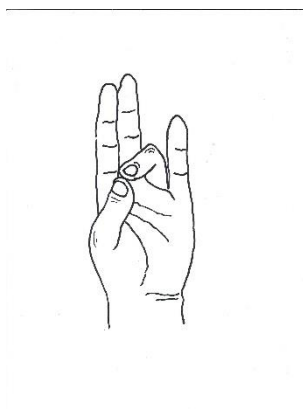
Young, J. L. (2012). Bringing My Body into My Body of Knowledge as a Dance/Movement Therapy Educator. *American Journal of Dance Therapy*, 2, 141.

Appendix

Table 1

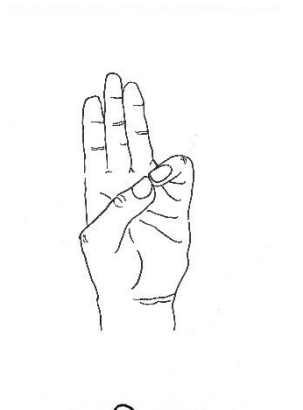
Balancing Elements: Mudras for Stress

MUDRA	NAME OF MUDRA	RELEVANCE
	Agni Mudra (Fire Mudra)	The mudra helps regulate body temperature and gradually reduces the intensity of anger.
	Vayu Mudra (Air Mudra)	The mudra helps regulate the element of air in the body. It removes excessive air and increases the capacity of the lungs to hold air in stressful situations.
	Shunya Mudra (Emptiness Mudra)	The mudra helps create internal space, helps with motion sickness and can be a symbol for loneliness.
	Gyan Mudra (Knowledge Mudra)	The mudra helps expand the centers of knowledge and to concentrate and memorize.



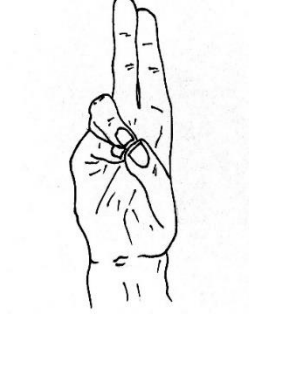
Prithvi Mudra (Earth Mudra)

The mudra helps with a sense of being centered and grounded.



Varuna Mudra (Water Mudra)

The mudra helps with becoming calm and cools body temperature if necessary.



Prana Mudra (Life Mudra)

The mudra activates the body's self-healing potential. It also helps increase attunement with self and increase willpower.

THESIS APPROVAL FORM

Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Dance/Movement Therapy, MA

Student's Name: HARSHITA BHARGAVA

Type of Project: Thesis

Title: THERAPEUTIC USE OF MUDRAS IN DANCE/MOVEMENT THERAPY WITH CHILDREN
IN A PARTIAL HOSPITAL PROGRAM: THE DEVELOPMENT OF A METHOD _____

Date of Graduation: MAY 16TH 2020

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: Meg Chang