



Spring 2009

Perceptions of and Receptivity to Dance/ Movement Therapy

Julia Cuccaro
University of Pennsylvania

Follow this and additional works at: http://repository.upenn.edu/anthro_seniortheses

 Part of the [Anthropology Commons](#)

Recommended Citation

Cuccaro, Julia, "Perceptions of and Receptivity to Dance/Movement Therapy" (2009). *Anthropology Senior Theses*. Paper 107.

Perceptions of and Receptivity to Dance/Movement Therapy

Disciplines

Anthropology

PERCEPTIONS OF AND RECEPTIVITY TO DANCE/MOVEMENT THERAPY

By

Julia Cuccaro

In

Anthropology

Submitted to the
Department of Anthropology
University of Pennsylvania

Thesis Advisor: Seran Schug

2009

ABSTRACT

This paper explores perceptions of and receptivity to dance/movement therapy through ethnographic research of students at the University of Pennsylvania. The data is examined in the context of three major themes observed: the relationship between the mind and the body, the influence of authoritative knowledge, and the role of belief. In exploring these themes, the author reveals the duality of ideas presented in the data and the frequent inability to reconcile science and art, Western medicine and CAM, and embodied knowledge and authoritative knowledge. This paper humbly submits itself as a case study for medical anthropologists, as well as a resource for dance therapists to better understand their cultural context.

“Gradually I came to see that movement is one of the great laws of life. It is the primary medium of our aliveness, the flow of energy going on in us like a river all the time, awake or asleep, twenty-four hours a day. Our movement is our behavior; there is a direct connection between what we are like and how we move. Distortion, tension, and deadness in our movement is distortion, tension, and deadness in ourselves...As people begin to move in their own way, they are faced with feelings of surprise and delight and often of anxiety and embarrassment. Judgments, corrections and explanations are of no use. It is their movement, and it happened just that way.”

Mary Whitehouse
qtd. in *Authentic Movement* by Patrizia Pallaro

Mary Whitehouse, one of the founders of dance/movement therapy (the psychotherapeutic use of movement as a process which furthers the emotional, social cognitive, and physical integration of the individual), draws attention to the multitude of feelings, often contradictory, that people encounter when they first experience dance and movement ("Who We Are"). These are common reactions that dance therapists witness in their work everyday, but where do they come from? How do people regard dance before this first experience? What does it take to get them into their first session? As an anthropology student who will soon pursue my degree in dance/movement therapy, these questions were of particular interest to me, both as an anthropological study of dance therapy and as a means of better understanding the perceptions of people that I would face in my future occupation. Dance therapists are in constant discussion regarding publicity and marketing strategies to get their work known and to legitimize their profession in the eyes of biomedicine and the public. What are the conditions that necessitate this focus? What is it that people think about dance therapy that has created the advocacy efforts by these professionals? Why is there such a push for empirical research, as opposed to qualitative research, amongst dance therapists? These are but a few of the questions that sparked my interest in doing a study on dance therapy from an anthropological perspective.

I began this paper with an interest in studying what people knew about dance therapy, what they thought about it, what reactions they had to it, and whether or not they would be willing to try it. As can be expected about something as unknown in the public sphere as dance therapy, I received a diverse array of responses from my ethnographic interviews. Even still, an overarching tension emerged that made its way into every interview I conducted—the tension between medicine and art. In the minds’ of my subjects, these two fields were often irreconcilable, even for people who thought about dance therapy in a positive light. The few people that showed an interest in the intersection of these disciplines often didn’t know how to fit them together. It was as though the only discourse they knew didn’t allow for their interrelatedness. This separation of medicine and art results in a series of other tensions: that of the body versus the mind, embodied knowledge versus authoritative knowledge, science versus art, and alternative medicine versus Western biomedicine, to name a few. Art and science had been separated into two very different, often irreconcilable, worlds. Consequently, attaining the goals of dance therapy, and the attempt to bring these two worlds together, were seen as being either inexplicable or impossible. These tensions characterize the major themes of this paper, which will explore them in relation to the impact they have on people’s perceptions of dance therapy.

The Beginnings of Dance Therapy and the ADTA

Many cultures use dance to promote wellness, celebrate rites of passage, mourn, encourage community, and induce healing (Laderman 134-138). Despite these direct connections with health and wellness, dance was not associated with medicine or healing in America until quite recently. In the 1940’s, several dancers, including Marian Chace, Liljan Espenak, and Mary Whitehouse, began focusing their work on the use of dance as a

psychotherapeutic tool. It was this application of dance that instigated the emergence of the field at this time and created the professional discipline of dance therapy, as it exists in America today. (Kashyap 12).

Chace had studied at the Denishawn School, one of the prominent early American modern dance sects, established by Ruth St. Denis and Ted Shawn. Denishawn is well known for its importance in training many of the prominent modern dancers of the day. It was founded on the belief that all styles of dance had merit, yet it also was meant to introduce students to Denishawn's own belief in what the new modern dance should be: an art that was spiritual and could communicate meaning. After leaving the school, Chace continued dancing and performing, eventually forming her own branch of the Denishawn school in Washington D.C. As she taught, her interests began to turn from performance and dance technique to meeting the individual needs of her students. It was this shift in attention that distinguished Chace as a teacher. As she was teaching modern dance, Chace began to realize that many people, dancers and non-dancers alike, were taking her classes not because they wanted to perform as professional dancers, but because they valued the experience of movement as it affected their bodies and provided a medium of expression (Kashyap 12-13). As a result of Chace's experience and influence, dance therapy takes some of its principles from the emotionality and experiential basis of American modern dance, which had begun to develop about forty years prior to her work. This style of dance originated in opposition to the codified and confined nature of ballet. Instead of focusing on the technical prowess of the dancer, modern dance breaks away from the restrictions of ballet and emphasizes the self-expression of the individual. In this way, modern dance is less about virtuosity, alternatively prioritizing the communicative power of dance to express the soul in this emotional expression and release.

Around the same time of this development, the field of psychology was exploring repression and non-verbal communication and trying to find a means to release these repressed thoughts and feelings (Bannerman-Haig 157). Pediatricians and psychiatrists began to refer their patients to Chace's classes, and she was later invited to work at the St. Elizabeth's Hospital in Washington D.C. It was at this federal psychiatric hospital where Chace began her foundational work that would soon become dance therapy. The hospital housed many World War II veterans who had returned with psychiatric symptoms and illnesses. Because psychotropic drugs had not yet been introduced, treatment methods were still actively being sought and explored, leaving a recess for various modes of therapy and encouraging an openness in treatment options. To address their psychological troubles, Chace began to lead sessions for the patients in the closed wards. Patients she worked with were suffering from a wide variety of issues, including those who were schizophrenic, depressed, manic, withdrawn, overactive, hostile, and who exhibited other psychoses (Chace 12-17). Her use of movement in working with these patients was a critical element in their treatment because of their non-responsiveness to verbal therapy (Kashyap 14). In 1947, Chace became the first dance therapist hired, implementing dance as a communicative tool and establishing the new mental health treatment of dance/movement therapy. She succeeded in treating these patients by fostering a patient-therapist relationship, and staff from St. Elizabeth's reported an increase in range of movements, response to music, and improved expression. Patients began to emerge from their withdrawal and interact with their peers in dance therapy sessions, moving closer to reintegration with society (Kashyap 14).

Chace was then invited to lecture at Chestnut Lodge, a private psychiatric hospital in Rockville, Maryland and also taught at the Turtle Bay Music School in New York City. Subsequently, she began to publish articles, offer workshops, and take interns as she continued

her work at St. Elizabeth's (Chaiklin). Co-workers, therapists, and students began to train under her and spread dance therapy to other institutions and clinics (Bartenieff 143). The American Dance Therapy Association was founded in 1966, with Marian Chace serving as president for its first two years. This development led to the institutionalization of the field and created an organization to regulate the standards of the profession. Upon its founding, the ADTA had 73 charter members that practiced in fifteen states ("Dance/Movement Therapy").

Though the discipline evolved directly from Chace's work, it also takes influences from many other theorists, most prominently Rudolf Laban, Carl Jung, Sigmund Freud, and Wilhelm Reich. Developments in American modern dance, anthropology, psychiatry, psychoanalysis, and non-verbal communication also made substantial contributions to the foundation of dance therapy (Kashyap 12-16).

The Profession Today

This section seeks to describe the main tenets of dance/movement therapy— a typical dance therapy session, contexts in which dance therapy can be used, therapists' method of training, and their placement in the medical field— and the profession's background. The section will describe dance/movement therapy as the therapists and their institution represent themselves (in an attempt to demonstrate the profession in the same light in which they view it). As such, it uses the American Dance Therapy Association (ADTA) and the National Coalition of Creative Arts Therapies Association (NCCATA) websites as its primary sources. All sources in this section, including the two mentioned above, were written specifically by creative arts therapists. This ensures that the information given is presented by the members of this community and has not been filtered through the perceptions and opinions of outsiders. Thus, this section is a representation of how dance therapists view themselves and their field.

Dance/movement therapy is a modality that falls under the umbrella category of creative arts therapy, the other principle modalities being art, music, poetry, drama, and psychodrama. These modalities are founded upon the idea that creative processes are an effective means to “foster health, communication and expression” (“NCCATA Home”). Although dance therapy is its own distinct field, it is often grouped with the other creative arts therapies in educational programs, legislation, and facility departments. According to the ADTA, dance/movement therapy specifically is “based on the assumption that the body and mind are interrelated” and defined as “the psychotherapeutic use of movement to further the emotional, cognitive, physical, and social integration of the individual (“About Us”). Early on, dance/movement therapy was categorized as having a psychological focus. At a workshop in 1968 on research between dance therapists, movement researchers, and clinicians, it was said that “self-awareness, body awareness, self-identification and the positioning of the self in space and time [were] found to be of importance in the struggle to cope with the effects of cultural deprivation, mental retardation, learning deficit, and alienation withdrawal,” (Bird 8). Dance/movement therapy lays its foundation on this belief.

Dance/movement therapy is used for a wide demographic of people and for an extensive array of reasons. It can be employed to help the seriously ill patient cope with the emotional and cognitive effects of their physical illnesses, the mentally ill patient, or any other individual who may have reason to seek psychological therapy. Sessions may be conducted with individuals, families, couples, or in groups. The following is a list of settings where dance therapy may be employed, courtesy of the NCCATA:

- adult day treatment centers
- community mental health centers
- community residences and halfway houses

- correctional and forensic facilities
- disaster relief centers
- drug and alcohol programs
- early intervention programs
- general hospitals
- home health agencies
- hospices
- neonatal nurseries
- nursing homes
- outpatient clinics
- psychiatric units and hospitals
- rehabilitative facilities
- senior centers
- schools
- wellness centers

In these various types of facilities, dance therapy has been used for patients with mental health needs, chronic illnesses, head injuries, substance abuse problems, physical disabilities, and developmental disabilities (“NCCATA Fact Sheet”). Research has been conducted by dance therapists and the ADTA on patients with a broad range of illnesses or issues, including the homeless, imprisoned, learning disabled, frail elderly, emotionally disturbed, depressed and suicidal, mentally retarded, substance abusers, visually and hearing impaired, psychotic, autistic, amputees; those with traumatic brain injury, stroke, or chronic pain, eating disorders; and cancer, Alzheimer’s, cystic fibrosis, heart disease, diabetes, asthma, AIDS, and arthritis patients (“Dance/Movement Therapy”). This research is pursued fervently by the ADTA in the attempt to align itself with the Western biomedical paradigm, issues which will be discussed at length later in this paper.

The typical dance therapy session lasts for about one hour and usually meets twice weekly, though these variables depend on the capabilities of the group and the availability of space, the therapist and the patients. Each session is composed of four parts. The first section consists of warm-up exercises for both the mind and the body. This might involve stretching, isolating particular body parts, or moving the whole body in order to increase energy, prepare patients for moving around, and get them comfortable and open with this environment. Next is theme development, which is the segment where most of the therapeutic activity is invited to occur and therapeutic goals are accomplished. Patients will participate in various movement experiences. For instance, patients might dance in unison in a circular group formation or perform a mirroring exercise with a partner. These activities may enhance social functioning, as well as encourage appropriate expression of emotions. This part also seeks to increase body and spatial awareness of the patients, and in applicable cases, leading patients to be present in the current moment or real world and interacting with others. The cool down seeks to bring patients back to a state of relaxation by calming the energy with slow movements and breathing techniques. Movements that encourage community, such as hand-holding, are also done during this time. Lastly, the therapist evokes a sense of closure by leading a verbal discussion for the participants to share their experiences and resolve feelings and issues that occurred during the session, encouraging integration and cognitive learning from the experience (Kashyap 97-99).

Today, the ADTA has at least 1500 registered members that work in over forty-six countries and on all the continents except Antarctica (Kashyap 16). They deliberately present themselves as a global profession, displaying on their website many of the countries in which dance therapists have worked and committing themselves to understanding the diverse needs and considerations of various cultures and ethnicities (“Who We Are”). Furthermore, training in

multiculturalism and diversity is one of the six principles that the board of directors of the ADTA requires in an educational program for dance therapy (“Educational Information”). In this way, dance therapy strives to make itself available and widely known to all people as potential patients, also making accommodations in their training for this hopefully diverse patient base.

Multiple elements of the way the ADTA represents itself are reminiscent of the mainstream medical and psychological fields. It has created its own national association to standardize the profession, has a formally documented and regularly updated code of ethics, publishes a journal of dance therapy, coordinates conferences, and regulates the training, education, and certification of dance/movement therapists. All these practices, along with clinical internships, required hours being supervised, and credential requirements, resemble those of the Western medical establishment. The ADTA has developed requirements for the education and certification of dance therapists that fit this model of Western medical training. The dance therapy degree is a master’s degree program, and the ADTA approves only six of these graduate programs in the United States. The approval of these programs, as well as the clinical internships of dance therapists, is based on competency in the following six areas: applications of dance/movement therapy with children; cognitive, social and psychological development; movement behavior and nonverbal communication; family systems theory; development through the lifespan; and multiculturalism and diversity (“Educational Information”). Similar to other medical professions, there are required programs of study. These generally include coursework in dance/movement therapy theory and practice, movement observation and analysis, human development, psychopathology, cultural diversity, research skills, and group work (“Dance/Movement Therapy”). These are the areas of study that dance therapists are expected to demonstrate competence in upon completion of a graduate program. In the event that a

candidate cannot attend one of the six graduate programs, the ADTA permits alternate route options of completing coursework through other institutions, in order to accommodate people interested in dance therapy but unable to access one of the previously approved programs. However, these paths are also highly regulated by the ADTA if the individual therapist wants to receive recognition as a Dance Therapist Registered (DTR) (“Educational Information”).

In addition to a master’s degree in dance/movement therapy, the ADTA, similar to the American Psychological Association, has its own requirements for becoming a credentialed dance therapist, of which there are two levels. To become a DTR, the candidate must complete 700 hours of a clinical internship supervised by an ADTR (Academy of Dance Therapists Registered) following their graduation from the master’s program. It is only with the DTR title that the ADTA considers the therapist fully qualified to work in a professional treatment system. Fifty hours of Continuing Education credits must be completed every five years to maintain the DTR credential. To achieve ADTR status, a DTR must complete 3,640 hours of supervised clinical work. With this title, the dance therapist is approved to teach, provide supervision, and participate in private practice. The ADTR credential requires 100 hours of Continuing Education every five years. ADTRs, many of whom have obtained doctoral degrees, may hold state licenses and can obtain the National Certified Counselor (NCC) status. To obtain either of these levels of registry, the candidate must submit an application for review by the ADTA (“Credentials”).

The institutions in which dance therapists place themselves are almost all sanctioned by Western medicine, a clear attempt to distinguish themselves from both a strictly arts based community or an alternative medical community. A specific example of this association with established institutions of Western medicine is dance therapy’s status as a specialization of

counseling. The National Board of Certified Counselors (NBCC) has made ADTR level dance therapists eligible to take the exam and apply to be recognized as an NCC. This collaboration between the NBCC and the ADTA began in 1998, and since then ADTR's have obtained certification as specialty counselors under this organization because of their training in mental health ("Resources"). In many cases, this collaboration is the factor that has made state licensure possible for dance therapists. This objective of attaining state licensure, certification, and national recognition demonstrates their desire to attain legitimacy in the eyes of the government, American society, and the medical and psychological professions.

Finally, it should also be acknowledged that dance/movement therapy also frames itself within a body-mind narrative. First, dance therapy is based on the premise that the body and the mind are interrelated ("Who We Are"). The idea that moving and dancing can affect the mind of a patient in terms of their social, emotional, and cognitive well-being is innate to the profession. In a dance therapy session, the therapist will observe and assess the patient's movement, often looking for connections between the emotional state and the physical expression of a particular patient. For instance, the interaction between peers demonstrated by expressions and body attitudes is used to gather information about the thoughts and feelings of people in social settings (Kashyap 109-110). This focus is also displayed in the frequent use of Laban Movement Analysis, a method of movement notation and analysis frequently employed in dance and non-verbal communication research, in the training of dance therapists. The belief in the relationship between movement and the mind is pivotal to the research question presented in this thesis and will be discussed in more detail later.

Though this is a very simple description, it is only my intent to give a brief background on the field of dance/movement therapy and the way that they have framed themselves before

moving on. This history does not claim to be exhaustive, but rather to give a workable amount of background information to those who may not be familiar with dance/movement therapy, so that they may be able to better evaluate and comment on the data and ideas below.

Cultural Context

The way the arts are regarded in American society is a critical component to understanding the perception of the creative arts therapies. Again, this is a difficult subject to measure and research on the topic is rather scarce. Fortunately, the timeliness of the United States stimulus package and the debate as to whether or not the National Endowment for the Arts (NEA) should be included in this bailout is very useful for my purposes. Hence, I will use the public reaction to this debate, as well as the recently published and groundbreaking Cultural Engagement Index study, fittingly conducted in Philadelphia, the location of my research, as evidence for the current climate of the arts in American society.

In 1997, the House, dominated by the GOP, voted to eliminate the NEA. Due to a compromise reached that greatly slashed their funding, they were able to survive as an organization (Kranish 2). However, with the economic troubles that the United States is currently facing and the recently approved economic stimulus package, questions about whether to include the NEA in this emergency stimulus recalled this debate of whether the NEA deserves federal funding. The stimulus package for the NEA was eventually passed, though not without sparking a considerable deliberation as to whether or not it would specifically be able to stimulate the economy, as well as whether the arts should even be funded by the government at all. Arguments range from the adamant support of William Ivey, former chairman of the NEA and leader of President Obama's transition team on arts-related spending, to the chastising

criticism of Republican Representative Jack Kingston of Georgia and Bill Riedl, analyst for the Heritage Foundation (Kranish 1).

Kingston, in agreement with many others who have regarded NEA funding as “pork barrel spending”, has insisted, “We have real people out of work right now and putting \$50 million in the NEA and pretending that’s going to save jobs as opposed to putting \$50 million in a road project is disingenuous,” (Kranish 1). In keeping with this assertion, Kingston had proposed rerouting the funding set-aside for the NEA to a highway construction project. The mentality that providing funding to the NEA, which would create and save jobs for artists, would not be employing “real people” demonstrates that certain members of American society don’t regard jobs in the arts as “real” jobs, and that artists aren’t “real people” who contribute to the economy.

Ivey, on the other hand, represents the other end of this debate. He states that it is problematic for people like Kingston to argue “that an arts worker is not a real worker, and that a carpenter who pounds nails framing a set for an opera company is a less-real carpenter than one who pounds nails framing a house,” (Kranish 1). Addressing this issue, Michael Kaiser, head of the John F. Kennedy Center for the Performing Arts adds that “the arts as a totality in this country employs 5.7 million people, so we’re not a small sector of this economy. Our employment levels are important to this economy,” (Blair). As evidenced by these supporters and by the passing of the NEA stimulus package, there are many arts advocates in the United States, but the opposition to the arts is also significant. Even though not all people have opinions as polar as those represented above, these examples serve to show the wide spectrum of beliefs about the value of arts and the disparity in attitudes about the role of artists in our society. Thus, this debate is particularly relevant for analyzing society’s reactions to a therapy that utilizes the

arts in its treatment. The comments here only briefly recount the situation. For further information about the climate of arts in American society, the media coverage and public response about this event is relevant and telling ethnographic material.

Yet, this paper studies dance/movement therapy specifically, so it is also essential to discuss the placement of dance within the hierarchy of the arts community itself. The Cultural Engagement Index seeks to measure the engagement of the Philadelphia community in a wide range of cultural activities, including, but not limited to, the arts. I will include two relevant statistics, one showing the attendance of the community at various types of art performances or venues, and the other indicating personal involvement in creating art in an informal setting. I have chosen these statistics because I consider them as demonstrating both a wide variety of engagement through both informal versus formal settings and personal involvement versus spectatorship.

The following are the percentages of people who attended various presentations of art at least once a year (*Cultural Engagement Index* 14, 17, 20, 26):

STYLE OF ART PRESENTATION	PERCENTAGE
Professional music performance	59%
Plays of musicals with professional actors	51%
Performance of a dance company	28%
Art museum or gallery	60%

It is apparent that even in comparison to the other arts, dance is significantly less attended. It is not possible to speculate what the contributing factors are for this disparity from the research presented in the study, but its having half the attendance of the other art forms reveals that the

community's exposure to dance, and perhaps also interest in it, is much smaller. However, for people who have participated in the arts at least once a year, the disparity is not quite so straightforward (*Cultural Engagement Index* 14, 17, 20, 26):

ART ACTIVITY	PERCENTAGE
Sing	56%
Play an instrument	23%
Make up your own dance steps	22%
Dance socially at nightclubs or parties	46%
Tell stories in an oral tradition of storytelling	26%
Act out stories or scenes at home	20%
Paint, draw, or make other original art	32%
Make crafts of any kind	46%

Although making up one's own dance steps again has one of the smallest responses, social dancing has a considerably large percentage of participation. Seemingly, the social nature of this activity might have an affect on participants' willingness to engage in dancing. Unlike any of the other arts activities listed, this one specifically references it taking place in a group. Again, the data does not indicate if or how this might influence participation rates, but it is a distinguishing factor of that particular activity. This could signify potential for dance/movement therapy because of its social and communal focus.

This questionable standing of the arts, especially when paired with the historically prominent stigma of mental health, already places it on the periphery of American society. This is again reinforced with the perception of dance/movement therapy as a complementary and

alternative medical (CAM) practice. For a time, medical anthropology had studied many CAM practices under the classification of ethnomedicine, which they defined as the “beliefs and practices related to disease which are the products of indigenous cultural development and are not explicitly derived from the conceptual framework of modern medicine,” (Brown 14). By studying CAM practices solely as cultural customs or traditions, alternative and indigenous medical practices were, perhaps unintentionally, framed as being ineffectual, outdated, or nonsensical:

At the beginning of this century, anthropological studies of medical systems were confined to ethnographic descriptions of “exotic” practices within non-Western societies. Many observations about sickness and therapeutic rituals were analyzed from the perspective of underlying cosmological beliefs and cultural values within comparative studies of myth and religion. However, some aspects of these works have been criticized for a tendency to sensationalize the differences of “primitive” people in comparison to those in Western industrialized societies (Brown 14).

Eventually, anthropologists began to realize the lens their predecessors were looking through was a faulty approach. In order to reconcile this, they began to study indigenous practices alongside Western biomedicine, instead of in opposition to it. From this perspective, researchers discovered the pluralism of health beliefs and practices in which biomedical practitioners were engaged. This discovery led to the expansion of the definition of ethnomedicine to include Western biomedicine as an ethnomedical system (Brown 14-15). With this new understanding of medical anthropology, its foundation, and its scope, methods of evaluation began to shift. Marc Micozzi details the additional elements that influence the cultural evaluation of the healing relationship:

Scientific evidence provides the bedrock on which the practices and activities associated with contemporary Western medicine rest... The clinical part of medicine, however, is an

art as well as a science. The healer clearly must understand the expectations of patients. Although depending on knowledge and experience, patients also expect the healer to project authority, demonstrate confidence, provide reassurance, and don a culturally appropriate appearance... Observations that are real in the clinical setting (at the level of human experience and observation) and that cannot be understood or explained in a materialist, reductionist biomedical paradigm are revealing that paradigm to be incomplete (Micozzi 402, 398).

As Micozzi suggests, there is much more to the healing relationship between a practitioner and their patient than just scientific evidence. The Western biomedical paradigm shouldn't necessarily be the only means of evaluation or standard to look to, and because of the changing perspectives of medical anthropology, medical systems are being evaluated from a more comprehensive and holistic viewpoint.

Despite how frequently anthropological studies had been done on CAM practices, most had not been tested scientifically until very recently, and many of them still have not been. There are multiple reasons for this, including lack of government and private funding for CAM research and a disparity between the philosophy and methodology of CAM practices and the obligatory Western biomedical double-blind, placebo-controlled study method. This need for scientific evidence and to have it be conducted in a manner that follows the Western biomedical standard is a fairly new development. Until recently, CAM practitioners had their own authority based on their experience and specialization. However, the trajectory of medical care in America removed much of this and confined authority to biomedicine:

In the medical field, Paul Starr gives a compelling account of the historical transformation of authoritative knowledge in America. He points out that well into the twentieth century, medical care was provided by a multi-stranded, pluralistic medical system within which the knowledge held by barber surgeons, homeopaths, folk healers of various kinds, midwives, and other empirically based practitioners was considered authoritative by different parts of the population. A series of events culminating in the Flexner Report of 1910 resulted in establishing allopathic professional knowledge as the

dominant form—a transformation that quickly de-legitimized all other kinds of healing knowledge, putting the newly defined medical profession in a position of cultural authority, economic power, and political influence (Jordan 57).

The drastic alteration caused by the adjustment of medical training resulted in the elimination of many of these folk medical specializations. Suddenly, their methods of training had been deemed inadequate and unworthy of certification or recognition as a legitimate alternative. Biomedicine became the only health system endorsed by cultural authority.

Despite medical anthropology's recognition of biomedicine as a cultural system and the subsequent, though slow to disseminate, public awareness of their subjectivity, the "authoritative knowledge" that biomedicine is not a cultural institution but rather an unbiased, completely objective scientific approach remains culturally ingrained. Consequently, dance/movement therapy and other CAM practices continue to be subjected to evaluation based on the Western, biomedical paradigm, with little respite. Though medical anthropology has begun to uncover this problematic way of viewing biomedicine as distinct from ethnomedicine, the general populace does not act within this framework. There is a disparity between their realization that insurance companies and agendas in biomedicine don't always have the patient's best interest at heart, yet they still hesitate to look outside of this authority. This fosters a positive feedback loop where dance therapists are forced to conduct research within the Western paradigm, which doesn't comprehensively represent their work, to receive recognition as a legitimate study, but then the lack of well-executed studies using a different model discredits these new models even further. Until society acknowledges new types of medical authority, CAM practitioners have to subscribe to Western biomedicine's precedent to be legitimized.

Dance therapy thus holds a problematic place in our society. It is located on the periphery because of its association with both art, especially dance, and alternative medicine.

Because people have little exposure to either of these practices, they transfer the stigma associated with dance and alternative medicine to dance therapy. Consequently, it faces a significant obstacle in gaining legitimacy since it is forced to go up against the dominant biomedical authority. It is important to keep these cultural considerations in mind when evaluating the responses of subjects.

Background to Research Problem/Intellectual Framework

The vast majority of literature on dance therapy focuses on efficacy, case studies, and other outcome-based research, primarily because of the intent on branding dance therapy as a profession grounded in scientific research and located within the medical field, as discussed above. I have yet to come across an article that formally studies the societal responses to dance therapy, the way its regarded, or how the general populace or medical professionals situate dance therapy in the medical field (or not). Though it is possible that this research may exist, it has not been disseminated very widely, making it difficult to locate. As such, it has been my purpose to study dance therapy from an anthropological perspective, with the intention of determining what action will assist the field most in increasing its credibility, recognition, and acceptance as a legitimate mode of therapy.

With this objective in mind, I sought to research the perceptions people had towards dance/movement therapy. As a student of medical anthropology, I was intrigued by society's views of medical systems, how they regarded them, and what informed their beliefs. As a future dance therapist, I was interested in uncovering how receptive people were to dance therapy and what it was that informed their thoughts about it. Seeing as 27 out of the 34 subjects had not known about dance therapy prior to becoming involved with the study, I had the advantage of

working with people who had only their cultural knowledge about dance, the arts, and the American health system to inform them.

When I began this research, I did it with the expectation of using Erving Goffman's work with stigma. While this work is still relevant to the analysis of my findings, I realized during the research process that the question of whether or not there was a stigma, a discrediting or disgraceful attribute, against dance/movement therapy could not really be posed as such (Goffman 2-3). This is primarily because most people don't know anything about dance/movement therapy. While this does not rule out the possibility of stigma being attached to dance therapy, it indicates that this stigma was not inherently linked to the profession specifically. It does mean, however, that there are elements of dance/movement therapy that already have a stigma attached to them, and as people learn what this modality is and connect these elements to it, the stigma is transferred to the field of dance therapy. As mentioned earlier, the main stigmatized elements are dance and the arts, psychology, and alternative medicine. When it seems as though stigma is a relevant interpretation, it will be acknowledged. However, most of what I had originally anticipated facing as stigma is actually framed as the need for belief, a concept that will be discussed in greater detail later.

In my interpretation of the data I have also been influenced by Nancy Scheper-Hughes and Margaret Lock's theory of the mindful body. I have used their theories on the influence of Cartesian dualism in the natural and social sciences to analyze the body/mind associations that the participants had. Brigitte Jordan's work with authoritative knowledge was also a significant tool for analyzing my data. Her theory was used to understand the subjects' perspectives on medical authority and the conditions they require for legitimacy. Lastly, William Cobern's explanations of knowledge and belief are used as a foundation for understanding subjects'

perceptions of the role that belief plays in the effective practice of dance therapy. With these three perspectives as my analytical tools, I will explore the data's emerging themes of the concurrent connection of and disparity between the body and the mind, the power of medical authority on the public, and the role of belief necessary for successful treatment.

Methodology/Research Design/Context of Interviews

This study is ethnographically based, using interviews as my source; I will describe my subjects, their perceptions, and their beliefs through the material gathered. I conducted all interviews at the University of Pennsylvania, using both graduate and undergraduate students as subjects. Interviews ranged in length from ten to thirty minutes and were conducted confidentially with only myself and the subject present. In all, thirty-four interviews were conducted for the purpose of this study. They were originally intended to be open-ended interviews, but specific questions were developed in response to the subjects' need for structure in discussing a topic they were mostly unfamiliar with. Prior to the interview, all subjects were told two statements. First, they were encouraged to be completely honest in their responses, and that none of their answers would be offensive to the interviewer. Second, they were encouraged to speculate and elaborate whenever necessary, seeing as the topics of the questions might be unfamiliar to them. Their perceptions were the important material, not whether or not their ideas were correct. With these things in mind, subjects began the interview.

Below is the list of questions developed for the interviews, which can also be found in Appendix A:

SECTION	QUESTIONS
Background/perspectives on mental health	<p>What is your course of study?</p> <p>Would you ever seek medical treatment for a mental health illness?</p> <p>What kind of treatment would you seek?</p> <p>Would you be willing to go to a psychologist/psychiatrist?</p> <p>Would you be willing to try acupuncture? Massage? Arts (D/MT) therapy?</p> <p>Do you think the forms of traditional therapy can be successful?</p> <p>What do you think their success is dependent on?</p> <p>Would you be willing to recommend mental health therapy to a family member? To a friend/acquaintance? What kinds?</p>
Perspectives on dance/movement therapy	<p>What do you think dance/movement therapy is?</p> <p>What do you think it may involve?</p> <p>What would a dance/movement therapy session look like?</p> <p>What do you think it is meant to accomplish?</p> <p>Do you think the effects of dance/movement therapy are primarily chemical, emotional, spiritual, or some combination?</p> <p>Do you think this type of therapy can be successful?</p> <p>What do you think this success is dependent on?</p> <p>Would it be more or less successful for people of demographics, illnesses, values?</p> <p>Do you think you have to have a passion or a talent for dance in order to benefit from dance therapy?</p> <p>Do you think there's a resistance or hesitance towards dance therapy? Do you think increased awareness, familiarity, or scientific research would help diminish this?</p> <p>What do you think the advantages and disadvantages are to an alternative therapy like dance therapy versus traditional therapy?</p>
<p>Prompt: As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."</p>	<p>Does this change your understanding of what dance therapy is?</p> <p>Does this change your understanding of what a session might involve or look like?</p> <p>Does this change whether you would recommend it to a mental health patient/family member/friend?</p> <p>Does this change whether you yourself would be willing to try it?</p>

All subjects were asked the questions listed, though some subjects were asked other follow-up questions depending on their responses and experiences. It is important to note here that the majority of subjects interviewed, though not all, were peripherally acquainted with the interviewer, not by choice but out of necessity of obtaining subjects. Some of these participants were also aware that the interviewer intends to pursue a career in dance/movement therapy, though care was taken to interview only those that had minimal exposure to dance therapy directly through the interviewer. As with most studies, however, it must be taken into consideration that the participants are aware that the interviewer has some vested interest in the subject they are researching, which might sway their responses to be more considerate, positive, or censored to avoid offense.

Since all subjects were taken from the population of students at the University of Pennsylvania, I will give a brief synopsis of some of the relevant figures of the Penn community. Penn is an ivy-league institution located in the University City neighborhood of West Philadelphia. It is a large university with 20,000 students, evenly split between graduate and undergraduate. Approximately 10% of the student population is international, giving the community a very global focus ("Facts and Figures"). The undergraduate division of Penn is comprised of four schools: the School of Arts and Sciences, The Wharton School for business, the School of Engineering and Applied Science, and the School of Nursing. Each of these schools has their own distinct culture and though it is beyond the scope of this paper to elaborate further on this, I will mention that this structure gives Penn a significant pre-professional emphasis, particularly in the last three schools. There are twelve graduate schools, ranging from law and medicine to engineering, education, and social work. Because of its standing as a liberal school and its focus on research and interdisciplinary work, the atmosphere of the campus is

generally very open-minded, though it does have considerable conservative pockets. The fact that Penn is a research-based institution is significant because of the demand for empirical research to prove anything as truth that has been instilled in them by the university. The possible impact of this variable is noted in my data analysis. A list of the specific majors and concentrations of the subjects interviewed can be found in Appendix B.

Findings

Three very distinct themes emerged from the responses of the subjects: a body/mind dualism, confidence in authoritative knowledge, and the role of belief in dance therapy. The presence of these three themes in some combination in nearly every interview displays that they share similar views on what factors are of relevance when discussing dance therapy. Despite this apparent cohesiveness in themes, there was no general consensus on opinions about each theme, but rather, a wide range in beliefs. Subjects answered questions about dance/movement therapy according to a shared cultural paradigm of what a treatment regiment should look like and how health care systems should function. Invoking the medical discourse that has been culturally appropriated by Western biomedicine, subjects addressed or revealed the impact of authoritative knowledge, which is a social process by which one knowledge system gains authority either by explaining a given subject better or by having more power within the society, and the body/mind relationship. They also referenced the role of belief as influenced by popular culture and the media, expectations of and reactions to dance, and shared knowledge of what role medicine and psychology play in American society.

The Body/Mind Relationship:

The relationship of the body and the mind is of critical importance in dance/movement therapy, seeing as it is necessary to believe that the body can affect the mind and vice versa for

the theoretical foundations of dance therapy to be upheld. Biomedicine also has a prominent discourse on how the two are related. Nevertheless, these two institutions' perspectives on this relationship and their power to impact each other are rather opposite. The question of this relationship has been considered extensively throughout the history of medicine, psychology, and anthropology. The most significant influence on this discourse has been René Descartes' theory of dualism: the view of the body as a mechanical object and the mind as a nonphysical, self-aware entity. Though many other scholars have commented on, revised, or even tried to reverse the effects of his theory, the most prominent example being Michel Foucault, the impact of their criticism rarely leaves the circle of academia. Instead, the cultural knowledge, or information inherited either formally or informally through other people, about the relationship between the body and the mind centers around the idea that they are distinct entities and have little influence over one another. Nancy Scheper-Hughes and Margaret Lock discuss the history of Descartes' dualism and its impact on medicine and psychology in their examination of how the body is conceptualized in Western societies:

The Cartesian legacy to clinical medicine and to the natural and social sciences is a rather mechanistic conception of the body and its functions, and a failure to conceptualize a "mindful" causation of somatic states. It would take a struggling psychoanalytic psychiatry and the gradual development of psychosomatic medicine in the early 20th century to begin the task of reuniting mind and body in clinical theory and practice. Yet, even in psychoanalytically informed psychiatry and in psychosomatic medicine there is a tendency to categorize and treat human afflictions as if they were either wholly organic or wholly psychological in origin: "it" is in the body, or "it" is in the mind (Scheper-Hughes and Lock 4-5).

The impact of Cartesian duality is seen clearly here, even where psychosomatic medicine exhibits its influence. Yet, the ideology of this dualism is innately antithetical to the foundations of dance therapy because there is an inherent necessity for dance therapy to believe that the mind can affect the soma and vice versa in order to ascribe to the belief that movement and dancing

can have an influence on the psychological state of a patient. Because of this, dance therapy falls outside of this culturally dominant conception of how the body and the mind work. This places it in the cultural category of being regarded as mystical or new age. Scheper-Hughes and Lock then address the original source for this marginalization of medicine that uses any approach other than a somatic one: "Hippocrates and his students were determined to eradicate the vestiges of magico-religious thinking about the human body and to introduce a rational basis for clinical practice that would challenge the power of the ancient folk healers or "charlatans" and "magi," as Hippocrates labeled his medical competitors," (Scheper-Hughes and Lock 4-5). Seeing as the Hippocratic Oath is still used in medicine today, his legacy as the father of medicine has persisted, as has the desire to label anything as illegitimate that has not been sanctioned as rational, material, and directly caused from somatic forces. Any health system that doesn't subscribe to this Hippocratic and Cartesian philosophy has therefore been marginalized as charlatanism or quackery. Subsequently, many of the tenets of dance therapy fall under this category, placing it under this label. The belief that the movement of the body has the power to change the psyche is too similar to the magico-religious or energy medicine belief systems. Therefore, dance therapy is inherently distinct from the Cartesian dualism/Hippocratic mode of thinking. Since this school of thought is the dominant one in the American medical system, dance therapy is placed on the periphery of the health care system.

While culture is not a single thing but rather a social process dealing with a range of beliefs, often through the functioning of powerful social institutions (such as biomedicine), singular discourse patterns do emerge. In my data, for instance, body-mind dualism is exhibited in the responses of subjects. Though the majority of subjects believed that it was possible for dance therapy to increase the overall mood of a patient with moderate emotional issues such as

mild depression or stress, it was also common for subjects to reduce the potential effects of dance therapy in the cases of chemically-based ailments. Furthermore, nearly all subjects thought dance therapy would be ineffective in treating what they believed to be serious chemical imbalances, most frequently schizophrenia. Subject 12, a psychology major, reported the following:

I mean I think if you tried to use dance/movement therapy to treat schizophrenia you would have very, very little success. Or one of those... If you use any kind of therapy that's not drug therapy to treat something that seems to be very biochemical, there's not so much you can do. But I think in terms of like... I don't know. I mean I honestly I don't know that much about what it is. I think in terms of just like bettering someone's mood, especially somebody who, that's something that they enjoy generally, I think it could be very effective. I don't know... I don't know, I can't imagine how that would help you cope with like a phobia or something. But I think in general like depression, anxiety, PTSD, stuff that's less... kind of... very, very specific where you need very specific coping skills, I think that it can be effective for that (Subject 12).

Subject 12 admits to having very little knowledge of dance therapy, yet still decides that its primary function would be to improve patients' moods. Following the line of thought of the Cartesian dualism, she assumes that dance therapy would be ineffective for diseases that are mainly biochemical or for those that require addressing and overcoming specific issues. This kind of response was rather typical from subjects, signifying that many of them were invoking the cultural understanding that movement or dance or language is not capable of affecting chemical diseases, thus displaying the dualistic paradigm.

Subject 6 also shares this perspective, but he struggles with the disparity between authoritative knowledge and embodied knowledge, namely what he has learned is true culturally versus what he has experienced to be true. First, he says that schizophrenia could not be treated by an alternative therapy like dance therapy because it is a chemical imbalance. The subject thought that diseases that involved "normal emotions that are just exaggerated," including depression, stress, and anxiety, could be treated by dance therapy. However, when he discussed

his personal mind/body experience, it becomes apparent that he perceived a connection between the two: “I actually had a massage once and it was unbelievable because after that for the next week and a half, it was just... life was just so much better because when you feel... obviously stress and emotional distress has an impact on your body physically. When you fix those aspects of yourself, then it could allow you to clear your mind,” (Subject 6). Intellectually or empirically, it is obvious that many of the subjects struggle with the ability of dance to affect these highly chemical diseases like schizophrenia. Yet, when they turn to their embodied knowledge, the connection of mind and body comes very naturally to them. Though they themselves frequently mention personal experience with this connection, there is something of a stigma once removed, where the subjects might be able to see the connection, but assume that others cannot. Subject 6 exemplifies this notion: “I mean I don’t know if it’s necessarily rational, but the idea of well people just kind of dancing around, ‘how is that going to help them to no longer be depressed?’ That’s like something that I get. I just um, I have my own parents in mind with this and that seems like what they would be like,” (Subject 6). Though he mentions several times throughout his interview that massage and other somatic experiences have influenced his mood and functioning, Subject 6 assumes that others don’t share this understanding. This scenario where the subject states their own open-mindedness to the possible effectiveness of dance therapy or their willingness to try dance therapy, yet adds that they don’t think others would be as willing or open-minded, is a common response, and will be discussed further in a later section.

Even those subjects who believe that dance therapy has the potential to affect emotional well-being refer to it with a discourse that creates an identity of informality. When subjects discuss the ability of dance to improve mood, they often refer to playful, yet silly situations.

Though dance therapy is meant to be enjoyable, the identity many subjects have assigned to it risks the exclusion of the theoretical and therapeutic foundations of the process, as well as the possibility of dance therapy being a professional occupation. Subject 15 equates the effect of dance therapy to one of these informal, playful situations:

I've heard a lot of people, not myself, like to sing in the shower because it's fun, you know, it's euphoric or something like that. I think that the... you know, being able to forget about inhibitions and just concentrate on what you're feeling and the mood that you want to put yourself into. I think you can do the same thing with dancing or with moving around. I know some people, when they're in a giddy mood, they like to, you know, waltz around the room or something. I think that's neat expression and vehicle towards changing your state of mind or expressing it (Subject 15).

The idea of euphoria or endorphins often comes up in subject responses, as in Subject 15's response above. Other references have been made to exercise, taking a walk, or recreational dancing. While these elements certainly involve aspects that affect mood, many of which dance therapy itself utilizes, they overlook the psychotherapeutic basis of dance therapy. This, in turn, diminishes the status of dance therapy as a therapeutic modality that has theoretical underpinnings and instead equates it with a recreational form of entertainment, invoking the dualistic notion that the body requires medicine, which is genuine, and the mind requires play, which is more spurious. Subject 13 also acknowledges the distinction between these views, stating that he had originally perceived it as recreational:

I kind of think of it more like you go to... you know how you go, if you go to a psychologist or something you're in an office, or if you go to a physical therapist you work with them one on one, so I kind of see that here now, too. Because before I was picturing like a group, like you go to the gym, but I think I see it more as you go to the physical therapist. So, you get individual training, you're working in... you're not going to the gym basically, you're going to the doctor's office (Subject 13).

Subject 13's interview represents the dichotomy between medical health and recreational fitness. Throughout the course of the interview, he altered his understanding of the goals of dance therapy and consequentially it changed his understanding of its characteristics. After giving him

the ADTA definition, he says, ““Well, one thing that struck me was the term psychotherapeutic. Alright, because that sounds really medical, right? So it sounds like it’s more than doing something physical. The association is trying to kind of couch itself in the medical language, medical terms, and it’s also saying, that okay these things will have benefits on mental health,” (Subject 13). The discourse associated with the term psychotherapeutic is able to alter his perception of what dance therapy involves. For him, it moves dance therapy from the realm of the gym to a doctor’s office, automatically associating it with the medical field and making it a more legitimate, regulated, and concrete method of therapy and dissociating it with the recreational conception he had originally associated it with.

Another body/mind connection that has elicited uncertain reactions is that of the power of non-verbal communication. Subject 12, who studies psychology, views the issues of non-verbal communication from a therapeutic perspective, even acknowledging that it could be a great resource for those who cannot or have difficulty communicating verbally:

I mean, I kind of said this before, my sense is that it really is a great thing for people who can’t express themselves through traditional means, but it definitely has drawbacks because there’s a limit to how much you can communicate without using words. You know, I mean I’m sure there’s words involved as well, but like I don’t know, you get into this whole realm of guesswork and stuff like that and that can be problematic I think (Subject 12).

The subject brings up the issue of what they perceive as the abstract, nebulous nature of dance. While it is true that dance can be ephemeral in many ways, this characteristic of dance is not always seen among dance therapists as a disadvantage. However, this does show that there is a disparity between the need for definitive and exact verbal communication that Subject 12 requires and dance therapists’ acceptance of what is seen as a less precise expression. It is interesting that several subjects have commented on this need for language considering the work done by linguistic philosophers such as Bertrand Russell and Ferdinand de Saussure, who discuss

the vague and arbitrary nature of language. It is pretty instinctual in our modern day culture to understand that verbal language has many shortcomings and people don't always interpret correctly the intended meaning of a given statement. And yet, many people still regard language as being precise in nature. This is illustrated in the way Subject 12 refers to interpreting meaning through movement as guesswork, yet does not perceive language the same way. Although, there are people who do value this supposedly more abstract type of artistic communication:

I think it has to do with their willingness to accept... some sort of truth in non-verbal communication. I think that some people just think it's not existent, that you're not going to be able to do that. And I think some people are very willing and open to say that 'I can listen to an eleven minute symphony movement and the composer is going to say something to me, even though there might not be any lyric to the song or program that he's given us.' That there's some sort of communication that's going on (Subject 18).

Subject 18 displays a belief in the ability of modes of communication other than verbal language to convey meaning. His embodied knowledge from the experience of communicating through music informs this belief, one that is a necessary component for a person to put trust in dance therapy as an efficacious psychological treatment. This returns us to the issue of whether abstract movement has the ability to translate into some kind of meaning for the patient, or whether they can express a specific emotion in their movement. With the precedent of a mind/body disconnect that was set by Cartesian dualism, it follows suit that society would struggle with the ability of the body's actions to have a distinct effect on the psychology of the mind. As described by Subject 12, this provides a foundation for the belief that non-verbal communication through movement is "guesswork", in contrast to real science. Consequently, how can dance therapy be medicine if it relies on this guesswork?

Though there are a number of participants who see the relationship between the body and the mind as clearly distinct, or have an unclear vision of this relationship, there are also others who see them as clearly connected. Subject 37, a nursing master's student, sees her career as

much more holistic and focused on attending to the whole person. For her, “everything is always mind-body related.” Subject 34 sees it similarly, elaborating on this connection:

I think maybe you would have a trainer or someone with you, a teacher, asking you to describe how you feel and then movements to accompany that. Like, just expressing it with your body, like expressing your anger and showing it more physically to try and get it out. I feel like a lot of people are angry and they don't show it, they still remain in the same physical position, are happy and they still remain in the same position, and are really sad and remain in the same position. So sometimes moving how your body wants to be when it's emotional could be helpful... I could tell, just naturally, that it was going to have to do with the emotional and you can see how it has to do with social, cognitive and physical integration. And it seems like a great idea that, you know if someone has problems, it's different facets for dealing with the physical, cognitive and then social and then emotional, that trying to bring those together could be really helpful. And it could be helpful for someone who needs to work on all these areas and of course they still might see therapists or psychiatrists or psychologists for different things, but have something that brings it all together could be really useful then having all these things separate. Because as a person, it's all these things together, so why not do something that brings it all together (Subject 34).

The correlation that Subject 34 discusses here demonstrates her belief that the “body” itself would have a physical reaction and response to emotion, and would consequently want to express or reflect that feeling. She assumes that the body has a specific desire to move in a way that is related to their mental state and posits that allowing your body to follow that intuition could be beneficial. Yet, dance therapy is based on the ability of this mind/body relationship to be reciprocal, and Subject 34 does not mention that the body can do anything to affect the state of the mind. She does, though, view health in a very comprehensive and holistic sense. She sees the integration of various parts of the individual as instinctive and dance therapy as a catalyst that has the potential to foster this integration.

Though there was a spectrum of the degree to which subjects thought that the body and mind were connected, each subject had at least one response that indicated the distinction in their mind of these two entities. This demonstrates the far-reaching influence that the historical precedent of Cartesian dualism has had on American society and their views of the individual,

health systems, and their relationship. Because this conception is so culturally entrenched, it is difficult to reconcile the possible efficacy of dance/movement therapy, seeing as its success relies on the notion that the somatic and the psychological can affect each other. Without the possibility for these entities to affect one another, as Cartesian dualism would indicate, it is difficult for subjects to view dance therapy as anything more than a recreational and stress-reducing activity.

Authoritative Knowledge:

The presence of authority is obviously necessary in society to help us make sense of our world, verify information, and ensure that we are not being misled. However, it is critical to know the basis of the authority upon which we make our decisions. As cited earlier, Brigitte Jordan discusses authoritative knowledge as it has been defined anthropologically, stating its social origin. The process by which it gains its dominance is outlined below:

The central observation is that for any particular domain several knowledge systems exist, some of which, by consensus, come to carry more weight than others, either because they explain the state of the world better for the purposes at hand (efficacy) or because they are associated with a stronger power base (structural superiority), and usually both. In many situations, equally legitimate parallel knowledge systems exist and people move easily between them, using them sequentially or in parallel fashion for particular purposes, but frequently, one kind of knowledge gains ascendancy and legitimacy. A consequence of the legitimation of one kind of knowing as authoritative is the devaluation, often the dismissal, of all other kinds of knowing. Those who espouse alternative knowledge systems tend to be seen as backward, ignorant, and naïve, or worse, simply as troublemakers. Whatever they might think they have to say about the issues up for negotiation is judged irrelevant, unfounded, and not to the point. The constitution of authoritative knowledge is an ongoing social process that both builds and reflects power relationships within a community of practice. It does this in such a way that all participants come to see the current social order as a natural order, that is, the way things (obviously) are (Jordan 56).

This pathway to achieving authoritative knowledge has been utilized by Western biomedicine, as described in the cultural context section. With this precedent set, alternative medicine, or anything that is perceived to be alternative, becomes a parallel knowledge system and is quickly

made irrelevant. The Flexner Report, which called for stricter requirements and more standardization of medical training, acted as the catalyst for Western biomedicine to gain its authority, forcing folk and alternative views of medicine into being the illegitimate parallel knowledge system. Though dance therapy doesn't view itself as a CAM practice, it is regarded as such by both the general and medical populations. Consequently, according to the theory of authoritative knowledge and the supporting perspectives of the vast majority of participants, dance therapy needs to prove itself within the boundaries of biomedical system. However, there is a disparity of needing research as proof, but only having methods of evaluation that would either seem inappropriate as a measurement for this type of work or would not be considered a legitimate form of research. For instance, quantitative research often does not represent accurately psychological work, yet the qualitative research and narratives that would be more fitting would not be considered acceptable. The biomedical system thus presents this catch-22, making it impossible for alternative medical systems to find a means to effectively prove themselves in the eyes of biomedicine.

Most subjects recognize this standard that dance therapy must conform to for it to obtain legitimacy. Subject 8, a first year medical student and modern dancer, has an interesting perspective because of her location in both the biomedical world and the modern dance world that dance therapy has taken so much from. She gives a comprehensive description as to what she understands are the necessary elements for working towards the legitimization of dance therapy within the culturally authoritative Western system:

I think it's, unfortunately, a very biomedical, western medicine precedent. There's an etiology to disease and there's a standard treatment that's been proven through a double blind clinical trial. Always. In order to prove anything, or to seem like it proves something. There's lots of gains being made with, I think, with acupuncture. And a lot of pushes for translational research or even with um, complementary and alternative medicine. But everybody still wants research, they want to see the results. They don't

want to see ‘Oh this might possibly work for one individual.’ [This research] as well as publishing some papers about it in the New England Journal of Medicine, obviously would catch so many eyes, or whatever the one’s for psychology (Subject 8).

A significant issue that Subject 8 touches on are the methods of research that are used to demonstrate empirical success. The precedent, she says, is a double blind clinical trial. Though this has undoubtedly become the standard of evaluation, she mentions that it may only “seem like it proves something.” The randomized, double-blind, placebo-controlled method of scientific research that is then published and publicized in a medical journal has become the authoritative system in America. Yet, Subject 8’s indication that this method’s ability to prove efficacy is not always appropriate proposes a conflict of whether or not this approach is always relevant. She mentions a new demand for translational research, yet it’s only mentioned as a method for CAM and not for biomedicine. According to Jordan’s theory of authoritative knowledge, if translational research would be done for CAM practices and not for biomedicine, it would already be deemed irrelevant because of CAM’s status as a parallel knowledge system.

One of these translational research methods could be qualitative-based, narratives. Though Western scientific research is requested as evidence in nearly all interviews, narrative evidence is not excluded in subjects’ minds as a possible form of the measurement of success. Subject 6 regards it as the most crucial form of verification:

I would say if a close family member were to try it and were it to be successful, I think that would be the most effective just because I think anything personal is more powerful than statistics and scientific evidence, but that obviously couldn’t hurt. And like I said, there are some people where it doesn’t matter how effective it is, how effective it’s proven to be, it’s just never going to sink in with them (Subject 6).

Subject 6 emphasizes that for him, personal, narrative research is much more persuasive than a randomized controlled trial would be. However, he also acknowledges that there are some people that will not be convinced no matter what efficacy outcomes are proven. This perspective

indicates that for some people, the cultural beliefs of the authoritative system are so ingrained that even if the same standards of evaluation are imposed upon an alternative system, they cannot be accepted into the authoritative system, nor can they be legitimized within the parallel system.

The two perspectives of Subjects 8 and 6 discuss this disparity of needing research as proof, but only having methods of evaluation that would either seem inappropriate as a measurement for this type of work or would not be considered legitimate. This contradiction has been mentioned several times by participants who grappled with how to measure what they viewed as a more abstract treatment:

Yeah, I think the disadvantage would be it's possibly harder to track progress or, you know, feel like... that progress is happening at all because it seems like a really subjective and kind of free-form thing. And it'd be hard to prove that there were, you know, positive results because how do you... kind of like assign numbers to things like in that setting, you know, and run statistical analyses on different things. You could have really qualitative reports, I guess, that sort of sound like ethnographic things. But then there's always the issue of people not wanting to buy into narratives and really wanting numbers, or reports, like chemical reports or something (Subject 22).

Subject 22 illustrates the discrepancy between empirical research that is sanctioned by biomedical authority and a narrative report. Though she thinks narratives might be more suitable for dance therapy research, she acknowledges the pervasive impact of the medical authoritative knowledge system and comments on the fact that many people consider this empirical data as necessary to determine efficacy. For subject 22, tracking progress with a modality that is this "free-form" is problematic just based on that aspect, making any measure of efficacy questionable and consequently difficult to provide definitive answers.

This paradox of finding a means of research that is both suitable for measuring the success of a dance therapy patient yet an acceptable way of measuring efficacy in the eyes of the public and the professional medical world is one which many subjects mentioned in their interviews and that dance therapy will have to struggle with to overcome its position as a parallel

knowledge system. However, there is another element that subjects have mentioned would influence the full integration of something like dance therapy into the medical mainstream. Institutional recognition has been mentioned as a critical element in the legitimization process. Some subjects refer to it as simply as, “Just naturally, it sounds legit when you have the American Dance Therapy Association. I’m like wow, there’s an association about this!” (Subject 34). The mere presence of an organizational body to regulate a particular practice, especially since this type of association falls in line with the paradigm of Western biomedicine, provides this subject with a sense of legitimacy. Subject 13 has a similar outlook that addresses the institutionalization of the modality itself:

So yeah, I think it can be [successful], but I think it depends on the teacher. And it depends on the training of that person. And it depends on some sort of standards, so some sort of professionalism like we have with psychiatry for example, which may not be there with acupuncture and yoga and stuff like that. So I think that if there’s... I’m a scientist, so if there’s a body of research or there’s some sort of professional organization that has kind of vetted these things, then I think these types of things can be very helpful, yes (Subject 13).

Here, it is the professionalization of the field and the training of its practitioners that determines the success. Subject 13 mentions the need for standards, indicating that the education and the certification of dance therapists by a “professional organization”, similarly to Subject 34’s reaction, would impact his opinion of the efficacy of the therapy. However, it is also important to note that this organization needs to be analogous to other medical associations. The subject mentions that it should follow the prototype we have of psychiatry, also revealing his uncertainty as to whether the training of things such as acupuncture and yoga are sufficient.

For others, recognition from outside sources is another step towards achieving legitimacy. Some subjects indicate that the only way to really gain acceptance is for the authoritative knowledge model that made it illegitimate in the first place to sanction the therapy:

This is going to sound horrible, but it's just because I've been in the healthcare industry. Honestly, if insurances would start really paying for these things and really saying that, 'This is part of your plan and it's perfectly acceptable and they've been proven to work and these people are, they're not just new-age whackos, they're people that have had training and they've gone to school and they know what they're doing.' I think that having that type of, I don't know what the word is, but I guess just kind of having backup [or institutional support], (Subject 26).

The large degree to which people rely on already established institutions is made evident in Subject 26's comment. Because people trust the standards and regulations set by institutions like insurance companies as sanctioned by biomedical authority, they feel comfortable depending on their endorsement. They also believe that these organizations have done the investigation necessary to verify the validity of a given modality, taking their motivations for granted as being in their best interest. There is also a negation factor to consider here, where people assume that if a practice isn't approved, it's because the modality is illegitimate, and not necessarily because the institution hasn't had the desire examine its potential.

The final authoritative consideration to be discussed here is governmental/political support. Very few subjects mentioned this as a factor, but Subject 4 makes an interesting point about the complete integration of an alternative modality like dance therapy into the dominant authoritative system:

I guess I wonder also if people are... not necessarily court-ordered, but if their school asks them to get therapy and such and if people at that level don't understand what dance therapy and other artistic therapies can do they would be less willing to kind of accept it as a method of that person dealing with their problems, (Subject 4).

Here we see a second line conflict, where even once people begin to accept dance therapy as an option for themselves, they might face difficulty with other people accepting it, specifically in this case other institutions like schools and courts. This could remove any progress dance therapy might have made by adding obstacles for its patients. If patients wish to receive dance therapy services but, whether formally or informally, it will be unacceptable to educational,

governmental, or even social institutions as being an adequate form of therapy, then this will reinstate the hindrances of getting patients and their peers to view it as viable.

As demonstrated, the influence of the authoritative knowledge system has a critical influence on the acceptance of dance therapy. The process is two-fold, requiring each individual to regard dance therapy as a new part of the system or as a suitable alternative to it, but then also for the authoritative system and its supporting institutions to reinforce this acceptance. As we have seen, dance therapy is located in a liminal place where it tries to place itself within the medical field, requiring more than narrative evidence for its efficacy, but is also founded upon more qualitative methods that make measuring it with the established randomized, double-blind, placebo-controlled trial troublesome and perhaps ineffective. In order to overcome this paradox, one of these factors will have to become more flexible.

The Role of Belief: Willingness

One of the most commonly shared beliefs subjects mentioned in their responses was that in order for a mental health treatment to be successful, the patient needed to be open-minded towards the therapy and willing to fully commit themselves to getting better. In this way, belief in the mental health system is almost unanimously agreed upon as a necessary component of effective treatment. At the same time, knowledge about the empirically based efficacy of dance therapy was also very important to the subjects' consideration of the modality. William Cobern discusses the historical and cultural background of the way Western society views belief as opposed to knowledge. Here he distinguishes between these two categories:

For most people, including scientists, knowledge implies certainty. Knowledge is something that one knows (for good reasons) to be true. Belief on the other hand implies uncertainty. One may believe that something is true but if it cannot be known, it can only be belief. Ultimately, what one believes is a matter of faith. One may have many reasons for believing something to be true but the empirically based uncertainty involved precludes knowledge (Cobern 227).

Cobern demonstrates the value we have placed on the view that knowledge is certainty and belief is uncertainty. This semantic distinction is critical for the legitimacy of dance therapy. As described earlier, the qualitative nature of a therapeutic modality, specifically one that involves what is regarded as the abstract communicative system of dance, precludes it from being verifiable as knowledge. In the previous section, we witnessed many subjects grappling with this predicament. However, Cobern asserts that this perspective does not follow reason:

Knowledge without faith is groundless; belief without knowledge is empty. People simply do not hold beliefs for no reason... This is not to say that everyone is self-reflectively aware of all reasons for his or her beliefs, only that reasons exist... For all practical purposes, belief and knowledge both represent what one has reason to believe is true (or valid),” (Cobern 223, 234-235).

As Cobern explains here, the notion that belief and knowledge are at odds to one another is not necessarily the way we experience them in our lives. Many subjects confirm this assertion in the way they value the beliefs that inform their opinions. Whether it has a positive or negative impact on their view of dance/movement therapy, cultural beliefs played a large role in each subject’s interview.

The influence of belief on the patient, their soma, and the community at large has been documented in the foundational work done by Claude Lévi-Strauss. His discovery of the relationship between belief and experience in studying shamanism is particularly relevant to the data obtained from my subjects. The discourse they use to speak about the belief necessary for treatment to work corresponds with Lévi-Strauss’s account that belief is maintained socially through symbols and communal attitudes towards healing. Belief is situated in contrast to knowledge in this work, corresponding to the “knowledge” of biomedicine as opposed to the “belief” of alternative health systems. As will be described below, the subjects ascribe successful treatment using dance therapy to “open-mindedness” and “willingness”, but not to the

empirical factors of the modality. Though there is agreement that belief is essential, the specific elements that each subject requires for this belief to be present vary.

Because of dance therapy's placement on the periphery of the medical establishment and the minimal media awareness it has had, subjects experience a significant amount of ambiguity surrounding it. Consequently, the most frequently discussed topic was the need for a patient to be willing and open-minded to trying dance therapy, or in Lévi-Strauss's discourse, to believe in it, for it to be successful:

You know, they have to be willing to try it first. There has to be some sort of benefit that they're getting out of it immediately, whether it's as little as, 'Well, I feel a little better today,' whether it's, 'I don't feel as sick as I did this morning,' or 'I don't feel... I just feel stronger than I did yesterday in a purely physical sense. I feel like I worked out or something like that.' Sure, I mean they're going to find different merit in it. I'm sure there's a lot of people who will come into it, 'Ok, I'll try it once.' And maybe they'll do it again thinking, 'Ok, it's not doing what they think it's doing, but it might be doing something for me.' So there's some sort of willingness, I think. And it's not just dance, I think it's a lot of things that when people are just, kind of not sure about if they want to try something, they can kind of construct these various reasons until they've convinced themselves that it's positive (Subject 18).

Subject 18 emphasizes both the need to be willing to try this modality, but also the willingness to be open-minded to its potential to accomplish something for the patient. He describes it as a process whereby the effects of the therapy work to convince the patient of the therapy's merit. The interesting aspect of his statement is the way he ties willingness together with benefit. In a way, he characterizes them as being mutually dependent on one another. This process of belief acquired through willingness and immediate benefit demonstrates his method of developing faith in a given treatment.

This idea of developing belief as a process indicates a level of effort that must be put forth. Several subjects have mentioned that traditional medicine is easier because that effort is

not necessary, seeing as it has already been legitimized and people have already evaluated their opinion of its worth. It is the effort itself that some people find deterring:

Also it requires you to take a much more active part in doing something you're not necessarily familiar with. So, taking a drug is relatively passive, seeing a therapist is relatively passive, getting a massage or acupuncture is passive, but dance is an active process. So I think that's part of it, too. I don't want to have to do anything to make myself better, I want you to make me better, that's the whole point... Yeah, I guess we all still just want to be fixed, we don't want to have to work at it (Subject 25).

Not only is the effort in belief not necessary in the case of biomedicine, neither is the effort of engaging in the treatment process. With most biomedical processes, the treatment is being done to the patient. Subject 25 equates all these practices with passivity. However, he regards dance therapy as an active process that requires an effort on the part of the individual to achieve success. For him, it is this effort that decreases his willingness to try dance therapy. Instead of "having to work at it," he'd rather the therapist do all the work to make him better. Several other subjects have mentioned the idea that dance therapy would be more of a practice that continues over a span of time, an aspect over which they expressed hesitation:

And I think that dance/movement therapy, if it's similar [to yoga and acupuncture], probably needs multiple times or having people incorporate it as an almost daily or weekly or, you know, regular practice in their lives. I know in this day and age people are much more willing to take a pill and have it resolve itself than invest time and energy and, you know, belief in something else, if they can take a pill for it (Subject 23).

As Subject 23 explains, time commitment was a deterrent for many subjects. Again, a new system that requires a patient to put forth belief and effort when you can do something as quick and passive as taking a pill was seen as a less desirable option. Ultimately, many people preferred that which was simple and fast, which many people assumed was not the case with dance therapy.

Ultimately, many subjects claim that willingness to try dance therapy and to believe in its ability to have an effect is the main hurdle dance therapy must overcome. Despite the emphasis

on empirical evidence, belief or faith in the system is still considered a significant factor, one that is even necessary for success. It is also important to note that subjects seem concerned about the need to be involved in this treatment process, giving time and effort to the treatment as opposed to being passive and just receiving treatment. Considering all of these elements, dance therapy seems to require a great deal of belief, effort, and willingness to attain patients and to be successful in its treatment.

The Role of Belief: Perceptions

A noticeable factor that people used to discuss their understanding of dance therapy was, very fittingly, their conceptions of dance. Seeing as the majority of subjects had no prior knowledge of what dance therapy is, many of them resorted to their cultural understanding of dance, its place in American society, and their own perceptions of its meaning, relevance, and reception to develop a characterization of dance therapy. Subject 30 elaborates what he thinks a dance/movement therapy session might look like:

Oh. I don't know. Wearing tights of some kind, hahaha, being in a big square room with a wooden floor and a mirror and maybe those big thick socks, you see how much I know about dance. Moving and such, things. I really don't know what I'm talking about, I hope you don't mind... I'm picturing moving around and stuff like that. I'm not picturing break-dancing necessarily... A little bit more, when I think therapeutic, I always think slow. For some reason, it's just... machine gun fire kind of stuff doesn't really sound therapeutic to me. So yeah, I'm picturing fluid-type motions, I mean it seems like it would fall in line with this (Subject 30).

In this excerpt, the subject combines his expectations of both dance and therapy to create an impression of what dance therapy might entail. He evokes the image of a dance studio with his description of "a big square room with a wooden floor and a mirror." He falls back on the culturally appropriated image of dancers as people who wear tights and legwarmers. He chooses this depiction because, unlike break-dancing, it seems more appropriate for his conception that therapy is slow and fluid.

Furthermore, the comfort level people have with dance is quite varied. At least eleven subjects mentioned feeling uncomfortable dancing in public. Subject 22 says that he's not comfortable dancing in front of other people, but also that some people might feel insecure watching themselves dance in front of a mirror. For Subject 15, this depends on the participants' willingness to be "silly." He says that a lot of people don't dance in front of others, so they would view something like this as being playful. He then implies that the willingness to be silly and not take things too seriously would allow people to be more comfortable with dancing in front of others. However, sometimes the concern is less about comfort level and more about what is appropriate. Subject 8 mentions that she believes some religions are resistant to dance because expression is something that should be contained and not externalized or shared with others. Moreover, there is the risk of invoking an image of promiscuity with certain types of movements. For people with these beliefs, Subject 8 thinks something like dance therapy would face a lot of resistance.

Yet, not all conceptions of dance were negative. Several subjects referred to it as something that they know and are familiar with, unlike perhaps some of the biomedical treatments that are more difficult for people to understand. Subject 23 espouses this view, saying, "But also because, you know, dance is not... you know what dance is, it's not, you know, something scary like sky-jumping therapy, or something like that." For him, dance is something more familiar and natural than biomedicine or even other therapeutic forms that may utilize methods that are less familiar to patients. The familiarity with dance he describes is equated to a comfort level with what it involves. Subject 14 mentions the recent increase in media attention that dance has had, stating, "I'm trying to think if our society is more prone to dancing than it was a while ago, but I haven't been around that long, so I can't really provide any specific

evidence on that. Maybe films like *Footloose* and other shows like that are making us more prone to feel good about dancing.” Here, it seems as though Americans are becoming more comfortable with dance as a result of its presence in the media. This awareness has perhaps led to an increase in acceptability of dancing and, consequently, other fields that incorporate dance, such as dance therapy.

Though some people assert that there has been a recent increase in the popularity of dance, there are others that view it as having lost favor. These varying perspectives reflect the earlier discussion about the cultural context of dance displayed by the NEA stimulus package. Subject 15 has a less positive outlook of the American opinion of dance. He explains his understanding of the cause for resistance towards dance therapy that he anticipates:

Yes, in natural and mainstream America, just because it's new. Because... people don't like to do things that they're not good at, or that they don't particularly enjoy. So, dance and art and things like that, there's a certain, a large subset of the population that doesn't enjoy doing them and/or is not good at them. So that's I think where a lot of the hesitancy comes from. The other major source of hesitancy is the lack of understanding in how it could work. A lot of that I think, is due to people not realizing, not believing that they can have access to their emotions and that they can change them and that they can change their feelings and their mental state of mind. The way you can do that and access that is through art or music or dance. People aren't... people don't appreciate art the way that we used to I suppose, I don't think. Everybody knows that, you know, yellow will make them happy, but you still see people paint their entire kitchen yellow and then they don't realize why they're apprehensive every time they go in there. It floods a part of their brain and just makes you crazy... I don't think people want to admit that they can be swayed, so much, by anything less than an Academy award-winning performance in a movie. You know, that's accepted, but art, dance, I don't think mainstream America loves it anymore (Subject 15).

The doubt that the arts can affect people emotionally and have a significant impact on “their mental state of mind” is very tangible to Subject 15. He characterizes it as a cultural trend, and one that influences people in many ways. For instance, his example of the paint color in the kitchen demonstrates his belief that the impact of even small emotional responses runs quite deeply. However, he indicates that these reactions are suppressed because people are unwilling

to admit the ability of things like art and dance to affect them on a profound emotional level. With this denial and the lack of passion for art, the resistance dance therapy faces appears to be deeply rooted in our society.

This standing of arts in American society that Subject 15 discusses is critical to the reception of dance therapy. Popular acceptance, media attention, and narrative accounts by prominent American role models were frequently mentioned by subjects as a way for them to become familiar with, understand, or accept dance therapy. Increased awareness through these venues were often emphasized as important:

I think that, it's just like what's the most popular. You know what I mean? People are always kind of afraid of what's new or different. I think that people are used to seeing, you know, people go to the doctor and people getting pills and people talking to a therapist, and it, a lot of people don't know about alternative therapies and stuff like that. So I think that the tendency, the natural tendency is to go towards what people know and have heard of and may know people who have done and things like that...People have their conceptions of what it's like to go to a therapist, you know and sit on a couch and you know, cry about their mothers because that's what they see on television and in movies and stuff like that. But this is completely, I mean it's not as pop-culture as that other notion (Subject 7).

Here, Subject 7 likens the process of becoming acquainted with various modalities to its presence in pop-culture. She mentions the tendency of people to embrace what is common and well known. Through the images portrayed in movies and television and other popular mediums, an understanding of what to expect becomes culturally appropriated, which subsequently makes people more comfortable with a given practice. Subject 35 is among the many other subjects who feels similarly: "Even if you got one famous person to kind of buy into it if you will, and be like, 'This is for me,' it kind of creates a cult following. Like, 'Madonna does Pilates, oh my God, I want to do Pilates,' type of thing." The power these figures have over the integration of new practices into the realm of acceptability is quite significant. Even if they don't necessarily

provide legitimacy, they at least increase awareness and thereby make such practices more standard.

Dance therapy faces a discrepancy of being suspicious because it is viewed as alternative and unscientific, while also being more approachable than biomedicine because it is less invasive and stigmatized. For some, it seems as though there would be less stigma surrounding it than traditional therapy, while some others had the opposite opinion. Subject 25 is in the latter category. He expresses some hesitancy about dance therapy and its legitimacy:

Well, one, people don't like to try new things. People do want something serious, you know. People want a drug or a doctor, someone with a degree. And then also, there's the fact that dance therapy, in my mind and probably in many other people's minds, is way too close to all the bullshit out there like crystal therapy or like hippie-dippy new age stuff. So, it probably gets a negative effect from just there being so many other silly things out there, that it's hard to prove that it works. And plus, people are unfamiliar with it...I would have to know more about it, but yeah, I think it gets lumped together with it. Whether it deserves to be lumped there, I don't know...But also, you know, it's like who ends up going into dance therapy? Could they not get into med school or are they dancers that take it too seriously? There's a set route that let's smart people who study a lot go to med school, but what the route to get into dance therapy is, who knows? (Subject 25).

Many issues that have led to the stigmatization of dance therapy in some people's eyes are addressed here. The subject first addresses the fact that for many people, its newness alone is an issue. Since it hasn't been accepted into the authoritative system, it is not considered serious, which would require people to determine its legitimacy on their own. Many people are unwilling to do this, either for purposes of time, money, or possible risks to their health. Subject 25 also states that because so many alternative forms of treatment exist, it is difficult to discern which are legitimate and which are not. Consequently, they are all lumped together as being "silly" or "bullshit." Finally, he mentions that there is a concern about the authority of the dance therapists and their training. Because he is unfamiliar with the route one takes to become a dance therapist, he cannot determine their professional aptitude. All these things considered, Subject 25 does see

somewhat of a benefit as a result of dance therapy not being associated with traditional psychotherapy:

Because people... because it's not associated with mental illness. Healthy people can go to a therapist, but if you tell someone you go to a psychotherapist, they're like, 'Shit, what the fuck's wrong with you?' But if you go, 'Oh, I went to dance therapy,' 'Oh, did it make you feel better?' It's kind of the double-edged sword of people taking it seriously, the stigma versus the beneficial, whatever (Subject 25).

In this light, dance therapy faces a "double-edged sword" of having the disadvantage of not being viewed as a serious enough form of treatment to have the power to produce efficacious results, while also having the benefit of not being associated with the stigma of serious mental illness that psychotherapy has developed.

Subject 26 views the beliefs that cause resistance towards dance therapy as very deeply rooted. For her, it is based upon the way in which people analyze or evaluate their practices in general:

It could be family values. They could be based in old cultural values that haven't shifted over time. Fear. I think some people have such, they want to hold up certain kinds of therapeutic regiments as always, never failing and not trust anything that's not those things. They don't really evaluate those things they put all their trust in, so they really give good, they won't evaluate the new things either. I don't know if I'm making sense. It's almost as if they've set these things on a pedestal and nothing else can hold a candle to it. But then what happens when the research comes out and says, 'Wait, we've been telling you to do this for fifty years, and now we found out it causes cancer,' so now what do you think about that? I don't know, I just think sometimes people really, almost need to be, have their idols shattered in order to look somewhere else, I don't know. I just see a lot of rigidity in some people, in just even looking at a spectrum, rather than at just like three things you can do when you have this problem, they don't look at the rest of the spectrum at all (Subject 26).

She sees many people as accepting treatments based solely upon convention, a complete reliance on the authoritative knowledge system to inform people what treatments are effective and which are not. Because they take the authoritative system for granted and don't feel the need to evaluate these established methods, they don't feel the need to evaluate new methods either.

Instead, they rely upon the fact that these parallel systems cannot be effective; otherwise they would be sanctioned by the dominant system. In her mind, this cultural rigidity or reliance upon conventional medicine to dictate what is acceptable creates this stigma towards new medical treatments.

Both perspectives of the double-edged sword that Subject 25 mentioned were discussed in the course of the interviews. Subject 23 was one of the few subjects that indicated a certain skepticism or stigma towards conventional medicine, thereby making him more open to alternative therapies:

It would be something very natural, you know what I mean? And I think that sort of natural, holistic, mind-body-spirit kind of thing... that's much more appealing than electro-shock therapy, or drugs, or surgery, or these really, really invasive techniques. Like if you look at the history of psychiatry in the United States, it's been... it's so problematic with how casually they do these very destructive things to other people's bodies in the name of science. Like lobotomies, like the, you know, uh! So I would think that any sort of natural, or holistic, or time-tested, you know, therapy needs to be taken seriously, especially if it's non-invasive... (Subject 23).

Subject 23 views the natural elements of dance therapy as more appealing than the invasive methods of biomedicine. There is something safer and more comfortable in participating in a therapy that he describes as "natural, holistic, mind-body-spirit" focused. This kind of integration is an attractive factor for this subject, providing him with a means for treatment without the problematic history that is associated with psychiatry in the United States.

Conceptions of dance and of what dance therapy might be like are likely so prevalent because of the subjects' minimal exposure to either discipline. Therefore, their perceptions of what they must be are greatly influenced by the cultural discourse on dance. Another of those perceptions is the double-edged sword that Subject 23 refers to: dance therapy has both less stigma because it is not associated with crazy people, yet also more because it is not regarded as a serious treatment option, creating another obstacle for dance therapy to overcome. Yet,

because many of these beliefs are based on perceptions, there is the possibility that marketing dance therapy will be able to influence some of these perceptions or form others.

Case Study

As discussed in the previous section, the authority of Western biomedicine has a very significant impact on American society and their views about the healthcare system, the legitimacy of different modes of treatment, and the what methods of evaluation are acceptable to measure the efficacy or value of a given modality. A considerable ratio of our medical epistemology is determined by the influence of these professionals. Consequently, I have chosen to take a closer look at the perspectives of a fourth year medical student (Subject 10, who we will call Chad) to gain further insight. Chad is twenty-eight years old and a male student at the University of Pennsylvania School of Medicine. The interview was conducted on November 30, 2008. He is acquainted with the interviewer through their mutual employment at Harnwell College House, an on campus undergraduate dormitory at the University, where he has the advisory role of a Graduate Associate. As a medical student and a future doctor, Chad is representative of what dance therapy must prove itself to and has to interact with on a daily basis.

From the beginning, Chad's perspective on dance therapy was very skeptical. Though he states he "honestly" does not know what "the precise definition of dance/movement therapy is," he is immediately cynical about its validity:

Well, I guess it involves... trying out new... movements for a patient. You know, learning how to adjust to rhythm or some sort of periodic movement in a way that may promote relaxation or some sort of self-centeredness, in quotes. I imagine a typical session is either a small group of people or a one on one session with an individualized instructor who then proceeds to instruct a patient in very basic movement and balance skills and things that promote sort of a calmness or quote unquote inner peace that may perhaps have some influence on their subjective inner state (Subject 10).

Chad's portrayal of a typical session regards dance therapy much more seriously and speaks about its aims in a much more concrete and descriptive way than most other subjects. Yet, he is also somewhat condescending in the way he regards it. His framing of specific terms or phrases in quotes indicates a certain disbelief in or mockery of the premise of dance therapy. He also makes assumptions about the goals of dance therapy only influencing "subjective" parts of the individual. This characterization represents generally how Chad contextualizes dance therapy. He states in several ways that he is open-minded to such a method if its efficacy were proven, yet this open-mindedness appears only theoretically in light of the obstacles he has created that dance therapy needs to overcome to prove itself. In response to whether or not he thought dance therapy could be successful, he originally seems open to the idea: "I believe that they could be successful, but their success is dependent on proper evaluation in a double blind, placebo-controlled, randomized trial." He indicates that as long as it's proven by this method, it could be successful. However, his doubt surfaces once asked if that would alter his decision and increase his likelihood of trying dance therapy: "No because evidence of such trials would be invariably limited. I would be suspicious of the people sponsoring them because I'm sure they have their own agenda regarding such things," (Subject 10). Though Chad claims that he would give merit to dance therapy if proven by a randomized trial, he actually gives very little allowance for this. Instead, he demonstrates a suspicion that even trials conducted would have limited evidence and that they can be influenced and perhaps misrepresented by those who sponsor the study. On one hand, Chad claims that efficacy of a therapeutic modality can be demonstrated by a clinical trial, yet he removes the possibility for dance therapy to verify itself by saying that even if it did, he would not trust the motives of the sponsors. Again, we are faced with this catch-22 that dance therapy cannot be proved legitimate in the eyes of biomedicine, regardless of what they do.

Still discussing dance therapy's ability to be successful, Chad's response recalls the earlier discussion of the body/mind dualism. He aligns himself with the idea that dance therapy does not have the ability to affect serious chemical disorders:

Well I think the success of something like dance therapy is highly dependent upon what you want it to be successful for. It's highly dependent upon what you ask of it. Is dance therapy going to fix a schizophrenic? No. Is it going to fix someone with bipolar disorder? No. Might it be a complement to traditional pharmacologic therapy for depression? Possibly. So I see it working in, at the most, working to complement traditional behavioral and pharmacologic therapy techniques for diseases, which on the spectrum of mental illness, aren't as devastating as other mental diseases... [because] those diseases are amenable to a wide range of low-level interventions (Subject 10).

While it was not uncommon for subjects to express hesitancy about dance therapy's effectiveness with diseases such as schizophrenia, Chad is noticeably more adamant. While others may have seen dance therapy as a likely treatment for depression, Chad is much more skeptical. He says "at most," dance therapy could "possibly" be an adjunct therapy for less serious diseases. His cynicism is quite evident in his reference to dance therapy as a low-level intervention that could only be used as an additional option.

Even as an adjunct method, Chad expresses concern at what he sees as the possible risks of engaging in dance therapy. His approach, while still skeptical, is also quite economical in the way he views treatment:

If you're thinking about dance therapy complementary to traditional therapy as a second line therapy, then I think that, you know, it is important to explore these alternative strategies with a caveat that you're doing something that's untested, unproven, has benefit for help or benefit for harm in terms of the opportunity cost of using your time doing one thing versus using your time potentially to do another thing. So I think patients really need to understand that yes, this is a therapy available to them. They also need to understand that there is very little good evidence supporting it and very little evidence against it, and that, you know, they run the risk, in some sense, of getting sub-optimal treatment by pursuing this therapy, but, at the same time, they may derive significant potential benefit from it, it's just entirely unknown. The alternative is to pursue a first or second line therapy, which has been highly studied, and is known to give a certain X percentage of benefit in this certain type of population of patients. So I think the real balance... the real question you have to ask is how much uncertainty are you

willing to deal with. You know, as someone who provides care, I would be very, very hesitant to pursue dance therapy as a first line intervention for anyone with any of the common array of mental illnesses that I see on a routine basis (Subject 10).

Chad begins his response rationally, discussing the possibility for both help or harm with something like dance therapy that has not been tested to his satisfaction. He states that attending dance therapy has an opportunity cost of the benefits of a "highly studied" therapy that has "a certain X percentage of benefit." Though he is pretty even in his assertion that a patient can either receive "sub-optimal treatment" or "significant potential benefit" from dance therapy, the uncertainty is clearly a concern of his. This uncertainty seems to triumph when Chad discusses his personal perspective. He expresses that personally, he would be "very, very hesitant" to recommend dance therapy to the patients he has seen. Again, we are faced with this disparity between his claim that patients should be aware of it as an option and his practical assertion that he would be unlikely to recommend dance therapy to his own patients as a primary treatment method.

This need to very concretely measure everything is repeated frequently in Chad's responses. The empirical evidence and measurements he discusses reflect his experience with pharmacologic methods of treatment and his unquestionable reliance on the biomedical standard of the clinical trial:

I guess I can probably speak most closely, most accurately about my colleagues and I would say there would probably be a very generalized level of skepticism about such an intervention. You know, part of the problem is just how do you mention the intervention itself and then how are you going to measure outcomes. You know, the outcomes are probably easier to measure with standardized scales, but whether or not you're actually delivering the quote appropriate dose of the intervention and that you're standardizing quote doses across people who are otherwise alike in any other way, in all other ways, is just very difficult for me to comprehend, and it would probably be very difficult for my colleagues to comprehend. As far as patients, you know, I don't think you could easily generalize whether or not this would be acceptable to patients, you know. My patient population at the VA, which consists almost entirely of male war veterans, would probably be less likely to pursue an intervention like this, just based upon my own

anecdotal experience. However, I imagine if we go to the suburbs and take a group of patients that also do Pilates and yoga and may be soccer moms, they may be more willing to try something like this out, especially if they have a healthy skepticism of traditional medicine in the first place (subject 10).

What Chad fails to recognize is that many of the other mental therapies he mentioned as ones he would be willing to recommend to patients, including cognitive behavioral therapy and Freudian analysis, also do not have a means to measure “the quote appropriate dose of the intervention.” In that way, dance therapy and other non-pharmacologic mental health treatments are similar in their methods and in their more qualitative approach. However, when asked if he thought there was resistance to dance therapy, this is how he explains his and his colleagues’ perspectives. In terms of patients, he makes very specific references to his male veteran patients, who he says later “have a much higher degree of the co-morbidities than your usual soccer mom” and “reach for the bigger guns faster.” He makes the assumption here that the illnesses of “soccer moms”, which he relates to illnesses that people would more likely seek recreational activities such as yoga and Pilates to treat, are much less serious and hence can be treated by therapies that have a “quote softer aspect to them.” There is an implication that the illnesses that can be treated by dance therapy are much less serious and the types of patients that it would attract are women who are interested in Eastern practices like yoga or other alternative, stress-reducing activities. He also presents the gender bias that it would be primarily women who would be interested in the practice of dance therapy.

This question of the practical ability of dance therapy to handle the treatment of serious diseases is further explored when Chad is asked if the ADTA’s definition of dance therapy changes his perspective of the modality:

It obfuscates my understanding of dance/movement therapy because I don’t know what social integration is. It’s unclear to me what these terms... what it means to have cognitive integration of the individual or social integration of the individual in terms of

patients. You know, my patients come in with pain and they need to get rid of the pain, or they come in wanting to kill themselves and you have to stop them from killing themselves or they come in hearing voices, and how do you get rid of the voices? And so, those are like hard outcomes... And those are hard problems, and you gotta fix them, and you gotta try and fix them and you gotta hit them hard and fast. It is unclear to me how these less concrete objectives of this endeavor relate to these very, very real world issues that people have that they present within the office. I mean I would have a difficult time even selling it, I think, to some people, but it depends on the target audience (Subject 10).

For Chad, the qualitative, abstract nature of a treatment correlates directly with its ability (or inability) to handle “very, very real world issues.” He mentions the pressing issues of a patient with serious mental health problems, asserting that those are hard problems you have to fix and that you have to “hit them hard and fast.” There is an understanding here that the “less concrete objectives” of dance therapy are unable to handle these serious mental health issues. Again, it seems as though it is the mere qualitative nature of dance therapy that leads him to believe this, which itself cannot be resolved.

Interestingly, when asked if he had any other general opinions on dance therapy, Chad chooses to discuss some of what he views as the shortcomings of biomedical authority, elaborating on the possible advantages of alternative therapies, such as dance therapy:

Well, you know, I mean... I do think it's important to explore these alternative options for our patients. You know, particularly in the realm of mental disease where the illnesses we tackle are so recalcitrant to traditional treatments for so many people. So I think it is important to keep exploring, to keep trying out new ideas and new therapies and new interventions. That being said, you know, I think we have to strike the right balance between exploring new options and new therapies and just trying to do a better job with the existing therapies we have. So, I think there is always a need for new and better therapies, but I think a part of that need may be a function of the fact that we do a poor job implementing the therapies we do have available to us. And so, I think dance therapy may serve as... potentially serve as a complement to traditional therapies but I highly doubt it will ever supplant any of our original weapons in the repertoire (Subject 10).

As has been characteristic of Chad's responses, he concludes the interview with a comment that wavers between being seemingly open-minded and openly skeptical about dance therapy.

Though just a few moments earlier he had emphasized the practical realities of mental illnesses and the need for concrete, fast solutions, he now acknowledges the complexity of mental illness and the difficulty biomedicine has had in addressing them. He does not claim that biomedicine itself has not struggled to treat patients effectively, stating the value of exploring new options and allowing for the possibility that they may be able to solve illnesses that biomedicine currently struggles with. Despite this allowance, Chad maintains his skepticism, still unwilling to entertain the idea that dance therapy could surpass or even provide an equally efficacious outcome.

Ultimately, the opinions expressed by Chad are common ones that are shared by both medical professionals and general community members alike. They seem to exhibit an open-mindedness to new and alternative therapies on one hand, while simultaneously making it impossible to convince them of their efficacy and legitimacy. Dance therapy stands at this threshold, attempting to enter the biomedical field, yet facing these impervious requirements. Without the cooperation of fellow health professionals, dance therapy will have a considerably difficult time aligning itself in the biomedical realm and will struggle to attain things like recognition from insurance companies and referrals from doctors.

Discussion

Throughout the course of this study, I have gathered data useful for my work both as an anthropologist and as a future dance therapist. The three themes I have focused on for this paper are interrelated in ways that are significant for the cultural anthropologist and necessary to understand for the dance therapist. With this information, anthropologists can continue to study the impact of these three discourses and their mutual influence on American society and the way they view health and healthcare systems. Dance therapists can then apply this knowledge to

better cope with the obstacles they face in gaining legitimacy in the eyes of patients and medical institutions.

I have found that the issues dance therapists face are deeply ingrained in the responses of the subjects interviewed. The biomedical world has become the only dominant and validated source of authoritative knowledge in American society. By framing themselves as being based on empirical knowledge, they have eliminated the need for belief in their work, at least in the conscious mind of the average person seeking treatment. The power of their authority is exhibited in many ways, but most fittingly in the intensity of the discourse on body/mind dualism. This phenomenon is deeply rooted in American society and has a significant effect on the ability to have belief in the potential of dance/movement therapy. Therefore, these three discourses are critically related to my subjects' perceptions of dance therapy. The impact these themes have on the field of dance therapy cannot be overemphasized. It is necessary for dance therapists to become aware of them and work to refute their stronghold on the healthcare system. Yet, they cannot overcome these obstacles without biomedicine relinquishing some of its power and opening the field to other options. Whether it involves directly endorsing dance therapy or simply acknowledging their own status as a cultural, subjective institution, their influence is needed to open up alternative medical options for American society.

As for medical anthropologists, understanding the relatedness of these discourses and their subsequent effect on healthcare in the United States is critical. This information can then be used to further study the cultural influence of biomedicine and its relationship with other medical systems. By exposing this phenomenon, medical anthropologists could in effect also help to open up the healthcare marketplace, allowing for more competition and creating more appropriate and diverse care for patients.

Culture is complex; there is never one answer or one tidy explanation. A sizeable range of opinions was expressed in interviews. Only a portion of the relevant information gathered from subjects was used in this paper. As such, there is much more to glean from these interviews that have not been addressed here. I hope this paper will create a forum where more of this data can be discussed, questioned, and put to use for various purposes.

References Cited

- "About Us." American Dance Therapy Association. 11 May 2009. <<http://www.adta.org/about/who.cfm>>.
- Bannerman-Haig, Sara. "Dance Movement Therapy: A Case Study." Process in the Arts Therapies. Ed. Ann Cattanach. Philadelphia: Jessica Kingsley, 1999. 155-78.
- Bartenieff, Irmgard. *Body Movement: Coping with the Environment*. New York: Gordon and Breach Science, 1980. Print.
- Bird, Bonnie. "The Workshop on Dance Therapy: Its Research Potentials." *CORD News* 1.1 (1969): 8-9. *JSTOR*. Web. <<http://www.jstor.org/stable/1477685>>.
- Blair, Elizabeth. "Stimulus Package Includes Millions for the Arts." *All Things Considered*. National Public Radio. *NPR*. PBS, 27 Jan. 2009. Web. <<http://www.npr.org/templates/story/story.php?storyId=99916513>>.
- Brown, Peter J., Ronald L. Barrett, and Mark B. Padilla. "Medical Anthropology: An Introduction to the Fields." *Understanding and Applying Medical Anthropology*. Ed. Peter J. Brown. Mountain View: Mayfield Publishing Co., 1998. 14-15. Print.
- Chace, Marian. *Marian Chace, Her Papers*. Ed. Harris Chaiklin. Kensington: American Dance Therapy Association, 1975. Print.
- Chaiklin, Sharon. "Marian Chace Biography." American Dance Therapy Association. 11 May 2009. <http://www.adta.org/resources/chace_bio.cfm>.
- Cobern, William W. "The Nature of Science and the Role of Knowledge and Belief." *Science and Education* 9.3 (2000): 219-46. Kluwer Academic Publishers. Web. <<http://www.springerlink.com/content/j54858352447p071/>>.
- "Credentials." American Dance Therapy Association. 11 May 2009. <<http://www.adta.org/about/credentials.cfm>>.
- Cultural Engagement Index*. Publication. The Greater Philadelphia Cultural Alliance, 20 Mar. 2009. Web. <<http://www.philaculture.org/news/2424/CEI>>.
- "Dance/Movement Therapy." *National Coalition of Creative Arts Therapies Associations*. Web. 11 May 2009. <http://www.nccata.org/dance_therapy.htm>.
- "Educational Information." American Dance Therapy Association. 11 May 2009. <<http://www.adta.org/resources/education.cfm>>.

- "Facts and Figures." *University of Pennsylvania*. 2009. Web. <<http://www.upenn.edu/about/facts.php>>.
- Frieder, Susan. "Reflections on Mary Starks Whitehouse." *Authentic Movement: Moving the Body, Moving the Self, Being Moved: A Collection of Essays*. Ed. Patrizia Pallaro. Philadelphia: Jessica Kingsley, 2007. 35-55. Print.
- Goffman, Erving. *Stigma; notes on the management of spoiled identity*. Englewood Cliffs: Prentice-Hall, 1963. Print.
- Jordan, Brigitte. "Authoritative Knowledge and Its Construction." Ed. Robbie E. Davis-Floyd and Carolyn F. Sargent. *Childbirth and Authoritative Knowledge: Cross-Cultural Perspectives*. Los Angeles: University of California, 1997. 56-57. Print.
- Kashyap, Tripura. *My Body, My Wisdom: A Handbook of Creative Dance Therapy*. New Delhi: Penguin Books India, Penguin Group (USA), 2005.
- Kranish, Michael. "Stimulus Funding for Arts Hits Nerve." *The Boston Globe*. Globe Newspaper Company, 5 Feb. 2009. Web. <http://www.boston.com/news/nation/washington/articles/2009/02/05/stimulus_funding_for_arts_hits_nerve/?page=1>.
- Laderman, Carol. "The Poetics of Healing in Malay Shamanistic Performances." *Performance of Healing*. New York: Routledge, 1996. 134-38. Print.
- Micozzi, Marc S. "Culture, Anthropology, and the Return of "Complementary Medicine"" *Medical Anthropology Quarterly* 16.4 (2008): 398-403. *Wiley InterScience*. Web. <<http://www3.interscience.wiley.com/journal/120178357/abstract?CRETRY=1&SRETRY=0>>.
- "NCCATA Fact Sheet." *National Coalition of Creative Arts Therapies Associations*. Web. 11 May 2009. <http://www.nccata.org/fact_sheet.htm>.
- "NCCATA Home." *National Coalition of Creative Arts Therapies Associations*. Web. 11 May 2009. <<http://www.nccata.org/index.htm>>.
- "Resources." *American Dance Therapy Association*. 11 May 2009 <<http://www.adta.org/resources/index.cfm>>
- Scheper-Hughes, Nancy, and Margaret M. Lock. "The Mindful Body: A Prolegomenon to Future Work in Medical Anthropology." *Medical Anthropology Quarterly* 1.1 (1987): 6-41. *JSTOR*. Web. <<http://www.jstor.org/stable/648769>>.
- "Who We Are." *American Dance Therapy Association*. 11 May 2009. <<http://www.adta.org/about/who.cfm>>.

APPENDIX A

INTERVIEW QUESTIONS

Interviews were open-ended, but the prompts will follow this general format:

What is your course of study?

Would you ever seek medical treatment for a mental health illness?

What kind of treatment would you seek?

Would you be willing to go to a psychologist/psychiatrist?

Would you be willing to try acupuncture? Massage? Arts (D/MT) therapy?

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

Would you be willing to recommend mental health therapy to a patient? What kinds? To a family member? To a friend/acquaintance?

What do you think dance/movement therapy is?

What do you think it may involve?

What would a dance/movement therapy session look like?

What do you think it is meant to accomplish?

Do you think the effects of dance/movement therapy are primarily chemical, emotional, spiritual, or some combination?

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

Would it be more or less successful for people of demographics, illnesses, values?

Do you think you have to have a passion or a talent for dance in order to benefit from dance therapy?

Do you think there's a resistance or hesitance towards dance therapy? Do you think increased awareness, familiarity, or scientific research would help diminish this?

What do you think the advantages and disadvantages are to an alternative therapy like dance therapy versus traditional therapy?

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what dance therapy is?

Does this change your understanding of what a session might involve or look like?

Does this change whether you would recommend it to a mental health patient/family member/friend?

Does this change whether you yourself would be willing to try it?

APPENDIX B

LIST OF PARTICIPANT'S MAJORS

(Overlap is due to students with more than one academic major)

Undergraduate:

Accounting- 2
Anthropology- 1
Biochemistry- 1
Bioengineering- 1
Biology- 1
Chemistry- 1
Communications- 2
Economics- 1
Environmental Studies- 1
Finance- 3
History- 2
Management- 2
Marketing- 2
Mathematics- 1
Near Eastern Languages and Civilizations- 1
Nursing- 1
Philosophy- 1
Political Science- 1
Pre-Medicine- 1
Psychology- 4
Sociology- 1
Systems Engineering- 1
Theater- 2

Graduate:

Anthropology- 2
Architecture- 1
Demography- 1
English- 1
Medicine- 2
Nursing- 1
Social Work- 1

APPENDIX C

QUANTITATIVE RESULTS

Number of people who would seek medical treatment for a mental health illness:

Yes- 28

No- 1

Unsure- 5

Number of people who would be willing to see a psychologist-

Yes- 32

No- 1

Unsure- 1

Number of people who would be willing to see a psychiatrist-

Yes- 28

No- 4

Unsure- 2

Number of people who would be willing to try acupuncture-

Yes- 25

No- 6

Unsure- 3

Number of people who would be willing try massage therapy-

Yes- 29

No- 3

Unsure- 2

Number of people who would be willing to try dance/movement therapy-

Yes- 19

No- 7

Unsure- 8

Number of people who think alternative therapies, like dance therapy, can possibly be successful-

Yes- 29

No-1

Unsure- 4

Number of people who think traditional mental health therapy can be successful-

Yes- 32

No- 1

Unsure- 1

Would you recommend mental health therapy to a family member?

(Out of 15)

Yes- 15

No- 0

Unsure- 0

Would you recommend mental health therapy to a friend?

(Out of 15)

Yes- 15

No- 0

Unsure- 0

Would you recommend dance/movement therapy to a family member?

(Out of 15)

Yes- 10

No-2

Unsure- 3

Would you recommend dance/movement therapy to a friend?

(Out of 15)

Yes- 10

No- 2

Unsure- 3

Do you think the effects of dance/movement therapy are primarily chemical, emotional, spiritual, or some combination?

(Check all that apply, or ALL)

Chemical- 7

Emotional- 18

Spiritual- 10

All- 14

Do you need to have a passion or talent for dance to benefit from dance therapy?

Yes- 2

No- 25

Unsure- 1

Not talent, but some interest- 6

Do you think there is a resistance towards dance therapy?

Yes- 30

No-3

Unsure- 1

After being read the ADTA definition of dance/movement therapy:

Does this change your perception of what dance therapy is?

Yes- 13

No- 20

Unsure- 1

Does this change whether or not you would be willing to try it?

Unsure/No changed to yes- 3

Unsure if they would try it- 6

Unchanged yes- 15

Unchanged no- 5

Unsure or yes to even more likely- 5

APPENDIX D

INTERVIEW TRANSCRIPTS (Subjects 2, 19, and 28 were eliminated from the data because they did not fulfill the subject requirements of being students)

SUBJECT 1

What is your course of study/occupation?

"I am a psych major"

Would you ever seek medical treatment for a mental health illness?

"yes"

What kind of treatment would you seek?

"um, I would be willing to seek either psychotherapy or I would even do meds, like psychiatric meds."

Would you be willing to go to a psychologist/psychiatrist?

"yes"

Would you be willing to try acupuncture?

"yes"

Massage?

"yes"

Arts (D/MT) therapy?

"yes"

Do you think these forms of therapy can be successful?

"yes"

What do you think their success is dependent on?

"Um, I think that for specifically dance and art, if the person who is seeking the treatment is willing to like embrace it, and willing to open up"

So you think you have to be somewhat open-minded?

"um, yeah, I would say so"

Would you be willing to recommend mental health therapy to a patient?

"yes"

What kinds?

"I would recommend pretty much anything. I would probably start with traditional psychotherapy first, just because that's what I'm most comfortable with. I would be more willing, I guess, to recommend some kind of alternate like dance, art, pet, or any other kind of expressive versus medication"

What is your reason for being more comfortable with traditional therapy, what exactly do you mean?

"I just mean that I have the most experience with that, and I have the most training in that. I've never taken a class on alternate forms, it's always been psychotherapy or medication, and where I work its all psychotherapy, so I've never done other kinds."

Do you think your comfort level would change depending on how informed or experienced you were with a certain type of therapy?

"yes, absolutely"

Would you be willing to recommend mental health therapy to a family member? which kinds?

"My own family? I would again start with the psychotherapy, then move onto alternate forms of therapy, and then medication."

To an acquaintance? or stranger, same plan of action?

"Maybe not to a stranger, unless I had a relationship in terms of I met them and had to give them advice, I would definitely recommend the same"

What do you think dance/movement therapy is?

"Ummmm, I think it... is... um... a way of releasing stress and anxiety through concentrating on the movement of your body and how your different muscles work"

What do you think it may involve?

What would a dance/movement therapy session look like?

"I think, I think that it would be... maybe the therapist, maybe demonstrating different moves and then like helping the patient like if they're having trouble forming different... I'm not really familiar with dance so... hahaha... But um, I would imagine it would be a lot of imitation of the patient imitating the therapist."

What do you think it is meant to accomplish?

"I think it's meant to de-stress and release anxiety and, um... they always say that when you move you release endorphins and endorphins heighten your level of happiness, so I would imagine that would be a big part of it."

Chemical, emotional, spiritual reactions, how are patients most affected?

"I think it's probably a combination of all those things. I think there's definitely a chemical aspect to it, but I also think a lot of it has to do with how dancing makes you, like when you accomplish a move you couldn't do before, that makes you feel good, makes you feel like you've accomplished something, that definitely has an emotional side to it. And a lot of people find that dancing is very spiritual too, so that's also an aspect."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think it could be successful. I think it depends on... how... how much the patient, um... how much the patient is willing to try, and how much, I mean there's also the therapist, how well they connect with the patient. A lot of therapy, it really depends on if the person wants to get help. And if the person is opposed to getting help, nothing's gonna work. But if the person really, really, really wants to get better, I think anything can work. And so, I think dance/movement therapy can be very, very effective."

Would it be more or less successful for certain people?

"Um... um... I think it... in terms of ages, I think, I feel like it would be most affective for younger and older (can you give time range?) So I would say children and teenagers, and maybe young adults so maybe up to 25. And then older would be 50's and up... I also think it would be... I mean this is very stereotypical, but I feel like it would be better for girls, because I feel like guys might feel uncomfortable. Guys sometimes have a hard time with therapy anyway because they don't really like to talk about things. I think it could be applicable to all different illnesses, like physical and depression and schizophrenia and things like that, I think it could be good for everyone."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?

“Um, I don’t think so. I think it’s pretty much what I envision”

Does this change whether you would recommend it to a mental health patient/family member/child/friend?

“No, I would still recommend it”

Does this change whether you yourself would be willing to try it?

“No, I would be willing to try it”

Other thoughts/opinions about dance/therapy:

“Um, I... I would just say that I’ve never seen it, like personally, so I have no experience with it. But I really like the idea of it because I think there are some people who really respond to movement and dance. I like the idea of different approaches to mental health because mental health isn’t a clear-cut illness and there are different ranges and people respond differently. And that’s one of the reasons I don’t necessarily like medication because some people don’t need it and they’re on medication anyway. I feel like therapy is a better approach than medicine, and so I think dance therapy is a really good option and can be very affective.”

dance therapy affective with no experience with dance or doesn’t originally enjoy dance?

“Yes, I think that... I mean I think that even if you don’t have experience or you claim you’re not good at dancing, everyone has a natural rhythm, and so I think that if you can have someone that is helping you bring out that natural rhythm, that it would be really really good. Any form of art that’s expressive can... everyone can express something. Like art therapy, you don’t have to be amazing, like you don’t have to be the next Van Gogh, but what you create is expressing who you are and how you feel. I think dance is the same way”

you mentioned pet therapy, dance and art therapy can be successful—advantages/disadvantages of alternative v. psychotherapy?

“One of the... um, advantages to using an alternate form of therapy versus just normal psychotherapy is that it allows people a different avenue of expressing themselves because some people are uncomfortable sitting in a room and talking to another person. But if you can sit down with a paintbrush and just paint, or if you can be in a room and just dance, um it’s just a different avenue and a different form of getting to the same result. A disadvantage is facing the... psychotherapy is an established, a pretty established form of therapy, so suggesting alternate forms of therapy you’re faced with resistance because people aren’t as familiar with the success of it or familiar with what it even means, so that’s definitely a disadvantage to using it, because people are probably less willing to accept it. That doesn’t mean that it is less successful, it’s just going to be harder to convince people, in the beginning, that it is successful.”

familiarity/awareness diminish resistance, or still remain?

“I think if people are more familiar with it they will not be as resistant to it... but... I feel like it’s going to be awhile, just because psychotherapy has been around for such a long time. But I definitely think that when, if people become more familiar, they’re going to be more willing to accept it as one of the options and not as an alternate form. It will just be like ‘ok, well these are your options- psychotherapy, dance’. It won’t be like ‘ok psychotherapy didn’t work, so now let’s try something else.’”

SUBJECT 3

What is your course of study/occupation?

"I am a psychology major. I am also pre-medicine, so I'm a chem minor too.

Would you ever seek medical treatment for a mental health illness?

"yes."

What kind of treatment would you seek?

"I would go to a therapist"

Would you be willing to go to a psychologist/psychiatrist?

"yes"

Would you be willing to try acupuncture?

"yes."

Massage therapy?

"yes."

Arts (D/MT) therapy?

"yes"

Do you think these forms of alternative therapy can be successful?

"I do."

What do you think their success is dependent on?

"I think a large part would depend on how open the person is to them. If you think that it's going to work, I think it has a much higher chance of it actually working. Going in with an open mind."

Would you be willing to recommend mental health therapy to a patient?

"absolutely"

To a family member?

"definitely."

To an acquaintance/friend?

"yeah"

What do you think dance/movement therapy is?

"...In my mind I am picturing... I'm actually kinda picturing Penn Dance and taking my disturbed inner-self and projecting it onto one of those dances and getting it out through dance."

What would a dance/movement therapy session look like?

"I'm not actually sure. I guess going in to meet with someone and me rocking my little heart out."

What do you think it is meant to accomplish?

"I think it can just be another form of... a way to express either your pain or whatever you happen to be going through. For your body I think it would be very healing."

Do you think this dance therapy can be successful?

What do you think this success is dependent on?

"I think it could be very successful. I think again it would have to be the person wanting to try to express themselves in a different way or wanting to heal themselves through movement."

Would it be more or less successful for certain people?

"Absolutely. I feel like first of all you have to be able to move, I'm not sure certain people have that complete freedom. I would probably say younger people would be more open to it. Also

having a background in dance or theatre. I'm not sure certain demographics would necessarily accept this as a good alternative.

Do you have specific kinds of people in mind?

"I'm not sure John McCain's demographic necessarily would be into this, but that could also just be my personal bias. I think this is for younger, liberal people. Definitely more open to new things because this is pretty unconventional, I think.

Do you think effects are primarily chemical, emotional, spiritual?

"I think it would be some combination because I'm sure there must be a physical release of chemicals that trigger either happiness or I guess a sense of relaxation. I could see it being spiritual or something very close to that.

have to like or know how to dance?

"Not necessarily, I think it could be a learning process. So I don't think you would necessarily have to have training or even be very familiar with it. I think you would just have to be open to trying it and then see how it goes.

advantages/disadvantages of traditional v. alternative, in terms of success rate

"I mean for traditional therapy, it has been proven to work. I feel like this would be a good either supplement or, but not necessarily a complete alternative, I feel like you would have to go and have traditional therapy first to know what direction you're supposed to go in, but then I think this would be a realistic route to take after that."

disadvantages of alternate in terms of attracting people/ability to have success?

"I feel like this could be a little off-putting for certain people, and that would be a disadvantage. I also think that... It also depends what I guess type of mental illness you're being treated for, I could see this being good for maybe depression, or certain things like that. But then for more serious things, for say like, bipolar disorder or something like that I think traditional therapy might be needed. So I guess it depends on the nature of the disorder.

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?

"No."

Does this change whether you would recommend it to a mental health patient/family member/child/friend?

"Not really"

Does this change whether you yourself would be willing to try it?

"No."

general opinions, perceptions of alt. therapy/dance therapy, opinions, effectiveness

"I mean this is really the first time I've ever heard about it, so this is a completely new topic to me. I've no idea if it is effective, how it would actually work, what types of people it is necessarily aimed at, so I feel like I would need to know more about it, but I'd be interested.

how do you think effectiveness can be measured, what has to be provided

"I don't know, I think that's gonna be a problem with a lot of things. I would actually just like to maybe hear someone's personal story with it, like someone who actually did try it and whether or not they felt that it helped them on whatever level that may be. So I think that could just be a way, just on an individual basis, actually just having people tell their particular story because I

think that's very hard to do. 'Oh yes, this cured my mental illness' because I don't necessarily think that's something that can be cured I think it's just something that you're dealing with and this can just be a form of dealing with it.

need biomedical backing? influence people to be more willing to try it?

"No. I'm actually not sure. I wouldn't necessarily think that it would need a biomedical backing. Just because I think that... people could be open to just trying something new without necessarily being like 'oh this will alter your chemicals, and because of this you'll feel better.' I think people are like 'well I could have a drug for that, maybe this is something that I could do that's more like a personal therapy that's not chemical related.' That's the way that I would think of it, but that could be totally wrong."

don't know anything about it, that's why you don't know how to respond. familiarity and awareness would help eliminate resistance to trying it?

"Absolutely. I feel like getting it out there as a possible alternative or even talking about it, because I had never heard of it before. That would definitely help a lot. I think if people know about it then it can cause discussion and that can lead to people actually trying it.

general comments, opinions, questions?

"I know you asked my opinion of what it is, I'd be curious what actually does happen in a session, is there a set regiment for it?"

SUBJECT 4

What is your course of study/occupation?

“economics”

Would you ever seek medical treatment for a mental health illness?

“definitely.”

What kind of treatment would you seek?

“I think I’d be fine with going to see any sort of therapist, I don’t really know much about dance, music therapy or anything like that, but the traditional forms are certainly acceptable.”

Would you be willing to go to a psychologist/psychiatrist?

“Mhmm.”

Would you be willing to try acupuncture?

“Sure. I mean I’ve had friends do it and it’s actually seemed to work for them, so.”

Massage?

“Yeah, I think so.”

Arts (D/MT) therapy?

“I mean, I’ve never really experienced something like that, and I don’t know particularly how it works, but being an athlete growing up, I understand that like, sports and movement and physical activity definitely help you emotionally and mentally as well, so I certainly think it’s a good idea.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“I think it would definitely be successful, but it has to be someone that’s open to the idea of it working for them. I think traditional therapy is like that too, if you go in thinking that it’s not something that’s going to help with other aspects of your life, then it’s not going to work. But if you open up to a new form of thinking, then it’s certainly possible.”

Would you be willing to recommend mental health therapy in general to a family member/acquaintance/friend?

“Yeah definitely. My mom, she used to practice psychology, so it’s definitely something in our family where it’s totally acceptable.”

What do you think dance/movement therapy is?

“What do I think it is. Umm, I would guess that it’s... I don’t know, dancing to express your emotions in a different way. So maybe, just having different types of music played for you. I mean I’m not sure how much guidance you would get from the person leading you, if there’s also like discussion involved as well. But I would presume that you just get to express yourself in a way you probably haven’t experienced before unless you dance in your life regularly.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Well, I’ve never considered this so... Speculate, okay. I mean I guess that you would go in and have some sort of conversation about why you’re having the therapy. Then possibly just explore different ways of moving your body and uh... different types of music. So maybe whoever’s leading the session would talk to you and find out what’s going on and then play different sorts of music in conjunction with what they thought you needed for that time.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think that it would have to be combined with other methods of treatment. I think that it's a good way of kind of releasing energy and releasing tension and emotion, but that without, I guess, talking about certain things as well then it wouldn't be nearly as effective."

Would it be more or less successful for certain people?

"Yeah, I mean I... I guess for people who have trouble expressing themselves in other ways, dance/movement therapy and other types of artistic therapy would offer them an outlet that they normally wouldn't consider. I mean I guess I could see it working well for children who have trouble expressing in words what they mean, so like painting therapy as well would be a similar means of expressing those emotions. Also I guess, I hadn't considered but when you said people with mental disabilities like people who have trouble expressing themselves, it's a way that they can... have an outlet for whatever's going on inside their head even if we can't understand it via the way they talk or the way they try to communicate. Yeah, I think definitely it's an avenue that should be explored because we obviously don't know how to communicate with all types of people in all different sorts of situations."

effects chemical, emotional, spiritual?

"I would presume that, at least for me, it would be mostly a spiritual exercise which indirectly would affect emotions. But just kind of getting to a place where you're free from your problems and can just think about them in more clarity. Also just as like purely a stress release thing, like expressing yourself in an artistic fashion's always good. And as far as chemically, I mean I guess all of that is interconnected somehow, so, like even if you wouldn't realize it, maybe you're releasing endorphins or some sort of other thing going on to help get you in more balance overall."

less effective for certain people? not as open?

"...My perception would be that depending on the person, boys would be less susceptible to this kind of treatment just because I feel like they would be uncomfortable expressing themselves through dance unless it was something they had grown up around. And I guess that also goes just for like anyone who is uncomfortable kind of performing in that way even if it's just with one person. I know I would be a little bit uncomfortable dancing in front of someone even if it was just one on one as like a therapeutic thing, so I guess that would be a limitation. As far as other kinds of people... yeah, I just really see adult men having an issue with it. I guess if you had a really well-trained, like good person leading it, they would be able to get you past that and suggest ways to get you started."

have to be good at or enjoy dance to benefit?

"No, I don't think so, because I mean personally I love dancing around my room, but I would never be like 'Oh, let me get onstage and do what I just did in front of people.' Yeah... I think that... you wouldn't have to have any talent whatsoever, passion for watching dance itself, just the physical act of moving. For me it would also be just like getting in touch with the musical aspects of it too, as kind of a release."

advantages/disadvantages traditional v. alternative?

"Um... I think certain advantages would be just getting in touch with people who are weary of traditional therapies or can't be reached by them. I mean you always want to keep exploring different ways to help people deal with their problems so it's certainly worth exploring. Other advantages... um... I mean yeah it's also a relatively simple way of getting to people who can't communicate otherwise, so children specifically. But I think as far as disadvantages a lot of people would not be open to it and I think that would prevent it's success in those cases.... I guess I wonder also if people are... not necessarily court-ordered, but if their school asks them to

get therapy and such and if people at that level don't understand what dance therapy and other artistic therapies can do they would be less willing to kind of accept it as a method of that person dealing with their problems. I guess I would also see that there would be a perception that it's some hippie thing like people dancing around or painting out their problems. Even today, people, lots and lots of people, don't accept psychology and psychiatry as real disciplines, so this taking it to a next, like a further level would add to that even."

what do you think would be necessary to legitimize it in this kind of institutionalized way (court-ordered) or weary individuals?

"I mean I think you need to do studies on people, I mean I guess I don't know how you'd go about doing this, but see how particular... the dance/movement therapy itself affects them, how it helps them deal with their problems, if it works more effectively in conjunction with other types of therapy or medication, or how it can be used, just to really scientifically see what the effectiveness is because if you get some serious research published on it, then people are more likely to trust it and put their faith in it and try it out themselves."

where does hippie hesitation come from, why resistant?

"Well I mean, because it's not something you can feel or touch or really see tangible results in which would be a challenge in researching and finding out how it actually works. When it comes to like emotional and mental issues it's always hard to put them down on paper and really see what's going on. When you try and deal with those, people are pretty skeptical of what it is, because even if someone says one thing, they could be feeling another and how do you really try and figure out what's going on. And then when you take it to a whole new level with the dance therapy, which is expressing it through bodily motions, which you can't really capture in any way. Like you can obviously videotape it, but what does that really show you? So, I think, just because you're moving outside of the traditional scientific realm even further people have a hard time accepting it as a legitimate thing."

dance therapy on a different level, what are the differences?

"I think because it's... Well I guess in my perception of it, since I don't really know fully what it is, it's more wordless, and so it would have a harder time kind of conveying to other people how it affected you. I would just see it as a very personal, guided personal means of addressing your mental issues. So just putting you in a place where you can kind of come to internal clarity on certain things, which, although it may be effective for you, you have a hard time like putting into words those feelings or what that does for you. Until people just jump the gun and try it, they won't know themselves what it does or does not do."

dance is deluded, or harder to communicate through dance and bodily gesture than through language?

"I don't think it... Well I think it's just a different way of communicating. I just think that it's harder to quantify, and for the average person who would find out about it not from watching it or seeing it but from reading about it or talking about it, it's harder to put into words what it does for you."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?

“It sounds pretty similar to what I was thinking. I guess that implies that there’s more guidance in it via some person leading it. And also that it’s clearly integrated with other types of therapy as well.”

Does this change whether you would recommend it to a family member /friend?

“No, I mean to me it just still sounds kinda like a cool idea like if you don’t find a solution through other methods you might as well try whatever you got.”

Does this change whether you yourself would be willing to try it?

“Uh-uh.”

SUBJECT 5

What is your course of study/occupation?

"I am in the school of nursing"

Would you ever seek medical treatment for a mental health illness?

"Yes."

What kind of treatment would you seek?

"Um, counseling, maybe drugs. It would depend on the illness."

Would you be willing to go to a psychologist/psychiatrist?

"Yes."

Would you be willing to try acupuncture?

"Mmmm... yeah."

Massage?

"Oh, definitely."

Arts (D/MT) therapy?

"Um, probably not."

why not?

"Um, I was just never digging the dancing. I personally think I'm too clumsy to do that."

Do you think these alternative forms of therapy can be successful?

"Yeah, it probably depends on the person."

What do you think their success is dependent on?

"Um, if you enjoy it or not. I mean if you don't like the kind of therapy you're having, then you're probably not going to get too much out of it."

Would you be willing to recommend mental health therapy to a patient

"yeah"

To a family member?

"Probably."

in what instances?

"Well I mean, I'm not really an expert so I would have trouble diagnosing them. But you know, I would encourage them to listen to whatever their doctor says."

To an acquaintance?

"Umm, that probably depends how well I know the person."

What do you think dance/movement therapy is?

"Uhhh, the picture I'm getting in my mind is kinda like yoga on crack. But I don't know if that's right or not."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Something like yoga but more fast-paced."

What do you think it is meant to accomplish?

"I don't know, my perception of yoga might be totally off, but I imagine it's something similar to calm you down inside."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Specifically, you mean by itself? Umm, Probably not. I don’t know, in all my classes we’ve talked about a lot of mixing of therapies and a combination of therapies is usually what works best. So it could probably help, but I don’t think it would be the single most important factor.”
what do you think the most important factor is?

“Ooh, that’s. I don’t know, it’s hard to say which one would be the most important because a lot of therapies depend on the person, like drugs can have different results depending on genetics and stuff like that so drugs might be more effective for one person than the other. To pick one across the board that’s better than the rest, I don’t know, that’s hard to do.”

Would it be more or less successful for certain people?

“Different demographics and values, probably. Basically those demographics and values that would appreciate dance/movement more, I know there are some groups that would not and they would probably never do it.”

what do you think those groups would be?

“How stereotypical am I allowed to be? What you said (qualifying statement). Um, I feel like if you grow up in the city more, maybe in some ethnic group whether it be Hispanic or African American or something, it might be more in your culture than if you’re a suburban white kid. You know, you don’t really grow up dancing too much. I mean you probably danced to pop music when you were a kid, but you know that doesn’t always count. And then you said, as far as pertaining to certain diseases, um I really don’t know. The only thing I can think of is if the illness has some affect on your physical capability to do it, that’s about it.”

effects chemical, emotional, spiritual?

“Um, I think it would be primarily chemical, but not to rule out the others that you mentioned. It’s just that movement like that, like exercise can release chemicals in the brain that actually help you feel better.”

advantages and disadvantages to alternative

“Uh yeah, I think it definitely has advantages because... like I keep going back to this, it depends a lot on the person. Some people will definitely take to it a lot more than others and it’s a great alternative for people who enjoy it, especially if it helps them. *disadvantages*—“Um, not really. I mean, if you don’t like it than you don’t have to do it, you know. So the only people who are going to be doing it are those who are going to like it or at least don’t mind it, so I don’t see any disadvantages from that.”

be good at or passion for dance to get anything from it?

“Well, you don’t have to be good at it but you probably have some kind of interest in it, you know. I mean I have interest in dance but I’m not good at it at all!

would that affect your willingness to try it?

“Well personally it would affect my willingness to try it like in a public, well not public setting, but group setting more, probably. If it’s more of a one on one therapy I think people might be more willing, especially if they’re not very confident about their dancing ability.”

would you be willing to try it one on one?

“probably.”

do you think there’s resistance towards alternative?

“Um, I feel like in the past decade it’s changed a lot. There used to be a lot of resistance to alternative therapies, but current medicine is exploring a lot of different alternatives and you know, the field is really opening up. So, any idea that has a sound basis is worth looking into.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?

"Um, I don't think so. That sounds about like what I was thinking."

Does this change whether you would recommend it to a mental health patient/family member/yourself?

"Um, I would recommend it to patients that I think would be interested or that it would benefit. I mean I don't think any of my family would really like it because they're not big into dance, so I don't think I'd recommend it to them, but for patients, definitely."

yourself?

"Um... Probably not. I mean I wouldn't rule it out but, I'm not sure."

general ideas of perception of dmt, view toward it or your own?

"I mean honestly this is the first time I've really heard of dance/movement therapy, so I haven't really heard of any other opinions. The only thing I can think of is, it's basically a form of physical therapy, right?"

mental health therapy using dance

"Yeah, I mean, I've heard, I've seen research and stuff on the effects of movement like that on brain chemistry and mood and things like that. It sounds pretty good. I obviously haven't experienced it... Um, I think most people would probably kinda perceive it as an extra, like an extra thing to do, like not their primary source of therapy, just because most people still think of like counseling or drugs as the primary source of rehabilitation."

SUBJECT 6

What is your course of study/occupation?

“political science.”

Would you ever seek medical treatment for a mental health illness?

“Uhh, I honestly am not sure, it depends on if someone made me.”

court ordered, doctor ordered, recommendations?

“Um, I would say if my family recommends that I go, then I probably would.”

What kind of treatment would you seek?

“I’m not really sure, whatever they thought was best.”

Would you be willing to go to a psychologist/psychiatrist?

“Oh god yes... I would love to actually.”

Would you be willing to try acupuncture?

“Yes, yes! Please! Acupuncture sounds so cool! It’s too expensive. If my insurance could pay for it, then I would be all over it.”

Massage?

“Again, if I could get insurance to pay for it, then I would do that like every other day.”

Arts (D/MT) therapy?

“Um, well I can’t really dance very well, and I think it would just be painful for everyone else. So, I personally would not be so interested in that. Especially because I just, I don’t know, dancing is fun and all but it’s not really my thing. I’d rather have someone massage me. That would be so nice.”

Do you think mental health therapy can be successful?

What do you think their success is dependent on?

“I think it’s dependent on, primarily, the efforts of the patient, recognizing that there is something going on and trying to fix it. So I think, you know, I think certain mental illness can be, I don’t know if they can ever be cured through therapy, but they can certainly be handled and people can learn how to deal with them through therapy.”

Would you be willing to recommend mental health therapy to a family member?

“Already have.”

To a friend/acquaintance?

“Already have, twice.”

What do you think dance/movement therapy is?

“I’m guessing something like, I don’t know, not quite yoga, but like.... uh... You move around slowly and in ways that seem natural and it relaxes you, I don’t know.

What would a dance/movement therapy session look like?

“Um, I mean I’m kinda picturing a Penn Dance rehearsal, except slower. Um, yeah I don’t know how, yeah that seems about right.”

What do you think it is meant to accomplish?

“I would guess it would be to relax your nerves and clear your mind.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I’m sure it can be successful, but people have to be interested in doing because otherwise if people are thinking to themselves, ‘Wow, this is really dumb,’ than it’s not really going to accomplish anything.”

Would it be more or less successful for certain people?

“I mean, obviously people whose beliefs are that dancing is a sin it would probably not be effective. As for demographics, I mean, I don’t think the over 75 demographic it would be very successful because they probably couldn’t actually physically do it. I also don’t think the under 15 demographic would be very successful because they wouldn’t be able to comprehend it well enough. Otherwise, I don’t think there would be much difference between anyone.”

effects chemical, emotional, spiritual

“Uh, I would say emotional and spiritual, yes. Chemical, not necessarily, maybe.”

advantages/disadvantages

“With traditional therapy being like, sitting in a room with a psychologist? Absolutely. I think because a lot of times... I actually had a massage once and it was unbelievable because after that for the next week and a half, it was just... life was just so much better because when you feel... obviously stress and emotional distress has an impact on your body physically. When you fix those aspects of yourself, then it could allow you to clear your mind... You know, I think that a lot of people would be skeptical that it would work for them specifically for the issues that they have. As long as someone was willing to try it and give it a shot, than I don’t think there could be any disadvantages. Unless something goes wrong, like if someone is doing dance/movement therapy and they twist their ankle, that would probably not be very good. Otherwise, what’s the worst that’s going to happen? Like if you’re getting acupuncture, it’s just going to feel tremendous and if it doesn’t cure you, well if it doesn’t help you emotionally, oh well, you still feel good.”

have to be able to dance/passion for dance?

“I don’t think you necessarily have to be able to dance, but you need to have some kind of passion for it.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?

“No, not really, that goes along with what I was thinking.”

Does this change whether you would recommend it to a family member/ friend?

“No, I think it just, formalizing a definition of it makes it seem more legitimate, and I kinda thought it was legitimate anyway, so not really.”

Does this change whether you yourself would be willing to try it?

“I still, I mean... it really depends. I don’t think I would try it. Just because I’m just not... I don’t know dancing’s just not my thing and even... I highly doubt that I would try it but there’s always the potential.”

general opinions on how people perceive dmt?

“I think that the generation of our parents or maybe our grandparents would be very very skeptical of it because I mean, I don’t know... the more rigid people, the non-traditional method of uh... psychological help, I think they’d be much less likely to think it had any purpose or could work. But otherwise, that’s about it.”

where does skepticism comes from?

"I think they're just not used to seeing these new methods, and they see that old methods, such as traditional psychotherapy and certain medications that have been developed are relatively effective, and that these seem, you know, just kind of... I mean I don't know if it's necessarily rational, but the idea of well people just kind of dancing around, 'how is that going to help them to no longer be depressed?' That's like something that I get. I just um, I have my own parents in mind with this and that seems like what they would be like."

what would it take to absolve skepticism

"It depends on how stubborn someone is. If they just think that it's... like if they think one way but they're willing to, if they see evidence that this therapy works, then I think that they'd be much more willing to accept it. But there are some people who are just, it doesn't matter how much it works they think it's all stupid and there's no correlation so, for some people there's just no way of changing their minds."

scientific evidence or familiarity/awareness/someone trying it, what do you think would best alleviate skepticism

"I would say if a close family member were to try it and were it to be successful, I think that would be the most effective just because I think anything personal is more powerful than statistics and scientific evidence, but that obviously couldn't hurt. And like I said, there are some people where it doesn't matter how effective it is, how effective it's proven to be, it's just never going to sink in with them."

what do you mean, people who think dancing is a sin?

"I'm just thinking of the very rigid... religious groups... I think there are a few of them that still exist that believe that dancing is just the work of the devil. It seems ridiculous to most people but it seems completely legitimate to them. I forget what group it is... it's a fundamentalist Christian group."

what about dance do you think makes them think that?

"I couldn't even begin to tell you, to be honest. Especially because when these beliefs formed, dancing was, like this... it wasn't even close to. I could understand if they think what we call dancing at a party or that we see... I don't know I'm picturing Britney Spears doing her little thing, I could see how they would think that is a sin. What we're talking about... ballroom dancing and stuff, I don't see anything wrong with that, but I guess they didn't like it so I don't know exactly where it came from, but it is."

other thoughts or opinions?

"I never thought of dance therapy as existing I didn't realize it was before you brought it up. Personally I really think that the alternative therapies can be more effective than a traditional, or... especially if they're used in conjunction with traditional therapy because any kind of emotional problems exist in multiple ways. So, like I said before, when you're extremely stressed you can feel that, everyone gets it in different places. When I'm really stressed out, my lower back feels like its just tied up in knots, all the time. If there is someone who is depressed or who is overly stressed or has some of those problems, actually I don't know I don't think, if we're talking about something like schizophrenia, I don't believe that an alternative like massage therapy or dance therapy would do anything just because that's a chemical imbalance. I just don't think it could be effective for that. But when we're talking about something that is a normal emotion that is just exaggerated in people like depression and like anxiety and stress, that's where I think that the alternative therapies can be really effective because you have the physical aspect of getting, having acupuncture done or doing these dance movements thrown in with the couple hours a week you spend just talking, I think that could be really really effective."

SUBJECT 7

What is your course of study/occupation?

"I study communications and theatre."

Would you ever seek medical treatment for a mental health illness?

"Yes, if I had one, I would seek medical treatment."

What kind of treatment would you seek?

"Umm...I think, off the top of my head, I would go to, you know, like a psychologist or someone like that. That's what, instinctually, I think I would do."

Would you be willing to go to a psychiatrist?

"Yes, I would definitely be willing."

Would you be willing to try acupuncture?

"Uh, yes, but I feel like it would have to be recommended to me by like someone. You know what I mean? I don't think it's something I would seek out by myself."

Massage?

"Same thing. I definitely am open to that, but I think someone would have to tell me because I don't think it's something I would think of off the top of my head, myself."

Arts (D/MT) therapy?

"Yeah, same thing. I definitely think it's something I could do. I don't dance, but I think that it would, if it's something that would help me in a situation I would definitely be willing to do it."

Do you think mental health therapy can be successful?

What do you think their success is dependent on?

"I do think that, what was it treatment, yeah, I definitely think that treatment can be successful. I think that people who are involved, people who are receiving treatment have to be willing to be treated, and willing to face their problems and get better. And I think that's the main thing it depends on. Um, but I definitely think that they can be successful."

Would you be willing to recommend mental health therapy to a family member?

"Um, yeah. If I thought that someone needed help, I definitely think. I mean it's not a comfortable thing to talk about with someone, but I think if someone needed help, I wouldn't have a problem suggesting it, recommending it.

friend or an acquaintance?

"I feel like depending on the level of friendship. Like, I have before, to a friend, a close friend, so I think that it's someone that you'd have to feel comfortable enough, you know, that you don't think you're going to offend someone by recommending it. But I definitely would, for someone I care about, for sure.

What do you think dance/movement therapy is?

"Uhhh, I don't really know...haha... Um, but, I mean, I, I would assume that it has to do with dancing and just being in your body and physically I guess, exploring the issues that you have or expressing them in different ways or something, but I don't really know."

What would a dance/movement therapy session look like?

"Umm, I mean I assume you'd have a dance/movement therapist who would take you through certain steps or movements or something like that. I mean I don't know if it would vary from person to person, or issue to issue, or things like that, but I think it would definitely be based on someone who's in charge helping you through it step by step."

What do you think it is meant to accomplish?

“Um, I think... well usually when I’ve heard of stuff like this its more like physical therapy in terms of people, you know, helping injuries and things like that to help get over physical pain, but in terms of like mentalness and stuff like you’ve been talking like this, I’m not really sure how it would work. But, um, yeah, I guess just from what I’ve known before it’s just more like physical injuries and like rehab as opposed to working through mental issues and things like that.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Um, I mean yeah. I’m a firm believer in all different types of things and I think that different things can be helpful to different people, and I think that not everything is going to be helpful to everyone. Like I said before, I think it depends a lot on the person who’s being treated, whether they’re willing to let it help them or not. Um... and you know sometimes people have blocks about certain things and it might not help them, but I definitely think that this... I mean dance/movement therapy would, could be helpful to people as long as they’re open to it.”

Would it be more or less successful for certain people?

“Yeah, no, I do. I’m not so sure... I think in terms of beliefs and stuff like that, like some people... are very... inclined to put their, you know, emphasis behind medicine and that’s all that they’re gonna investigate in terms of like treatments and stuff like that. And so I think that people who are very like gung-ho about that would probably be less likely to even be inclined to try something like that, something like this. But I think that, wow, I just lost the question. Oh, different kinds of people, sorry. But I also think there are some people who have the opposite kind of things, and don’t like to rely on medicine, don’t... who would be more inclined to do something like this. And I think that that, that really depends, I mean I think belief plays a huuuuge role in it. Um, in terms of like specific demographics as like, I don’t know, age and ethnicity and things, I mean I have no idea. But I think that belief definitely plays a huge role in it because some people just will put up a mental block and think something like this won’t help, or I mean even if medicine won’t help or talking to someone won’t help or anything like that.”

effects chemical, emotional, spiritual?

“Um... I mean, I think that, in terms of talking about for like... I mean I think it’s more... emotional and I mean I don’t know if I would say spiritual but I think it’s beyond the physical. I think it’s more about like... getting to know yourself and like getting to know your body and moving on from there. And I think it’s more about that, I mean I guess that’s physical too, so I guess it’s some sort of combination. But I think it’s exploring these things, like personally, through the therapy. Which I mean I guess is an obvious answer, but I think it has to do with a combination of those things, I don’t think that you can say it’s strictly one or the other.”

chemical results? for mental illnesses?

“Umm... I have no idea, to be honest. I don’t really know anything about it so I can’t really answer that question. But, I mean, and I don’t really know anything about biology or anything, so I can’t really answer that with any type of knowledge on the subject, sorry, haha.”

good at or passion for dance for benefits?

“I don’t think so. I mean, like... well I mean, I think on any, like... some people may think that. But I think that, like I said you have to be willing. On some level everyone can dance and everyone likes to dance, whether they say they do or not. And I think that for some people, dancing is a nice alternative to other things, you know what I mean? So taking drugs or having to sit through, you know, talking to someone one on one or something like that. I mean, it would definitely help, obviously, but I don’t think it’s necessary for someone to partake in such a

program. I don't think it's necessary at all, as long as there's a willingness there. There obviously has to be the willingness to try, but I don't think it's necessary."

advantages/disadvantages to alternative v. traditional

"Um, I think in general, well I'm also like, the daughter of a doctor, so maybe that colors my perspective too, but I think in general people are more likely to take the traditional route in terms of something like this. So a disadvantage is I think that people are more likely to go towards something more traditional and, like, you know if someone's not willing to try this then it's not going to help them, obviously. But I think the advantage is it's something completely different. Um, I don't know the specifics about exactly how it helps people, but I think that it gives people a nice alternative to the traditional. I think that might appeal to some people, even as a way... of just trying something new and something different that might be less intimidating to them, and you know in the end helpful to them too."

what causes people to use traditional, have hesitation to alternative?

"I think that, it's just like what's the most popular. You know what I mean? People are always kind of afraid of what's new or different. I think that people are used to seeing, you know, people go to the doctor and people getting pills and people talking to a therapist, and it, a lot of people don't know about alternative therapies and stuff like that. So I think that the tendency, the natural tendency is to go towards what people know and have heard of and may know people who have done and things like that. So I think that's where the natural thing is, and I think that's why I say that coming from being a doctor's daughter, like that's just, I know that's what would be, my father would tell me is, 'go talk to a doctor.' I think that's definitely something, and if people don't know about it that's obviously not something that they're going to try to do because they have no way of knowing how to go about you know, trying it or whatever."

increasing familiarity would help eliminate hesitations?

"I definitely think so. I definitely think if people knew more about it or, like I said I don't really know exactly... what it posits to do or anything like that, but I think if people knew, and if people knew it was an option, I think it's a less scary option than going to talk to a doctor. I don't like going to the doctor, I don't like anything like that and I think that if people know that this is a way that can help them with their problems... in, you know a more unconventional way. I think that upping the knowledge and the education about it would definitely help, for sure."

what makes it less scary?

"Um, when people know about it? Or, no then traditional? Well I also am kind of afraid of doctors, I don't like going. I never went to the doctor's as a kid. Whenever I was sick, my dad would say, 'Oh, here I'll get you antibiotics,' or like whatever. I just never went, so to this day I don't like going to the doctor. And I think that the thought of going to therapy and talking about my problems is, I mean I talk about my problems to my friends a lot so I guess that's a form of it. But like, I don't know, it's so formal and so, I don't know, I feel like it's so structured. And that's something that I think frightens me at least, I don't know if it frightens people in general."

dmr less structured, and that's its appeal?

"I think it's... I mean I definitely think there's structure to it but I think that it's a different kind of structure. I don't think it's: you go into a room and sit on a couch and have to divulge all of your deepest, darkest secrets. I think that it approaches it in a different way that might be less intimidating to people. I think that's the difference."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like? or what it is?
"Um, no. Well, I mean, I still don't really know what a session would look like, based on that definition, but I mean it kind of goes along with what I was thinking, that the purpose of it is to incorporate all these different aspects and to address them in this way, I guess. But I don't think it helps me understand what a session would look like, necessarily."

Does this change whether you would recommend it to a family member /friend?

"Um, I mean yeah. Because like I said before, I wasn't really sure what it was. So I think that, it would... it definitely would help because now I know exactly what it's supposed to do or supposed, the supposed benefits or outcomes that you look for are, why it's used, so that definitely helps."

Does this change whether you yourself would be willing to try it?

"Um... I mean yeah, I mean it makes it more specific. But at the same time, like I said earlier, I'm pretty open to different things, so I mean, it helps solidify that, I guess."

would viewing session, or hearing personal experience help you be more open or feel like its legitimate?

"I think so, yeah. Well, it also just helps because like I said, it's the whole familiarity issue again. It makes it that much more real, and clear, I think. I mean yeah, you have a real life example, which I always think is a good thing. People have their conceptions of what it's like to go to a therapist, you know and sit on a couch and you know, cry about their mothers because that's what they see on television and in movies and stuff like that. But this is completely, I mean it's not as pop-culture as that other notion."

SUBJECT 8

What is your course of study/occupation?

“Um, currently I’m in the medical school, first year. Um, but my undergraduate work was in biomedical engineering, English, and women, gender, and sexuality.”

Would you ever seek medical treatment for a mental health illness?

“Mmmm, yes, at some point, I would.”

why the hesitation?

“Because it seems like sometimes it’s something you can kind of work through on your own, depending on how bad it is.”

What kind of treatment would you seek?

“Um... I would be more apt to try talking treatments or other types of treatments before any type of medical, or pharmacological treatments.”

Would you be willing to go to a psychologist/psychiatrist?

“Mm, I’m not too familiar with the different techniques that they would use. So, I would probably want a doctor, rather than a psychiatrist, just in case there’s other things that can possibly be causing the mental illness. Possibly they might be able to pick up on symptoms that are out of the ordinary, that lean towards more bodily causes than just mental causes.”

Would you be willing to try acupuncture?

“definitely.”

Massage?

“yes.”

Arts (D/MT) therapy?

“yes.”

Do you think mental health, specifically traditionally based therapy can be successful?

What do you think their success is dependent on?

“Hmm... So psychotherapy, but not alternative methods? I think that depends on the person’s willingness to go along with it and to not balk at certain levels of the discussion or where it goes to. But I think it can, it really can be very limiting because a lot of times people don’t want to hear certain things or realize certain things about themselves. So I think psychotherapy can be very limiting in that way, in the way you realize yourself.”

Would you be willing to recommend mental health therapy to a patient?

“yes.”

To a family member?

“yes, definitely.”

To an friend/acquaintance?

“yes.”

What do you think dance/movement therapy is?

“I would think it’s some type of um expressive... using movement to be expressive, to find oneself, to feel, or to explore certain aspects that might not be readily verbal, verbalized, or understood even. So just another way to break through personal problems or boundaries or barriers and communicate.”

What do you think it may involve?

What would a dance/movement therapy session look like?

"I've never, I haven't actually... I don't know any particularly. But I would think it would be, um... maybe something like, uh, improv where it's probably some guidance, um... some, of course probably some stretching or warming-up just to be safe, and then some guidance with giving some verbal cues or themes to explore and then allowing people to just be in the movement and the moment, seeing where it takes them, I guess."

What do you think it is meant to accomplish?

"Um. Well, catharsis for one... would be an interesting type of release. Or just to, an escape. A release of endorphins or just, a release of emotion through movement. So that's I guess the cathartic aspect. But then I would also think maybe it could teach something teach the person involved in it something about themselves, or through observation of each other. Maybe teach each other something about human nature or something that you might not readily recognize day to day."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think it could be very successful. I think dance, from my perspective, can be very spiritual and transcendent, as well as just a release of energy, something that allows you to just be in the moment. And it can be successful... I think if individuals are willing to do it and to release themselves and not feel silly or judged, especially judged. I think that's, any type of creative movement that can be a big block, especially for improv type of movements. Feeling comfortable with one's body could be a very important point for developing individual's... a healthy outlook on their body and themselves. It was interesting, I actually did a class for a bunch of... these little girls that were girl scouts. The mother was really, or one of the den leaders... I think that's the boy's name but... anyways she was really happy with the idea that it could be male or female, anybody could do modern dance and anybody's body type, it really doesn't matter what you look like you can just participate and she thought that was extremely important for building self-respect and awareness, and a good body image for young girls and stuff. I think dance therapy could definitely be important for that. Even the thought that dance therapy could be something useful for maybe not just mental health but treating obesity and diabetes, which also has something to do with somebody's... how they view themselves. Self-confidence, I guess. So that's kinda how I would view that as being successfully implemented."

effects chemical, emotional, spiritual?

"I think it could be all three. And it could be very personal. I think chemical is definitely biologically important because you release endorphins, you release any type of things, you get the body moving. It's very important for health and for balance and for feeling good about yourself. Spiritually, if you can reach that level. I don't think necessarily everybody can reach a spiritual, transcendent level. It depends how much they're willing to commit or beliefs or how much they read into the movement. Sometimes individuals are too self-conscious and it hinders that extra, spiritual aspect. And then the third, emotional definitely. I think it's kind of a cathartic release. If you're exploring some type of emotion that... ends up just manifesting itself beyond just movement, just straight up release, definitely emotional."

Would it be more or less successful for certain people?

"I think that the thing about dance is that so many people like to do it, even if they're self-conscious of it and don't think they're good at it, they still enjoy it. It kind of transcends a lot of boundaries, except, I would think, certain religions or certain conservative individuals might not be as willing to engage in it. I would think maybe some type of Muslim or eastern orthodox faith would maybe not choose to participate in that sort of thing, but other than that... Especially an

urban demographic, I would think, would be very, very willing in participating, maybe rural, a little less so if you're more conservative, fundamentalist."

what do you think hesitation from religious/conservative people stems from?

"It's interesting... I had a modern dance teacher who, her father was a priest or a minister, and he didn't allow her to dance at all... She kind of went away from that and became a modern dance teacher and went to school for it... and became pregnant right after high school... but anyways, so it's kind of interesting... how I think religion has a lot to do with it, the idea that any type of excess, any type of... external expression might be, not as... more of a personal or something close to the family or to themselves should be contained, it should not be shared with, outside the family. Certain types of movements should not be engaged upon because they might be viewed as promiscuous, or any type of that... yeah, I don't really know what else."

good at dance or passion to benefit?

"My personal belief is that you don't ever have to know how to dance, everybody can dance. And so, I feel that everybody should be able to participate in dance. It doesn't matter what it looks like, it's for the individual. It's a very individual thing. The more you do it, obviously, maybe the more comfortable you'll be. I don't think you really need to be good at it... You have to have a willingness, I think the passion comes over time. I feel that most people don't mind dancing at all and the only reason people say they don't like to dance is because they're self-conscious, and they don't want to look stupid. But um, everybody, I think, deep down likes to dance."

advantages/disadvantages for alternative v. traditional

"I feel that they are very beneficial as... as options and stuff, but I feel that still they haven't come into... probably not enough research has been done in order to establish them as gold standards or up treatment. And also it takes a lot more effort and energy or I guess belief into the system, or convincing of the patient rather than just 'Oh, just take a medicine, you'll be better.' I feel that it might meet with some resistance until it's proven itself a little more... which is unfortunate, I feel."

convincing of the patient? why and what would it take?

"Similarly for somebody being... I think it depends... one maybe if they're more desperate they might jump to this as an option more quickly. But if there's somebody who's... if you have a patient who has some type of disorder, anxiety disorder, or they're really shy or they can't connect with people or agoraphobia, or something like that it might be very, very difficult to convince them to try a dance therapy technique in order to overcome that type of mental problem, rather than somebody who's dealing with anger management or other issues. And also, but if you have someone with anger management issues it might be a safety issue having them in a dance therapy group. You'd have to evaluate if it's something safe for the individual and safe for the group, or if it's one on one for the instructor, to put them into the situation. Also, making sure they're stable... I know that it's not supposed to be something... they shouldn't be judged in dance therapy at all, but if they ever were to perceive that at all, I feel that that could be a very explosive situation, or cause, I guess, a move back in their therapy. I think it could be really good with normal, uh traditional therapy and then to see, individually how the patient would respond to it."

you mentioned resistance, where does it come from?

"I think it's, unfortunately, a very biomedical, western medicine precedent. There's an etiology to disease and there's a standard treatment that's been proven through a double blind clinical trial. Always. In order to prove anything, or to seem like it proves something. There's lots of

gains being made with, I think, with acupuncture. And a lot of pushes for translational research or even with um, complementary and alternative medicine. But everybody still wants research, they want to see the results. They don't want to see "Oh this might possibly work for one individual." Also I feel that a lot of physicians maybe aren't as well educated about other options. They went to medical school when the only gold standard was medicate or talk therapy. There's just two... only those two branches. So I would think one barrier would be communicating with them and educating them about other options and showing them proof and results of patients that benefit from it. And then patients... they're very savvy individuals they go online, they find things out online and find out what works for other people. So, they might come to their doctors with this option and ask for it or going and finding it, seeking it out themselves. You always have the early adaptors, but then... there will be some that lag behind, I think."

increased awareness/more research will help eliminate resistance?

"I think both. I would even think some type of convention that allowed the mental health professionals to experience it themselves could be very convincing. And it's not like something like acupuncture where you actually have to have a procedure done sort of. It's very harmless for you to try... at least experience something new. So yeah, communicating about it and awareness about it would be really key. As well as publishing some papers about it in the New England Journal of Medicine, obviously would catch so many eyes, or whatever the one's for psychology."

eliminate it, or resistance remain?

"I think there's always going to be resistance but as medical education progresses forward and a lot of physicians retire, I feel like the old order is somewhat coming to a close anyways in the type of rigidity in medicine. I feel that a lot of people are moving towards... the biopsychosocial model is definitely instituted in pretty much every medical school across the nation. And then every medical school has at least a lecture on integrated or complementary medicine. It's only a matter of time. I think that that continues to expand. As more people know about it will, I think, have a much larger impact. So I think it's just a matter of time as well as a matter of emphasis."

general perception? colleagues, patients?

"Oh my perception is really positive so it's hard for me to think of what other people would think. I think it would be several different reactions. I could think of somebody at the VA hospital being appalled or shocked or just thinking 'what are you doing you're not going to get a veteran to agree to do this', or this is somewhat emasculating or something. Whereas you might get somebody as HUP who's looking for the best interests of their patients or trying to find what could help, the next thing that could help their patients and after seeing so many patients not improve or just wanting something better or anything else. I think it'd be definitely mixed. I think that students would be more approachable about it as they're entering the profession, before they become somewhat hardened."

emasculating, is that a factor in male participation?

"Yes, exactly. I think that could be a perception that... for example any type of release of emotion or catharsis... well, hmm. There is that example with the prisoners and stuff and how that helps with... but that's a different country, so... I don't know where I'm going with this. There's the dancing prisoners, I think in Guam. They make the prisoners dance and it has pretty much quelled all the problems with fighting and aggression. So it provides a different outlet. You might be able to convince... if you're not getting anywhere in sort of... talk therapy, trying to convince a male, hyper-masculine individual to talk about his emotions or to release any of it,

it might provide a better avenue for them to do it in the more abstract, or a different type of cathartic release. I can't imagine them reaching the point of... well, they might. It might be a break-through actually. I really don't know, to completely turn around on that, yeah."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what a session might involve or look like?/what it is?

"I think that's pretty, that sounds good."

Does this change whether you would recommend it to a mental health patient/family member /friend?

"No, I think I'd be more willing to with... that's a very solid definition. I like the idea of an integration. I feel that at one point, any type of mental illness treatment deals with just one aspect, very mental, compartmentalized, nothing else is involved, whatsoever. And that's not the case at all, your body's involved, how you feel, and if you can integrate it, that's a much more holistic approach to how you treat mental illness."

Does this change whether you yourself would be willing to try it?

"I would definitely want to try it. I would try that probably before standard treatment, almost. I feel that if I could participate and overcome any type of mental illness in an integrated fashion, I feel that that would be better than trying to pick pieces apart first.

more holistic view beneficial for you as opposed to psychotherapy or medication?

"Yes, definitely."

SUBJECT 9

What is your course of study/occupation?

"I'm currently a second year master's of social work student."

Would you ever seek medical treatment for a mental health illness?

"I will and I have."

What kind of treatment would you seek?

"Um, individual therapy."

Would you be willing to go to a psychologist/psychiatrist?

"Mainly a psychologist. I'm not really a fan of psychiatrists. I don't believe in giving out medication for illnesses, I definitely believe in individual therapy, or group therapy if that's possible."

Would you be willing to try acupuncture?

"Sure, I actually went to, I've tried acupuncture."

Massage?

"Yes."

Arts (DMT) therapy?

"Yes, since I'm a social work student, I have done arts therapy with my clients in the past."

Do you think these forms of therapy can be successful?

"That's the basis of my career. Mental health therapy is definitely essential in achieving psychological well-being and being able to function in daily life, in managing and coping with traumas, psychosocial stressors, and just daily activities. So I think mental health therapy is essential."

What do you think their success is dependent on?

Definitely a good rapport between the client and the therapist in order to build trust, in order to implement a successful intervention with the client. And also, just listening on the part of the therapist and being open and honest with the client is very important.

Would you be willing to recommend mental health therapy to a patient?

"Yes, I have and I am."

To a family member?

"yes."

To an friend/acquaintance?

"yes."

What do you think dance/movement therapy is?

"I believe it's grounded in the idea of being creative and expressing yourself through movements, which will relieve stress and allow you to cooperate with others and with the therapist as well."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Well, from experience the dance therapist I worked with, she did a lot of work with balls and like a parachute thing. She had the kids stand around a parachute and throw it up and then they ran across from each other, interacting with each other. She also ran across with the kids as well. She would throw in the ball to the kids and have them throw it to each other to induce interaction, so that was my experience with dance therapy."

What do you think it is meant to accomplish?

“Sometimes a cathartic experience allowing the patient to release stress, most of the time, and just interact with others.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I believe it can be successful. I guess from my experience again, it can be successful at just improving relationships with primarily children and their peers, and just like relieving stress.”

Would it be more or less successful for certain people?

“I think it’s successful among children and adolescents. I’ve only seen it done with African American children, so it’s been fairly successful among that cultural demographic. And mental illness? I haven’t seen it done with children who have severe mental illnesses, but mainly children who have experience like PTSD, anxiety, some depression, just to get them lively and interactive.”

less successful? resistance?

“I think the resistance may be for people who have maybe social anxiety, who are afraid to speak to others or even come out in public. Those who are possibly resistant to the idea of therapy, who have stereotypes or preconceived notions about therapy, that it may not help them or they might have heard negative experiences from other people who have experienced therapy.”

effects emotional, spiritual, chemical?

“A combination of emotional and spiritual with dance/movement therapy. I’m not necessarily sure if chemical would play a factor in it because it’s primarily movement and expressing emotions through dance.”

have to be good at dance or passion for dance?

“I don’t think so because the dance therapy I’ve seen wasn’t necessarily dance, more so just like moving around and being physical and interactive with others. So you don’t have to know how to dance to have a successful outcome from dance therapy.”

general perception of people? working with it, how do people react?

“Um... Well I experienced it at a therapeutic summer camp. The counselors were a little hesitant to actually have a dance therapist come. That was my first time experiencing it so I was pretty much open to the whole idea. Just seeing it done with a younger population, they were mainly children between the ages of seven and ten, they really enjoyed it. It definitely fostered positive well-being, good peer relationships, they wanted the dance therapist to come back. So I mean I did see success in that population, but the older counselors were definitely resistant to it at first.”

where does resistance come from?

“Just some stereotypes about dance therapy, the unknown, ignorance towards the entire therapy itself, and just like um, preconceived notions from other people. The idea that it’s mainly a fluffy form of therapy. Some don’t really believe in any therapy beyond the typical rigid form of individualized therapy. So the more experimental, you know, dance, arts, movement therapy is not really accepted by the *older* population.”

advantages/disadvantages to alternative v. traditional

“I think it’s advantageous when you see results among your clients. From my experience, alternate therapies have been more successful than evidence-based, traditional therapies because people are different. They operate at different capacities. You have to find out where your client is before you even, you know, proceed with a certain modality. So if your client is very creative, if they’re into different activities such as dance, like dance/movement therapy would be beneficial. If they’re into art, then art therapy would be beneficial. If they like to talk and to

listen then, you know, traditional, individualized therapy would be important. So it definitely depends on your client and where they are in your session and your initial assessment of them. I think the only disadvantage I find is when people are not interested in it. I mean there's no point in implementing dance therapy if no one wants to do it or if you find it's not successful with your clients. And that's with any kind of therapeutic modality. It can be an ? type of therapy but if it's not advantageous than what's the point of doing it. So I think that it really depends on the success among your clients and how your client perceives it."

certain people more open or interested?

"Um... I guess people who are willing to explore themselves, who are open to change, who are creative people, who are primarily young, and I know this sounds a little stereotypical, but the younger population are definitely more open to alternative forms of therapy. They like to have a good time, they like to be interactive. So, definitely younger children are better suited for alternative forms of therapy and even some adults who are creative in nature are more inclined to pursue alternative forms of therapy."

interactions with colleagues- reactions and opinions?

"When I was in a school last year, most of the social workers participated in a lot of arts therapy, a lot of movement therapy. I actually did some art and play therapy and drama therapy with my clients. So it was definitely encouraged within a school setting. In a hospital, the child life department does a lot of arts therapy, movement therapy, creative therapy with their clients. So... and doctors really appreciate that because they have a difficult time talking with the younger children about their illness or about the effects of their illness and what's going to happen after they have a surgery or something like that. So they do rely on the child life people to... implement these different, alternative forms of therapy as opposed to the traditional psychologist coming in and talking to the client who's five years old who doesn't have any idea what the person is saying and the psychologist doesn't know how to communicate aside from filling their head with jargon. So I think that alternative forms of therapy are important and you know, it's really appreciated in the hospital and school setting."

kinds of people being recommended for dmt?

"I think those dealing with either a cognitive or psychosocial impairment is good for dance/movement therapy or any creative therapy because it is looking for that relationship, that chance to bond with someone else. And creative therapy, or alternative therapy in general, gives the client and the therapist the chance to bond on not only a traditional, talking/listening level, but more so on a more creative and more in depth level. So I think those who are really striving to form a relationship with someone, primarily another adult figure is important."

family's reactions to dmt?

"Well... most of the families are pretty open to any kind of intervention we are willing to provide. Since most of the kids that I worked with in the past are younger children, they really prefer me using dance/movement therapy or any kind of alternative therapy because they feel like the more traditional therapies and modalities are too intense for their children. So they feel as though any way you can intervene on a level that the child can understand is more important than actually implementing some traditional form of therapy."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your understanding of what d/mt is or what a session might involve or look like?

“Um, no not really. I mean, like I was saying before I’ve definitely seen that played out in a dance/movement therapy session. I didn’t really have a formal definition for it, but I did see the psychological well-being of the child change from before and after the therapy session, to I agree with that definition.”

Does this change whether you would recommend it to a mental health patient/family member/friend? or you?

“No, not at all.”

general comments or opinions how you feel or how you think others do?

“I mean myself, since I’m a therapist, I definitely agree with any kind of therapy that’s going to produce positive psychological change within a client, be it traditional forms of therapy or alternative forms of therapy. Any way that a therapist can intervene with a client in a positive way, which produces change, I’m advocating for. I think for other people who aren’t well-versed in different kinds of therapy modalities are going to be skeptical and those who have been practicing one form of therapy for X amount of years is definitely going to be skeptical towards alternative, more new aged forms of therapy. So I guess for those who are willing to practice these alternative forms of therapy, do not get discouraged because you’re introducing a new way to intervene with clients and it’s going to take awhile before it’s completely accepted, as will any nuanced form of therapy or anything that’s introduced to society.”

what’s required to make it more accepted, decrease hesitation?

“I guess from a scientific standpoint, just having more articles published displaying the effectiveness of dance therapy. So, adding to the literature about how effective this form of therapy is on a certain population. I think that will validate the use of alternative forms of therapy. Because as of now, it’s pretty new, like no one really knows anything about it. They don’t know the validity of it. So I think just publishing more material on this kind of therapy would be beneficial. And that will show other therapists who are more inclined to use traditional forms of therapy that this works, and that they should practice it with their clients.”

anything about background, training, study that influences your opinion on dmt?

“I guess just from my brief experience with it and just my experience with other alternative forms of therapy. I mean I’m a pretty open clinician, so anything that benefits my clients, I’m willing to try. But again, that’s just me and other people are more rigid in their ways, so I can’t really change their mindset.”

SUBJECT 10 (CASE STUDY)

What is your course of study/occupation?

"medicine."

Would you ever seek medical treatment for a mental health illness?

"No."

What kind of treatment would you seek?

Would you be willing to go to a psychologist/psychiatrist?

"No."

Would you be willing to try acupuncture?

"No."

Massage?

"No."

Arts (D/MT) therapy?

"No."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"I believe that they could be successful, but their success is dependent on proper evaluation in a double blind, placebo-controlled, randomized trial."

if proven successful, you still wouldn't be willing to try?

"No because evidence of such trials would be invariably limited. I would be suspicious of the people sponsoring them because I'm sure they have their own agenda regarding such things."

Would you be willing to recommend mental health therapy to a patient? What kinds?

"Absolutely. Um... well, for non-pharmacologic therapy, cognitive behavioral, I mean traditional sorts of therapy, cognitive behavioral therapy, behavioral analysis, possibly even Freudian therapy for some people, sexual dysfunction therapy, and then of course there's a whole range of pharmacologic options available, depending upon the etiology in question."

To a family member?

"Uh, yeah. Sure."

To an friend/acquaintance?

"Sure, depending upon their... with the caveat of the mere seeking of therapy itself could have potential harm to their profession. So it would really be dependent upon what profession they had or what profession they were a part of and whether or not the therapy itself would cause them some harm and the subsequent balance of risks and benefits."

is that why you won't seek it?

"That is one of many reasons. It's unclear to me what the efficacy is for people that are, sort of, oriented towards help or change to begin with. I mean to think the side effects of pharmacologic therapy can sometimes be very drastic and it's unclear to me whether the risk-benefit ratio would be tolerable in my particular instance, should the need arise to pursue such therapy."

distinction between you getting therapy and recommending it to family?

"Expertise. I have it, and they do not."

What do you think dance/movement therapy is?

"Well... that's a very good question. I would honestly have to say that I... do not know the precise definition of what dance/movement therapy is. However, my impression of

dance/movement therapy is the use of some sort of creative kinesiology to help patients feel better about themselves in some way.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Well, I guess it involves... trying out new... movements for a patient. You know, learning how to adjust to rhythm or some sort of periodic movement in a way that may promote relaxation or some sort of self-centeredness, in quotes. I imagine a typical session is either a small group of people or a one on one session with an individualized instructor who then proceeds to instruct a patient in very basic movement and balance skills and things that promote sort of a calmness or quote unquote inner peace that may perhaps have some influence on their subjective inner state.”

What do you think it is meant to accomplish?

“Well, I mean I suppose if it’s targeted as a potential mental health therapy than it should hopefully accomplish similar goals as to other traditional forms of mental health therapy, which is alleviating any sort of mental disease that may be afflicting a given individual.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Well I think the success of something like dance therapy is highly dependent upon what you want it to be successful for. It’s highly dependent upon what you ask of it. Is dance therapy going to fix a schizophrenic? No. Is it going to fix someone with bipolar disorder? No. Might it be a complement to traditional pharmacologic therapy for depression? Possibly. So I see it working in, at the most, working to complement traditional behavioral and pharmacologic therapy techniques for diseases, which on the spectrum of mental illness, aren’t as devastating as other mental diseases.”

Would it be more or less successful for certain people?

“Uh, so yeah. So I think that it would be less successful for people, like I said, with schizophrenia, bipolar, schizo-affective disorders, any axis 2 disorder, people with substance abuse disorders. I think it would be less successful for those people. I think it might be more for people with depression or anxiety just because those are my own personal biases and those diseases are amenable to a wide range of low-level interventions. In terms of particular groups or segments of society, I mean I think it’s highly contingent upon the individual and how open they are to receive such therapy. That’s generally the case with other forms of non-pharmacologic therapy for mental illness. So I’d be hesitant to categorize any one group or another as more or less likely. Certainly having the funds to pursue it is critical to success, so practically, you know, I imagine this would be probably more expensive than some of the cheaper mental health interventions, such as lithium. So, um, I imagine one might need the funds in order to access it and that would be a critical element of success.”

effects chemical, emotional, spiritual

“Well I don’t know what it means to have a spiritual effect. I imagine that the emotional is biochemical, so those two are very much similar to me. So any effect it would have, if it were to be a true effect, would have to affect the chemistry in the brain, because as we know mental disease is a function of imbalanced chemicals. So were it to work, it would have to affect at that level in the brain.”

do you think it’s capable of that?

“Sure. Absolutely, why not?”

advantages/disadvantages to alternative v. traditional

“Well that depends, I guess, if you’re thinking about using it as a first line intervention or a second or third line intervention. I think there are obvious disadvantages to using an unproven therapy as a first line intervention for a patient with a serious mental illness, or even a not so serious mental illness, given the high degree of morbidity and mortality associated with these diseases. If you’re thinking about dance therapy complementary to traditional therapy as a second line therapy, then I think that, you know, it is important to explore these alternative strategies with a caveat that you’re doing something that’s untested, unproven, has benefit for help or benefit for harm in terms of the opportunity cost of using your time doing one thing versus using your time potentially to do another thing. So I think patients really need to understand that yes, this is a therapy available to them. They also need to understand that there is very little good evidence supporting it and very little evidence against it, and that, you know, they run the risk, in some sense, of getting sub-optimal treatment by pursuing this therapy, but, at the same time, they may derive significant potential benefit from it, it’s just entirely unknown. The alternative is to pursue a first or second line therapy, which has been highly studied, and is known to give a certain X percentage of benefit in this certain type of population of patients. So I think the real balance... the real question you have to ask is how much uncertainty are you willing to deal with. You know, as someone who provides care, I would be very, very hesitant to pursue dance therapy as a first line intervention for anyone with any of the common array of mental illnesses that I see on a routine basis.”

talent or passion for dance to benefit?

“I would imagine not.”

general perceptions from general population, patients or colleagues?

“I guess I can probably speak most closely, most accurately about my colleagues and I would say there would probably be a very generalized level of skepticism about such an intervention. You know, part of the problem is just how do you mention the intervention itself and then how are you going to measure outcomes. You know, the outcomes are probably easier to measure with standardized scales, but whether or not you’re actually delivering the quote appropriate dose of the intervention and that you’re standardizing quote doses across people who are otherwise alike in any other way, in all other ways, is just very difficult for me to comprehend, and it would probably be very difficult for my colleagues to comprehend. As far as patients, you know, I don’t think you could easily generalize whether or not this would be acceptable to patients, you know. My patient population at the VA, which consists almost entirely of male war veterans, would probably be less likely to pursue an intervention like this, just based upon my own anecdotal experience. However, I imagine if we go to the suburbs and take a group of patients that also do pilates and yoga and may be soccer moms, they may be more willing to try something like this out, especially if they have a healthy skepticism of traditional medicine in the first place.”

certain groups of people less willing, what about them (VA) makes them less willing than suburb soccer moms?

“Well... I would say that my patients at the VA are typically sicker. They have a higher degree of the co-morbidities than your usual soccer mom and this places them, practically, you know, even just movement speaking, it places them at a disadvantage. They’re typically older and may not have the functional ability to get around like they used to. But even beyond that, you know, being sicker and being sort of part of that population means that, you know, you’re more likely to expect interventions that are biochemical or based on drugs or surgical interventions than you

are interventions which may have a quote softer aspect to them. So I think that population reaches for the big guns faster.”

dmt doesn't have scientific background, with more evidence for success, would that change your perception/willingness

“Oh sure, yeah. I mean if there's good evidence, you know. I think any good physician should be constantly willing to challenge their own beliefs. I think the problem for acceptance of something like dance therapy within mainstream medical practice is that people just aren't going to believe the studies themselves. So it would take a very, very well-designed study, multiple very, very well-designed studies with clear measurement of intervention and clear measurement of outcomes across clinically meaningful parameters and within clinically relevant populations in order for the majority of patients... of physicians within the medical community to sort of drop their long held beliefs and latch onto something like this. I mean, you can see it with acupuncture today. There are just no good studies showing that acupuncture does anything. There's lots of studies, mediocre studies that show it might do something. But, because there are no really, really good studies, you see a general skepticism in western medicine of things like acupuncture. I see that as highly analogous to something like dance/movement therapy. Although, however, you know, that being said, I think acupuncture relies on concepts which are probably more foreign to physicians than the, perhaps whatever concepts underlie dance therapy because one can imagine like, the correlation between that and physical rehab. There might be a more digestible, more palatable causal pathway with dance/movement therapy than there would be for acupuncture, acupressure.”

well-designed study could eliminate or reduce resistance?

“Yeah, depending on the study results themselves. If you can show a major effect, right? Like if you had twenty minutes of dance therapy twice a week cures autism, than I think you'd see lots of people at your local dance therapist.”

any interactions with colleagues regarding dmt?

“No.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change what it is?

“It obfuscates my understand of dance/movement therapy because I don't know what social integration is. It's unclear to me what these terms... what it means to have cognitive integration of the individual or social integration of the individual in terms of patients. You know, my patients come in with pain and they need to get rid of the pain, or they come in wanting to kill themselves and you have to stop them from killing themselves or they come in hearing voices, and how do you get rid of the voices. And so, those are like hard outcomes. Getting rid of these things and fixing these problems. And those are hard problems, and you gotta fix them, and you gotta try and fix them and you gotta hit them hard and fast. It is unclear to me how these less concrete objectives of this endeavor relate to these very, very real world issues that people have that they present within the office. I mean I would have a difficult time even selling it, I think, to some people, but it depends on the target audience.”

Does this change your understanding of what a session might involve or look like?

“No.”

Does this change whether you would recommend it to a mental health patient/family member/friend?

“No.”

Does this change whether you yourself would be willing to try it?

“Um I’m probably less likely to try it given such a vague definition of what it is supposed to be. I went from zero to negative ten on the willingness to try scale.

general comments or opinions?

“Well, you know, I mean... I do think it’s important to explore these alternative options for our patients. You know, particularly in the realm of mental disease where the illnesses we tackle are so recalcitrant to traditional treatments for so many people. So I think it is important to keep exploring, to keep trying out new ideas and new therapies and new interventions. That being said, you know, I think we have to strike the right balance between exploring new options and new therapies and just trying to do a better job with the existing therapies we have. So, I think there is always a need for new and better therapies, but I think a part of that need may be a function of the fact that we do a poor job implementing the therapies we do have available to us. And so, I think dance therapy may serve as... potentially serve as a complement to traditional therapies but I highly doubt it will ever supplant any of our original weapons in the repertoire.

difficulty implementing therapies we have?

“Well, you know, we have patients that are prescribed the wrong medications or are prescribed medications too late or are prescribed medications with side effect profiles they can’t tolerate when there are alternatives available. There are, you know, patients who aren’t sent to non-pharmacologic therapeutic options when they should be. You know we do a very bad job, as we do with the rest of medicine, of delivering the appropriate care when appropriate to our patients. And because we fail to do that, systematically, there are always these gaps in what we want the world to look like medically and what the world is medically and the question is ‘are the therapies we have failing because they’re inadequate or inferior therapies, or are we failing to deliver those therapies appropriately?’ And both of those things can produce a gap in how we want the world to be and how the world is. And that gap is what pushes medical research and scientific research and it’s what pushes people to pursue alternative things like dance therapy. But whether or not that gap is due entirely to the fact that our current repertoire of therapies is deficient inherently, that it cannot tackle the diseases as they are or whether it’s due to the fact that we just do a shitty job of delivering the therapies that we currently have is unclear. And so I think we need to keep a foot in both potholes, you know, and recognize that all the therapies we have are inferior, and on the other end, that perhaps there’s room for improvement with new or alternative therapies.”

SUBJECT 11

What is your course of study/occupation?

"I'm a bioengineering student at Penn."

Would you ever seek medical treatment for a mental health illness?

"Um, it depends on what the mental health illness is... So if it's schizophrenia, then probably yes. If it's something like... it depends on what is considered to be a mental health illness. So, I don't know if ADHD or anxiety disorders are mental health illnesses, but I probably wouldn't take drugs for those.

perceive to be serious?

"It's not a question of seriousness. It's a question of whether I consider these to be legitimately... easily diagnosed or not. Schizophrenia I feel you can pretty much tell if someone has schizophrenia or not, but ADHD is sort of borderline for me."

What kind of treatment would you seek?

"Um... therapy. For schizophrenia? My serious mental health, ok. Therapy, I would avoid as much as possible drugs.

Would you be willing to go to a psychologist/psychiatrist?

I would prefer seeing psychologist over psychiatrist.

Would you be willing to try acupuncture?

"Um, sure, why not? Doesn't sound like it's gonna help, but sounds like something I would try if I felt like I needed it."

Massage?

"That sounds like it could be relaxing. Just from a relaxing point of view, I would just try that, but I don't think it would probably help my mental illness."

Arts (D/MT) therapy?

"Yeah, I could see myself doing that, too."

Do you think these traditional forms of therapy can be successful?

What do you think their success is dependent on?

"No, I don't think that works. I think it's uh... from the point of view of... I said I would go to it because I feel just the environment of it would probably help me, but not the person that's sitting at the other end of the table, would be of any help to me. Just being able to sit in a confidential area and be able to speak through what I'm going through might be a bigger help to me than the person telling me what's wrong with me, or, you know what I mean? Because you're guaranteed confidentiality, by law. It's not like you're telling you're friends your problems, so there's no embarrassment, familial or friendship, you know. Someone to talk to, who's a stranger, who's bound by law to not say anything."

Would you be willing to recommend mental health therapy to a family member?

"Umm, Yes."

To an acquaintance?

"Yes."

What do you think dance/movement therapy is?

"I have no idea what dance/movement therapy is... but I can guess that it's something to do with dancing, and music being very important."

What do you think it may involve?

What would a dance/movement therapy session look like?

“Umm... I will speculate. So I would imagine very calming kind of music. Maybe jazz routines. Maybe umm... I don't know I see people sometimes, like, really old people doing tai chi or something, so maybe tai chi related movements, nothing too jerky or... nothing like break-dancing or doing the robot. More fluid stuff, you know, fluid.”

What do you think it is meant to accomplish?

“One thing could be because it might take the person away from their... from thinking about their situation maybe or their mental health. I think you use different faculties, brain faculties when you're using your quote unquote creative side of the brain, if that exists or not I don't even know. So... and I feel like music also can be very therapeutic, I think that there's some evidence for that. Maybe the music might be even more important than the actual moving and dancing for these people, I don't know.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“So... it might be successful if the person is musically in tune or inclined. So if this person plays piano as a kid or violin, than the music therapy more than dance therapy would be helpful. Dancing entails a knowledge of music, I feel, or a feel for music. You can't have one without the other. And like I said, I don't think that dancing itself is helpful, I think the music itself might be helpful.”

So you think the distinction between something like music therapy and dance/movement therapy might be playing music or singing music versus moving to music and being in tune to it that way.

“Right”

So it's not so much the movement as the connection to the music through bodily movement?

“Right, right, right. Exactly.”

Would it be more or less successful for certain people?

“Like I said, I think it would be most helpful to the people that are musically inclined. Demographics- old, young, I don't think that has a big influence. Maybe it does. Compared to say, someone who has... I mean for different health disorders, definitely. Someone with uh, I don't know Parkinson's compared to... I mean does that count as a mental illness or a disorder or a disease of the mind? I don't know, maybe it's just a brain disease, not a mental illness. Does it count? Parkinson's? I don't really know I always consider mental illness to be schizophrenia or any of those non-curable by zapping the person's brain disorders. But for Parkinson's music therapy can help for Parkinson's, I'm not so sure for schizophrenia. Um, yeah, I don't think I have anything more to add to that”

effects chemical, emotional, spiritual?

“Chemical always, because no matter what you do you're going to have some kind of chemical signalings going on in the brain. Emotional, yeah, definitely because music has uh... again back to just focusing on music and not the actual dance therapy... music definitely because that may have some kind of emotional... um, I don't know, emotional impact on the person, whether it's sad music or happy music. Emotion, you know, has a correlation between like ... for stress... you might be less stressed if you're playing happy music compared to sad music. So maybe, and on a physical level the dancing I think can count as exercise so that can help, too I think.

need passion or talent for dance?

“I think it would be helpful, but I don't think you need to know... They're probably not going to teach you anything completely... very difficult in dance/movement therapy. It's probably going to be very simple, just like, like I said more exercise kind of thing with the music being the more important part.”

advantages/disadvantages?

“So the disadvantage would be that you can’t tell if it’s working or not. You can’t tell if the... there’s no way to actually study... well maybe there is a way. With drugs, everyone like always goes for drugs over say herbs, herbal medicines because you can study drugs. You can say this much dosage will work compared to that much dosage. But for herbal medicines, you really have no idea what’s working in the leaves or whatever it is. So, I would put the dance/movement therapy in that section where like you don’t really know what’s going on, but you can say it’s helping people. So that’s a disadvantage. Advantage would be that if it works, it works. It could be a placebo effect, you really can’t tell, so that’s a disadvantage of all these kinds of alternative medicines.”

general perception of dmt?

“I think it would be a very positive perception. More positive than going to a therapist or taking drugs for a disorder. It’d be... a perception of it would be, you’re just going to dance class.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change what you think it is?

“Uh, no.”

Does this change your understanding of what a session might involve or look like?

“No, still the same idea that I had with playing very calming music, doing very simple moves. Like I said this could be anything from like what old people do in swimming pools when they’re doing their exercises or tae bo class or you know, where it’s just something more... there’s music going on it’s calming music, it’s happy music, nothing too erratic... not erratic what’s the word? Nothing too crazy or jerky. So I still have the same idea of what it is in my head, and I still think that the music part is more important than the actual dancing part.

Does this change whether you would recommend it to a family member/friend/yourself?

“Um, no. I think if the session is helpful, than I would recommend it to anyone who I think needs it, even myself.”

SUBJECT 12

What is your course of study/occupation?

“psychology.”

Would you ever seek medical treatment for a mental health illness?

“Yes.”

What kind of treatment would you seek?

“Um, probably psychotherapy, cognitive behavioral therapy. Potentially medicine, although I see that more as a short-term thing, not a big fan of that for the long term.”

Would you be willing to go to a psychologist/psychiatrist?

“Yeah.”

Would you be willing to try acupuncture?

“Um, yeah... potentially.”

Massage?

“I mean, I don’t know if I would do that for... I would definitely seek that for fun. I don’t know if I would do that for like, mental health issues.”

Arts (D/MT) therapy?

“I don’t think so.”

Do you think general forms of therapy can be successful?

What do you think their success is dependent on?

“Yeah, I definitely... I mean I’m a psych major so, I’m pretty invested in thinking that that’s effective. I definitely do think it is. I mean I think it does depend on the person though, and I think some people definitely respond better than others to that. And I think a big factor is how much you think it’s going to work. Not necessarily in a placebo effect kind of way, but if you go in with the attitude of ‘oh, there’s no way this will work’ then it’s not going to, you’re not going to put in the effort.”

Would you be willing to recommend mental health therapy to a patient?

“Yeah, yeah definitely.”

To a family member?

“Yeah.”

To an acquaintance?

“Yes.”

What do you think dance/movement therapy is?

“Hmm. I don’t know... my sense is that it’s just another way of expressing yourself and expressing your emotions, and especially for people who are less comfortable doing that through words or might not be aware of issues in their lives, it might be more effective for them to do that through movement. But I don’t know so much about exactly what it entails.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“So in my mind, it’s like Julia the dance therapist being like, you know, ‘Show me how you feel.’ and then somebody dances and you’re like ‘cool!’ Or, I don’t know, that’s not really exactly what I think it entails, but that’s about as far as I can get. I’m not sure... I understand how it can be like a form of expression, but I’m not sure exactly where the therapy aspect comes in and how you do that without being like, ‘No, dance like this, and then you will be cured!’ I

mean, I don't know if there's... I'm assuming there's some kind of talking element to it and analyzing what the person is doing and what's behind it and then maybe talking about that."

What do you think it is meant to accomplish?

"I think it has the same general goals as any kind of other form of psychotherapy, to resolve conflict and mental health issues and to make people more emotionally stable and comfortable in their lives."

Do you think d/mt can be successful?

What do you think this success is dependent on?

"I think it, again, it really depends on the kind of person. I think for me personally, I don't think that's something that would work for me... because I'm not like... I really don't like dancing. I think it would just be aversive to me. And I think I'm also very comfortable just using words and expressing myself that way and that's kind of my preferred method of expression. But I think I'm also a very, what is it, left hemisphere kind of person and if you're a very right hemisphere person who's very artistic and not so language-oriented, something like dance therapy or art therapy might be a lot more effective for you just because it's another way of getting at the same things. And I think also if dancing is something you already enjoy and therapy is not something you're looking forward to then it kind of puts a positive spin on it."

Would it be more or less successful for certain people?

"I mean, ok. This is a very long question. Yeah, definitely. I mean I think most importantly you have to find people who are artistically oriented and that's something that they're interested in doing. In terms of demographics, I mean I think the kind of people you're going to find that are interested in dance therapy and would want to commit to it are probably going to be on the more liberal side, generally speaking, and probably more affluent because I don't think that that's something that more inner-city, poor people are even aware of as an option. And also I don't know how... I'm not sure how that's covered in terms of insurance and stuff... I mean I think if you tried to use dance/movement therapy to treat schizophrenia you would have very, very little success. Or one of those... If you use any kind of therapy that's not drug therapy to treat something that seems to be very biochemical, there's not so much you can do. But I think in terms of like... I don't know. I mean I honestly I don't know that much about what it is. I think in terms of just like bettering someone's mood, especially somebody who, that's something that they enjoy generally, I think it could be very effective. I don't know... I don't know, I can't imagine how that would help you cope with like a phobia or something. But I think general like depression, anxiety, PTSD, stuff that's less... kind of... very, very specific where you need very specific coping skills, I think that it can be effective for that."

effects chemical, emotional, spiritual?

"Um, I would guess emotional slash spiritual. I mean I think there could be, definitely, chemical changes based on that, but I think that would be a very much secondary thing."

is there hesitance to dmt?

"Yeah, definitely. I mean again, it depends like what demographic you're trying to target. At least for myself personally, I think in terms of mental health issues, the first thing I would do is probably like, some kind of like talk therapy, then maybe medication. I don't know, some combination of those. And then anything like acupuncture, anything in that realm would kind of be like, I don't want to say last resort, but just like something else to turn to if I feel like I'm really not having success through the traditional paths and I feel like that's... I don't know I feel like other people probably feel that way as well. That it's... you know and I think about like

eastern medicine too, generally, people just kind of go with what's common and known and if that doesn't work they'll explore other options."

awareness would help to alleviate?

"I don't know... I mean I think... I don't know what research has been done on it and if it's shown to be effective and what kind of stuff is out there about it. Like I think for me personally, having statistics about it would be very helpful in terms of making a decision. So, I guess awareness would be good. I mean yeah, it depends what for that takes."

advantages/disadvantages to dmt compared to traditional?

"I mean, I kind of said this before, my sense is that it really is a great thing for people who can't express themselves through traditional means, but it definitely has drawbacks because there's a limit to how much you can communicate without using words. You know, I mean I'm sure there's words involved as well, but like I don't know, you get into this whole realm of guesswork and stuff like that and that can be problematic I think. I don't know, did I answer your question?"

passion or talent for dance to benefit?

"I don't think you have to have a passion for it, but I think if it's something you don't enjoy, you probably won't benefit from it, you know. I think you have to have like a willingness to explore that path, which I guess anybody who's going to come in for dance/movement therapy would hopefully have to begin with."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

what dmt is?

"No, I don't think so."

Does this change your understanding of what a session might involve or look like?

"No I think that's kind of what I was envisioning."

Does this change whether you would recommend it to a mental health patient/family member/friend?

"No, I think, I mean, I don't think that really changes my understanding of it so, my answer would be the same. But I feel like I... It's something I would maybe recommend to different people depending on what I know about them.

is it an open-mindedness or desire or affinity for dance, what things would you look for in a person?

Yeah. I mean... I'm trying to imagine the circumstances. So am I a psychologist and someone's coming in to see me and then I might recommend them for dance therapy? I mean in that situation I feel like it might be somebody who is not doing well, necessarily with CBT or whatever and seems to be like... have the right personality, like very open-minded and interested in trying something else, very willing to kind of look at things from a different angle, then I would be more willing to recommend them. Obviously if somebody... I mean theoretically if I'm a psychologist and patients are coming to me, I don't know, I mean I'm not sure if it's really an either or situation, but that's a lot of therapy to have, like all of that. Do you know what I mean? I think I would probably... I don't know. I feel like if I'm a psychologist and people are coming to me I would probably encourage them to try talk therapy first unless it seems like that's really not going to mesh with their personality."

Does this change whether you yourself would be willing to try it?

“No.”

other general perceptions or opinions?

“I think people generally like... I don't know I was talking to people about music therapy recently and they're like 'Oh, what a joke.' Like I think a lot of people don't really see it as a serious thing, and also don't have so much knowledge about it.”

why don't they take it seriously?

“Because they're like 'Oh whatever, it's just, you know... it's just like expressing yourself through dance, like what does that do, how does that change anything?' You know, I mean I'm kind of generalizing from things I've heard about like people talking about art therapy and music therapy too. Like 'Oh art therapy, you're just going to make a painting and then someone's going to be like oh, you used the color black a lot.' It's the same kind of thing, I think they don't... they see the analysis as kind of sketchy.”

what would convince people?

“I really just think like data about it and like research studies on the effectiveness and making people... if it's shown to be effective, like if it's like empirically supported, just making people aware of that because I think... I mean I don't know if it is or it isn't, I'm assuming that it is if it's something that like you can go to school for. But I don't think people are very aware of that at all.”

experience with colleagues or classmates about dmt?

“I mean, just this conversation that I had a few days ago, when people were like making fun of it, that's about it.”

SUBJECT 13

What is your course of study/occupation?

"Demography, PHD student."

Would you ever seek medical treatment for a mental health illness?

"Yes."

What kind of treatment would you seek?

"Any treatment. Psychology, psychiatry. A psychologist, a psychiatrist. a counselor."

Would you be willing to go to a psychologist/psychiatrist?

Would you be willing to try acupuncture?

"Yes."

Massage?

"Yes."

Arts (D/MT) therapy?

"Yes."

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

"I think that it depends on it depends on the type of illness, the type of mental illness, it depends on the practitioner. I think there's a lot of research showing efficacy in certain modalities, certain modes of treatment, which maybe not be there for the kind of the newer stuff that we're exploring like acupuncture and other stuff you've said, yeah."

Would you be willing to recommend mental health therapy to a family member?

"Yes."

To a friend/acquaintance?

"Yes."

What do you think dance/movement therapy is?

"...I think that it's similar to... like other modalities that use like your body to help with your mind. So something like, something like yoga or something else. I think it incorporates some kind of concentration and physicality, but beyond that I don't know much about it."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Uh... an instructor hahhaha... teaching people how to dance... hahhahaha. Or showing them specific techniques that hopefully have been shown to be proven efficacious."

What do you think it is meant to accomplish?

"Just from the sound of it, it's meant to do something... something that has to do with healing. Because therapy usually means like healing or some process that leads to better well-being."

Do you think DMT type of therapy can be successful?

What do you think this success is dependent on?

"I think it can be, I think it can be. I'm a strong believer that if you concentrate or you do something with practice that it actually does help, help your mental health. So yeah, I think it can be, but I think it depends on the teacher. And it depends on the training of that person. And it depends on some sort of standards, so some sort of professionalism like we have with psychiatry for example, which may not be there with acupuncture and yoga and stuff like that. So I think that if there's... I'm a scientist, so if there's a body of research or there's some sort of

professional organization that has kind of vetted these things, then I think these types of things can be very helpful, yes.”

so some kind of professional certification or title is something that's important to you?

“Yes, exactly. Yeah, yeah, some sort of accreditation or something, yeah.”

Would it be more or less successful for certain people?

“I think, I think it depends. I think it really depends on... you can say demographics or certain like groups of people may benefit more, but I think it's more about individuals and whether they're open to different types of treatment.”

so like an open-mindedness is necessary?

“I think so, yeah. I think anybody who tries quote unquote alternative therapies has to be open to it.”

talent or passion for dance?

“You probably have to have some rhythm, yes.”

effects chemical, emotional, spiritual?

“Again it depends on the individual and their openness toward it. So I think that, we know that physical activity in and of itself, whatever you do, whether you're walking up stairs or going to the gym and running on the treadmill or dancing, you know will have positive effects on health for most people. So to that extent, yes. Now the thing when you talk about dance therapy, in my understanding, is there's more of a structure to it, and there's more of a science to it. You talk about yoga or these other things... I've mentioned before and whether those things actually... are helpful in terms of changing someone's biochemistry or acting like a medication or a pill, I'm not sure yet. I don't know. I don't know if the research is there for that.”

dependent on the individual for patient and instructor, what are characteristics that distinguish?

“In terms of the patient or the professional? Ok, so I think in terms of the professional it goes back to training and to have some sort of methodology... that's vetted. Then obviously it's... You know if you're a doctor, if you're a teacher, if you're a GA or an RA, it's a skill that's... you need to be good with people, you need to work with people well, you need to be nice to people, you need to listen to people. These are the kind of skills that anybody who works with the public or with others or wants to teach or impart knowledge or whatever has to have. So I think the dance therapist should have those things because they're a social worker or something like that. For the patient I think they need to be... do it out of volition. So they shouldn't be forced into this. They should have an open mind and be open to these alternative treatments, so kind of what I said earlier.”

hesitation towards dmt?

“Yes, yes because most people don't know what it is.”

so do you think it's based on awareness?

“Yeah, I think so. I think, I think Americans today are open to different types of treatments. It's just... they need to know about it. You know maybe twenty or thirty years ago people were not. People were not thinking about yoga or acupuncture or these kinds of things, but I think today people are very open to these... different modalities, so I think it's definitely an awareness issue.”

with increased awareness hesitation can be eliminated?

It can be if what dance therapists are selling have... have again the accreditation and the research behind it and have competent people selling it. Right, so I think if those things are there, then yes.”

any interaction with colleagues about alternative forms, creative arts?

"No, I have not. Well, well I mean I know some people take yoga, I mean people who do it like... vet it... I mean they swear by it. But that's the most experience I've had talking to other people about these things."

advantages/disadvantages dmt compared to traditional

"I think, well it can be... again it's whether these things have competent people selling it or teaching these classes. So, you know, we don't know, if we talk about traditional therapies, a lot of them haven't been vetted. So we don't know if they're effective but doctors prescribe medicine all the time that we don't even know whether they're going to work or not. So it's the same thing with any other what we call alternative modalities. They're only alternative because they're not a part of modern medicine, right? I mean if we integrate them, things like yoga, acupuncture, even dance therapy, won't be alternative, they'll be part of how we treat people."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what dmt is?

"Yes, yes it does. Well, one thing that struck me was the term psychotherapeutic. Alright, because that sounds really medical, right? So it sounds like it's more than doing something physical. The association is trying to kind of couch itself in the medical language, medical terms, and it's also saying, that okay these things will have benefits on mental health. So, I think that's what struck me the most, yeah."

Does this change your understanding of what a session might involve or look like?

"Yeah, it does, it does. I kind of think of it more like you go to... you know how you go, if you go to a psychologist or something you're in an office, or if you go to a physical therapist you work with them one on one, so I kind of see that here now, too. Because before I was picturing like a group, like you go to the gym, but I think I see it more as you go to the physical therapist. So, you get individual training, you're working in... you're not going to the gym basically, you're going to the doctor's office."

correct me if I'm wrong but it's the difference between recreational yoga class was your original idea versus going to a specific physical therapists office?

"Yes, yeah, or going to CAPS. So now I think of it more as going to CAPS."

Does this change whether you would recommend it to a family member/friend/yourself?

"I still need to learn more about it. Yeah, so I think I need to... and I'm a scientist again, so I need to see the research. So before I would recommend it to anybody, even consider doing it myself, I'd have to look at it, and I don't know enough about it."

general perceptions/opinions?

"Well there's an association, obviously, so that's new. So that's something that says there's a lot of people who are trying... and I know you want to do a degree in it, so there's obviously, you know, majors at academic institutions, so that's something that kind of peaks my interest. That's something that I'd like to learn more about. But it's hard for me to have any more impressions because I don't know much more about it than what I've learned today."

SUBJECT 14

What is your course of study/occupation?

“Master’s degree in architecture.”

Would you ever seek medical treatment for a mental health illness?

“Depended how bad I felt I was.”

the worse you were, the more likely?

“Yes.”

What kind of treatment would you seek?

“Psychiatric help, I guess. I’m not really sure about the options out there.”

Would you be willing to go to a psychologist/psychiatrist?

“Sure.”

Would you be willing to try acupuncture?

“Probably not.”

Massage?

“Yeah.”

Arts (D/MT) therapy?

“Maybe.”

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

“I do think they can be successful. I think it’s dependent on the ability of the person a be able to speak about what’s frustrating them and then have that information returned to them or spoken back to them in a different way to help them sort of reprocess these things that are bothering them.”

Would you be willing to recommend mental health therapy to a family member?

“Yes.”

To a friend/acquaintance?

“Yes.”

What do you think dance/movement therapy is?

“Mmm... I’d say that it’s about helping you become more comfortable in your body.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Uh... I don’t think it would be ballroom dancing or sort of elaborate footwork, all those sorts of things. I think it’d probably be, it could be about posture and how you standup, how you sit down. I don’t think... I don’t think they’d want you to become more self-conscious about how you carry yourself, but I think dance therapy or movement therapy would be about helping you understand your own movements and how your posture maybe affects the way you interact in social settings, but also affects your own personal well-being.”

What do you think it is meant to accomplish?

“To help you become more comfortable and possibly even happier.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think it probably can be successful. I think it’s probably dependent on the same factors that all sorts of mental therapies are dependent on, and that probably has a great deal to do with the willingness of people to participate in the first place. It also has to do with the skill... the skill

level of the instructor or the psychiatrist or the dance therapist and how easily they can relate to other people and how comfortable they can make that other person feel.”

Would it be more or less successful for certain people?

“It could be more helpful for people that are already inclined to dance or are more movement-oriented in the first place or athletic. But at the same time it probably has more potential for a really sort of dramatic or changing sort of pattern for a person that isn’t as comfortable moving within themselves. I don’t know, I think in both cases, it probably has great potential, but for that person isn’t as comfortable, is awkward about the way they move or awkward about their social interactions or even about the way they feel they act or think. I guess the potential could be quite amazing. I’m not sure about values, religions, all those sorts of things, if that would have much effect. It could, but I really don’t know enough to say anything specific. There are so many different kinds of people out there anyway. Maybe in a few years we’ll have research that will show us something interesting about that. Particular mental illnesses, hmm. Illnesses such as schizophrenia, depression? Mmm... um, I guess with schizophrenia and those sorts of disorders it could be kind of interesting, it could be even kind of fun to watch. That’s not very PC to say though. Um, I don’t know. I think it probably has quite a bit of potential with any disorder but I don’t really have any specific information.”

effects chemical, spiritual emotional?

“Mm. Maybe spiritual but I would say most likely... chemically and emotionally would probably be... I think those would probably provide the biggest effects. Chemically that could be pretty interesting because there’s research about the chemical change within an athlete’s body during the action of performance or within a dancer’s body during performance in that way, too. So, I don’t know changes in chemical levels might be pretty interesting to see. I guess if a person’s depressed and they don’t have the right amount chemical, chemicals running through them, or... acted out, that might change quite a bit during the motion of dance. Emotionally... I’d say that chemically might be the most interesting to see. Emotionally, I’d say that’s more of a given. I think just moving around can, feeling a little bit more free about your movements is going to make you a little bit more... emotionally happier, it’s going to suggest a change in emotion more naturally. The chemicals would be definitely something we’d need more scientific research for.”

passion or talent to benefit from dmt?

“No.”

resistance or hesitance to dmt in general populace?

“Hmm. Not in the general populace. I would say in smaller, much more distinct groups, demographics perhaps. Umm, I wonder about the elderly population, especially for those that aren’t getting around as well anymore. There might be some sort of slight resistance, but I wouldn’t say that would be general in that category, in that demographic because there are probably plenty of people that would welcome the opportunity to move or do some therapeutic routines. As far as younger demographics or various ethnicities, various minority groups, I wouldn’t say there would be any particular group that would be less likely to. I’m trying to think if our society is more prone to dancing than it was a while ago, but I haven’t been around that long, so I can’t really provide any specific evidence on that. Maybe films like Footloose and other shows like that are making us more prone to feel good about dancing.”

advantages/disadvantages?

“Well, I think with any kind of mental therapy or kind of... I don’t know if risk would be quite the right word, but you’re taking some kind of chance. Obviously if you feel you have the need

to go for some sort of mental therapy, to enroll in some such course of action, then you realize that you're maybe in a problematic state currently and that you might need a change but you're not going to find the change that you're really looking for or it might not manifest itself in the way you want it to. All those sorts of therapeutic activities require a bit of faith, I think. So I'm not sure if there's really any distinct advantage or disadvantage between these kinds of therapies."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what dmt is?

"It colors it with a few more specific words, specific terms for what it actually does, but it doesn't really change my perception of it."

so is it more of an articulation of things you had thought generally or specific words that occurred to you as different?

"The word cognitive surprised me a little bit. I'm kind of puzzled as to why it actually surprised me, because it actually makes quite a bit of sense when you think about it, that dancing and knowing how to move and having sort of muscle memory to perform actions, whether that's athletic action or musical action or any sort of daily activity, it is a sort of cognitive ability. I think it just provides a more... academic discipline to what we're actually talking about because basically I'm thinking about it in a very secondary or offhand way, since it's not something that comes naturally to me or that I've thought about at great length. But, most of those words and what I'm hearing matches up with what I was thinking about."

Does this change your understanding of what a session might involve or look like?

"No."

Does this change whether you would recommend it to a family member/friend/yourself?

"I don't think it changes any of that. I think my perception of dance therapy is that there are probably different kinds of it, sort of different modes. There's not just one dance step or one movement piece that's going to cure everyone. So there are probably a number of different techniques or a number of different actions that would go into the study or into this work. Any number of those different activities would affect any person that I know, myself, my friends, my family members in a different way. So I think I'm intrigued about the potential of it."

general perceptions/opinions?

"It definitely seems... very new to me. I've also learned in recent years about sort of animal therapy for autistic kids, that that's become a larger focus these days. So I think that people that are acutely affected with these disorders or mental conditions, or autism, or anything really, they would probably seek out any number of methods that they could that would help them. I'm not sure that... I haven't been inclined to... really seek out all the sorts of mental therapy available to me anyway. So I can't say for certain that I would choose to going to a psychiatrist or a psychologist or going to a dance therapist or to anyone else, an acupuncture specialist or anything, really. So I can't really give any specific evidence to which one I would try first or who I would lead anyone else to. Statistically, there just isn't any evidence for me myself that I could really share that would say that I would go to a dance therapist versus anyone else. I don't know, I would be intrigued if I was in that situation, I needed a sort of therapist, if I would look in a phone book and just like pick someone straight out of the phone book randomly, or do a

little bit more research on what I wanted to do. I'm not sure how I would come to that conclusion of deciding whether or not I needed to see a psychiatrist or a dance therapist. That may be a bit confusing to me right now, is how I would know that I wanted one versus the other. *based on qualitative description, scientific evidence for efficacy, or what is most important element?*

“Scientific efficacy would be very important I think, first and foremost. But if I felt that my problems could be more easily recognized through dance therapy, movement therapy, I think that I might be more inclined to try that out. But if felt it was just a sort of general mental condition, that I was going through a really strong period of anxiety or any other thing, then I think I would probably need more scientific efficacy to sway me to go to that route versus any other traditional mental therapy route.”

SUBJECT 15

What is your course of study/occupation?

“At the University of Pennsylvania, I study mathematics, philosophy, logic, a little bit of poli sci and languages, including sign language.”

Would you ever seek medical treatment for a mental health illness?

“Yes.”

What kind of treatment would you seek?

“Therapy... both self and group therapy, I guess depending on what it was. If I needed medical treatment, like drugs and things like that, or institutionalization, yeah, I’d consider that, depending on what the doctor said I had. That sort of thing, the severity of it.”

Would you be willing to go to a psychologist/psychiatrist?

“Yes, yes. I’d be willing for both, yes.”

Would you be willing to try acupuncture?

“For a mental illness? Maybe... I’d have to really be convinced by a doctor I trusted. I just don’t see how they connect. Now if I had some kind of neurological thing or muscle therapy, that makes more sense, but I don’t see how those two connect yet.”

Massage?

“That just sounds like a good idea no matter what. I think massage therapy would be great in reducing stress, which I believe definitely contributes to mental illness or mental hang-ups, if we can call them that.”

Arts (D/MT) therapy?

“MMmm. I’d have to be really comfortable with the situation. I know sometimes I like to move around or like to bee-bop or hip-hop to some music in my room, you know, to change my mood, but I don’t know, I’d have to really trust the doctor or something like that. I don’t know.”

the doctor prescribing or dance therapist?

“More of the latter, but the former, definitely. Kind of along the same lines with the acupuncturist. You know, the doctor would have to convince me of it, and then I’d have to make sure the acupuncturist doesn’t have shaky hands.”

when you say you need to be comfortable, what things would contribute to your comfort?

“Privacy, discreteness, professionalism, the place in which it’s happening, definitely some real training, like a degree or certification, or some kind of training in more than just... you know, the activity. Something more medical, like more psych training or medical training so that it fits into the overall goal of the treatment, I think.”

*Do you think **TRADITIONAL** forms of therapy can be successful?*

What do you think their success is dependent on?

“Yes, I think traditional forms of therapy can be successful. What they depend on... I guess a lot of it has to do with the... I don’t know if it’s... the patient needs to be willing, I believe. I guess I believe a lot of the things just don’t happen by accident. The patient has to be willing and it has to be the right course of treatment for it. Do I think all forms of mental illness can be handled with traditional? I don’t know. It’s hard to say when the somebody is trying enough or the doctor has done the right thing.”

Would you be willing to recommend mental health therapy to a family member?

“Yes.”

To a friend/acquaintance?

“Yes.”

What do you think dance/movement therapy is?

“...Well, let’s say I have no idea, but I’m going to try and speculate here. Well, like it is the case I’ve heard a lot of people, not myself, like to sing in the shower because it’s fun, you know, it’s euphoric or something like that. I think that the... you know, being able to forget about inhibitions and just concentrate on what you’re feeling and the mood that you want to put yourself into. I think you can do the same thing with dancing or with moving around. I know some people, when they’re in a giddy mood, they like to, you know, waltz around the room or something. I think that’s neat expression and vehicle towards changing your state of mind or expressing it. So I guess it’s some of that. I don’t know, I’d have to think about it for a little bit, to come up with something more I mean.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“I guess the cliché answer that I have in my mind is maybe it’s a group thing because if it’s an individual you probably... if it’s a group than you probably feel more willing to be silly, if you find this sort of thing silly to begin with, that is dancing in front of people, which a lot of people don’t do, so I imagine a lot of people might think it’s silly. So I imagine that the instructor, the leader might put on some music with a specific feeling or emotion attached to it and ask people to express themselves in dance, or just, you know, see how they respond to a certain piece of music. And then maybe, I hope, I think that there’d be a debriefing afterwards, and there’d be some... You’d try to tease out why people respond in a certain way towards a certain kind of music. Maybe the music was thought of as aggressive and another person thought about it as exciting. And the two of them are in different mental states and that’s why they respond differently? I don’t know, but that’s my speculation.”

What do you think it is meant to accomplish?

“I think it’s... I can definitely see the value in helping people understand... like what their natural inclination is because if you can talk about a piece of music and, to go back to the previous example, you know, if you can identify the music as exciting, but yet you responded to it as if it was aggressive, then maybe you have a natural predilection, you know, with this music or in this situation, to be a little bit more fearful of it. Maybe that can help you realize and help convince you that there’s something going on that you need to understand, and realize, and deal with.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Well, if it’s successful, I think it could be, if it’s successful, people definitely have to be willing to dance and give it a try. I doubt it’s the kind of thing where you just have a magnificent break through one day sitting on the psych’s couch and, you know, everything just comes into focus. I think that it’s a process that you work through. In that way, you have to be willing. There’s no one piece of music that’s just going to shock people into understanding their mental problems, or getting past them. So it’s dependent on the patient being willing and trying it and having an open mind. And a lot of it I think is the environment because it’s not a quiet, discrete, private, intimate moment on a couch with the doctor. It’s probably something in... something conducive to dance, a studio, and like I said before, I think it’s definitely a group endeavor. A lot of that kind of thing plays into it, the environment, that is. So the doctor, the instructor, the lead has to be professional and cognizant of all the other things that are going on because I don’t think it’s a one on one. And even if it is a one on one session, there’s everything else going on, there’s the

studio, the trip there that day, the other concerns that are going on in their life, how they're feeling because they have to move, I suppose, maybe what they ate that day, all that I think could fit into... there's a lot of externalities, and I think a good doctor has to understand all those, if they impact it, I don't know."

Would it be more or less successful for certain people?

"Huh. Yeah, let's look at a few of them. I think some people that don't move so much could benefit, yes, but in different ways because the kind of movement they can do... take an extreme case, somebody who's paraplegic or in a wheelchair or something like that. They could find that... they could fully express their body's movement but just in a more limited way and I think that could be definitely therapeutic. Other people with limited mobility, the elderly, I think that they could find new expression in their limited body movement. I think that there's some people that are just naturally closed-minded to this sort of thing. I think that there's a subset that's closed-minded to all forms of treatment for mental illness, the acknowledgement of mental illness, and even just open-minded to traditional but not non-traditional forms of therapy or treatment for mental illness. I was thinking about the group idea, and maybe it'd work well for people with similar hang-ups or mental illnesses or mental problems or mental deficiencies. So, you know, a group of people who all experienced the same traumatic event, maybe they'd be comfortable with each other. I wonder if it'd be particularly helpful for couple's counseling or family counseling because they all know each other already, and I think that'd help... Yeah, I'm not sure how the group dynamic plays into it, but I think that's definitely a consideration of how well they could... I'm sure there's a lot of research and information out there about how group therapy, group discussion therapy, how you pick the group and I think a lot of that could probably translate into how you make a group of dance/movement therapy participants. I don't know if it's the same, but it might be... at least contributory."

effects chemical, emotional, spiritual?

"I think therapy like that, anytime you're asked to do something you wouldn't normally do, could definitely change your emotional state of mind. It could let you access awareness and control, I believe, to certain emotions that you thought were not there or untouchable, unreachable. Dancing around, to return to the, you know, singing in the shower, you know, you get a euphoric sense out of it, you know, there's definitely some kind of chemical thing going on. Some people feel better, you know, kinesthetically or physiologically when they exercise, and if you're not used to that, if that's not your normal thing, and dance/movement therapy is something you end up doing, I don't know how often, but it probably happens in some sort of weekly, or bi-weekly, or multi-weekly event, you know, it's kind of like exercise and exercise induces chemical change in people, you know in their head and that's good. I think that could work out. So I think it's a combination of those two. Spiritual? Nah, I mean that means different things to different people, but some people might describe it as getting in touch with their internal sense or, because it's a group setting, this common spiritual sense between all of us, I don't know enough about how they pick the groups, but if it was a common factor of illness between all of the people in the group, then they could find some spiritual self-identity with the group. I think that would be helpful, let you know you're not alone in it."

good at or passion for dance to benefit?

"No, but I think you need to be open to the idea of expressing yourself and your emotions, and your feelings, and your thoughts, and your views, and your fears with your body's motion. So I think dance/movement therapy, the name, is aptly picked because it's movement, it's kinesthetics, it's just an idea of expression. I think that it's... like I said I think that a lot of it is

dependent on if the patient is open to it. A lot of people have heard of art therapy, you know, where they draw, or they paint, or they finger-paint, or they do pottery or something as a form of self-expression, and I think a lot of people accept that. I don't know how prevalent dance/movement therapy is in mainstream America or abroad, but maybe in time it will become more accepted and then people will consider it more. I imagine years ago, people would have thought that art therapy was only for the... the classic example of art therapy being used for misbehaving children or psychopaths. Schizophrenia, really, comes up in a lot of references in pop culture and movies and things like that. I imagine now, since it's so prevalent, you know, people would be willing to try that. If you're willing to try therapy to begin with, I imagine you'd be willing to try art therapy, and I hope dance/movement therapy moves along the same lines, if it is really as new as I predict America thinks it is, yes."

do you think there's a hesitance/resistance to dmt?

"Yes, in natural and mainstream America, just because it's new. Because... people don't consider themselves... people don't like to do things that they're not good at, or that they don't particularly enjoy. So, dance and art and things like that, there's a certain, a large subset of the population that doesn't enjoy doing them and/or is not good at them. So that's I think where a lot of the hesitancy comes from. The other major source of hesitancy is the lack of understanding in how it could work. A lot of that I think, is due to people not realizing, not believing that they can have access to their emotions and that they can change them and that they can change their feelings and their mental state of mind. The way you can do that and access that is through art or music or dance. People aren't... people don't appreciate art the way that we used to I suppose, I don't think. Everybody knows that, you know, yellow will make them happy, but you still see people paint their entire kitchen yellow and then they don't realize why they're apprehensive every time they go in there. It floods a part of their brain and just makes you crazy. It's like 'This is a really nice shade of yellow, honey. We should make the whole kitchen this color.' He doesn't care and then people hate eating in there and they don't know why. I just don't think there's... I don't think people want to admit that they can be swayed, so much, by anything less than an Academy award-winning performance in a movie. You know, that's accepted, but art, dance, I don't think mainstream America loves it anymore."

what could overcome this?

"Gosh, I don't know. Generational change. I think that the newest generation... um, needs to be convinced and trained in it. I mean, uh I mean, well, pie in the sky. If curriculum in schools, you know, had some of this. If music class and enrichment programs were more about actively changing your state of mind and less about just doing some song and dance. If physical education class was more than just teaching you how to stretch and running around a little bit for thirty minutes while you're in grade school and maybe a little more about... I think that's a neat idea, actually. I think that it would not be unheard of for there to be some sort of research grant or something to explore the effects of d/mt in an elementary school setting. You can convince a local school board of that. No one's going to... yeah, I think that'd be neat. You could definitely find a progressive local school district to try that. National education policy doesn't move, ever. No state ever really, really, really cares about education, I think, because it's such a divisive... it's a nonstarter. You can't fix education in a year, and nobody has patience for that, politicians and people paying taxes. I think that'd be a really neat idea, and I think that'd be a way to change it. A national ad campaign, a lot of research from leading universities saying that dance/movement therapy and art therapy and, you know, the like works, I don't know how much that'll change the public opinion. People grow up with an idea and they stick with it because if

they have to change their opinion that means they were wrong at one point and nobody likes to be wrong. Yeah, so I'm going to recommend we start with the kids. But to start with the kids, you need to convince some physical education teacher, or something similar to that. So it's going to start with the next generation of teachers, the next generation of educational leaders, the next generation of psychologists and psychiatrists and mental health professionals and social workers and yeah, so maybe we're two generations away."

advantages/disadvantages of dmt compared to traditional

"I definitely think there'd be particular advantages and disadvantages. Disadvantages- some people are just not going to be receptive to the idea for a while, if ever, so you lose a whole subset of the patient population that way. Other disadvantages, I'm not sure how dance/movement therapy conflicts or interacts or complements or interacts with from other forms of traditional therapy, so I'm not sure if you can try both at one time, a parallel track or an intersecting track. I don't know how much research has been done on all that. I'm not sure if you're on a regiment of drugs if that would affect your ability to experience the dance or things like that. So I'm not sure if the combined approach is understood, I'd be worried about that. Advantages... I think a particular advantage is that it's something new, a new arsenal or a new tool in combating mental illness is always a plus, always, as long as it doesn't dilute the field to the sense that nothing's effective. Other advantages, it taps into a different sort of therapy than all traditional forms of therapy so in that sense it has a particular monopoly on a certain avenue of help in which definitely, if nothing else and no research or evidence exists, definitely warrants attention and farther study because it's new, because it's different, and because it has the potential to do something that other forms of traditional therapy just simply cannot."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

"So it sounds like I got it right earlier."

change perception of what it is?

"No, you just said what I had said but made it sound all medical. Uh, no, I'm kidding. Does it? Um, yes. It changes in the sense that now it's formalized in this vision statement, if you will. Movement statement, to make a pun. It really shows that there's this multi-faceted concept of how it affects or how many parts of the body the other parts of the internal mind. And it's each of these conflicting and complementary avenues of approach that I think, you know, makes dance/movement therapy a viable option. So, I think I had a pretty good idea of what it was, but only in the theory. I'm not sure if my, you know, suppositions or presumptions on how group therapy, or even if it is group therapy, would work, I just simply don't know. But, you know, work with the psychotherapeutic, therapy through the psyche, or therapy of the psyche, changing the emotional with the dancing, yeah, that makes sense, as predicted."

Does this change your understanding of what a session might involve or look like?

"No, no it doesn't because I had predicted the name of the therapy in general beforehand."

Does this change whether you would recommend it to a family member/friend?

"It hasn't changed my understanding, except in the sense that now I'm a little more sure of my conceptual idea of what d/mt was or is, will be, if I recommend it. Only in the sense that my speculation was pseudo-confirmed."

Does this change whether you yourself would be willing to try it?

“Yeah, I think it’d be fun.”

general comments/perceptions/opinions?

“General comments... gosh, I don’t know. Academically I think it’s an interesting thing and I think someone needs to run with my idea about implementing it in grade school. Really, I think it’d be fun. Would I ever do it, could I see myself doing that? I don’t know. Bonus question, how would I feel if a friend had told me that he had just come from a session on dance/movement therapy? I’d be inquisitive I think. Knowing everything I know now about it, I think I’d just be generally inquisitive about how how felt and what it was like. I don’t know if those sort of probing questions would be helpful post-session. You know, I’d be interested in like how he felt before and after and during and what it was like. Yeah, I think that’s neat.”

SUBJECT 16

What is your course of study/occupation?

"I'm a communications major."

Would you ever seek medical treatment for a mental health illness?

"Yes."

What kind of treatment would you seek?

"Um... counseling. I guess if it came to it, anti-depressants or whatever kind of medication I guess, within reason."

Would you be willing to go to a psychologist/psychiatrist?

"Yes, even though I'm not sure what the distinction is, but yeah. Yeah, in my philosophy, whatever is necessary."

Would you be willing to try acupuncture?

"Yeah."

Massage?

"Yeah."

Arts (DMT) therapy?

"Um... yeah, I'm not much of a dancer, but yeah."

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

"Well, I think the traditional forms definitely can be successful, but I think they're dependent on, you know, you wanting to change... you know, if you're the patient I think you need to believe in it too. I think it's a working together process, it's not a magic cure-all just because it's science. I think it definitely is successful, one... given that whatever mental illness you have has been proven to work with this kind of treatment and also that you're fully invested in treating yourself or undergoing treatment."

Would you be willing to recommend mental health therapy to a family member?

"Yeah."

To an friend/acquaintance?

"Depending on if I knew them well enough."

What do you think dance/movement therapy is?

"Um... I have no idea. I guess that I would think that it is something... I mean I guess the same way art therapy is expressing your emotions and feelings through art, I guess it would be an extension of that, you know. I don't know if it's dance your anger away, but... I guess any kind of physical movement or exercise is good for stress release, just even in a non-mental health issue, way. So I guess it would be trying to externalize and physicalize, you know, whatever your problem is."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Um... I would imagine that it's... unless the... I mean I feel like it would probably have to be on an individual basis just because... I mean I don't know if you can do, you know, dance therapy for bipolar disorder, but, you know, I feel like mental health issues are sort of a private thing, so I think that it would have to be some kind of trained therapist that also has a psychological background and that it would probably be... I don't know, wearing a leotard doing... externalizing your feelings. I mean I'm guessing you would probably be taught ways. I

mean I don't think it would just be improvisational, I think you'd probably... there are certain methods that are taught and that are proven to work, I guess."

What do you think it is meant to accomplish?

"I think probably as an outlet, as a way to physicalize, as a way to like... you know, I mean I guess the sort of thing where maybe you can't understand your own problems unless you actually write them down, sort of an extension of that. You know, just really getting to know what it is, you know what makes you react physically, what are your feelings. I guess body language can tell you a lot about a person, so I'm wondering if that has something to do with it... kind of your reactivity, your intensity, something like that. I don't know if that makes sense."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think... well like I said before it would have to be successful if you believe in it too, if you think that this is going to help you. I think, I don't know that it... I think it would probably have to be successful in cooperation with other forms of mental health treatment. I think it's not... you know, I think... You know, just from my opinion, bottom line is if you need drugs, you need drugs. But I think it can definitely, one for like lighter issues it might be a cure-all on it's own. But I think it's also... I think it's a great, probably a good supplement to any other form of mental health treatment."

Would it be more or less successful for certain people?

"Just for the demographics I feel like younger people just because it's more of an unorthodox treatment. I feel like older people probably won't be as open to the idea. I think it also somewhat depends on your comfort level. I mean, you know, maybe you're a really uptight person, you have some kind of mental illness relating to that and maybe dance will help you explore everything. But bottom line is if you're not comfortable on a dance floor, I don't think it's going to work. So I think it probably will work more for people who have... more of an arty, creative edge, or who are used to at least expressing, physicalizing their feelings... Mental illnesses, I think that I mean, ultimately it'd probably be more for less severe forms of mental illness. You know, things like social anxiety disorder or even depression or something like that. Things that aren't... you know, that don't necessarily need drugs or need an operation, things that are more on the social side of things, I guess."

effects chemical, emotional, spiritual?

"I mean chemical, I don't know, like release of endorphins, I guess, which is like it. But I mean I think it works more on the sort of level of emotional, spiritual level in terms of you're doing some physical activity, you're doing something fun, you're externalizing your feelings. So, I think it works more on a psychological level than a physical level."

passion or talent for dance to benefit?

"Well, I mean like I said before, I think you that you probably need... if not able or passionate, at least be open to the idea. I think you need to get over the psychological hang-up of, you know, if you're not a dancer, you're going to need to be dancing in front of someone. So, I think that you definitely need to be open-minded to the idea."

advantages/disadvantages to dmt compared to traditional

"Um... I mean I think the advantages are just that it... I think it probably encourages you to see your problems in a new way. I mean you know, it might be more fun instead of sitting in a room with a therapist for an hour to, you know, dance around and do something crazy and fun and physical. So I think that advantages it because it's an unorthodox treatment, people might not react to it in the same way. You know, there might be a stigma against going to a psychologist

but, you know, if you're just going to, ostensibly a dance class it's less pressure, it's less strange, you know it's... it's different. I guess a disadvantage is that one, I feel like it couldn't completely eradicate traditional forms of treatment. I think that, you know, some people need traditional forms of treatment. Also, I feel like it could easily become a fad, like you know how everyone all of a sudden everyone needs dance therapy. So I think that keeping it within...keeping it, having it be it's own sort of art form and have it's own rules and have it's own... make sure that the psychological benefits are really what matters, instead of just being 'we're just going to go dance around and dance our feelings away.' Because I think that it needs to have more structure and more of an intent behind it than just that."

hesitance resistance to it?

"I think because a lot... I mean, it sounds interesting but it also sounds like it could be something very flighty and sort of, like I said, a fad, so I think that the resistance would be kind of like 'how is dancing going to help me with my problems?' unless you're open-minded about it."

what do you think can alleviate the flighty perception?

"I don't really know, I would think maybe... I mean have it be around long enough so that there's some kind of study, or some kind of proof or evidence or connection between that and getting better or working on your issues. So I think there probably just needs to be more evidence or proof. I mean I think also it's really like... it'd be a situation in which you meet someone who's gone through that and can tell you a success story of it."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change what you think dmt is?

"Not really, I think that's, you know, a very wordy way of... you know, my basic initial perception that I was seeing was kind of a really acting out your problems, and really sort of giving a physical force to your issues. So yeah, I think that sounds about what I think it would be."

Does this change your understanding of what a session might involve or look like?

"Um... well, I feel like the sessions maybe would have to be a lot more involved, it couldn't just be dancing, I feel like you'd have to talk about your issues first, unless you're being referred to it by a psychologist. I think... maybe the first few sessions are not even about dancing, maybe they're about just talking about your issues so that your therapist can design a treatment or design the appropriate dances or something. So there'd probably be, you know, more in depth talking and sort of traditional therapy first, maybe."

Does this change whether you would recommend it to a family member/friend?

"I would, but I would, you know, recommend it saying that, 'I don't know if this works, but you might as well try it because it sounds interesting, it sounds neat and you know, there's certainly been other unorthodox forms of treatment that have worked for people.' I mean, I wouldn't say 'don't take drugs, don't go to a psychologist.' But I would say, you know, 'people find help in the strangest of ways, so this sounds cool, so why not?'"

Does this change whether you yourself would be willing to try it?

"Well, I'm not a dancer per say, so I feel like I would be hesitant. I think I would be interested in trying it. I don't think... I mean I think I would probably seek out traditional forms of help

first, but I think that if I was referred to it or... I mean it sounds, it's an interesting concept so it's definitely something that I would be open-minded to.

general perception opinions?

"I don't know, just like I said before people... I feel like it's sort of a split where some people might think it's just some sort of new agey, flighty thing where, you know, people are trying to ignore their problems by dancing, but I think other people... I think we've reached sort of a point where a lot of different treatments and different therapies are coming in from all around. I think that people... I mean I think right now it's probably still about fifty-fifty, but I think, you know, given time, there's been enough strange treatments coming in that I think eventually it might become, you know, if not necessarily respected or seen as the be all end all, at least acknowledged as 'this is a way that some people like to deal with their problems.'"

SUBJECT 17

What is your course of study/occupation?

“History major and Spanish minor.”

Would you ever seek medical treatment for a mental health illness?

“Uh, I would say yes.”

What kind of treatment would you seek?

“Hmm. I would probably see a doctor, maybe a psychologist, although I’m not sure about that. If a doctor recommends it, I would see it... Chat with my doctor, and say ‘oh, I’m not feeling so well or something’ and then if he recommended I see somebody, then I would probably go.”

Would you be willing to go to a psychologist/psychiatrist?

“Yeah, I guess if I would see one, then I would see the other.”

Would you be willing to try acupuncture?

“If a doctor recommends it, then maybe, but I don’t know if I would go by myself.”

Massage?

“I... massages are weird because I never like massages, I just get uncomfortable, but if somebody recommends it, I would go. I usually trust what my doctor says.”

Arts (D/MT) therapy? why not?

“Maybe, probably less likely. I don’t know, it just sort of seems, I don’t know it seems less conventional. I’m sort of a conventional guy. I don’t know. It seems sort of... out there. I guess I wouldn’t be sure if it actually would work.”

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

“I think so, I think there’s enough of a... you know, based on what I know, which I’m sure is much more limited than you, then I would say it sounds like they can. At the very least, I’ve always thought that if you have issues, then just talking about them would help, you know.”

Would you be willing to recommend mental health therapy to a family member?

“That’s tricky. I would say in principle yes, but it’d be hard to do it because I’d be uncomfortable.”

To an acquaintance? how come easier?

“Easier, yes. Yeah, yeah. I don’t know, I sort of... I’m a little more open with that sort of thing with friends than I am with family. My family, I’m very close to my family, but we usually don’t talk about... I find it uncomfortable. My parents would talk to me about anything, would talk to me about the whole sex and the drugs thing, so you know.”

What do you think dance/movement therapy is?

“Probably dancing to relax or sort of chill, yeah.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“I kind of see it like your rehearsals. Like, you know, a bunch of people or even one person sort of doing some abstract movements with some relaxing music in the background. I don’t see anything too wild. Just sort of, like sort of yoga-esque, I guess.”

What do you think it is meant to accomplish?

“I sort of... I guess I would see it as sort of a relaxing thing. I don’t know how it’d relate to, you know other psychological issues like, like um schizophrenia or something like that. But I sort of see it as... I mean I would actually sort of think of it, even for me, as like, ‘boy, maybe that

would relax me. Maybe that would sort of calm me down,' I don't know. Maybe, you know, high stress time."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"Well, I think it depends on what you were going after. I would think for serious mental disorders, such as schizophrenia or some sort of psychosis, I have a feeling that it wouldn't be as successful. Mostly speaking from ignorance, but that would be my perception. But for stress, for common day issues, for things that you go in and say, 'Oh my wife is, you know, bothering me,' and, you know, talk to a psychologist about it, I feel that could be helpful, in sort of just centering somebody and relaxing somebody. I think it's dependent a lot upon the nature of the person, as to whether they're willing to fully try it, and willing to invest themselves in it, and whether they're sort of just willing to open themselves up to something new, because, at least from my perspective, it's something new, and something different."

Would it be more or less successful for certain people?

"I think so. I think, like the sort of same thing that I said, I think that people who are more open to trying new things, I think it would be more successful than people who are a little more rigid and a little more, you know, sort of centered in what they're doing and what the convention is. So I have a feeling like the more, sort of, I sort of see a liberal, hippie kind of thing, which I don't say negatively, I'm a liberal. But you know, the more sort of out there you are the more easy it would be to sort of invest yourself in it. [*certain illnesses?*] Yeah, I guess I'm sort of... I don't know. I would say my perception would be no, I couldn't see it helping. But that's sort of... like my perception is like, schizophrenia, the only type, which is sort of I guess the first thing I think of in psychology, you know, disorders, the only thing I've sort of heard about that is drugs or, you know, shock therapy or that sort of thing. I just, I don't know. Yeah, I would say probably not, that would be my perception. [*what about depression, social anxiety disorder?*] I think that would be better, yeah. I actually think, feel like that could be helpful. Because I feel like, you know, depression, sort of... get your mind off it, get sort of, lift your spirits up. I guess, I could also see, maybe if you turn the music up, getting adrenaline up, that sort of idea, that sort of concept."

effects chemical, emotional, spiritual?

"I think all of the above. I mean I think depending on the music, you get really active, you pump your adrenaline, and, you know, the more adrenaline... I mean typically when you exercise you get a little happier. Emotional and spiritual, I feel like, it depends a lot on the music, I would think. If there is music, I assume there is. But maybe not, I don't know. That's be interesting, I gotta find that out after this, wikipedia or just google it. But you know, I would assume that with different music, it would be a little more... I sort of see it... as slower music, as sort of calming and sort of better for other sorts of issues, anxiety, and yeah."

ability or passion for dance to benefit?

"I don't think so. I think it's like anything. I mean if you sort of invest yourself in it, even if you don't... you're not really good at it. Number one, you'll probably get better because you'll practice, and number two... you know it's sort of like.... Take singing, for example. Somebody's not really good at singing, but you know, or they don't even really enjoy it. Chances are it'll still be something, maybe to some extent relaxing. Or maybe not, I don't know. That might not work. But, I sort of, I don't think you do. I feel like it's effects can be felt, you know, the sort of relaxing thing, it depends on the type of movement, the type of music, very specific."

hesitance or resistance to dmt?

“I could see that, yeah. I feel like because to me it seems sort of new, and sort of new theory, new, you know, sort of. Acupuncture I see as something sort of, I know it’s not new, I know it’s thousands of years old. I’m guessing probably dance therapy probably is thousands of years old, but it seems sort of... at least to our society, sort of something new and not conventional, which obviously is usually resisted or, you know, to some extent, by more conservative elements of the society.”

resistance primarily because of newness?

“I think so. I think the less people hear of something, the less they’re willing to try it. You know, if you’ve seen A Beautiful Mind and you have some sort of disorder, you’re like ‘oh shock therapy, I’ve seen that, I’ve heard of that.’ But dance/movement therapy, you haven’t really seen that in popular culture or even like my doctor’s never mentioned it to me. And you know, maybe doctors do, but, you know, I don’t see it as something... I see it as something new, at least to me.

what would alleviate?

“That’s interesting. I think, I guess at least some of it has to do with popular culture. I think a major, like a big problem between drugs is the whole concept that it’s just not profitable. You know, it’s sort of a nice, cheap alternative, which means that it’s not going to be published, you know, in magazines or you’re not going to make commercials for it. So just to have even doctors’ awareness of it I’m sure will be low because the drug companies just won’t push it. Not a conspiracy theory per say, but, you know, it’s not profitable to the medical institution. If you have a doctor prescribing dance therapy versus prescribing a medicine that they know about, that they know has worked in the past, they’d probably be less willing to try it. So to relieve it I guess, I don’t know, you need people to push it. And not necessarily expensive advertising, just hitting the right community, which I think would start with psychologists and psychiatrists.”

advantages/disadvantages of dmt compared to traditional

“I would perceive there would be differences. I would say an advantage, I can say with some certainty, that there probably aren’t that many side effects, you know, as compared with drugs. The side effects would probably be like exercise, which is an advantage. But a disadvantage I could also see as... I mean I could see the drugs maybe working faster, working at times better. Maybe over time if you really... I could see a disadvantage being you have to put more into it. You have to sort of invest yourself, more time versus just popping a pill or going for an hour session every a week, so I guess that’s one of the big ones, yeah. Advantages are the side effects, disadvantages would be the time, I think you’d have to put more into it. But I guess overall, probably the main advantage would be you wouldn’t be messing with any chemicals... When you mess with those chemicals it’s not always positive. So, do something more natural or you know.”

general perception or your own?

“I sort of see it as, depending on your perspective, I see it as sort of like a new age, you know, I assume it’s not like... like acupuncture I believe is eastern. Sort of like yoga, that sort of thing, which some people are really into yoga and so at which point maybe it’s very positive for those kind of people. Other people are, you know, a little more rigid, a little more old-fashioned. So they see it and they go ‘oh, yoga heh heh, yeah.’ and they sort of push it away. I think it varies from your sort of stances and your sort of preconditions. I would consider myself a little more open to try new things, but still hesitant about new things because I’m hesitant about change. And so, for me something that’s sort of a little more new, I’d be a little hesitant to try it. I would

try it if my doctor told me to try it. But I don't know... I don't think society as a whole is as open or less open or... so I think it varies as to how open a society is."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what dmt is?

"Not entirely. I sort of saw that because, yeah I can sort of see that. I couldn't define it that deftly. I sort of see it as doing that. But, at the same time, to me it doesn't speak to how effective it is, so I'd still need more support or I'd need my doctor to say, 'hey, schmuck, try it.' You know, so, but yeah, I could define it as that."

Does this change your understanding of what a session might involve or look like?

"No, I sort of envision it that way. It's a little different, because I still don't know if there's music or not."

Does this change whether you would recommend it to family member/friend?

"Actually that I would be more willing to. And the reason because of that is because I don't think there's as much of a taboo on it. And a taboo in the sense that, you know one of the reasons I wouldn't recommend to my family members a psychologist or something is because I'd be afraid they'd... you know, a friend I could do that but I wouldn't want my family members to say, 'oh, you think I'm crazy, huh?' But if you say, 'oh, go try this thing, it'll chill you out' which is still how I envision it, it'll, you know, replenish your emotional, your spiritual... I feel there's less of... because, in a sense, in at least my circle, it's newer, there's less of a taboo and less of a 'oh, you're going to a psychologist, you have issues.' Which might not be my perception, but that would at least make me hesitant to go to a psychologist but less hesitant to go to a dance/movement therapist."

Does this change whether you yourself would be willing to try it?

"Yeah, I think I'd probably be more willing to try it. A little more legitimacy versus something that I just heard of in a lucky magazine or something, which is probably where I've heard of it."

SUBJECT 18

What is your course of study/occupation?

“History.”

Would you ever seek medical treatment for a mental health illness?

“...Maybe. I mean, yes.” [*depends on? more severe versus less?*] What it was. I mean... I guess it would depend on... I guess the severity is part of it, but it would also depend on my perception of that illness or whatever the condition was. I don't think I need to be running to other people to help everything that I have. I don't want to just... ok, there's one area in my life that I'm not happy so I'm going to run and get mental assistance. So, that's kind of my view, I would want to make sure that I pursued other options that I've been, you know, thinking about it, praying about it before I went immediately and said I need mental help. [*specific illnesses?*] I think it'd be a while before I pursued, what are we defining as medical help? [*psychologist, psychiatrist*] I think, something along the lines of depression, it would have to be... I would do a lot more talking with my close friends, with my parents, elders, pastors that I know well before I'd seek medical attention. If it was clear that there were I mean other, more serious mental illnesses involved, I'm sure there'd be a period of denial but I think, in the end, I would be willing to. I mean you look at worst case scenario, someone... you know, Alzheimer's, Parkinson's, things like this, that you're not willing to accept that at first, but, in the end, yeah, you have to accept medical treatment for that.”

What kind of treatment would you seek? Would you be willing to go to a psychologist/psychiatrist?

“Can we define some options? [*psychologist, psychiatrist, therapy v. pharmaceuticals*] I guess I'd be more willing to be involved with therapy, but, that being said, it is dependent upon the therapist. There's a lot of different schools in psychiatry, psychology and I'm not going to just blindly throw myself in any one person's hands. [*who would you go to to help you decide?*] Some independent research, my mom's involved... she's a nurse, and she's kind of involved with a lot of different areas of medicine. I mean she'd probably be the point person that I'd say, 'what do I need, where do I go for this?' Some of it would be, I'm sure, talking to pastor's in my local church to... I mean they deal with a lot of problems and they know kind of where to point people.”

Would you be willing to try acupuncture?

“Probably not. I'm not a big fan of needles.”

Massage?

“Sure.”

Arts (D/MT) therapy?

“Haha. My initial reaction would be that's b.s., I mean to be completely honest, but... maybe.”

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

“Um... I don't think they're always successful, to be sure. I think there are occasions that they can be, but I think it's more dependent upon specific circumstances of the individual, that they're... I think there's some things that psychoanalysis and psychotherapy, I'm probably mixing terms here, just are not capable of dealing with, but I think there are area's that they are. [*so it would depend on the kind of disease?*] The kind and the scope I think. I would say the less severe, the more likely they are to work.”

Would you be willing to recommend mental health therapy to a family member?

“Um, it would be similar to what my personal standards are too, I think. Like I said, the most severe case, you have something like Alzheimer’s or Parkinson’s, as a family member, you’re going to see that before they see that, and that’s something that becomes painfully necessary to do. If, and similarly along the same lines, I’m going to try to talk with them before I simply say, ‘hey, go see a therapist.’ Or have them, you know, talk with a good friend they have, or a pastor, or kind of along the same lines.”

To an friend/acquaintance?

“Um, it depends on the acquaintance, per say. That they’re some... just because I see them in class doesn’t mean I feel like I have the right or need to say, ‘you need a doctor or you need therapy.’ For a good friend though? Yeah.”

What do you think dance/movement therapy is?

“No clue. Speculate, um... holistic, there’s a buzzword for you. No, I would imagine it has to do with... movement and music, that somehow those are working together to kind of... get in touch with something that’s just simply beyond how we interact with other people, that just kind of, be more introspective.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Um... music and dance. That’s all I know.”

What do you think it is meant to accomplish?

“Like I said, I think it’s meant to be more meditative in a lot of ways, just to think about what you’re going through in a different light. Depending on the music, there’s... in modern dance you’re mostly dancing to some sort of lyric as well. There’s a certain music and it’s either... and if it applies to you in a certain way, you’re going to start thinking about your self in relation to the dance, that’s the best I can speculate.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Um... in and of itself, I would have my doubts. I think you’d have to be dependent upon other resources and other relationships that they have in their life. That if they just look up dance therapy on Wikipedia, I would have my doubts, if they were trying to self-execute this, if it would go well. That being said, I don’t know anyone who would do that, so just on the one extreme. On the other extreme I think if it’s a part of a plan or a system that they’ve put in place to deal with some issues for whatever the mental health issues is, that it could be part of a larger, successful plan.”

what’s the difference that makes it successful?

“I think it needs to be interpreted. There needs to be some sort of commentary on what a dance therapy session would look like. It can’t just be, and like I said I don’t know really what that term includes, but it can’t just be... there has to be some kind of debriefing as to what happened in there. There needs to be someone else to kind of say, to kind of talk someone through thinking about what the experience was, what’s going on in the session.”

so some kind of language-based, communicative debriefing, analysis?

“Yes.”

Would it be more or less successful for certain people?

“Um... yes. I could see dance therapy being... I mean people who have, throughout their life, kind of dealt with emotional issues in terms of music. I think it could be more successful. Some people, myself included, just don’t... I think there’s a wide range to which... I mean kind of

you're stereotypical emo person and you're stereotypical... guy who just sits around playing x-box all day, they're not relating to music on the same level and I'm not sure it would have the same effect on them."

what do you think it is about them that distinguishes them?

"I think it has to do with their willingness to accept... some sort of truth in non-verbal communication. I think that some people just think it's not existent, that you're not going to be able to do that. And I think some people are very willing and open to say that 'I can listen to an eleven minute symphony movement and the composer is going to say something to me, even though there might not be any lyric to the song or program that he's given us.' That there's some sort of communication that's going on."

some sort of connection to the arts? affinity for or involvement in?

"Yeah, I think some sort of connection to the arts. But I think, to some extent, you have to be willing... that there's some sort of independent meaning in music, that there's, it's not just whatever you want it to be."

effects chemical, emotional, spiritual?

"I'd say some combination. Chemical, emotional, spiritual is what you said? Yeah, I think... I don't know the science behind it, but I'm sure that there's some sort of chemical that's released and some sort of chemical change that when you're in different states of mind and different... and going about your life differently than usual. Emotionally, for most people it's difficult to hear certain music and not be affected some way emotionally, specifically I mean the content of the song, too. And I think everything we do is spiritual, so I think, yes there's going to be a spiritual component to it."

specific passion or talent for dance to benefit?

"No, but it probably helps."

resistance or hesitance to dmt, where does it come from?

"Yes, haha. Where do I think? Just not being exposed to dance period I think would have part of it. I think that some of it is just conceived as being, 'what are you doing? That's not really scientifically based.' That's not really, there's a scientific perception I'm sure. I'm sure there's a cultural perception as well, that people perceive a certain dance... 'these people who are dancers, they might have emotional trouble, I don't have that.' I think there's pride involved. So those are some areas."

advantages/disadvantages to dmt versus traditional medicine?

"My gut reaction to this is that there's less chance for it to go drastically wrong. You hear kind of horror stories of people being put on medication that they're not supposed to be on, of sitting in years of therapy, that the therapist is taking advantage of them. These are kind of the extremes, but... and I don't see that necessarily being the case in my perceptions of dance therapy. It could help you, I don't see it hurting you that much, unless you blow out your ACL."

do you think that's difference in capacity for effectiveness? pharmaceuticals have more effects, either successful or not?

"A little bit, yes, but I think in the post-modern world we live in, that so much of dance therapy can be 'well it is what you want it to be,' and I think we naturally put a positive spin on things. I'm not necessarily saying I agree with that world view, but I think that's kind of... it's less likely to be negatively perceived, I think. It's not perceived to have some sort of... the ideas of a doctor-patient relationship aren't as strongly perceived, I would think, in dance therapy or something like that. That, whereas you go to see a therapist or your doctor's prescribing drugs,

someone who knows more than you is implementing something that you need to do to make you, whether you like it or not, a better person.

so it's the lack of knowledge about what's going on?

"Yeah, there's a knowledge component, definitely. I don't think there is as much of that... sure you have instructor relationship, but it's still, even instructors know that they have to practice, they have to... you're never done, you don't get to this certain point and you're suddenly done practicing, at anything, but specifically the performing arts. I think, there's kind of a knowledge of that when you're someone who's never been exposed to dance and you're saying, 'Ok, they practice this a lot, but they're not done. They don't think they can just tell me what to do and I'll be better.'"

disadvantages?

"Disadvantages are that people might not take it seriously at first."

just because of lack of scientific basis?

"I think it relates to scientific basis, cultural perceptions, all those things that we kind of talked about earlier. So I think that's something. That's not necessarily to say a permanent disadvantage, I think that can be overcome if there is merit in it and if they or their family perceive the merit in it. I'm sure there's disability disadvantages, that there's... your range of motion and things like that are going to be limited. That's not to say that there, I'm almost positive that there'd be dance therapy, even for people who are virtually paralyzed, I'm sure. But I think that could be a disadvantage as well."

you mentioned before that it could be overcome, what would it take?

"Um... a willingness on the behalf of the patient. I don't think someone could be forced into something like this, for sure. I think that would be counterproductive and talk about a disadvantage, that would be a disadvantage. Yeah, a willingness on behalf of the patient, and really that can be achieved a number... you know, they have to be willing to try it first. There has to be some sort of benefit that they're getting out of it immediately, whether it's as little as, 'Well, I feel a little better today,' whether it's, 'I don't feel as sick as I did this morning,' or 'I don't feel... I just feel stronger than I did yesterday in a purely physical sense. I feel like I worked out or something like that.' Sure, I mean they're going to find different merit in it. I'm sure there's a lot of people who will come into it, 'Ok, I'll try it once.' And maybe they'll do it again thinking, 'Ok, it's not doing what they think it's doing, but it might be doing something for me.' So there's some sort of willingness, I think. And it's not just dance, I think it's a lot of things that when people are just, kind of not sure about if they want to try something, they can kind of construct these various reasons until they've convinced themselves that it's positive."

what about on a grander scale, what can eliminate the hesitance? personal narratives?

"I mean I think that's one way to achieve openness on the behalf of the patient. I think it'll depend on the patient, if you have a Penn philosophy professor, I have a hard time imagining that personal narratives, or a Penn bio professor or something, that personal narratives are always going to convince them. At the same time, you get someone who's... a bum off the street or something, you know, you're not necessarily going to perceive right away that 'Oh, I need to throw them all these surveys.'"

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what it is?

“Not really.”

Does this change your understanding of what a session might involve or look like?

“Not really.”

Does this change whether you would recommend it to a family member/friend?

“Not primarily.”

Does this change whether you yourself would be willing to try it?

“No.”

SUBJECT 20

What is your course of study/occupation?

"Finance and management, and music."

Would you ever seek medical treatment for a mental health illness?

"Yeah, it'd have to be pretty severe."

What kind of treatment would you seek?

"Therapy. I don't know, depends on what the diagnosis was. I'd probably do whatever."

Would you be willing to go to a psychologist/psychiatrist?

"Yeah, sure."

Would you be willing to try acupuncture?

"Yeah."

Massage?

"Yes, sounds good."

Arts (D/MT) therapy?

"Uh... not so much. I don't know, I'm not a dancer, and... I don't see how useful it'd be."

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

"Yeah, I think it's dependent on the person wanting help in the first place, and wanting to do the treatment, so yeah."

Would you be willing to recommend mental health therapy to a family member?

"Yes. Sticky situation, but yeah."

To an friend/acquaintance?

"Mmhmm."

What do you think dance/movement therapy is?

"Oh jeez, this is all about dance therapy, Oh God! Uh... I don't know, kind of like yoga or something, spiritual and dance? I don't know, I have no idea."

What do you think it may involve?

What would a dance/movement therapy session look like?

"A lot of stretching, and maybe, relaxation techniques, and then dancing I guess, I don't know."

What do you think it is meant to accomplish?

"Umm... relaxing the person. I don't know, yeah."

effects chemical, emotional, spiritual?

"Emotional and spiritual, not so much chemical."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"The person really into dancing, and then thinking that that's going to do an outcome that they want. So, being optimistic and not skeptical."

Would it be more or less successful for certain people?

"I'd say, less successful for men, um, yeah, in terms of demographics. Maybe better for older, I mean definitely not kids, so older people, adult at least. Specific illnesses... um, things where their movement is... I don't know, I have no idea."

need talent or passion for dance to benefit?

“I think you should yeah, at least like it, a lot. Otherwise, I mean if you’re doing it and you think you look stupid, and you’re just not enjoying the process, then you’re not really going to get anything out of it, so you should at least like it.”

resistance towards dmt and what do you think it's founded on?

“I haven’t really heard a lot of resistance. I think it’d be a personal decision on each person. If they don’t, you know, a typical male jock who finds dancing, you know, like not so manly and not useful, so that would be the resistance but I think it’s on a personal level, not groups.”

advantages and disadvantages of dmt v. traditional?

“Yeah, it’s not invasive, no side effects that I can think of. It’s probably good getting a person to exercise a little bit, emotionally good. If it works, I think it’s a good alternative.

[disadvantages?] It not actually working. That’s pretty much it, there’s not much else that’s long term problems, I don’t think.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change your perception of what dmt is?

“There’s nothing spiritual noted in that, so. Doesn’t really change my opinion, but, yeah, it’s a little more in depth than I thought.”

Does this change your understanding of what a session might involve or look like?

“Probably more physical than I imagined, in terms of actual movement, more active. I mean dancing is one thing, when you add therapy it makes it seem a little softer, at least. So it’s not going to be dancers doing it, per say. It’s going to be regular people who don’t dance, so it’s going to be at that level. If they’re sick, they probably have some types of limitations, so no experience, I don’t know. It’ll be less than a regular, typical dance class. Yeah, I think.”

Does this change whether you would recommend it to a family member/friend?

“Depends on each person. So, I would never recommend it to my dad, but my mom, yeah. She does yoga; she’s into all those things. She would probably do it before me, so yeah. But, it depends on each person.”

Does this change whether you yourself would be willing to try it?

“Yeah, I would try it. I don’t think it would work for me, but I would try it, for sure. *[why do you think it wouldn't work?]* Just because I’m skeptical and I’m not a dancer.”

what would it take to minimize/eliminate the skepticism?

“Um, I think a friend doing it and have a success story out of that. Or having tried the first, you know, the primary methods of medicine and it not working. Not a last resort, but further down.”

would medical research showing efficacy would convince you more?

“A little bit, if it was appropriate. I don’t really read medical research, ever, so. *[so more awareness in the public?]* Yeah, right. Like news media and stuff like that.”

general opinions

“I mean, I thought it was also dancers who’ve been injured who go through therapy. Is it that... nothing to do with that, yeah.”

so you thought it was more physical therapy based?

“Yeah.”

in terms of viewing it from mental health therapy perspective, how does that change?

“It’s different. It’s more... I don’t know, not just reconstructive or whatever for the dancers that were injured.”

do you think it’s a viable method, successful for people with mental illness?

“I think it could be if they really want it to be. Like if it’s something they’re passionate about. I mean, anyone has some type of thing, or like an outlet that’ll help them and if they pursue that, then their mental health usually goes up, or I don’t know, that’s what I’ve heard.”

SUBJECT 21

What is your course of study/occupation?

“Like my major and stuff? I’m in the college, I’m majoring in biology with a concentration in mathematical biology.”

Would you ever seek medical treatment for a mental health illness?

“Sure, if I thought I needed it.”

What kind of treatment would you seek?

“Probably one on one counseling, and, if necessary, group therapy.”

Would you be willing to go to a psychologist/psychiatrist?

“Uh, yeah. I would probably see a psychologist first, and then go to a psychiatrist.”

Would you be willing to try acupuncture?

“Yeah, definitely.”

Massage?

“Sure.”

Arts (D/MT) therapy?

“Sure, sounds fun.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“It can be successful. It probably depends on the patient-doctor relationship and it probably depends on the course of treatment as it goes, whether it’s with one on one talking and that’s done throughout years to help find the problems and then help solve them or work them out through talking. Or, if it comes with being with a psychiatrist, the drug treatment and the dosages and how long term, and whether you stick to a very strict regiment.”

Would you be willing to recommend mental health therapy to a family member?

“Oh definitely, if I thought it was necessary.”

To a friend/acquaintance?

“Yeah.”

willing to recommend alternative therapies, specifically dmt, to family member?

“Yes, definitely.”

friend?

“Yes.”

What do you think dance/movement therapy is?

“Umm, dance/movement therapy? I mean I don’t really know, but what I think it is, is kind of using dance as a way of expression that you can’t always put into words, but it does, in a way, help you work through certain issues in your mind, kind of in the way that there’s positive-reinforcement therapies and kind of controlled-aggression therapies, things of that sort.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Uh, I guess with a typical session, you’d try to first discuss what kind of issues are trying to be worked out, and in that sense trying to, in a way, choreograph your feelings and then just actually just letting go and actually dancing and seeing if those motions kind of help you express what you’re trying to feel, and things like that.”

What do you think it is meant to accomplish?

“Um, I guess just like with almost any therapies, just being able to, not always just working out your issues, but just kind of getting them out there into the world and just being able to express what your feeling in a way that you can’t in other ways do.”

effects chemical, emotional, spiritual?

“Um... I mean I’m sure with the chemical there’s always emotional, so in that sense. It can be spiritual, but again that depends on the patient itself because not everyone is as spiritual. I’m sure that there’s some components for the people who do feel that way.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I’m sure it can be successful and the success always depends on, like any other form of therapy, whether it’s done on a regular basis, it always depends on the doctor-patient relationship, and how strict and just keeping on track, basically just doing it as often as necessary.”

Would it be more or less successful for certain people?

“I guess the success depends on how much effort you really put into it. So I wouldn’t necessarily say it would depend on a demographic or any kind of values. It would just depend on whether someone who’s done it thinks it’s working for them and if it is, how much they want to keep at it, to keep working through their issues and things of that sort.”

do you think certain people would be more open-minded or willing to try it and believe in it?

“I suppose more liberal people would be more open-minded to it, just because, as a tendency, conservative people would rather just... well if they’re even looking to solve their issues at all, because they’re not so much of being open-minded and talking to people about their problems. It also depends on, I guess, how much they would go with that kind of alternative, instead of going through drug therapies, because they feel there’s more scientific basis behind it, so people would be more [lost]. So I believe more liberal people would go for it, and possibly after having tried other therapies as well.”

be good at or have passion for dance to benefit?

“I don’t think so. I mean, maybe, possibly have some sort of passion for dance because if it’s something that you like to do, it might be particularly useful to help solve any mental issues that you may have, especially with relieving stress and depression. I don’t think you necessarily need to be good at it, and if anything, because you’re not... because it’s not something you do, it might be a more useful therapy because it’s not something you’ve tried before and it might actually work more than other treatments in the end.”

possible resistance or hesitance?

“I think there could be, just because... especially with western and biomedicine, these alternative therapies are not always looked upon as so great. There’s always just a push, especially in North America, how we push drugs as therapy so heavily. It might be met with resistance more often than most other treatments.”

what would it take to eliminate or reduce resistance?

“I guess, like with anything, because drug therapies have so many studies worked on them, I guess having more studies that have statistical analysis and possibly have even kind of like medical correlations going along with it, how dance therapies have helped people improve their serotonin levels for example, or things like that. So, things that have more, I guess more quantified data would help people be more open to taking dance therapy, or at least being open to it.”

advantages/disadvantages to dmt compared to traditional?

“Um, I guess one advantage of it is that, depending on the situation, if people have tried group therapies and drug treatments in the past, and it hasn’t worked as well, it could serve as a potentially good alternative. It doesn’t require the use of drugs, so you avoid a lot of side effects that a lot of people get turned away from drug treatment. Any disadvantages I guess is just the initial step of getting involved with it because a lot of people, I could see meeting it with a lot of resistance, not really feeling like it’ll help unless you’ve been at it for several months, but that’s almost with any kind of treatment. A lot of people tend to be very impatient. So, it’s just a matter of how long you stick with it.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what dmt is?

“I mean, that’s pretty much what I thought it was. I guess I didn’t really consider it as integration. I mean getting involved in society. I mean, I just thought of it more as someone realizing they have kind of a mental health issue and then they would go seek out a therapy to improve upon themselves, not so much as they have an issue and it’s kind of deterring them from society and so they use dance to get back in, in that sense. So I guess that’s something I didn’t consider.”

Does this change your understanding of what a session might involve or look like?

“Uh, no. I mean it just pretty much sounded pretty explicit about using motion to help work through your issues.”

Does this change whether you would recommend it to family member/friend? Yourself?

“Not at all. I think it would be a sound kind of treatment. But again, it just depends on what kind of courses of treatments you would want to use before, or if it’s something that you’d be willing to do firsthand.”

SUBJECT 22

What is your course of study/occupation?

"Sociology and minor in linguistics."

Would you ever seek medical treatment for a mental health illness?

"I think so, yeah, maybe depending on what it was. Yeah, probably the more severe the more likely, yeah."

What kind of treatment would you seek?

"I guess some sort of psychiatric evaluation sort of thing or just seeing a psychiatrist."

Would you be willing to go to a psychologist/psychiatrist?

"Yeah, I think I would."

Would you be willing to try acupuncture?

"Hmm. I guess if I really thought it was going to help me, but if I was kind of unsure about it, I don't think I'd really be up for that."

Massage?

"I could go for that. It's better than, I don't know, getting needles stuck in me kind of creeps me out, so I think I would go for massage therapy over acupuncture. If I was really in pain and got a lot of recommendations that the best thing to do would be acupuncture, then I'd just suck it up, I think."

Arts (D/MT) therapy?

"Yeah, I would do that. I like dancing."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"Um, like do I think psychiatric or psychological therapy would be successful? I think so. I guess I'm not totally sure that drugs always work for people or that they're like the best choice, but it seems like in certain situations that yeah, they do work. [*what is it dependent on?*] I really have no idea, I guess the individual and whatever the issues are. I don't know, it seems really case by case and not really easily generalizable."

Would you be willing to recommend mental health therapy to a family member?

"Hmm. Yeah."

To a friend/acquaintance?

"Friend, like close friend, not someone that I wasn't very close with."

What do you think dance/movement therapy is?

"Um... it seems like it'd kind of be like physical therapy kind of combined with some sort of emotional, expressive sort of therapy, you know? Kind of relieving physical and emotional pain and symptoms at the same time, maybe."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Some warm-ups and some stretching. Um, I don't know I guess in my mind it would be like a yoga session, but with music and like dance moves instead of yoga moves. So it would be like really calm, and... a one on one thing, probably."

What do you think it is meant to accomplish?

"Um... hmm. I guess... I don't know is it combined with drugs? It can be. It seems like it would be more of an intervention to where you don't have to use serious drugs in addition to it. I don't know, just like I said, like relieving physical and emotional symptoms."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Um, I think it could be successful. I think it’d be dependent on, again, like the individual and if they were comfortable dancing because I know sometimes I’m not comfortable dancing in front of other people, especially if I don’t know them. So if they’re not really comfortable with whoever their therapist is, then that could be an issue. Or if they’re just not comfortable with watching their body move in a mirror, because I think a lot of people have that problem.”

Would it be more or less successful for certain people?

“Probably with different mental illnesses, I don’t really know about demographic. Yeah, I think there would be demographics that would be more or less willing to try it. I mean some people definitely have like religious beliefs that really strongly direct whether it’s even okay or not to seek any kind of mental health therapy or any sort of medical interventions. And demographic wise, I’m sure some people couldn’t afford to do it or wouldn’t have the resources available or knowledge to seek it out or know that it exists to actually use it. So it’d kind of be like an access thing. [*different mental illnesses?*] Um, probably. I’m sure some people would feel like it wouldn’t be relevant to like, let me think of an example... I don’t know, I don’t have a big enough catalogue of mental illnesses, but... I’m sure that would be a factor. [*more or less serious or different kinds?*] Yeah, I keep thinking like, I’m not sure if... people who had like serious... anger issues, like if it would work for them, I mean it could be a way to channel energy, but I’m not sure if someone with an anger management problem would see it as an effective way to help them out. I don’t know.”

effects chemical, emotional, spiritual?

“Probably a combination. I’m not really sure how they would be chemical, but I mean... Yeah, I definitely think they like emotional and on some level spiritual, and probably physical, too. But, I would say probably mostly emotional.”

have to have talent or passion for dance to benefit?

“Talent, no. I think passion, maybe. Or just enjoying music or enjoying just movement in general, and like I said, being comfortable with moving. I think that’s important, but I don’t think you would have to be particularly good at it, as long as you liked it, in some respect.”

resistance or hesitance to dmt?

“Possibly. I think, like it’s not something that I’ve really heard that much about, so I feel like people don’t really know about it or yeah, probably don’t really think about it as a legitimate form of therapy because everything is... mental health problems have become super medicalized, so the treatment, like the go to thing is drugs. So yeah, same thing with acupuncture and massage therapy. I feel like a lot of people write those off as just, not whack-job therapies, but kind of, you know? So, yeah.”

increased awareness would help diminish?

“Yeah, if it was more visible or promoted, I think that would make people more open to it, and if there were, I mean maybe there are, but I don’t know because I haven’t looked into it, but if there were studies that showed that it was effective, then yeah, that would definitely help out.”

advantages/disadvantages to dmt compared to traditional

“Yeah, I think the disadvantage would be it’s possibly harder to track progress or, you know, feel like... that progress is happening at all because it seems like a really subjective and kind of free-form thing. And it’d be hard to prove that there were, you know, positive results because how do you... kind of like assign numbers to things like in that setting, you know, and run statistical analyses on different things. You could have really qualitative reports, I guess, that sort of sound

like ethnographic things. But then there's always the issue of people not wanting to buy into narratives and really wanting numbers, or reports, like chemical reports or something."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change understanding of what dmt is?

"Well I guess, so I got the emotional and physical part. Yeah, I didn't really think of it as a way to help social integration, but I guess if you're working with emotional stuff then that always kind of channels into like how someone functions in society and same with cognitive, so it makes sense."

Does this change your understanding of what a session might involve or look like?

"I guess with that definition it seems like there would be not just physical stuff, but verbal interaction and talking through, I don't know, either what the person's feeling or just using different kinds of like, spoken exercises to go along with the movement."

Does this change whether you would recommend it to a family member/friend?

"Yeah, if I had tried it before and felt like it worked, I think so. I'd be more inclined to recommend it if I thought they would enjoy it or benefit from it. Like I wouldn't recommend it to my dad, hahah, but a friend of mine, maybe."

Does this change whether you yourself would be willing to try it?

"No, it doesn't make me any less willing to try it, I think I would definitely still go for it."

what is it about your dad that would make you hesitant to suggest it?

"I've never seen him do anything similar to dancing and he's just kind of, really stoic and just physically and verbally reserved. So I just, I can't see him in the setting like taking it seriously and being receptive to it."

is it an openness, a masculinity thing?

"I think it's probably both, and maybe the two are tied to each other. But, yeah... it's kind of like... his personality is just sort of, you know, he's got his own little bubble, his personal space. Yeah, stoic I think is the best way to describe him."

general comments/opinions?

"Um, well talking about my dad, I guess that I would think that men would be less responsive to it because dance definitely has a feminine connotation, and when you have men in dance, a lot of times they're just perceived to be gay automatically. So I think a lot of men wouldn't be comfortable with that, you know, to say that they're in dance therapy."

SUBJECT 23

What is your course of study/occupation?

"I am an English major, PhD."

Would you ever seek medical treatment for a mental health illness?

"Oh yeah."

What kind of treatment would you seek?

"What are my options? [anything] For mental health, probably talking to people, talk therapy. I'm more leery about things like drugs and stuff like that, but I mean I'm not discounting them if I had something, because I know it helps. I would refuse probably to do anything that was like surgical or shock therapy or things like that because that stuff just doesn't work and it's so invasive."

Would you be willing to go to a psychologist/psychiatrist?

"Well, I mean I would see a psychiatrist too, but I wouldn't like... I mean I would be leery about drugs and things like that. That's the only difference, right?"

Would you be willing to try acupuncture?

"Oh yeah, but I mean... because I'm also Asian and... my parents were first generation, so they are more... I grew up with more like herbal, homeopathic, alternative medicines, and, you know, things that have histories of working in the family, even more than like westernized medicine. Yeah, I mean acupuncture's been around for thousands of years literally, so something's gotta be..."

Massage?

"Oh yeah, yeah."

Arts (D/MT) therapy?

"I think so, but I think it would need to be, I would need to see what it was doing, but I would be willing to try it."

By see what it was doing, you mean see a session or see statistical results?

"I would be very interested in seeing the results, in terms of statistics, but I would still try it even if there weren't, because I know there's not a whole lot of studies on it. But, I mean, just to see what people would actually be doing though, to find out like what is it that you're doing and how is it affecting people, even on an anecdotal basis.

so like personal narratives?

"Yeah yeah."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"Um, I think it can be successful, but I think that it can be... um... I think it's probably successful because people's neuroses fit certain patterns and that they've learned, the psychologists/psychiatrists, have learned to recognize those patterns and, you know, deal with them accordingly, I guess. I don't know much about psychiatry though."

Would you be willing to recommend mental health therapy to a family member?

"Well, if someone I knew was going through something serious, I don't know, something that's more than just talking with your friends, I would definitely recommend seeing a... someone. Even just, because as an objective quote unquote person to talk to, I think it's important, you know what I mean?"

To a friend/acquaintance?

"Yeah, friend and acquaintance, family, all of the above."

would you be willing to recommend dmt to family member/friend?

“If I heard a personal anecdote, or saw it in action, or knew a statistic about it, I would definitely recommend it, but I wouldn’t recommend it until I had just more knowledge about it. Because, you know, no one really knows that much about it.”

What do you think dance/movement therapy is?

“At first I thought it was a physical therapy kind of thing, you know what I mean, but through dance. But I also know that dance, you know, creates different things with moods, too and emotions, so, you know, I’d be very curious to see what that was about.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“I’m not sure, because I’m not exactly sure what the purpose of it is. But you said to speculate, so I would speculate that dance/movement therapy probably has to do with you moving with an instructor or therapist and maybe, using movement to, you know, either reconstruct things that have happened or using movement to like get in touch, like align your emotional state with your physical state. Kind of like yoga, and I know yoga works, so I would think that maybe dance/movement therapy is kind of like yoga, but different. I don’t know.”

What do you think it is meant to accomplish?

“Well like I said, I think, you know, it’s probably something to do with aligning the mental or emotional with the physical, a more holistic approach. I don’t really know if it’s true.”

effects primarily chemical, emotional, spiritual?

“I think it’s always going to be some combination, because... I don’t know, brain chemistry is a very particular thing, but like everyone’s trying to treat mental health with chemicals these days, and so there’s gotta be something to be said about brain chemistry and how it works. I’d imagine brain chemistry can also be affected by movement and physical activity, too. And it probably has some spiritual resonance too, I would guess.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think it could be successful because I mean I’ve heard of crazier things, not that I’m saying I think dance/movement therapy is crazy. But I mean I’ve heard of people, you know, having success doing a lot of non-western things. When I say non-western, I mean non-western medical tradition, you know what I mean? So, I have no doubt that it could work, but again I would really want to see, you know, or read about or hear from someone who it did work for. I think the success would probably be dependent on how much the patient... believed, that’s not the right word, but how much of his or herself the patient put into it, you know what I mean?”

Would it be more or less successful for certain people?

“I think definitely. I mean, I’m comparing this to yoga, but I think dance/movement therapy would be really... much more embraced probably with younger people than older people as a general rule, but that’s only because younger people tend to embrace a lot of different things, or non-western medicine things, than older people. But again, there’s a lot of older people who have come to yoga and really, you know, blossomed because of that. In terms of values, probably would be, because it’s not really canonical, it would probably be someone who readily embraces, or can believe in, I’ll say that, something that’s not mainstream, you know what I mean? So probably people who are more socially conservative, not necessarily in a political way, but just, you know, in a family values quote unquote way probably wouldn’t get as much

out of it or probably wouldn't be as willing to believe in it as someone who's already embraced something new or peripheral or outside the mainstream."

so in both cases it's an open-mindedness?

"I would agree with that, yeah. I think you would need to be open-minded to have any new, quote unquote, therapy, work for you. But again, I hate, I hesitate to use the word new for dance/movement therapy because I think dancing as a spiritual practice or dancing as a healing practice even has been around longer than, you know, herbs, quite frankly, or western medicine and from a lot of other cultures."

certain mental illnesses?

"I just don't know... much about mental illness. But, I would say probably something like... something I think that's more based on emotions or personal brain chemistry like depression and things like that, probably would be, I would think, and this is solely speculation, I would think that would be... I think dance/movement therapy could help those people more, I think, than things like schizophrenia, or, you know, psychoses or things that are more extreme."

Do you think you need talent or passion for dance to benefit?

"I don't think you need to have a certain talent for dance, but I look at when people are dancing, on a dance floor, like just socially. Even if you're not good, you can still, if you're heart is in it, if you're having fun, then you're having fun, you know what I mean, no matter how technically amazing you're dancing is, or how technically professional you are. So, I would assume that in dance/movement therapy it's similar, that you don't necessarily need to be, you know, an amazing dancer with classical technique to be able to benefit from it. But I would say you probably need to have some passion slash belief in the process for it to work."

hesitance towards dmt?

"Yes, but I would say that there's a resistance to anything that's not mainstream, you know what I mean, especially when we're talking about mental health which itself is very, you know, people have a lot of resistance towards."

so you don't think it's necessarily unique to dmt?

"No."

what would reduce hesitance?

"If more people knew what it was, awareness of it, and also awareness to see it succeeding and working. [*through statistics and narratives?*] One or the other, I think both, actually because you're not going to win over the more techie people without statistics. I think everyone needs a good personal narrative to be convinced of it. But I would also say that... like a high profile case of someone, you know, really would shed light on it. But I think, like on a general rule, Joe college student probably wouldn't think about dance/movement therapy unless it was something that was... [*brought to the forefront*] yeah, or even things like included in insurance or, you know, things like that. If it's taken seriously by other institutions, then I think other people would take it seriously, too, or more seriously, I should say."

advantages/disadvantages to dmt compared to traditional?

"I think there's definitely advantages because it feels like... it would be something very natural, you know what I mean? And I think that sort of natural, holistic, mind-body-spirit kind of thing... that's much more appealing than electro-shock therapy, or drugs, or surgery, or these really, really invasive techniques. Like if you look at the history of psychiatry in the United States, it's been... it's so problematic with how casually they do these very destructive things to other people's bodies in the name of science. Like lobotomies, like the, you know, uh! So I would think that any sort of natural, or holistic, or time-tested, you know, therapy needs to be

taken seriously, especially if it's non-invasive. I think the disadvantages would be probably, I mean... like, for instance, again I'm comparing it to things like yoga and acupuncture. Yoga and acupuncture don't necessarily work right away. And yoga becomes a practice, something to do on a regular basis. Acupuncture, as well, is not something easy or, you know, immediate. And I think that dance/movement therapy, if it's similar, probably needs multiple times or having people incorporate it as an almost daily or weekly or, you know, regular practice in their lives. I know in this day and age people are much more willing to take a pill and have it resolve itself than invest time and energy and, you know, belief in something else, if they can take a pill for it."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

change perception of what dmt is?

"I think that's kind of what I was talking about. 'Psychotherapeutic use of movement' - so it definitely is movement, maybe not dancing per say, though. I do like that it's about the integration of the individual, it seems very holistic. Emotional, social, cognitive is the only one that surprises me, and physical, yeah, that's nice. [*why does cognitive surprise you?*] You don't really think about the cognitive integration of anyone."

Does this change your understanding of what a session might involve or look like?

"A little bit. It probably is going to be less focused on people learning dances than just the use of movement, you know what I mean?"

Does this change whether you would recommend it to a family member/friend?

Does this change whether you yourself would be willing to try it or recommend it?

"I mean, I would be willing to try anything, but, I mean, I was willing to try dance/movement therapy even before the definition, because I know you. But also because, you know, dance is not... you know what dance is, it's not, you know, something scary like sky-jumping therapy, or something like that."

general comments/opinions

"I would say that it's really, not many people know about it. I mean I've heard of it, but I have no idea what it is or what it would look like or anything like that. But I think it sounds kind of amazing."

SUBJECT 24

What is your course of study/occupation?

“Wharton, accounting and finance major and possibly a dual degree with systems engineering.”

Would you ever seek medical treatment for a mental health illness?

“Currently? I’m trying to see if it’s something... I guess I would, for mental health, if something went wrong, yes, but not right now. [*if you were to develop a mental illness*] Oh, absolutely.”

What kind of treatment would you seek?

“I’m not really aware of what’s out there, but I’d be interested in anything that was going to make me better. I don’t think I’d throw anything out of the window right off the bat.

Would you be willing to go to a psychologist/psychiatrist?

“I’d probably be more interested in talk therapy than in pharmaceuticals, but I wouldn’t, again, I wouldn’t get rid of either one.”

Would you be willing to try acupuncture?

“Not as my first choice, but if it was, repeatedly untreatable, I’d be willing to try it, just not as my first choice, I don’t think.”

Massage?

“Sure. Again not my first choice, but it’d be something I’d try.”

Arts (D/MT) therapy?

“I’d be willing to try it, again, wouldn’t be my first choice. It’d probably be behind those other two, just because I’ve never really heard of it.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“I do think they can be successful. What is it based on? I guess past experience and how do they benchmark it? I don’t know how you’d benchmark something like that. What would you do? [*what is necessary to see success?*] To see a change, a positive change, in a person’s behavior. So if they are, I don’t know, unable to communicate with people, or something like that, to see them beginning to communicate with people.”

what’s necessary for success to take place?

“I guess the participant needs to be receptive to any of the treatments which are kind of thrown at them that they need to do know matter how crazy they are, anything like that. And for them to follow through, because a lot of times people aren’t going to follow through on these crazy things that people will say, so they need to be really open-minded, I guess.”

Would you be willing to recommend mental health therapy to a family member?

“Right now? Oh, if they were to develop something, yeah, absolutely.”

To a friend/acquaintance?

“A friend, not an acquaintance.”

would you recommend alternative forms to family and friends?

“If the traditional methods haven’t worked.”

What do you think dance/movement therapy is?

“Um... is it something along the lines... my guess is it’s going to be something along the lines of like... more dance-like yoga that kind of does things with your mind and makes you, I guess, feel better, or something like that, that would be kind of my guess.”

What do you think it may involve?

What would a dance/movement therapy session look like?

"I've already, always viewed it as like a yoga session. So you have an instructor and it could be just you or you'd have a couple of other people and they'd just kind of be telling you what moves to make and things like that, and go from there."

What do you think it is meant to accomplish?

"I would think it was a relaxing... if you hadn't had all these other questions before about ways it would be similar to another treatment, but more as a way to relax your body and kind of get everything off your mind."

effects chemical, emotional, spiritual?

"Definitely spiritual and emotional, I don't know about chemical."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think it could be successful. Yeah, again, well obviously, again, and this one particularly, the patient needs to be open, very open, to anything that you are suggesting or, you know, the dance therapist is suggesting for them to do because it's really out there and like, you know, you get somebody who's very, kind of, narrow-minded, they're not going to be willing to try these things and obviously then it won't be successful. So that particularly, hmm what else. Maybe the person also needs to believe that this is going to help them, too. I guess that kind of helps with the open-mindedness, but if you're going to have a closed mind, I don't think it'll work."

Would it be more or less successful for certain people?

"Oh, absolutely. I think that... alright, let's start hammering out stereotypes. No I definitely think, I think somebody like my father who's... certain values, so, ok. Somebody who's come from more, how do I put this so that it makes sense. ... Ok, I'll start with different values absolutely would influence that. I think that people's, how... I hate to use the word open-minded again but I'm trying to think of something else, how open they are to something that is non-traditional. So, somebody who has had, up until this point in their life, you know, very, very traditional, very normal, normal's not the best word, but very traditional and things that kind of are done in the past and aren't new things, would be substantially less open to even trying something like this, and even if they did try it, thinking that it was actually going to cure them. So like my dad, just as an example, he's very traditional in everything that he does. He has redneck roots and I don't think, like he would not be very interested in doing something like this. I probably would be not as open to it unless it was kind of like, I wouldn't say a last resort, but, you know, I had gone for a bunch of other treatments and it hadn't worked. Whereas somebody like my sister, this would be the first thing she would do. She's very liberal and has, is much more open to all of these new, different kinds of methods.

what do you think the distinction is between you, your father, and your sister in terms of openness?

"What value? I'm trying to think of a particular value, because I was raised the same way that she was."

Even if it's not necessarily a value, but an opinion, or belief system, thoughts, or a demographic, is it because she's female or more likely to blank?

"Um, let me think about this. I do think it could be, I do think that her being female does help. I also think that her... I'm very structured, as is my father. Carolyn, Carolyn's my sister's name, she's not as structured at all. So, I think that there's a certain level of organization, a need for structure, need to stick with the past, I don't know what value that is. I think that is helping it because, or... that organization kind of value, and you can construe that however you like, I

don't know what I'm looking for, what the word is. I think it also has a little bit to do with her peer group is probably a lot more open and so those values have been..."

So is it perhaps a willingness to embrace change?

"Yeah, but it's very radical change. I think it's very radical change. Because... yeah, I think it would be very radical change. I'm not just saying this, but I do like change. But yeah, it would have to be very, very radical changes, or something totally different because it's something not a lot of people have heard about, or have heard about that I know of, I could be totally wrong. It's radically new, radically different. I guess, in a sense, yeah, being able to embrace change or being able to embrace things that are radically different than what has happened in the past, more liberal."

So a liberalness, not necessarily political, but...

"Yeah, yeah. Absolutely."

need talent or passion for dance to benefit?

"No, I think you need to be in an environment where people aren't going to make fun of you, or an environment where you're not going to feel like people are making fun of you. People won't make fun of you if you're dancing at a frat party, but I don't like dancing there because I feel very, I don't know, self-conscious. So, I guess the environment and you would have to have a great deal of comfort level with the teacher and anybody else who was in the room, that they are all there to help, and that's kind of difficult to get to. So, I don't think it has anything to do with skill, I think it just has to do with you feeling comfortable in the situation."

Feeling confident or secure in dancing? Like feeling comfortable?

"Feeling comfortable, it doesn't have to be with dancing, but with the environment that you're in, with the people that you're around. Obviously, if you go do it out in the middle of Locust Walk, I would not do that. But if it was in a closed room that was very confined and it was maybe you or somebody else that I know really, really well, then I think you're a lot more open to trying things, and yeah."

do you think there's a resistance/hesitance towards dmt? You mentioned radical change before?

What do you think it's based on?

"That it won't work. People, you know, they've tried this and this and this and this and this and they've spend how many hours of their life trying to get this problem fixed and this could be just another one, another thing to try. And for some people, they'll go for it because it could be the thing that could make them better. But I also think that, you know, there hasn't been as much research, nor as much very well-published research on how this can be effective. You hear lots of things... the first thing, you know, you'll hear on the news, 'Oh, this new psychological study comes up with this,' or 'this new drug will do this.' But you don't hear, 'dance therapy will do the same thing as that,' and it's usually, depending on the doctor that you're visiting, it's not the first thing that they suggest. And people that don't have a knowledge of any kind of medical or anything like that, are going to take their doctor's view, I think as the first thing. It's not the first thing that, I think, a lot of doctor's would suggest, they'd usually go with the traditional treatment."

so it's a combination between scientific research and awareness and publicity?

"Yeah."

with more awareness and scientific research, the hesitance can be eliminated?

"It'd take a long time. Because even if a whole bunch of it comes out at once, in the next six months, people are still going to be thinking, 'ehhh.' There's history that's also affecting this. That these other methods have historically worked in the past, so why try something new? Or

that's the perception, they might be totally useless, but the perception is that these methods have been used, tried and true, by people.

so it needs to prove itself along a certain time spectrum?

"Along a certain time spectrum, yeah. And it needs to be consistently, consistently work. You know, if its like 'Oh, it works with 25% of cases,' people will be like, 'Well, screw that, I'll try something else.' But it needs to consistently work and maybe consistently work better than the other methods, and that needs to be very well known."

advantages/disadvantages to dmt compared to traditional?

"Mmm. That's a hard question. Well the biggest disadvantage I think, right off the bat, not to be negative, but... is that I don't think as many people are going to be willing to try it, so that's a big disadvantage of it. This next one I think could be an advantage or a disadvantage is that some people might be more comfortable and less intimidated by dance therapy, some people might be more, depends on the individual. So that going to an institution like the one that's in One Flies Over the Cuckoo's Nest, like that could be very intimidating to a person, whereas going and enjoying dance therapy, for them, could be less intimidating, or it could be totally different."

You mentioned it can be an advantage or disadvantage, in which cases would it be one or the other?

"Well, I would come back to the question where you're asking what kind of person it is. I think that with a liberal person, I think that they would be more interested in dance/movement therapy, whereas somebody who's not as liberal or not as willing to trying these radically different new things wouldn't be. There's another point that I just thought of on that front... Also, I think that people who had had previously negative experiences with traditional treatments would be a lot more intimidated by trying another traditional treatment than by trying this kind of treatment. So, you know, if you had bad experiences with a psychiatrist or psychologist over and over again, trying this treatment I think they would be a lot more... feel a lot more comfortable because it's not, it's just not another one where they're going to go in and have a bunch of, I don't know what they do, but have electrodes hooked up to them or something like that."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change what you think dmt is?

"No. I don't think it does, because I think some of these are connected. I think if you're emotionally secure you're going to be more cognitively secure. I think the lynch point here is that it has to do with the emotional or spiritual. I think those two are very closely linked to a lot of these other things. If you're secure and you feel good about that, these will follow. Yes, reading that I would not change my thoughts."

Does this change your understanding of what a session might involve or look like?

"No, and again it has to do with that lynch point. You're going to kind of work on the spiritual and emotional things and then these other things will end up coming with it. Not knowing anything about what one of these looks like, but from that definition, that would not change that, absolutely not."

Does this change whether you would recommend it to a family member/friend? Yourself?

"The definition? No. Nope, I'd be just as willing as I was at the beginning."

General perceptions or opinions, yourself or others?

“Being completely honest, until I met you, I didn’t even know it existed. I think it’s really cool. I think I would want to just go to a session for fun, just to participate and to watch. I just think it would be a really neat experience, not as a treatment but just as an experience to see what this is and how it works. Yeah, again, like I said before, it obviously, or not obviously, it wouldn’t be my first choice, but I wouldn’t say no to it. I think it would be great, yeah it would be really cool to experience if it wasn’t actually like using it for therapy, and then from there, like I said, as a therapy it would definitely be lower on my list, but I think it’s cool. I think it’s really neat.”

Do you think it could work as a therapy, for mental illness?

“Um... yeah. I think it could work. I’d be interested in success rates. I’d be very interested in hearing what the success rates are of it working. Like you’ve asked, how those success rates are based. If it’s like this tiny little change, that’s not really any help, but if it’s this massive change, yeah absolutely. I think it could work, I just would be interested in hearing what happened.”

SUBJECT 25

What is your course of study/occupation?

"Psychology major, international relations minor."

Would you ever seek medical treatment for a mental health illness? If you were to develop one?

"Do I have the illness? Yeah."

What kind of treatment would you seek?

"Depends on the disease, but I mean if I got severely depressed, I'd do electroshock, I'd do psychotherapy, everything."

Would you be willing to go to a psychologist/psychiatrist?

"Well, I mean I'm willing to take drugs and I'm willing to do talk therapy, so yeah, both."

Would you be willing to try acupuncture?

"Yeah, I would because, you know, my dad's a medical doctor and we were talking about something like acupuncture. He also does Tai Chi and stuff, and so Tai Chi's all about energies flowing around through your different points, and so yes, bull shit. But they do studies where they do... control studies where they do acupuncture, and then they do, I forget what the reading, what the measurement was, but then they did acupuncture at random places, just on the body as a control, and there is a slight but significant difference between them. So who knows why it works, but it works to some degree, so yeah."

Why did you call it bullshit?

"Why do I think it's bullshit? Well, of course, you know, we make some new instrument and we start reading energy flows in our body, then yeah, I'll be proven wrong, but until then. I mean what is Chi? I don't think it's a real thing."

Massage?

"Are you offering? Um, yeah. I mean again, it's all dependent on what it's for. I'm not going to do massage therapy for alcoholism or something, but I would love a massage, so I'm willing to try massage therapy."

Arts (D/MT) therapy?

"What... ah... to be honest, much less so, but uh, yeah. I'm unfamiliar with it, and it sounds silly off the bat, so."

Is the unfamiliarity and the silliness what makes you less willing?

"That is part of it, but also it requires you to take a much more active part in doing something you're not necessarily familiar with. So, taking a drug is relatively passive, seeing a therapist is relatively passive, getting a massage or acupuncture is passive, but dance is an active process. So I think that's part of it, too. I don't want to have to do anything to make myself better, I want you to make me better, that's the whole point. That kind of makes sense. I was reading some book on psychotherapy, what is it, it's the magical covenant is like what shamans and stuff do. Therapists are always worried about getting into magical covenant where you just place your faith in someone like a priest or something and then they utter magic words and cure you. And so, therapists don't think that's good, obviously, because it's not an active process and eventually it wears off. Yeah, I guess we all still just want to be fixed, we don't want to have to work at it."

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

"They definitely can be successful. You know, I'm a psych major so I do a lot of readings on efficacy outcomes and what the method of change is in terms of psychotherapy. So, I mean it's hard because like traditional psychoanalysis, the supposed method of change is you bring

something into consciousness, out of unconsciousness, and that brings about health, and it works, too. But there are examples where it doesn't. So, the example I was reading in one of my textbooks was this kid was an arsonist. He went through psychoanalysis and it was because he was like repressing something sexual and he figured it out and, 'Oh, it's true, ok,' and then he still burned some more houses down. So, you know, just knowing something doesn't necessarily treat it. So there are theories that it's all about empathy or the bond with the therapist. No one actually knows why psychoanalysis works. Drugs work because they change things in your brain and that sometimes works. What I think, I don't know, I think that human beings are designed to share information and worldviews with other human beings because it's just so valuable to be able to share information and learn from other human beings. That we are built in such a way that that is one of the fundamental things that we do. So if someone has a fucked up worldview or just like they think something is incorrect, then as humans, one of our fundamental things is that we can let what other people think influence us. So however that works, I think that's how I think it works. And drugs are just, drugs work because drugs work, sometimes."

Would you be willing to recommend mental health therapy to a patient?

"Yeah, especially if I'm a therapist."

To a family member or friend?

"Uh-huh."

Would you be willing to recommend alternative therapy, dmt, acupuncture to patient, friend, family?

"Not without more knowledge of what that entails. So right now, I'm not, 'You seem depressed, you should go to dance therapy.'"

What do you think dance/movement therapy is?

"Ooh, ooh. Um, the way I imagine it is you get in a room and you do basically spontaneous interpretive dance. So, that's what I think it is. So you're expressing emotions through dance, that's what I think it is."

What do you think it may involve?

What would a dance/movement therapy session look like?

"I imagine a hardwood floor room. I imagine mirrors on the walls with a ballet barre around. I imagine bright light, but it's outside and the curtains are down and it's shady inside. And I go in, and a woman with large earrings in a leotard tells me, 'Express yourself,' and she has an Eastern European accent and I ask, 'What do you mean?' and she goes, 'Express yourself,' and she turns on a boom box on the floor, and strange music starts. I express myself, and I move. I'm beautiful. I'm twirling and dancing. It feels so good, it feels so good! That's what I think an average session is like."

What do you think it is meant to accomplish?

"Probably some form of like catharsis to get, purge emotions or else to get in touch with anger or something, or it can be served as a probably as a means of interpretation. You can let someone read, 'Oh, I see a lot of anger in your dance. Tell me, why do you think that?' As a means of expression to read something or to purge emotions."

effects chemical, emotional, spiritual?

"Physical, probably very much. I think, you know, I mean exercise makes people feel better and movement. Yeah, I think a lot of it's probably the physical activity, getting in touch with your body is very good. Emotionally, it's probably a lot of release. Probably emotional and physical, in that sense. In the body, not in chemicals."

Do you think dmt can be successful?

What do you think this success is dependent on?

“Yeah, I think probably for depression it actually would be very good because you’re doing something new. It’s probably fun, as long as it’s happy music or the Electric Slide. The Electric Slide’s fun... I think the success is probably largely dependent on the patient’s initial expectations. I don’t know, I don’t know much about dance therapy, so I couldn’t really tell you much what it’s dependent on.”

Would it be more or less successful for certain people?

“I mean definitely it’s going to depend on different mental illnesses. You know, schizophrenics aren’t going to probably be able to gain that much from it. As far as demographics go, probably a person’s ability to be able to do whatever dance therapy requires, somewhat, physical ability. Yeah, otherwise, I think it’s probably, nothing comes to mind.”

passion or talent for dance to benefit?

“I think the more... as far as talent corresponds to some degree of being in touch with whatever emotional drives that come out in dance therapy. So, the ability to translate emotion into movement. If that’s considered talent, I think that might also correlate to success. But, I mean, then again, maybe the less someone is able to do that, the more they can improve from dance therapy. There’s probably some relation to that, but what the direct outcome is, I don’t know. I don’t know.”

hesitance or resistance to dmt, if so, based on what?

“I think there probably is. Well, one, people don’t like to try new things. People do want something serious, you know. People want a drug or a doctor, someone with a degree. And then also, there’s the fact that dance therapy, in my mind and probably in many other people’s minds, is way too close to all the bullshit out there like crystal therapy or like hippie-dippy new age stuff. So, it probably gets a negative effect from just there being so many other silly things out there, that it’s hard to prove that it works. And plus, people are unfamiliar with it.”

What do you mean, it’s too close to that? Do you think it’s distinct from that?

“Well, I mean. I don’t know. I don’t know enough about it. I think, you know I mean especially when it comes to mental health and things, there really are so many bullshit cures and, you know, getting in touch with different things, and if you don’t know about dance, it certainly can be something that you don’t take seriously. I would have to know more about it, but yeah, I think it gets lumped together with it. Whether it deserves to be lumped there, I don’t know. I don’t know.”

What do you mean when you say people would be looking for something serious?

“Well, it’s a little bit of what I was talking about before. You can get common sense advice from a person, like a friend can say, ‘Oh, you should cut salt out of your diet,’ but then if you go to a doctor and he says you should cut salt out of your diet, you take it much more seriously.”

So it’s like legitimization through certification, training...

Yeah, your anthropological roots are showing. Yeah, I mean society puts value, says some people can help you for some things and some people can’t. A lot of that is legitimate. Like doctors can help you because they know what’s wrong with you and they studied for a long time and they know which bone goes where, so a lot of it’s legitimate. But then also, miss anthropology, some of it is societal creation alone... But also, you know, it’s like who ends up going into dance therapy? Could they not get into med school or are they dancers that take it too seriously? There’s a set route that let’s smart people who study a lot go to med school, but what the route to get into dance therapy is, who knows?”

Do you think increased awareness would help decrease hesitation?

“It depends on if it works, if it doesn’t work and you advertise that, I don’t think it’ll gain more adherents.”

What can prove its efficacy?

“Uh, depends on what it’s used for. If your claim is that dance therapy helps depression and people report being less depressed after dance therapy. I mean the common efficacies, I mean efficacy is hard to tell for therapies. It depends on what you’re trying to accomplish. Is dance therapy used for supposedly healthy people to make them more emotional or get them in touch with something? Is it used to cure disease? It depends on what it’s used for. Also if you want to improve the awareness and the acceptance of it, it would also maybe depend on making it work in a certain setting people are familiar with. So if you’re using dance therapy for seniors in a nursing home or something, and it’s not just happy, fun music hour... I don’t know, putting it in... I mean right now, dance therapy does that go through a medical clinic, does that go through a therapist’s office, does that go through a college? There’s no real setting for it, it just seems kind of nebulous.”

So putting it in a medical space? Psychological space?

“Well, not just a medical space. Putting it in a space where people would expect it to be and could then come to an understanding of it. But right now, it’s like where do I go for dance therapy? Do I go to the dance therapy place? So, I mean, I don’t know, if it works it might become part of a medical situation, yeah.”

advantages/disadvantages of dmt v. traditional?

“Just depends on if it works or not. Any particular advantages or disadvantages? Um, I suppose an advantage could be there might be less stigma to going to something called like dance therapy, although if you want that, you might want to remove the word therapy out of it.”

Why do you think there would be less stigma?

“Because people... because it’s not associated with mental illness. Healthy people can go to a therapist, but if you tell someone you go to a psychotherapist, they’re like, ‘Shit, what the fuck’s wrong with you?’ But if you go, ‘Oh, I went to dance therapy,’ ‘Oh, did it make you feel better?’ It’s kind of the double-edged sword of people taking it seriously, the stigma versus the beneficial, whatever.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does that change your perception of what D/MT is?

“Yeah, um, I would... the emotional part and the physical part, I guessed it would have something to do with that. See, it makes me call bullshit a little bit on the order they placed these things. So, it’s emotional, social, cognitive, then physical and the ones I think it actually applies to are the end... ‘Oh, we can slip in the stuff it doesn’t actually do in between the things it definitely does do.’ So, you would have to tell me and explain to me how it makes things social or cognitive, so yeah. But as far as changing my viewpoint, uhh... I don’t know. I think, well, just as a psych major, the fact that it uses the term integration makes me think it’s probably part of a particular school of psychological thought, so I don’t know.”

Do you have a specific one in mind?

“The word integration is very specific. If I had to guess, I would say some aspect of the humanist movement or something. But just integration is a strange term, so it just makes me think that it’s probably part of a movement, I don’t know which one, though. Yeah so, I don’t know. When you try and... I’m a psych major, so when you put something in a certain school or something, it inherently becomes something you can challenge more easily, so just as a psych major, I’m a little more skeptical of it.”

Does this change your understanding of what a session might involve or look like?

Does this change whether you would recommend it to a mental health patient/family member/friend?

“The definition itself, no, I mean until I know more about what the process is and how it works, I’m not more or less likely to.”

Does this change whether you yourself would be willing to try it?

“I don’t know, I’m an asshole and I like to prove people wrong, so the fact that I’m a little bit more skeptical makes me more likely to try it. Plus, I love to dance, I love to dance.”

general comments on perceptions, opinions, your own or others?

“My... the way I would say anything... I would tell the ADTA especially, worry less about the perception, and more about, if say you want to prove dance therapy works, then design a study that’s very valid and show that it works.

What would that involve?

“Well, you set it up. What is dance therapy applied for? If it’s supposed to, well...

I mean in terms of nature. Could it be a narrative based study, does it have to be specifically scientific/statistical?

“Yeah, if you’re doing it to try to improve a psychological disorder, then yes, you use statistical based. If you’re saying that it can just improve someone’s life, even if they don’t have a defined mental disorder, then I would read it and... but if it’s someone ‘Dancing made me happier,’ then I don’t really care. But if they learned something or if they changed socially or cognitively and they can tell me why and how from dance, then I’d listen to a... There’s no such thing as a narrative study. That’s not a real thing. That’s a thing anthropologists think is a real thing, but it’s not. What is a narrative study?”

A lot of people have said that knowing someone else’s success story would help.

“Well it depends, it depends if I relate to them. If it’s some doofus who learned something about his doofus self from doing doofus dance therapy, then I don’t care, because I’m not a doofus, hopefully. I mean if some intelligent person gained some profound insight or improvement in their life from dance therapy, then I would take a look at it. Depends on the person, depends on what they changed.”

SUBJECT 26

What is your course of study/occupation?

“Right now I’m just a student and I’m taking an anthropology major with a religion minor. I worked in health care, everything from billing and coding and working in specialty offices seeing patients with the doctors, things like that. So pretty much everything that you can do in healthcare without having a degree.”

Would you ever seek medical treatment for a mental health illness?

“Yes.”

What kind of treatment would you seek?

“Umm, hmm. I guess to a point, like almost anything that was recommended by two or more doctors, you know. I mean if they said you need electroshock, you know, I’m going to question. If they just say, you know, you need medication or you need talk therapy or whatever, I would be willing to pretty much do any of that type of thing.”

Would you be willing to go to a psychologist/psychiatrist?

“Yeah.”

Would you be willing to try acupuncture?

“Yes.”

Massage?

“For a mental illness? Um... I’d probably be willing to try it, I don’t know about the success of something like that, how I would feel about that. But, I think I’d probably be willing to try it. I mean it’s something that’s not going to hurt. It could only help a little bit if anything, so yeah.”

Arts (D/MT) therapy?

“Yes, actually.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“Um, I think they can be successful, depending on what the issues are. I think part of it, you know, is the patient’s willingness to participate in the therapy. You know, but obviously, there are some things that really drugs have a huge impact on. So whether or not the patient’s quote unquote participating, if they’re taking the drugs, there’s going to be an effect. So, you know, I think it’s half and half, kind of, depending on what the issue is.”

Would you be willing to recommend mental health therapy to a family member?

“Mhmm, yes.”

To a friend?

“Yes.”

Willing to recommend dmt to a family member?

“It would be a hard sell, but I would recommend it if it had been recommended, you know, by a specialist or whatever. I definitely think that those types of therapies can be very therapeutic in different ways.”

Why do you think it’d be a hard sell?

“I mean I’ve worked in healthcare, I’ve actually worked in behavioral health stuff, too. So, you know, I’ve talked to family members, I’ve done things like that. People that aren’t that involved with it though, sometimes, some of those therapies sound like ‘You want them to go brush horses? What is that going to do for them?’ and they don’t really understand the way that it works and the way that it can really affect people. So, you know, it would, like I said, to outsiders I think it would be a hard sell. But I definitely think, you know depending on what the

situation is, if somebody feels that this might be helpful, again, what's the worst that's going to happen? They go and nothing happens? You know, it's not going to be detrimental. So, you know, putting it that way, maybe you could get it across that they should at least try it."

What do you think dance/movement therapy is?

"Um, so far as I'm aware, those type of therapies, you know, where you're going and physically participating in some activities, are usually more just self-awareness. You know, especially, I don't want to just bring it down to like body issues, but if it is, that's a good way to learn about your body things that you may not have known, even about yourself. You know, and it can also help I think, in physical contact with other people, depending on, again, what the problems are, what the issues are. I think, you know, just having other people in close proximity or having other people touch you can be problematic for people. I think that a therapy like that can kind of, in an acceptable way, get you into a group of people and get you more comfortable with people and maybe just personal space issues and things like that."

What do you think it may involve?

What would a dance/movement therapy session look like?

"I have no idea. I don't know. I'm assuming that there's clearly someone who's in charge. And there's probably routine activities that kind of build up to, like I said, those personal space issues or body image issues about what you think you're capable of and what you're actually capable of and things like that. And also, I think just taking a good look at really starting to know yourself a little bit better. But again, I would think would be a gradual process where there's just definite steps involved, 'Oh, we're going to do this this day and we're going to do this that day,' and it just builds upon itself."

What do you think it is meant to accomplish?

"Pretty much the same stuff. You know, like I said, maybe body issues, personal space issues. Just self-awareness in a completely different form than I think maybe a lot of people have ever contemplated about themselves. I mean I've never thought about myself in terms of that type of thing. So, if I were to participate in something like that, I'm sure I would learn something completely new that I had never really considered before because it's a different approach than I would normally take if I were thinking about my own issues."

effects chemical, emotional, spiritual?

"Um, primarily? I would think there would be a lot of emotional components to it. Yeah like I said, just because a lot of people, if they're not used to having physical contact or they're not used to doing physical things with their body. If they've been shut in their house for months on end, and don't really do much or get out much or see a lot of people. I would think that it could be just a big emotional change for people. You know, physically, I don't think you're going to... you're not going to become a professional dancer by doing it, but you may learn a few things about yourself and your body, but I don't think there's going to be a huge physical change. I would think it would be mostly an emotional content, just through the physicality of what you would be doing."

Very social to, from the way you're talking about it?

"Yeah."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"Um, especially in something like this, I would think a lot of it is going to depend on the participation, the willingness to participate. I mean I do think it could probably be successful, or

at least contribute with other therapies, you know, to some success in whatever their issues are. I think something like this particularly would really depend on the person's willingness to participate. You know, if you can follow simple instructions and you're willing to go ahead and give it a shot, then you may get something out of it. But I think somebody who's very reluctant and is just not going to really mentally participate, may not get anything out of it."

Would it be more or less successful for certain people?

"Hmm. Um... I would think that there are certain things that would lend itself more to that type of therapy. You know, like I said, there's all these body issues, there's space issues, personal space issues, perhaps even... I'm sure that children with autism and things like that may really get some benefit out of it. Obviously total 'You need drugs and nothing else is going to help you,' those types of issues probably won't get much out of it. I would think like personality disorders, like I said autism or Asperger's or whatever, could probably, especially for kids, really get a lot out of it. So I think that would be a lot more successful. And of course kids are more willing to pretty much try anything. Something like that that's active and involved, and maybe you know, they make it fun and there's other children involved, I think they would probably have a better success rate.

Then say adults?

"Yeah, I think adults would tend to be, in general, just a little bit more reserved about it and it would probably take them longer to really, truly participate than it would for children."

passion or talent for dance to benefit?

"I don't think so, I think it would help. Clearly, if it's something that you're interested in anyway, you'd be more willing to really participate. I guess if it's not something that you've ever really done, or you feel like you're not good at it, or whatever, it would take some time. But again, as long as someone's willing to, I think they would still get something out of it, but I think they would just be less emphatic and less excited about doing it. Someone with a natural affinity for it is clearly going to jump right in."

Do you think there's a resistance to dmt? Where do you think it comes from?

"Mmhmm. Yeah, I do, because I've seen it. I mean I've definitely... I think it's just people's perception that if it's not quote unquote medical or psychological. If it's not drugs and you're not talking to a psychiatrist, people just assume that it's some sort of alternative, whacko, new-age thing. When really, I mean there's occupational therapy for all kinds of different medical and psychological issues and these things are proven to be successful, or we wouldn't keep doing them and paying for them. So I think people just, they're just not aware of what's out there and they're not aware of what these type of therapies are trying to do, that they're taking this other alternative approach to get people involved. So, I think it's just a perception problem and that they just don't really know the facts about them."

What do you think would help diminish or eliminate that resistance?

"This is going to sound horrible, but it's just because I've been in the healthcare industry. Honestly, if insurances would start really paying for these things and really saying that, 'This is part of your plan and it's perfectly acceptable and they've been proven to work and these people are, they're not just new-age whackos, they're people that have had training and they've gone to school and they know what they're doing.' I think that having that type of, I don't know what the word is, but I guess just kind of having backup [*institutional support*] yeah. Honestly, healthcare people drive me nuts, because I've been there too long, but, if it was something that they would be willing to get on board with, I think it would be much better. If they would just stop saying, 'Oh, we'll pay for your prescriptions and we'll pay for your psychiatrist, but we

won't do anything else for you,' and minimizing just those other approaches. You asked about acupuncture earlier and you know, come on, it's what 2% of insurance companies probably pay for acupuncture or chiropractor or something like that. I think if they were on board, it would really go a long way towards people going, 'Oh, it's legitimate,' you know'?"

what interactions with colleagues or patients have you had about dmt?

"I haven't had any experience with specifically dance therapy, but there has been, there was the whole horse thing which the family members were like, 'Really? Like you're kidding me,' and you know, they just don't understand the type of skills and the type of self-esteem that it builds and that type of thing. And again, it was with children, so I think people are more willing to accept this type of therapy with children. Like the family members would be more willing to say, 'Oh, you want my eight year old to go learn some responsibility by living at this home and they have horses and they have responsibilities and they have whatever.' I think they're more willing to say okay, at that age. If I had said, 'Oh, I want your forty-five year old spouse to go,' they would be like, 'Well that's going to be a complete waste of time.' I think there's just a perception again where people just... Sometimes they're just not aware of what the goal is, too. I mean I think it was easier to say with children that they want to build certain skills. With an adult, they say, 'Well, you can't change your spots. You can't teach an old dog new tricks and blah blah blah' And a lot of people just think it's kind of a waste of time. It's difficult to sometimes get across to people, like I said, what those goals are. And I think that might also go a long way in terms of getting them to be more accepting."

So increasing awareness and familiarity with these alternative forms of therapy?

"Mhmm, yeah. And not just with the processes, but what the goals are, really. What you're trying to get out of it for people. Because again, if you just say things like, 'Oh, it's self-esteem, or it's responsibility, or it's whatever,' people kind of think, "Oh, well don't we all learn that as we're growing up anyway?" But you have to put it in a context with whatever the specific issue is with the people involved. And I think that has a long way to go towards getting them to be accepting. And I think if maybe providers kind of explained that better, instead of saying, 'Oh, just give us your kid for eight weeks and this is what we're going to do with them.' Instead of the brochure version, actually sit down and explain what's going on better, I think would be more helpful."

advantages/disadvantages of dmt compared to traditional?

"I think one of the advantages, honestly, is that it is less threatening for patients.

Just because it's more familiar territory?

"Yeah, and it's not so clinical seeming. It's not one on one and, 'Okay, open yourself up and reveal everything that's going on with you.' It's, 'Oh, let's come do this.' It's interactive. 'We're going to do an activity. You're not going to be the focus of attention. You're not going to have the spotlight on you, sweating it out, being asked all these questions.' It's just more... I think it's just less threatening and maybe easier to start to get people involved in different ways that they may not be aware that they're even getting involved, but as they start to do things and they're active, it may just help people open up a little bit and help people be more comfortable with even other forms of therapy that they may be going through, just because it is a lot less intense and directed at that person, which is part of that drawback of why people think it's not as successful or as effective, or why they think it's kind of alternative and out there, because it's not so directed. So, I think that aspect of it, while people may not be onboard with it because of that, I think it's actually maybe a little more successful because of that because the patients themselves will feel more comfortable getting involved with something that's not so clinical."

disadvantages?

“I’m not exactly sure about the timeframe of that type of program. Depending on whatever issues are going on with people, you may or may not have six months, eight months, a year to take that kind of approach to work on things. But I think used in conjunction with other therapies, I think it may help, like I said, it may help them in other areas of therapies to do this in conjunction with it and may actually, in that instance then, kind of speed up the whole process for them and maybe help them in a different way.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does that change your perception of what dmt is?

“No, not really. No, it kind of hit all those issues anyway. I like the physical integration part, honestly. Like I said, I think it just makes people more self-aware. People tend to be a little bit outside of themselves a lot of the time and focus on so many outside things, so that’s what I think one of the benefits would be. So, no, that doesn’t really change my opinion.”

Does this change your understanding of what a session might involve or look like?

“I don’t think so, no.”

Does this change whether you would recommend it to a family member/friend? Yourself?

“No, I would still recommend it.”

SUBJECT 27

What is your course of study/occupation?

“Right now, well I used to be a nurse. I work with the nursing school, students and faculty, but I’m a librarian also. I do a lot of information, specialized information, assistance, lots of background research, and stuff like that. That’s what I’m doing now. My course of study has been long years of part time work in medical anthropology. My research interests turns out to be caregivers. I’ve been a caregiver myself, but I’m focusing on the type of care giving I didn’t do, which is long-term, long life, almost full life for some people, care giving of adults who have some form of intellectual disability who live at home. So whether it’s parents, or siblings, or other relatives, I would like to do a life story and kind of ethnographic, so that’s my proposal.

Would you ever seek medical treatment for a mental health illness?

“I actually have at one point, and that was when my mother died. I went to a psychiatrist because I wasn’t eating right and I wasn’t sleeping right and my biggest concern was lack of sleep and anxiety and reliving some of the horrible ICU days at the end of her life. So I finally, after six weeks, I just said, ‘I can’t go on like this, I have to get help.’ At the time I was living out of state, I was living in Connecticut. I was actually helping a psychiatrist with a book he was writing. I didn’t want to ask him to see me, but I asked for a recommendation. He recommended this woman, like instantaneously because of the types of symptoms I was having. Some of it was like, this is going to sound kind of whacky to you maybe, I was having extra-sensory perceptions about things that were going on. I can’t explain it, it would take too long, but I was having all sorts of weird events. As soon as I told him that, he told me about this woman, and she’s a psychiatrist. So, when I went to see her I was thinking, ‘Oh, she’ll give me something,’ because I don’t take medication usually, but I was desperate I was just exhausted and wrung out. But interestingly enough, even when I heard her voice on the phone to make an appointment, I slept well that night. I never got any medication from her and she said, ‘Well, I’d be happy to give you something light, and then if you need something heavy...’ and I never needed it. I saw her for about eight months, and she helped me do two things. She helped me get through the grieving. She helped me identify recovery from the grieving, which I really wasn’t aware of how that happened. She also helped me get through a job interview, which brought me to the job I’m now in. Because my mother died here at HUP, and the thought being in Philadelphia at all, especially here was just not... Weirdly six or eight weeks after my mother died, someone called me, they didn’t know my mother had died or anything and certainly not down here, and said, ‘Oh, there’s a job down here and you’d be perfect for this,’ it was someone I had worked with before. So, she helped me with that too, so I had a very positive experience with her.”

What kind of treatment would you seek? You mentioned that you were hesitant about pharmaceuticals?

“Oh yeah, I just think... I mean I’m a nurse and I work in the medical field and believe me I’m very well aware. I’m much more into the alternative side of therapy, even though I work in a heavy duty, pharmaceutically rich area, an interventionally rich area. I think if I felt I had a problem that I wasn’t able to find my own solution for, then I would seek medical care, yes.”

Would you be willing to go to a psychologist/psychiatrist?

“Yes.”

Would you be willing to try acupuncture?

“I’ve had acupuncture. Not necessarily for mental health. Well, it’s interesting, I’m friends with a physician who does acupuncture, and I didn’t go to him, he’s just a friend. I went to a colleague of his, she has a background in biology and she’s worked in the pharmaceutical industry, but now she does acupuncture. It cleared up a knee problem, but she did explain to me that sometimes you do get a reaction, she told me this after the fact, which was interesting. I had this done in May, and I started to laugh for like twenty minutes. I couldn’t stop laughing when she first did the needles and she kept trying to talk to me, and I couldn’t... I mean tears were running out of my eyes, I don’t even know why. And she said to me later, ‘You know, some people get depressed, you got giddy.’ And it was kind of funny, it was like I released something. And it felt good, and maybe crying feels good, too, if you haven’t cried or something and you need to. Yeah, and the acupuncture was helpful to me physically, which may have helped me emotionally, I don’t know. It’s very hard to tell because it’s subtle. But yes, I would definitely go back for acupuncture.”

Massage?

“I would consider it, I’ve never had massage therapy. I’m a little like... it seems a little intimate. So, that’s the only, I’d just get over that. In and of itself, I think it could be great. And I know someone who’s a professor who swears by it... for her mental health.”

Arts (D/MT) therapy?

“I think it’s wonderful, I just personally have not done it. When I was a kid I took ballet lessons, but that doesn’t count. Would I consider it? Yeah, I would definitely consider it if I could work it into my schedule. But, I have a dog and a commute and a full time job and my proposal to deal with. So right now it’s kind of a tough call, but I would not dismiss that as being weird or anything. In fact, I have a friend who has breast cancer and she does all sorts of dance therapy. She’s in Baltimore, but she does like belly-dancing, modern dance, jazz, and she even teaches it, I guess at some support groups. She’s not a professional dancer, but she’s done it as more... she’s like into acting and stage performance. That’s not me, but that’s her and that’s what she does. It helps her.”

Do you think traditional forms of therapy can be successful?

What do you think their success is dependent on?

“Well, my feeling, here’s my feeling now. I know that there’s a stereotype now of psychiatry in a lot of alternative circles of simply pushing pills. I think that, I think it depends on the individual situation, you know, whether pills are appropriate or not. I do know, however, from friends who’ve had children with what has been identified by a teacher as some kind of attention problem, that some people will immediately prescribe and others will get the bigger picture first, and then make a decision. I guess my feeling is I would hope that they would not just immediately jump to a pharmaceutical, that they might consider other forms of therapy. I’m not even sure if pharmaceuticals really are the most effective thing, I think sometimes dietary changes, and even, I’ve heard fish oil supplements and things like that help, although I don’t have any children so I haven’t had the experience of dealing with that, but I have read those kinds of things.”

What about the success of therapy?

“I think that’s dependent on the relationship between the therapist and the person seeking care. I will give you one... my father died about nine years ago, and without going into a lot of detail, I had a lot of problems with my brother in settling my dad’s estate and it was very stressful. I actually went to someone here, once, a psychologist. He was kind of flippant and I just felt, I didn’t go back because I didn’t feel I could have a therapeutic relationship with this person. I

kind of got through it on my own with the help of friends, which is not actually therapy but it is therapeutic. It finally all straightened out, but it was a very stressful stretch of time, but I just wasn't impressed with this particular person. That doesn't mean that I throw everybody out the window, all the babies with the bathwater, but that was my impression."

Would you be willing to recommend mental health therapy to a patient? family and friends?

"I would, yes. In fact I've recommended it to people I know, who are not patients of course, they're friends. I've actually recommended it, I recommended it to my brother, who I don't think would ever go, and who, by the way, was embarrassed that I went to the psychiatrist after our mother died, and told my cousins that I was crazy and it was proof because I went to a psychiatrist, which I found out years later, but that was pretty horrible. I did recommend more recently a friend, who I can't really be friends with anymore because she really has some behaviors that she... I'm not saying she needs medication necessarily, that wouldn't be my call, but definitely needs professional help. She herself is a mental health professional, which is interesting, but does not seek it herself."

Would you be willing to recommend alternative therapies to family members and friends?

"Absolutely, but people don't want to hear it sometimes. For example, I'll give you one more example, a family member. I have a cousin who's a physician, and she was, at the time, with the health department in New York City, during 9-11. I thought she was dead that morning because I knew she took the commuter train from New Jersey into the Trade Center, and then up and the health department is like four blocks from there, but anyway, nobody heard from her all morning and I was just sick. What happened is she got an earlier train, and then she came up and... She saw bodies hitting the ground when the people jumped out. She was right there and it was just horrifying. And her husband, unbeknownst to her, was like two blocks away and saw the second plane enter the second tower. So, both of them had, what I think is like a post-traumatic stress disorder from it. But I kept saying to her, 'You've gotta go for help.' They were offering mental health help for anybody in the vicinity, and she just wouldn't go. And she never has. And I would highly recommend, I tried... she took yoga for a while, and then she stopped, and I kept trying to get her to go back because I thought it was helping her. But she wasn't doing it for that, she said, you know. But I don't know, I think there's a lot of stress there on both their parts. In their behaviors, it's just not gone away. I just think, you know, if I can push something into the conversation, even acupuncture or something that's more physical, in the sense of someone doing something to you. But I just can't see her doing it. She's just very traditional medicine, which is unfortunate. I think she could benefit from a spectrum of things that would be available to her."

What do you think dance/movement therapy is?

"Well, this is my feeling about it, that it pulls together the body-mind-spirit kind of, expression, exercise, and, I don't know like a sort of meditative, kind of. I don't know if that's exactly the way to say it. But I think it alters your, or lifts your spirits, if that makes any sense. That's what I think."

What do you think it may involve?

What would a dance/movement therapy session look like?

"You mean with an individual or with a group? Either. Hmm, well I would think, and I don't know, but I would think that if it's a professional, therapeutic intervention, that I would assume that the person giving the session, leading the session, would be aware of the people's, I don't know if diagnosis is the right word, or their needs when they came in as individuals and maybe

would tailor some of it to that. I don't know if there's like a core set of moves that would be therapeutic for anybody and then they enhance it from there. I don't really know since I haven't had that experience, but that's my vision of it anyway. I don't know how correct that is, but."

What do you think it is meant to accomplish?

"Well, I think integration, body-mind-spirit integration. Lifting the mood, what I said, and just um what many exercises do, any physical exercise, to sort of, I don't know, endorphins are released, or what it is that physically, would make you feel better physically, and mentally, and maybe spiritually in a way, whatever that means to people."

effects chemical, emotional, or spiritual?

"I think it's a combination. I think it's an integration, in a sense. Similar to what I think yoga does for people. If you do a meditative yoga and then you do different Crias. I went to yoga and this particular instructor was great, she combined everything. If you went in and complained about your knee, she addressed it somehow in the moves that we did and we did these meditations, and it just seemed to all bring everything together and you felt better."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think yes, absolutely. What do I think it's dependent on? Mostly, I mean several things. Acceptance in the community I think. Acceptance by... I think this is what a lot of alternative therapists run into is like, who pays for it? In the case of people, say older people who are on Medicare, is Medicare going to pay for that? Are they going to pay for a yoga class? Are they going to pay for acupuncture? Are they going to pay for dance? Maybe if it's integrated into like a physical therapy area, than that's not such a difficult thing. But I think individually, I think that's a barrier, is that if it's not integrated into something that's covered by health insurance, it could become an issue. I also think another barrier is attitude. Would a physician be likely to suggest that if they felt the person was depressed and maybe had some form of, I don't know, arthritis or something, fibromyalgia, things that people really suffer, chronically, from? I think that word of mouth is helpful because if you've had the experience, then you can say, 'Look, I took, I did this and this is what it did for me. Even if you don't believe it, it's worth a shot.'"

Would it be more or less successful for certain people?

"Um, demographics, you mean ages and various other things? I think it could be highly successful if it's tailored for people's physical ability in an elderly population, which probably is not as often where you find it, I guess, I mean I don't really know. Children I think it would be very successful, because kids are up and moving more often, they're more likely to move anyway. I think it could work for any age group if it's the right attitude. I think it's the acceptance thing that's the issue. I think, my mother had very bad rheumatoid arthritis for years, and I know I could never make her do anything when I would be there, and yet her physical therapist would come in and she would say, 'Okay, today you're going to do x, y, and z.' Before the therapist would get there, she would say, 'Oh when Beverley comes, I'm not doing any of those. I'm sore, it's going to be raining, I'm achy.' As soon as Beverley walked in, she would do it. And I think she knew it made her feel a little bit better, it never totally got rid of it. But I think people with chronic illnesses, I think if they have the experience of feeling a little better, and maybe incrementally better over time, would really get a lot out of that kind of... As long as it's tailored to whatever their starting ability is, and then you can always increase it. I think one of the drawbacks to physical therapy is, especially the way it was when my parents were doing badly, that if you didn't keep up with some regiment that was sort of like one size fits all, then

they dropped you and you never got anymore therapy. I think that's horrible, but that was how they were doing it then. I just don't know how it is now."

Particular values?

"Yeah, I think values are, I think you're always going to have a certain number of people who are very much, who very much believe in traditional medicine and pharmacology and the doctor's orders versus, but even if it is the doctor's orders, I don't know that... if they're not in the mindset of 'these other types of activities could be therapeutic,' I think that's the value system. I think if they don't value that, or they don't know that maybe they used to square dance and they felt better, and now they can't do it so maybe this is a new kind of dance they can substitute, it's more gentle or something. I really think it has to do partly with experience, and partly with culture values of particular communities maybe, or age groups.

Do you have specific inclinations as to which?

Well, for example where I'm going to do my research, I grew up in northeastern Pennsylvania and I do know that there are... it's interesting because there are certain ethnic groups where dance is a big thing. Like in the Polish community, there's a lot of Polka and people do it well into their nineties if they can. And yet there are other groups, like my ethnic group from Whales, I mean they're really not into dance and it would seem weird, or at least I'm thinking of my parent's age cohort. They would probably think it was a little weird. I'm not saying they wouldn't do it or wouldn't try it. I mean my mother went for acupuncture, unbeknownst to me, and it wasn't even the kind she should have had because were hardly any choices up there, but I give her credit, she did it. Anyway, so you never know. I wouldn't have expected her to do that either, so, you know."

particular passion or talent for dance to benefit?

"I think it probably helps, but. It probably gives you more confidence to get out there. But no, I don't think so. I think if someone's there to help you do it right, I mean move in a way that's therapeutic, I think that would be helpful. I think if you have confidence in the person who's directing the group, who's doing the therapeutic evaluation and prescription, I think that's useful and I think eventually, if you're not judged, you're going to feel more comfortable. I'm just thinking of myself feeling, 'Oh boy, I don't know if I'll look stupid doing this.' So, I think if you can get past that, it's probably good."

You mentioned earlier that there's resistance, where do you think that comes from and have you had interactions about dmt?

"Well, again, back to this friend I mentioned earlier who's a mental health person. First of all, it's interesting, she doesn't really believe in all the pharmacy either. She's kind of, I guess you would call her a Freudian, kind of, a neo-Freudian or something. Which is fine, I really don't see anything wrong with that, but I think sometimes you really have to address the physical aspects of a mental health issue. I don't think she is into that. I mean using her as an example, I think that would be a hard sell with a person like her because she's very, she thinks it's all in the head, and it's not all in the head. I don't think it's all in the head, anyway. I think there is a physical component, and getting at that, means you have to do certain types of things. And she did go to an exercise class, but it didn't seem to... it was like an aerobics class. For her, she's like a person who's always very tight and you know, upset about everything, and she probably would do better with dance, I would think. It would be sort of more relaxing or more stress-relieving than stress-producing. Does that make sense? She's very, I don't even know if traditional is the right word, I don't know what it is exactly, but very strict about what she believes in and doesn't believe in. And people like her, I think are, and there are other people like her in the world. You

know, people think it's hogwash. 'Well, it's just a placebo effect if it worked.' 'Well, so could a pill be a placebo effect, but it could also have side effects, while you're having a placebo effect from a pill.' So, I think those people are tough. I think studies might convince people like her, would they convince people from the community? Do they care about studies? It's hard to tell, some people will. I know I have relatives, if it shows up in the New York Times health section, they might pay attention to it then, but if it's not there..."

Where do you think the resistance comes from?

"It could be family values. They could be based in old cultural values that haven't shifted over time. Fear. I think some people have such, they want to hold up certain kinds of therapeutic regiments as always, never failing and not trust anything that's not those things. They don't really evaluate those things they put all their trust in, so they really give good, they won't evaluate the new things either. I don't know if I'm making sense. It's almost as if they've set these things on a pedestal and nothing else can hold a candle to it. But then what happens when the research comes out and says, 'Wait, we've been telling you to do this for fifty years, and now we found out it causes cancer,' so now what do you think about that? I don't know, I just think sometimes people really, almost need to be, have their idols shattered in order to look somewhere else, I don't know. I just see a lot of rigidity in some people, in just even looking at a spectrum, rather than at just like three things you can do when you have this problem, they don't look at the rest of the spectrum at all."

advantages/disadvantages to dmt compared to traditional?

"Well, I think for one thing, if it's done in groups, am I right about that? It can be. Well for people who are in groups settings, and I'm thinking like nursing homes or children in the hospital, or even, you know, people who can go together to a class, you know, after work or something. I think there's a certain, social, community feel for that, which might be very good, that you don't get if you're going in for one on one, Freudian intervention, or you're just going home and taking Prozac however many times a day. It certainly has that advantage. The disadvantage, again, I think is what if you're sort of rigid, but not as rigid as all your friends and family, so you don't want to tell them you're doing this for therapy because that could look like you're a kook. Like I think of my brother making that comment about me going to the psychiatrist, of all things. I mean there's always a double, there's like two sides of the coin. You know one side is, this is great. The other side is, well does this make me look like a kook to my friends, which I don't think it would, but, you know, there would be people who would think that. 'Well, why don't you just go get pills from the doctor? Why are you going to this class and dancing around like a tree?' Or you know, whatever, who knows. People have opinions and I think socially, it could be strange."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance/movement therapy is?

"No, but I didn't mention the cognitive piece, but I would imagine that, you know, I'm assuming it could be helpful to people with cognitive problems. I have a cousin with Downs Syndrome who's in her fifties and she loves to dance to, which is funny, she dances a lot, on her own, to Broadway musicals, you know, soundtracks. I don't know for sure if it helps, but certainly people, I would think, with older people with some kind of cognitive decline, it might be helpful."

And lots of other people too, I'm not thinking of. But, I mean that was the one piece that I didn't mention, but I kind of guess I implied it. Yeah, the integration I think is... well, I just see it as an integrated therapy. I think it would be a wonderful thing, and like I said, maybe this will make me look into it more for myself."

Does this change your understanding of what a session might involve or look like?

"I guess it could change because I don't know anything about what a session is. Would it involve some sort of assessment by the dance therapist before and after or after so many before sessions and after any number of sessions that might be considered to reach a therapeutic threshold of some sort, I don't know if you do that, but..."

Does this change whether you would recommend it to a mental health patient/family member/friend? Yourself?

"Well, I would have been inclined before to try it at some point, or to recommend it. But now I would be probably more so. You know, I could see myself telling my aunt at Christmas. She's in her eighties and she's got some chronic problems, but she goes to yoga classes when she can get there. Her mother lived to be 106, so being in her eighties isn't that old for her. But I would say that, things like, what isn't mentioned but would be part of the physical, she has balance issues and it's not all the time, it's only sometimes. But you know, that could be very therapeutic for that. She doesn't have any cognitive issues, I can guarantee that, but I think emotionally it would be helpful. So yeah, I would recommend it. But again, whether she... I also recommended acupuncture, recommended a medical doctor who does acupuncture a half a mile from her house, and she hasn't gone, so. What can you do?"

General opinions or perceptions, your own or others?

"Again, you know, I kind of mentioned it, I think certain people, probably would always see it as kind of like a fluff thing or not really think of it as therapeutic or importantly therapeutic or therapeutic at all. My opinion is, I think if it's something that will work better than taking pills or having to wait fifty years for your Freudian, you know. I'm not putting it down, don't get me wrong, I just think that for certain kinds of things, I think getting yourself together and feeling better in a sort of holistic way is a good start. That's not to say don't go for the other stuff if you really need it, but I think this could be integrated with other therapies for people who really feel they need it all."

SUBJECT 29

What is your course of study/occupation?

“Theatre arts.”

Would you ever seek medical treatment for a mental health illness?

“Yes.”

What kind of treatment would you seek?

“Um... Wow, that’s a pretty broad question. Well, I mean I would start with like, sort of like traditional psychotherapy and working with a psychiatrist and a psychologist, sort of determine a course of treatment, whatever that may be. So working with them and through their sort of experience and suggestions and my experience of whatever I’m going through. Whatever we would think would be the best option.”

Would you be willing to go to a psychologist/psychiatrist?

“Yeah, yeah. I mean that’s pretty standard. Because if any pharmacology is necessary, then obviously I should be seeing a psychologist.”

Would you be willing to try acupuncture?

“Um... Yeah.”

Massage?

“Yeah.”

Arts (D/MT) therapy?

“Yeah.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“Yes, I think they can be successful. I think their success is dependent on the relationship between the client and the care provider. Also, I think success is dependent on the commitment of the person seeking the treatment. Just sort of like their willingness, there’s a certain amount of belief that needs to be there for success. I think those are sort of the most important factors, I don’t know what else.”

Would you be willing to recommend mental health therapy to a family member?

“Absolutely.”

To a friend?

“Absolutely.”

Would you be willing to recommend alternative therapies to family member?

“Um, yeah I mean depending on what my experience with them was. If I either A. found them personally satisfying or B. thought the experience was something that, knowing like, obviously I know my close friends or my siblings pretty well, and if it’s something that I think they would get something out of, then yeah.”

What do you think dance/movement therapy is?

“Umm... moving and dancing. Well it’s perhaps, I don’t know. I don’t know, I don’t know if it focuses on, if there’s sort of a mental life to it, that you are thinking about certain things, or if it’s more, just to stimulate, just your physical being because that connects to your mental well-being. I don’t really know how many levels there are, but I imagine it involves... dance.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Um... I imagine having whoever’s leading it and people come in. You sort of stretch for a while, check in, see how everybody’s doing. Then you just sort of, you know, you do whatever the sort of the plan for the session is. Put on your music and do your whatevers, I don’t know.”

What do you think it is meant to accomplish?

“I imagine it’s like... my sort of conjecture is that it is to sort of raise your physical well-being and connect to your body to increase your mood. So like a holistic approach to mental health by including the physical aspects because it can be also a very physically trying situation.”

effects chemical, emotional, spiritual?

“I mean, but actually getting up around and dancing and using muscles, there would be a body/chemical thing going down. But also just sort of a, an emotional, just like the freeing, you’re just doing something involving movement. You can have an experience that’s maybe not connected to your mind too much, but something else, I don’t know.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“Um, I think that it can probably be an effective part of a treatment plan, especially, I can imagine it being very helpful in in-patient situations, hospitalization situations, where it can provide a different focus for part of your day. I really think that vitalizing your body in a way that is connecting to the other things that you’re doing throughout the day in your treatment and that can really complement the other work that you’re doing in your groups and stuff like that. I just think that it can be a very effective tool in creating a holistic approach to improving overall well-being.”

Would it be more or less successful for certain people?

“Um, I mean I think that there, I don’t know that there’s any particular demographic that is like, ‘Oh, like clearly this group is going to be more resistant than others or more willing than others.’ I think that within every sort of group you’re going to get people that are like, ‘Wow, this seems hokey. Like dance, what is this doing?’ So I think there’s a certain amount of resistance. But, do I think that it definitely... I think people that are willing to give it a try, anyone who’s willing to give it a try has a chance of it being helpful for them. Like everyone who does it will it be helpful? No, not necessarily. Again... it just like, drawing on the experiences that I’ve had, even approaches that you would never think of, or you’re like ‘Oh wow, I don’t want to draw a picture to explain how I’m feeling, that is silly.’ If you are willing to commit to it, you often can find ways for it to be useful.

need passion or talent for dance to benefit?

“No.”

resistance towards dmt?

“Yes, I mean I think that there’s, anything that... I think in America we sort of have a bias towards drugs. Very cut and dry answers like treatment is pills, or something like that. Anything that doesn’t seem super scientific, if it doesn’t seem scientific, if you’re not doing it with a doctor there with a white coat on, then it’s not really treatment. So things like dance/movement therapy or music therapy or art therapy are all like, ‘Ooh, this is kind of weird. What am I going to do, talk about my feelings?’ I think that’s sort of like this monolithic cultural resistance, that, given the right atmosphere, like if you have enough people there that are buying into it, or you’re in a kind of environment that fosters, ‘Okay, you’re just going to try it,’ you can get past that initial resistance pretty quickly.”

What do you think it would take to minimize this resistance?

"I really don't know. Yeah, um... I think that really the best way, probably, is by raising awareness with clinicians, like the actual therapists themselves, because I think it goes back to having, I think that, hopefully, and most people do, they're going to find some therapist that they trust. Any successful treatment plan, I think is going to be one that is developed in therapy, with your therapist, with whoever's on your sort of team. And the more that the therapist knows about these sort of options, then... when your therapist suggests it's to you, then there's a sort of, already like an automatic, 'Oh, well it's not nothing.' If John off the street says, 'Oh man, you should totally try this dance therapy that I do,' John just sounds like a weirdo, whereas if your therapist says it to you, you're like, 'Really?' but then you think about it, like, 'Well, this is my therapist that I talk to all the time and that I like and that I trust, so, maybe this is worth a shot.'"

advantages and disadvantages of d/mt compared to traditional?

"Um... You know, I almost don't really know how to go about answering that question because I really see it as something that couldn't be a stand alone treatment option because there is... because I'm a big believer in the traditional therapist-client relationship. That that relationship and the work that's done there is really important and needs to happen. If you ignore... the work that you do there can't really, necessarily be replicated in other forms of therapy, and so if you're doing... if you're pursuing other forms of therapy without that, it's ultimately not going to be as effective as if you had paired whatever you are doing with... I don't think, pharmacology I don't think will work without therapy. It all needs to be part of a package and the base point that you build from is therapy, and you figure out what you need to add to that. So you be like, 'Oh, well let's add dance/movement therapy to this. I think it'll be very helpful for you. Let's do this, but let's not do that because it's not going to work,' stuff like that."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"Um... Maybe a little, not really. I think that's, it sort of seems maybe what I was thinking of. Although with the social being part of it, maybe, now that I think about it makes much more sense, now my picture of the experience is one that involves more interaction between the people that are all involved, but that makes sense. It seemed like the picture that I have of it hasn't change that much, really."

Does this change your understanding of what a session might involve or look like?

"No, I mean, like, I think... I think part of it has to be because I've been in alternative mental health therapeutic settings, and I have a base to work from, so, the sort of mechanics of like, especially how the session sort of starts, and how you feel when you walk in the room and what's happening and all that, that sort of just kind of makes sense to me."

Does this change whether you would recommend it to a family member/friend? Yourself?

"No, no."

General comments, opinions, perceptions, your own or others?

"Not really. I think that it could definitely be, from the sort of understanding that I have of it, it seems as if it would be a good option as part of your treatment plan, especially in the kind of in-patient type situations where you're starting from pretty low place and you need to be able to build well-being in a lot of different ways. I think that would be a valuable option to have. I'd probably be the kind of person that would be like, 'Oh my God, am I really going to have to do

this?' And I would do it, and it'd be okay, but I can imagine people that would really get a lot out of it."

SUBJECT 30

What is your course of study/occupation?

“Systems engineering.”

Would you ever seek medical treatment for a mental health illness?

“Yeah, okay, yeah.”

What kind of treatment would you seek?

“Like therapy treatment, not drug treatment.”

Would you be willing to go to a psychologist, but not so much a psychiatrist?

“Yes, yes.”

Would you be willing to try acupuncture?

“Sure.”

Massage?

“Um, yeah.”

Arts (D/MT) therapy?

“If I knew what it was, I would consider it.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“Yes, I do think they could be successful. I think it’s dependent on the willingness of the person involved to accept it. If you’re unwilling, you can’t be forced into it. You make what you will of it.”

Would you be willing to recommend mental health therapy to a family member?

“Yes.”

To an friend/acquaintance?

“Yes, a little less confidently, but yes. Because family are a little closer, it’s a little bit more open of a relationship. Friends, it would have to be a really close friend. I don’t think I would just do it with a casual acquaintance.”

Would you be willing to recommend alternative forms to a family member? Friend?

“I think I’d have to be more familiar with them myself, before, I mean I’d have to know more about them. Same for a friend, yeah.”

What do you think dance/movement therapy is?

“Um, well I mean, just breaking it apart, it seems like you’re moving in a dance-like way and it’s therapeutic somehow. But I mean, I don’t know. Physical therapy, from dance/movement I guess. It seems like it would be to me, yeah, so like good stretching, muscle toning, I don’t know.”

What do you think it may involve?

What would a dance/movement therapy session look like? [It’s mental therapy]

“Oh. I don’t know. Wearing tights of some kind, hahaha, being in a big square room with a wooden floor and a mirror and maybe those big thick socks, you see how much I know about dance. Moving and such, things. I really don’t know what I’m talking about, I hope you don’t mind.”

What do you think it is meant to accomplish?

“Um... mental therapy. Well, I mean it seems like it could be, like I guess in a similar way to acupuncture and these other physical means of therapy, it probably puts you in a different state

of mind. Kind of clears things up for you or whatever. Just the whole physical process is probably something that's good for body and mind."

effects chemical, emotional, spiritual?

"I would, yeah I think the effects would probably be kind of physical and chemical. I think the activity would probably just kind of induce something internally. I'm kind of the a-spiritual type, so I would tend to shy away from that end. I'm a little bit more of a scientist, but I could see that being the case. And also emotionally, but I mean I think emotional could flow out of the physical and the chemical."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I'm not sure, because when you say mental illness, it's kind of broad. I'm not sure what the limitation would be, but I mean there are certain degrees of severity of mental illness and I think would be kind of like a limitation. I think it definitely could probably be useful for some people in some cases. And again, it's openness. I think with anything, if you enter into it and your skeptical, it's a little hard to get anything out of it, you know? So yeah, so the openness of the individual and what their ailment is."

Would it be more or less successful for certain people?

"Um... I don't know. Like demographically? I don't know if I can narrow it down demographically. I think in general it might be women over men, I would think, for the most part. I couldn't split it along racial or religious lines or anything like that. I think there's definitely, probably a type of person who would probably be more willing. I tend to doubt the suburban family man is going to be the one who's going to get involved. It would probably be somebody who's a little more... college-educated, urban-dwelling type people, you know what I mean? There's just like a type of person I would expect to be more open-minded to this kind of stuff as opposed to more straight-lined, traditional kind of means."

Particular mental illnesses or degrees of severity?

"Yeah, I would fall short on schizophrenia or you know, I can't really think of any other ones, I don't really know these things. But really severe, very serious kinds of things. But I think probably like emotional disorders that I think a lot of times and I'm a little bit of a... I'm skeptical when it comes to drugs and stuff like that. I think it's over-diagnosed with drugs and addressed in that way. I think a lot of times there are probably alternative means. If it's on that level, more like emotional imbalance, something like that, that probably could be addressed by this or other... [*depression or...*] Depression, definitely, I think for the right type of person in the right circumstances is probably useful."

passion or talent for dance to benefit?

"I would go with... passion might be a strong word, I think an interest maybe, but not a talent, necessarily. Talent helps, but if you have a talent for dance, then you probably dance already and it probably changes the dynamic of the whole situation, so I don't know."

resistance, and what is it based on?

"Yeah, just in a general way, it's not the norm. I think people in general, in this society, are skeptical of things that aren't the norm. Some people are skeptical of things that are the norm, that works too, but. I could see just on that level alone, I think there's probably going to be... like I said, men probably wouldn't get involved, but it's probably a macho thing like, 'I don't dance,' kind of stuff. There's going to be that, too, I think there's going to be a little resistance on that level also."

what do you think would help reduce resistance?

"I think that probably the biggest thing would be just popular acceptance. If it was... like everybody has heard of acupuncture. It's kind of still like a small-time thing. I mean the amount of people who have actually had is probably really tiny. But it's out there, you know? It's probably just the comic value of seeing people stuck with needles in movies that it actually has gotten out there, but I mean, you know, it's something that we're all familiar with. You say it to anybody, you know it. When it gets to that point, then people are a little bit more ready to accept things."

advantages/disadvantages of dmt compared to traditional?

"Well certainly a disadvantage is to attracting people to the treatment because it's not widely accepted. Disadvantages or advantages to the treatment itself... I need to think about this one for a second. Well I think an advantage of it is that traditional sometimes just doesn't work. So I think that would be one advantage of it is some people kind of give up after traditional stuff, but some people kind of explore what's beyond that. Or want to start with that first before they go to the drastic measure of, you know. So I think that's an advantage of it is that it could fill in gaps in traditional therapies, I think."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"It doesn't really, it's kind of the impression that I got. I think I wouldn't have necessarily described it verbatim like this, like cognitive, social, but I can see that. I think it seems like a pretty good definition of it. I mean it's in line with the image that I had and what the goal, I think was. My opinion of it... I think it's, I think it's a good definition. A good definition means nothing, but what I'm trying to say is it kind of conveys what the goal of dance/movement therapy is in such a way that I think it gives it a little validity [*so legitimizes it a little?*] Yeah, I think so because until this moment when I've seen the definition of it, it was just kind of like this abstract thing that I was making up myself as you were feeding me information. Seeing this kind of gives it something, gives it a little weight."

Does this change your understanding of what a session might involve or look like?

"No, it's pretty much exactly... I'm picturing moving around and stuff like that. I'm not picturing break-dancing necessarily. [*is there a particular style you're envisioning?*] A little bit more, when I think therapeutic, I always think slow. For some reason, it's just... machine gun fire kind of stuff doesn't really sound therapeutic to me. So yeah, I'm picturing fluid-type motions, I mean it seems like it would fall in line with this."

Does this change whether you would recommend it to a family member/friend? Yourself?

"It gives it a little bit more weight, a little bit more validity, so yes. I guess a little bit more of a chance that I would recommend it."

any other general comments, opinions?

"Yeah, I'm kind of vague on exactly what goes on, but I guess that's not something you can answer right now, but yeah, I don't know, I don't know much."

SUBJECT 31

What is your course of study/occupation?

"Finance and accounting."

Would you ever seek medical treatment for a mental health illness?

"Yes, um yeah if it got to the point where I had enough people telling me that I had an illness, then yeah."

What kind of treatment would you seek?

"I would look for a specialist in that area. I'm pretty trusting of doctors, whatever they say, I'm generally... whatever, go for it."

Would you be willing to go to a psychologist/psychiatrist?

"Yes."

Would you be willing to try acupuncture?

"Uhh... Yeah, I guess, if a well-credentialed doctor suggested it. I think it's kind of a ridiculous thing, but if people that know more about it than me would suggest it as a treatment, than yeah, I mean I'm pretty much open to anything."

Massage?

"I'm always down for a massage."

Arts (D/MT) therapy?

"Um.. yeah. I mean I can see where physical activity and stuff like that can help soothe things."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"I think they can be successful. I think a lot is dependent on the patient's attitude and more of like a placebo type thing. If that works, that works."

You don't think the therapies do so much as it convinces people?

"Yeah, that's my view. I don't have any personal experience. That's at least what I think. I mean I could just be naïve, but I would say that."

Would you be willing to recommend mental health therapy to a family member?

"Yes."

To a friend?

"Yes. I think it's tough for someone to diagnose themselves, so I think you need to tell, you know, try to tell people. And it's a tough thing to approach, but..."

Would you be willing to recommend alternative therapies to a family member?

"Not necessarily, unless I had had personal experience with a good friend having success with it. I would leave the recommending up to a professional."

Same for friend?

"Yes."

What do you think dance/movement therapy is?

"I imagine something similar to like yoga, but maybe a little bit more active that just kind of allows you to express yourself and free yourself from troubles of the world."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Um, I don't know. Right now I'm kind of picturing a teacher in the front and then a couple people following. You know, the teacher kind of guiding, but then kind of leaving a little bit up

to interpretation from the patient as well. Just kind of suggesting dance movements and things that could help.”

What do you think it is meant to accomplish?

“Um, I think it generally is to allow people to kind of let loose and kind of relieve some of their stress and some of their built-up frustrations. Also, at the same time, allow them to express themselves and kind of figure out maybe who they better are.”

effects chemical, emotional, spiritual?

“Emotional and spiritual, I would say. I definitely see the emotional side, and then spiritually depending on how religious a person is, I can also see that side of things coming through.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think the severity and what kind of mental illness it is. You know, things like depression and things like that, I think it’s possible. More, I don’t know, scientific or serious, I don’t know what to classify them as, but things like schizophrenia and things like that I see as more chemical imbalances and things like that, I don’t know about how much for those. For some of the more mild illnesses, yeah.”

Would it be more or less successful for certain people?

“Yeah, I mean I think a lot depends on, you know, your values and what your kind of built on, your demographics. I think certain people would kind of just see this and laugh it off and kind of say that it’s ridiculous. If you had been brought up in kind of an open-minded atmosphere and environment then I think you’re more willing to open yourself up to these things. You know, and the more cultured a person is. I think if you’re either sheltered or too much caught up in one single culture, you can kind of shut yourself off to new possibilities.”

specific talent or passion for dance to benefit?

“I don’t necessarily think that you have to have a talent and maybe not so much the passion, but I think the passion could help. I think you have to at least be very, very open, completely devoted to it when you do try it. I don’t think it could like...you be like, ‘Oh, no, this is never going to work, never going to work, but I’ll do it for you, if you really want me to,’ and then ‘No, this isn’t going to work.’ I think you would have to have that sense of passion, but I don’t think you would have to necessarily have been passionate about dance before.”

resistance to dmt? what is it based on?

“Yeah, I think there could be from certain people. Either academic people that are too caught up in just all scientific. You know, ‘There’s no way it can help, it must be a chemical imbalance. There must be certain medications, but there’s no way dance therapy could ever help.’ Also, kind of like what I mentioned before, if you come from too closed of a culture, too closed-minded of an environment, then you wouldn’t have that passion because you wouldn’t be willing to allow it to work or open up to it.”

What do you think could help eliminate this?

“I think that’d be tough. I think it’s a lot of how the person was raised. I think it would go back to their upbringing. I think it’d be very tough to diminish that hesitance from a grown adult because I think people already have their values and have their demographics and such.”

Do you think medical statistics proving the efficacy could help?

“For the academic people, I definitely do. I think if you get enough empirical evidence that studies have shown that it worked, I think that I guess could, in that respect. So yes, I think you could convince the academics to try it, the biomedical influenced people to try it. But I think the

cultural people would still probably be pretty hesitant. I mean even if you did get them to try it, I don't think they would have that passion to allow it to work."

advantages/disadvantages of dmt compared to traditional?

"I think it could break up some of the monotony that someone might be used to if they've been trying to get treated and they've just been going to counselors and saying the same thing and they kind of give the same suggestions and stuff like that. So it's a more creative solution to things. I think it kind of allows for the person to enjoy themselves as well, which I think happiness and stuff like that can have a big influence on how a person deals with mental illness."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"Um... no, not necessarily. It's kind of similar to what I thought. Definitely a big focus on the emotional part. I guess I hadn't thought as much about the physical part, but I mean I guess that should have been maybe more obvious that it is good for the body as well, as it's an aerobic activity. I can see social, because it could allow you to interact with other people, which could always help. So I guess I hadn't thought of that facet as much, either. The cognitive and the emotional, I think, you know the mind and stuff like that, I think is kind of how I thought it was. So, not drastically different, but just maybe some different perspectives."

Does this change your understanding of what a session might involve or look like?

"No, no. I mean I still think, from that definition. I mean it's still a very dictionary definition. No, that didn't change the picture in my mind."

Does this change whether you would recommend it to a family member/friend? Yourself?

"No."

general perceptions or opinions, your own or others?

"No, I mean it's an interesting concept. I mean I think people are generally really happy to express themselves when they finally feel comfortable doing it themselves. I can definitely see where it would help, but I think the biggest challenge is getting people to try it and have that extremely open mind and some sort of passion about it, and I think that's their biggest challenge as the American Dance Therapy Association."

SUBJECT 32

What is your course of study/occupation?

"I'm studying marketing."

Would you ever seek medical treatment for a mental health illness?

"Yes."

What kind of treatment would you seek?

"I would be willing to meet with a psychiatrist and see what they thought. If they thought I needed medication, I would be willing to do what they said was necessary."

Would you be willing to go to a psychologist/psychiatrist?

"Yes."

Would you be willing to try acupuncture?

"I think so."

Massage?

"Yes."

Arts (D/MT) therapy?

"Maybe, less so than the others. Just because I've never been a huge fan of dancing and stuff like that I guess, so it would be a little more awkward for me."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"I think they can be successful. I think the success would be based on basically the effect it has on the person's life. So maybe if it helps them get control of their life, or if they're depressed, helps them feel better about themselves again. Basically, helps their physical and mental well-being, that would be how you measure the success... I think it's dependent on the subject or the person taking the medication or the treatment. They have to be willing to take the meds and work at it. Also, partially on the doctor or psychiatrist too, because they have to understand the patient's needs."

Would you be willing to recommend mental health therapy to a family member?

"Yes."

To a friend?

"Yes."

Would you recommend alternate forms to a family member? Friend?

"Yes. Mmhmm."

What do you think dance/movement therapy is?

"I have no idea but maybe... I think my vision is like of cultural dance or something like that, but I really have no idea what it would be."

What do you think it may involve?

"Obviously an instructor and maybe a couple of participants and then them dancing to... I'm thinking kind of foreign music, but like soothing. Kind of yoga-ish, maybe, but something like that with a lot of slow movements and deep breathing and stuff like that."

What would a dance/movement therapy session look like?

What do you think it is meant to accomplish?

"I don't know, but I would guess maybe making the person feel better and get more energized, perhaps."

effects emotional, spiritual, chemical?

“For the dance, I would probably say more emotional and spiritual.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think it can be effective for some kinds of mental illness maybe, like depression or something like that where you’re really lethargic and feeling down. Again, the success would be dependent on how the person or the patient feels afterwards, not immediately afterwards, maybe later down the road. So if they find themselves having more energy and feeling better about themselves, then that would be successful.”

Would it be more or less successful for certain people?

“I think it would be more successful for certain people, like I said, depending on the mental illness. As far as willingness goes, I think it would definitely... certain people would be less likely and more likely. In general, just stereotypically, men would be more opposed to it, initially because a lot of times, just with dancing in general, they’re more self-conscious about that. Maybe in certain cultures, like Hispanic cultures or maybe Indian cultures where dancing is more part of their culture, they might be more willing to do it, regardless of gender. So I think it really depends on your gender and also your cultural beliefs and just what you feel comfortable doing. People who are self-conscious probably wouldn’t want to do it either, I wouldn’t think.”

So cultures that might have more inherent tendency towards dance might be more likely to pursue this?

“More likely to do it, right. It might be better for them, too.”

You mentioned specific mental illnesses, which?

“Well, I think depression would probably be good for it. I would say that people who have certain types of anxiety probably would not want to do it, especially social anxiety, fear of other people, just because they’re self-conscious about themselves, they probably wouldn’t want to dance in front of anybody, or anything like that. So, those are the two that come to mind.”

passion or talent for dance to benefit?

“No, but I think that people might think you do.”

Is there resistance, and what based on?

“Yeah, I think there would be a resistance to it and just because I think it would be that since it’s something physical you would have to do, potentially in front of others, it would make people just more self-conscious and potentially embarrassed about it. So if they’re not comfortable with themselves to begin with, I don’t think they would jump at the opportunity to dance to make themselves feel better.”

What do you think would help reduce this?

“I think if they really explained what it was, so they understood what it was and the benefits of it. Beyond that, just saying how everybody else is in your shoes. It’s not a class where for people who have to dance, who are really good dancers. Everybody’s on the same level, and depending on what it was, if it doesn’t require much skill, tell them that so they won’t be embarrassed. Maybe for some people, doing it with just them and an instructor versus a whole group, so make people feel more at ease, more comfortable.”

advantages/disadvantages of dmt compared to traditional?

“I mean, so the disadvantages are like what we already said about people not wanting to do the physical stuff and being embarrassed. The advantages would be I know that some people don’t like the idea of taking chemicals into their body or medicine. So, this would be good for them because they might think that the drugs are affecting who they are, changing who they are,

whereas dancing, they're still the same person. If it helps them, then I think they may be more willing to do that because it's not like, it's kind of organic in a way, it's just naturally affecting them."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"Not really, it's about what I thought. Maybe, yeah it wouldn't be like hip-hop or pop dancing, it would be probably more slow, deep breathing, stuff like I thought. This definition legitimizes it, at least a little bit to me. Beyond that, it's still about the same conception."

But it makes it more authoritative in a way?

"Yeah, right."

Does this change your understanding of what a session might involve or look like?

"Not really, I'm still viewing it as in like a dance studio room with the people and then the slow movements in unison."

Does this change whether you would recommend it to a family member/friend?

"I would still be willing to recommend it, yeah."

Does this change whether you yourself would be willing to try it?

"Yeah, I think now I'm more willing than I was in the beginning of the conversation to give it a try."

general opinions, perceptions?

"I think it would be great to try out, but I still think that certain people would be resistant to it. So, you might have to find different ways to encourage them to do it. Maybe start out slow by doing short sessions one on one and then build up to a group session or something."

So primarily based on comfort for you?

"Yeah, I guess I would say."

What about increased awareness and familiarity?

"I think that would help people, too. Some people might be skeptical; I was a little bit at first. I was like 'Well, what's dancing going to do to help me?' So I think that should be done for everybody, to explain the benefits of it. Then for certain people you might have to ease a bit into it to make them more comfortable."

So knowledge about what it's goals are, what it aims to do, what it's capable of?

"Yeah, and I would do that for everybody, so they know the benefits."

SUBJECT 33

What is your course of study/occupation?

"Biochemistry and chemistry."

Would you ever seek medical treatment for a mental health illness?

"Yes."

What kind of treatment would you seek?

"Well, I guess I'd probably first go to a therapist or something and go from there based on the recommendations I get."

Would you be willing to go to a psychologist/psychiatrist?

"If necessary, yeah."

Would you be willing to try acupuncture?

"No. It doesn't seem like real medicine to me, just based on some of the reading I've that done. It doesn't seem like it's something that would produce a realistic, favorable outcome."

Massage?

"For mental health stuff, probably not."

Arts (D/MT) therapy?

"Probably not."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"Yes, I think they can be successful. I think it's dependent on the therapist knowing what he or she is doing and cooperation from the patient."

Would you be willing to recommend mental health therapy to a family member?

"Yes."

To a friend?

"Yes."

Would you be willing to recommend alternative therapy to a family member?

"Doubtful. Unless I saw some evidence that it was worthwhile."

What do you think dance/movement therapy is?

"Well I don't really have any idea. Other than the obvious that it involves dance, I don't know. Presumably somebody thinks that there are certain movements that would be helpful for some aspect of mental health, I really have no idea."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Probably have a trained instructor, one on one instruction, trying to... choreograph something or just probably go through the motions, maybe. The instructor would do something and have the patient repeat it, or something like that."

What do you think it is meant to accomplish?

"It seems like it might be an effective relaxation or confidence technique."

Effects chemical, emotional, or spiritual?

"Um... Probably more emotional and spiritual than chemical."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I would imagine that it could be successful, but it would have to have a patient that buys it. I would imagine, it seems like something that's more emotionally based than something that, you

know you give somebody a pill and that's supposed to make them better. It would have to have a kind of patient that would buy that, yeah."

Would it be more or less successful for certain people?

"I don't know that there's a certain demographic that I would pick. I think there's a certain kind of person, but I don't know... That kind of person would... like I was saying before, it has to be someone that buys into this idea, that this is going to help and someone who has a strong sense of connection between their body and their mental state. I don't know how much more specific I can be than that. I wouldn't characterize myself as one of those people, but I'm sure they exist, but I don't think that that's necessarily confined to a certain demographic."

Specific mental illnesses?

"I don't know. I don't know enough about mental illnesses to know what that would characterize itself as."

specific talent or passion to benefit?

"Uh... no, probably not. It might help, but I'm sure that there can be an effective treatment for people who are just beginning to do dance stuff."

resistance to dmt, based on?

"I think there is, based on this idea that it's sort of a pseudo-science I guess you might say and it's not real medicine. I think a lot of people just like to have a drug that's supposed to specifically treat this or that. A lot of people wouldn't buy that this is something that would be effective, for themselves at least."

what would help diminish hesitance? Show statistics of efficacy?

"Show its effectiveness. Yeah, yeah."

advantages/disadvantages to dmt compared to traditional?

"Well it seems like there might be fewer risks involved in terms of side effects of drugs and things like that. A lot of mental health drugs have pretty undesirable side effects and it seems like something like dance therapy would minimize that. I would say that's probably the primary advantage, that it's a very non-invasive, non-drug way to do it. The disadvantage I would think of is it seems like it would be less effective to me. Other than that, I mean it's probably limited, somewhat, in terms of people who can do it, in terms of if they're in a physical state where they can do... I don't know how demanding it would be. Presumably, if someone's very elderly or something, they might not be able to move around as would be desired for something like this."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"Um, no, not really. That seems pretty... that's something I would have expected the definition to be from um... yeah."

Does this change your understanding of what a session might involve or look like?

"No. I am a little intrigued by the cognitive part. It's just not something that I would have probably come up with myself about this. Yeah, so I'm not sure exactly what that's driving at, maybe just in terms of being able to put all these pieces together with what you're learning in this dance therapy. Maybe there is something that I wasn't originally grasping at in that word."

Does this change whether you would recommend it to a family member/friend?

"No."

Does this change whether you yourself would be willing to try it?
“Uh, no.”

SUBJECT 34

What is your course of study/occupation?

“Environmental studies.”

Would you ever seek medical treatment for a mental health illness?

“Yeah.”

What kind of treatment would you seek?

“Like therapy, but not group therapy, individual therapy.”

Would you be willing to go to a psychologist/psychiatrist?

“Yeah, I’d probably try going to the psychiatrist first. I think I would just naturally go to a psychiatrist first just in case a psychologist that can’t prescribe medication then... just having to change over and then deal with that. I’d rather just cut out that issue.”

Would you be willing to try acupuncture?

“Yeah, my boyfriend did acupuncture because... and he had good results with it. He had a tumor in his ear when he was a child, and the anesthesia was constantly making him sick, but they tried acupuncture and it really helped with that. I don’t know if I would go to it as a first measure. After I tried a few things, then ‘Well maybe I would try acupuncture.’ I don’t know how much stock I put into it, but I’ve never tried it.”

Massage?

“Yeah, I would be open to that, in accordance with something else. Like I wouldn’t do that first, but I think it could help.”

Arts (D/MT) therapy?

“I’ve never really heard about that and I don’t know if I personally would be interested because I’m not too interested in dance. I feel like it just makes me more self-conscious. Like other forms, the arts maybe, but for myself no, but for others, I could see a benefit.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“I think they can be successful. My sister used to be really depressed in high school because she had seizures for no reason. So, I think even though I was four years younger than her, so this was happening when she was 17 and I was 13, I could see that had a lot to do with her mental health. So, when she was seeing a psychiatrist because she was on medication for depression, seeing that person helped her. Then eventually, I think it made getting over her seizures and the seizure medication more effective.

Success dependent on?

“I think it’s the relationship between the mental health provider and the patient. It’s not like the provider, even if it’s a psychiatrist, can just write out a prescription and the person gets better. I think it’s the relationship, especially built on trust and trusting this person to tell them all the things that are wrong and that you need help with, and trusting them that they’ll be able to actually help you.”

Would you be willing to recommend mental health therapy to a family member?

“Yeah, like I saw it with my sister. Last year, I wanted to suggest it to my mom because she was really depressed, but then we found our solution that we bought my mom the dog, and she was really happy! So we just have to make sure the dog doesn’t die. She was a lot happier, so...”

To a friend?

“Yeah.”

Would you be willing to recommend alternative forms?

“Yeah.”

What do you think dance/movement therapy is?

“It sounds like something like moving to express feelings and just moving to get things out. I can understand that because sometimes... I think it's the same way that like you're really upset so you go for a walk that just the movement of your body feels nice. So I can understand that moving to dance or music that is reflecting how you're feeling could help get those emotions out, especially for people that can't get them out in words.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“I think maybe you would have a trainer or someone with you, a teacher, asking you to describe how you feel and then movements to accompany that. Like, just expressing it with your body, like expressing your anger and showing it more physically to try and get it out. I feel like a lot of people are angry and they don't show it, they still remain in the same physical position, are happy and they still remain in the same position, and are really sad and remain in the same position. So sometimes moving how your body wants to be when it's emotional could be helpful. So I feel like a session would be something like that.”

What do you think it is meant to accomplish?

“I think it would be a release of emotions because I feel like a lot of therapy is a release of emotions to... once you get all those things out, you come to what's at the bottom and what's the core problem.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think it could be successful, especially for those that have communication problems. I think it depends more, less of the relationship between the trainer and the person and more just the person because people move naturally, but they don't naturally analyze their past actions all the time. So I think it depends on the type of person going through that that's open to the dance therapy.”

effects chemical, emotional, spiritual?

“I could buy that it's some combination because they talk about your body releasing endorphins when it's doing something it loves. So, if you like the dance therapy it would release positive things. You hear about people doing it with, when they're acting, singing dancing. I think it also could be spiritual, definitely emotional because I feel a lot of arts are very emotional, that's where they come from. And spiritual too, that dance has been a part of a lot of religions, native religions, that it's like it would be hard to separate the emotional and the spiritual in getting back to yourself.”

Would it be more or less successful for certain people?

“For mental illnesses, I think it would be... those that have trouble communicating, and mental illnesses with severe emotional problems in dealing with things and connecting towards others. Like if you have a hard time talking to people, then maybe dance is better because you can do that by yourself and it's a unit. Demographics, I don't know if I can name any specific demographic that I would feel would be more open to it, but maybe slightly younger people because I feel older people wouldn't be too inclined to do dance. I feel like it's not as much of a part of their lives. For people in college, people in high school, it's like ‘Oh, dance is kind of cool. Yeah, that sounds like something I'd do,’ naturally for their fun time. I can't see a seventy-year-old man doing dance therapy. Anyone that has a lot of physical problems, it might

just worsen their emotional state that they're frustrated with their body that they can't express things. I think those that value the body more than what's outer, and I know that doesn't make any sense, but there's people that value their self and are very aware of their body and very aware that their body is a gift and your body is your temple. And then there are those that don't really think about their body, it's just who they are. I think people that are very conscious of their body would get more out of it and be more open to it."

passion or talent for dance to benefit?

"No, I don't think so, but I think you need to be open to it. I think there are those that have a preconceived notion that it's just like, 'I just don't dance.' I dance, but I don't know if I would enjoy... I don't know if dance therapy would be the best route for me if I had a mental illness, and if it's not the best route, then it's like, why take it? In conjunction with something else, I could understand, but I don't know if it would be best for me. I feel like everyone enjoys dance, most people enjoy dance on some level, but I think there are those that might not even have a passion for it, but could gain something out of just feeling the movement and getting things out physically."

You mentioned that you would be less likely to do it even though it could be good for others.

Specific reason?

"I'm very... I like speaking, I like talking. So I feel like whenever I think about... I want to discuss things with people and hear their ideas. So, I feel like dance therapy is too much of myself. It's the same reason I don't keep a diary, because I need other comments in there. Then it's just myself, I don't feel like I get enough reflection out of it. Than if someone who was self-reflective with dance therapy, I think they would get more. I need the other person, I need the feedback. It's not the confirmation, but the other perspective about what's going on."

resistance, and what's it based on?

"I would believe that there's resistance, but there's always a resistance to something new. Since it's not grounded in medical terms 'This is what we see when we make a prescription. This is what we see when we put a patient through this trial. This is what Freud says.' Anything outside of that is going to have resistance and people are going to argue that, 'Well you don't know if this is really having an effect. It could be a waste of time for people. We should go back to the tradition.' Anything new is going to have resistance, but it doesn't mean that it's a bad thing, it just hasn't had time yet to see the experiences. People have probably thought that physical therapy is a waste. Like, 'Oh, people in an accident, they're never going to walk again, why do something like that.' But, over the years we can see how it does have a profound effect, that you need to look at things in the long haul to see how it is true effects are."

What would help minimize or diminish that?

"I think if you could hear people's testimonials about how it's helped. People know how group therapy has helped in different modes of therapy, but you don't know about this, so how can you argue that it's effective. If you've never heard someone say, 'Oh, this is what it's done to me and this is how my life's better.' If you can tie a face to it and exactly what it is. And also hearing about other alternative forms of therapy, you realize, 'Oh, it's not just dance therapy that's different, it's other different things that help people, it's not always the traditional.' Emphasizing that not everyone is the same, so why should everyone have the same sort of therapy that's them speaking to a therapist, when dance therapy could be better for them."

advantages/disadvantages to dmt compared to traditional?"

"I think the advantage is giving people that are not the norm other avenues for therapy. That it doesn't work out for them speaking to a therapist or talking in a group, but something like dance

therapy or anything alternative gives them options, and because there are so many options, that they have hope that something out there, some sort of therapy is going to help them. That if we just have the traditional, for people that like the traditional... if you only have two options and neither of those options work, you're left with this hopeless feeling that 'Nothing can be done with me,' but if you have like one hundred options, and you've only gone through twenty of them, you still know, 'There's something else that might help me and there's more people out there.' But disadvantages, is that to some people it could be that it just doesn't sound real. It doesn't have that hard science kind of sound to it. It's one of those things that it's hard to quantitatively measure like 'These dance movements improve this quadrant of the brain.' It's one of those things that's difficult and it's going to take a lot of personal stories to really solidify that it's legitimate or not.

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"No, I think I was... sorta... on the mark about what I thought it was. Just naturally, it sounds legit when you have the American Dance Therapy Association. I'm like wow, there's an association about this! I could tell, just naturally, that it was going to have to do with the emotional and you can see how it has to do with social, cognitive and physical integration. And it seems like a great idea that, you know if someone has problems, it's different facets for dealing with the physical, cognitive and then social and then emotional, that trying to bring those together could be really helpful. And it could be helpful for someone who needs to work on all these areas and of course they still might see therapists or psychiatrists or psychologists for different things, but have something that brings it all together could be really useful then having all these things separate. Because as a person, it's all these things together, so why not do something that brings it all together."

Does this change your understanding of what a session might involve or look like?

"No, I'm still not sure what a session would be. But I feel like it would... like it's hard for me to picture what a session would be like because I can't picture it having a lot of rules about what's right or wrong, you know what I mean? If I didn't know what physical therapy was, I wouldn't really, like if I had never seen it in movies and stuff like that, I'd be like, 'I don't know, someone trying to walk maybe?' And if I didn't know what talking with a therapist was like, it would be really hard for me to guess, 'Like I guess you talk.' The only thing I can inference is like, 'Well I guess you dance.'"

Does this change whether you would recommend it to a family member/friend? Yourself?

"I would still recommend it to other people, but I'd probably still recommend traditional avenues first. Just as the risk if like... if my friend's depressed or overstressed and I say dance therapy and they're like, 'What's that?' and they're really skeptical. But if I say traditional therapy, because they've heard of it, they might be more likely to get help.

So to break the boundary, to get them in and then they can choose their best therapy, once you're convinced?

If they tried that and they were like, 'Oh, I don't think it's working out.' I would say, 'Well, I've heard about dance therapy, maybe you'd like that better,' but I wouldn't necessarily recommend it first. If I knew someone who was in therapy I would mention, 'Oh, have you ever thought

about this?’ And now that I know about it, I’m like alright maybe, but I would wonder about whether health insurance recognizes it as a cost, because if it wasn’t covered in cost, that’s obviously a huge issue. I’d probably try a traditional avenue that was the cheapest, and if that didn’t work out, I’d look outside that scope.”

General comments, opinions, perceptions, thoughts?

“It sounds interesting and at the same time it’s making me wonder about other forms of therapy that exist out there. I never really... The thing about options like I knew that they had mental health patients paint, but those are usually... I usually see that in people in insane asylums, not... I’m like okay, and then it makes sense that dance therapy could be an option because people can paint, why can’t people dance? You see people acting out emotions, and I know that can be helpful. As you get in touch with a character, you get in touch with your own emotions at the same time. So, it seems like a good possible avenue, but it’s not something that I would necessarily pursue first. And I don’t know how widely accepted or legitimate it would seem if someone who had serious mental health problems in like a small suburban community or rural community, even then seeking therapy is a big deal, but seeking dance therapy, ‘Well what does that mean, what are you doing?’ Especially for young boys, it might be a problem getting them to accept it. Boys dance with girls to get girls, but usually they don’t dance by themselves. So, I feel like they might have a problem with that. So, especially if I was trying to recommend it to a young man, or if I’m older my son, I might encounter roadblocks. But... it seems like a legitimate idea. I know I say legitimate a lot. You know, as long as it helps people, then why shouldn’t it be looked into. Because that’s the whole point, as long as it’s helping people, versus doing things harmful like drugs, alcohol, promiscuity, then why not?”

SUBJECT 35

What is your course of study/occupation?

"I'm in Wharton studying marketing and management."

Would you ever seek medical treatment for a mental health illness?

"If I needed it, then yeah."

What kind of treatment would you seek?

"Any that I needed. I mean I know a lot of people who have seen a psychiatrist or a psychologist depending on what they need. So, I wouldn't be afraid to seek the maximum of whatever I would need."

Would you be willing to go to a psychologist/psychiatrist?

"Yeah, if I needed meds or..."

Would you be willing to try acupuncture?

"Personally no, I really hate needles. So, I'm very afraid of needles actually, so no. If someone else did it, I mean if that's what they choose, that's cool, but I couldn't do it personally."

Massage?

"Um, I think that would be okay if it's something like stress you're dealing with, like the same kind of thing that can be worked out at the gym or you just want to release something. But I think if you have a legitimate chemical imbalance, that massage isn't going to make it go away. If you have like bipolar or something, that's not going to do it."

Arts (D/MT) therapy?

"I don't really know anything about that, but I guess it would probably fall in the same lines of working out or releasing something. I mean I think it could definitely be a good way to calm yourself or release stress or something. But like I said, if it's something like really, legitimately imbalanced chemically, then I don't think it's going to do it."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"I think they can definitely be successful, whether it's just talking to someone or meds depending on, like I said, what you need, I think they're definitely successful. I guess I would determine success on the individual's opinion of how they feel. Say it's depression, if they are still feeling depressed, then it's not successful. If they can get through their lives and they're happy, then that would be a success. I think only the individual can say if it's successful. A doctor can't be like, 'Oh, you're cured!' because they're not in your head... .. I don't think there's anything that's specifically necessary. If you need medication and you don't take medication, then I probably think you won't be successful because if there's a chemical imbalance then those chemicals have to be fixed. If you're just maybe feeling sad, then talking it through could be the difference, or maybe something else. I don't know, going to work out and working out your anger or something. I think each person is different, so it's kind of hard to have an overarching success."

Would you be willing to recommend mental health therapy to a family member?

"Yeah, I mean definitely. Plenty of people in my family already have issues and they've been to doctors or take meds or whatever. So, I'm definitely pro-therapy and definitely have talked to friends before or family members."

To a friend?

"Yeah, yeah."

Would you be willing to recommend alternative forms to a family member or friend?

“Umm, maybe. I mean if they’re the type of person that doesn’t want to open up to someone else, and they want to just kind of keep it within themselves. If they’re embarrassed or they just don’t believe in talking to someone else about their problems, then it could be good. Like I said, if it’s the kind of problem that can be worked out that way. If it’s super serious, then I’d be like, ‘Okay, maybe that’s one thing you should do, like maybe that’s for yourself, but you should probably seek something else, too.’”

So it’s like a supplementary thing?

“Yeah.”

What do you think dance/movement therapy is?

“Um, I don’t know. I would think of maybe like a cross between a yoga type of thing that relaxes you, or maybe even something more high impact that actually gets yourself going. Because you know, when you’re working out you feel better and everything, the chemicals change. So I think, definitely if it had heartbeat changing, that would be important. At the same time, something yoga like yoga is very calming, and it can have a soothing effect, so maybe something that combines the two, I don’t know.”

What do you think it may involve?

What would a dance/movement therapy session look like?

“Am I assuming this is a group thing, or is it personal? I envision group. I guess in my head I was thinking kind of a yoga class at the gym type of thing. Maybe combining different stretches or movements and then maybe different... I don’t know, I see two things- I see like high, techno music and people would just be dancing like crazy and letting everything out and then, or really calm music and you’re like ‘Let it out,’ and it calms them like that. So, I envision, I see both of them.”

What do you think it is meant to accomplish?

“I think it depends which one I’m talking about. I think if it’s calming, soothing, then it’s kind of just releasing some tension maybe, or if you’re really stressed then it could be good to you know, just relax yourself and take yourself out of whatever your thoughts are. And then if it’s a high impact something, then you’re really stressed or something really bothers you and running it out or punching or dancing or whatever is your way of letting out steam when you’re otherwise angry or something like that.”

effects chemical, emotional, spiritual?

“Probably emotional or spiritual. I don’t think it would help with chemical, because I personally think drugs are really the only way to solve chemical, that’s just me. And then emotional, I think it could definitely help. Same with spiritual, it’s kind of like if you feel either sad or angry or stressed or alone or something, I think that spiritual and emotional are really linked in that way. So, I think something like dance or meditation or yoga or something like that is a good way to kind of bring those together and release whatever it is you’re feeling.”

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

“I think it could be successful. I don’t think for really serious mental illness it could be successful, unless it was a supplement to drugs or something else. I think it could also be a good supplement, or maybe even replacement of just talking to someone, like talking to a psychologist since they don’t prescribe. So I think just talking to a psychologist, maybe that’s how they get it out, because if they’re just talking, talking, maybe they don’t want to talk, maybe they want to dance or something. Then I think, kind of like what I was thinking earlier, in terms of if it’s

successful, if the individual can notice a change within themselves, then that's successful. You know the dance instructor can't say, 'Oh, you look so much better,' and you're like, 'Oh, I feel better!' It's really about internal."

Would it be more or less successful for certain people?

"Um... I would think people with... Well first of all, I don't really see men doing this. Even something like yoga or Pilates or something, you just find far less men doing it to start with. The same with dance in general. So, I would kind of envision this stuff like a woman type thing and probably like college age, thirties-ish age. I mean, it could be good for children, but, mmm... maybe. In terms of who's more or less willing, I would think also maybe people of higher income would probably be more willing to do this because it seems like something that's not necessary, but more of a supplement. So, drugs, like if you need drugs, you have to take drugs. If you need to talk to someone, that also gets a little gray, maybe insurance won't cover that. But dance definitely wouldn't be covered by insurance, that is definitely something that would have to be extra. I think people would be willing to do it if they didn't have a severe mental illness. I just don't think it would cure anything. It may moderately help and relieve stress and stuff, but I think if it's like a severe mental illness, then it probably wouldn't.

You don't think it could cure things. Specific illnesses or in general?

"I mean, I think if you have something above... chemical balance and above, if you think about it that way. It could be depression or bipolar or schizophrenia, or something like that kind of mental illness, I don't think that could be cured. I think if it's something like, 'I'm feeling lonely or I'm feeling stressed,' or those kind of like, maybe more of...

So more daily problems, but not necessarily mental illness?

"Yeah. I mean I just... unless it's something that you don't stop doing. If you do it forever and you find that it does work for you, then maybe that's in essence a cure. But I think if it's just something that you do once in a while, then it probably wouldn't be able to do it. But I think, certainly, for the day to day emotional type of illness, that kind of thing I think it could work."
passion or talent for dance to benefit?

"Um, not necessarily. I mean if you have a passion for dance it could help, but then you could also be dancing already. In that case, then dance therapy might not help because it could just be part of your life already. I would think of this as something that's probably a little different than what you're usually used to. If you're trying to make a change in your life, then it has to be something different. If you're a dancer, then you probably wouldn't do this, it's too routine."

Is there resistance to dmt and what is it based on?

"I think the resistance would be that people don't think it would work or it could be a waste of money or if they're going to spend that much money, shouldn't it go to something that they know will work? I mean, people may be willing to try something different if things haven't worked in the past. Therefore, they may be willing to pay for it, since like I said I can't imagine insurance would cover that. I think the resistance is that A. it's an unknown, I hadn't heard of it, maybe it exists already, I don't know. But, it's definitely an unknown and it's not something people are familiar with. And it's not like... when you think of mental health, you think of your options, you wouldn't think, like that wouldn't hit your top five, probably. So, I think there may be resistance now because of that. If word of mouth got around and people were like, 'Oh, this is great,' then there would probably be less resistance, but I think there would still be resistance that it's not a likely cure that people would think of."

What would help eliminate resistance?

"I mean I think if, like I said if word got out. Whether that be through word of mouth or marketing or doctors prescribing it in essence, that kind of thing, I think that would certainly help. Even if you got one famous person to kind of buy into it if you will, and be like, 'This is for me,' it kind of creates a cult following. Like, 'Madonna does Pilates, oh my God, I want to do Pilates,' type of thing. But I think until someone can say, 'Oh, I've seen it, it's proven,' I think that's kind of the hurdle people have to get over."

What do you mean, proven, personal narratives?

"Like, personal narratives, something like that or this many people are doing it. So, at least you know a certain number of people believe it, then maybe I'll believe it, too. But I think if you're just like, 'Okay, here it is, this is what it is,' then it's like, 'Well, I don't necessarily believe that.' It's like, 'Oh, you know, we have two million people in the country doing it,' they're like, 'Oh, okay. Maybe...' or 'This person, someone famous has done it.' It's kind of like, it's been proven."

So more based on popular acceptance than necessarily medical statistics?

"Yeah, because I think mental health is the kind of thing like it's very internal. I mean if you have a broken arm, you can look at an x-ray and say it's healed. I mean I can go on the air and be like, 'I had a mental illness, and now I don't, because of this.' I mean, maybe not, if you see numbers of people who have done it, like that kind of thing. I think it's hard to kind of be like, 'Yeah, it cures it. It will help you,' without something to back it up."

advantages/disadvantage to dmt compared to traditional?

"I mean I think the advantages are like, I think I've already said this but, if you don't want one of the traditional ones, whether that be you're against medication or if you're against talking to someone because it just doesn't feel right. That's a good alternative for people, definitely, and that's definitely an advantage of it, that it is different. And maybe you like the fact that not a lot of people do it because it's kind of like your own thing maybe. A disadvantage is that this may not have been proven and there are surefire things that do work. If you need meds, take meds and you know, it's usually going to work or whatever. So, I think that is a definite disadvantage."

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"Um... not really. It's kind of like, you could interpret that in a lot of ways. That could be something very slow or it could be very fast, it could be a lot of different things. But I think, it's just the key that it's emotional and social and not chemical. I mean physical, but when I think physical, I think body movement and not so much chemical."

What about cognitive, what do you think of that?

"Yeah, um yeah, I mean I guess I can see that too, as it relating to the chemical. I don't know. I just can't wrap my head around the fact that dancing would cure a chemical imbalance."

Does this change your understanding of what a session might involve or look like?

"Um... not really. I still am picturing the two, one fast really, one slow. I think the social thing is interesting because I think it definitely implies like a group session and not a one on one, like a tutoring or something like that. It's definitely a group thing."

Does this change whether you would recommend it to a family member/friend? Yourself?

“I still don’t think I would try it myself because I’m not a good dancer and I’d probably get embarrassed by it and not be able to take it seriously, just me personally. I would recommend it to people if they’re kind of person who, like wouldn’t go for the traditional type of things or the people who are like, ‘I don’t want to talk to anyone.’ Like, you can’t even get meds without talking to someone, so this could be kind of like an alternative. But for me personally, I just... dancing just isn’t my thing and I wouldn’t be able to take it seriously.”

General opinions, perceptions, yours or others?

“I mean, I think kind of the way I feel, not taking it seriously, could probably be a problem amongst people. Even if they’re not doing it, just like if someone says, ‘Oh, that doesn’t seem real,’ or ‘I can’t imagine that works.’ So I think that would be something that you or they whatever would have to work on to try to get the message across that, ‘Oh, it does work, blah, blah, blah.’ I think there’s a bias towards these off the beat or off the normal track of procedures for this kind of issues. Especially since it’s such a sensitive subject, you know, mental health and whatnot.”

What do you think makes people not regard it seriously?

“I just think because there are these methods that are proven that are a little bit more traditional and less risky, you could say. This may not be proven or you may not know people who have done it, so you’re kind of taking a risk.”

Just in that you don’t know about it?

“You don’t know about it, it may be expensive. I mean, who knows, maybe it could hurt. It could end up doing more harm than good. I mean I think it’s definitely risky. Any time you do anything and there’s a mental health instability, there’s a risk involved. It could make things worse, you don’t know. But I think it’s interesting that there’s a social aspect to this because usually there’s not, in terms of mental health. It’s usually very individual.”

SUBJECT 36

What is your course of study/occupation?

“Anthropology and the Ancient Near East.”

Would you ever seek medical treatment for a mental health illness?

“I imagine if I had one and thought I needed help.”

What kind of treatment would you seek?

“I guess whatever resources I knew were available. Here we know about CAPS and that sort of stuff, the stuff available through the hospital.”

Would you be willing to go to a psychologist/psychiatrist?

“Um, yeah, I guess so.”

Would you be willing to try acupuncture?

“No! I just don’t like needles, so that’s probably why.”

Massage?

“Um, yeah, I don’t know if that would solve my life problems, but I would give it a try. I mean massage doesn’t sound that bad.”

Arts (D/MT) therapy?

“I don’t know, I guess I don’t really know much about it, but doesn’t seem like something that could hurt. I’m very open, I guess.”

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

“I don’t know, I’m a little hesitant, in terms of... I guess if the difference is that one prescribes medicine. You know, I was raised to believe that medicine isn’t going to help that sort of thing. But I guess, with the proper amount of research, I would be willing to listen to whatever sort of treatment is prescribed or suggested or whatever.”

Why do you think pharmaceuticals might not be the proper course of action?

“Well, you know, what I was always told as a kid is like they’re just trying to make money by prescribing things you don’t really need. But I’ve never looked into it really, so I guess...”

What about psychology, like talk therapy? What do you think it’s dependent on?

“Mmhmm. Yes, definitely. Well obviously if it’s a well-trained psychologist, then it’s very dependent on the person who’s going. Well, they have to be willing to accept, I guess the treatment or whatever, accept whatever’s going on in their lives that’s making them, or their state or whatever.”

Would you be willing to recommend mental health therapy to a family member?

“Mmhmm.”

To a friend?

“Yeah. I mean, it’d probably be a close friend. I don’t think I’d walk up to someone I don’t know very well. Might be a little insulting.”

Would you be willing to recommend alternative methods to a family member or friend?

“Um, maybe not as the first suggestion, but, you know...”

Supplementary or second course of action?

“Mmhmm.”

What do you think dance/movement therapy is?

“I guess, I guess I’m not really sure. Maybe something to do with helping you move... like something like.... I kind of imagine it as something like yoga where they put you, have you do

certain things which helps your body, I don't know, relax or de-stress, stretch out kind of thing, so..."

What do you think it may involve?

What would a dance/movement therapy session look like?

"I don't know, I guess if it's like regular mental health therapy, it'd probably be very small. I would imagine, just like maybe the instructor or I don't know, would you call them a psychologist? Therapist, sorry. And maybe one or two people and just, I guess, going through whatever necessary motions are a part of this."

What do you think it is meant to accomplish?

"Well, I assume if it's similar to psychology, all of those goals. Well, obviously like I said before, relaxing and de-stressing, but also maybe working out problems. Kind of trying to figure out why, what's bothering you, that sort of thing."

effects chemical, emotional, spiritual?

"Um... I don't know, I guess. Yoga does sorts of, I don't know if it's chemical, but things in the body that does actually change your mind, I believe. So, I imagine it's probably similar or maybe... Yeah, I think all three, maybe."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I mean, I feel like with treating mental illness, unless it's something that's like severely, it's physically, like you can't move past a certain point kind of thing, it's very dependent on the person. So, I mean obviously if this person has been in a car accident and they're missing something necessary to function, that's physical. But if it's they just need their other sort of... I don't know, I guess I don't know where I'm drawing the line. I guess mostly dependent on the person. And I think it can be successful. As successful as it can be when I don't really understand what it is."

Would it be more or less successful for certain people?

"Hmm. I don't know, in terms of demographics. I mean maybe people who already are very... hmm. I've never thought about that. I'm not sure, can I get back to you? I don't know about specific mental illnesses, since I don't really know that many. But in terms of values, I guess, I mean someone has to be fairly open-minded, because it's new, or to me it's new, so that sort of thing."

passion or talent for dance to benefit?

"Um, no. I don't think so because as long as you're trying, I think it's whatever's going on for you, not whether or not you look good or whatever."

Is there hesitance towards dmt, and what is it based on?

"I mean I imagine it's probably somewhat regionally based. People who are generally more open to alternative treatments usually are in more urban areas, in my opinion. I've certainly never heard of any dance, music therapy where I grew up, which is a very small town on top of a mountain."

What would help reduce resistance?

"Um, maybe... I guess it's not like you can really make a commercial or something. I guess just maybe more public presence of some sort."

So more awareness?

"Yeah, because it doesn't... Yeah, I guess so."

advantages/disadvantages of dmt compared to traditional?

“Well, I think that... I mean an obvious disadvantage would be that if it's not well-known, people might be less willing to even try it, so that even if they do go through it, in their minds they still might have some hang-ups towards it or something. Then again, maybe alternative treatments are a good way to get over that stigma of going to see a psychologist or something like that, I don't know. Maybe if it's not the traditional format, people feel better about going, I have no idea.”

Because people have less associations with that?

“Yeah, well less classical associations.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

“Um... not really. I mean it sounds a lot nicer when they say it. But yeah, I guess I was sort of imagining it as a very personal thing, so maybe a social integration [is surprising]. But I mean, you know, I can see how that would work as well.”

Does this change your understanding of what a session might involve or look like?

“Hmm, I'm still not really sure about that. I guess based on this, there's nothing saying that it has to be a small group of people or something like that. I'd certainly like to find out though, now I'm very curious!”

Does this change whether you would recommend it to a family member/friend? Yourself?

“Um I mean I still think I would recommend it. Probably still as an alternative.”

General perceptions, opinions, yours or others?

“Well, since I don't think I've ever talked to anybody else about it, they're probably mine. But I imagine I'm heavily influenced by my parents and that sort of thing, the environment being a college student. I think I'm more open to things because of this extremely liberal, urban environment like Penn's campus, not all college campuses are like that, obviously.”

What is it about your childhood that would influence you?

“My mother calls herself a Buddhist Catholic, so she's very into experimenting with all sorts of different types things.

So an open-mindedness, interested in alternative, exotic foreign things?

“Yes, yes, definitely. Mmhmm. More so for them I think than for myself, I haven't really...”

SUBJECT 37

What is your course of study/occupation?

"Nursing."

Would you ever seek medical treatment for a mental health illness?

"If I needed to, yeah."

What kind of treatment would you seek?

"Umm, Let's see. I don't know. It doesn't really matter to me. It could be alternative, could be something outside of the scope of normal drug, like cognitive-behavioral or art therapy, things like that."

Would you be willing to go to a psychologist/psychiatrist?

"Yeah."

Would you be willing to try acupuncture?

"Yeah. Yeah, why not."

Massage?

"Of course."

Arts (D/MT) therapy?

"Yeah."

Do you think these forms of therapy can be successful?

What do you think their success is dependent on?

"Um, I think so. I mean, it's obviously patient specific, I guess and some people respond better to different types of treatment. But, yeah, I think so. Cognitive-behavioral therapy seems to work really well. I mean as far as checking people's personality or their, I guess how their brain functions with standardized tests, like the mini mental and things like that, it's pretty effective. [based on?] Standardization, at least as far as instruments are concerned. And then, quality of life and actual behavioral changes in patients, or at least what they perceive is better for themselves."

Would you be willing to recommend mental health therapy to a patient?

"Mmhmm."

To a family member?

"Yeah, definitely."

To a friend?

"Yeah, I mean friends get a little harder, but if you weave it in the right way or be willing to go with them or things like that, I think it's easier to get them to go."

Willing to recommend alternative forms of therapy to family and friends?

"Most definitely."

What do you think dance/movement therapy is?

"I would guess it's kind of, I mean because everything's always mind-body related. So, I would feel like dance/movement therapy would involve the whole synching mind and body, as well as actual physical wellness as well, because obviously it's a form of exercise as well."

What do you think it may involve?

What would a dance/movement therapy session look like?

"Let's see. So I would say some kind of warm-up kind of thing. I don't know what it would be. I mean it could get anywhere from just breathing to actual stretching to prepare for dancing. Then whatever the session would be with some cool music in the background. Then, kind of a

warm-down. I don't know what people do, sometimes you can do a group session after to see what people thought about it, or something like that. I guess that's what it would be."

What do you think it is meant to accomplish?

"I'm not sure actually. I mean well, that's not true because there's speculation about art therapy and I think art therapy is pretty cool as well. Kind of getting people in a different mind frame because I guess... when you're moving and dancing and things like that you can focus on different things. Perhaps it can take you to a different memory or something that you may need to explore more, I don't know."

Effects chemical, emotional, spiritual?

"I think it would be a lot. I mean chemical, there's always chemical stuff involved that you don't really realize until afterwards, kind of those things you have to monitor if you notice some particular change. Definitely emotional, definitely physical, so, I'm trying to think what else. Spiritual for some people, as far as feeling really in sync, altogether."

Do you think this type of therapy can be successful?

What do you think this success is dependent on?

"I think it's dependent on behavior. I think it's dependent on patient satisfaction, overall quality of well-being that they themselves feel and can verbalize. I mean that's a little harder to track, just like it is with art therapy. It's obviously going to be more patient-related because it's harder to standardize or get specific measurement of what they're getting out of it."

Would it be more or less successful for certain people?

"Not necessarily. I mean I guess people with more severe psychiatric disorders maybe, I don't know, schizophrenia, things like that where they can't really focus too much on one particular thing for a long time probably would be less, but then again you never know. I worked for my psych rotation, I worked with patients of different backgrounds and I did music therapy with them, which they didn't have. I mean, it wasn't anything really structured and I wasn't kind of trained in any that, but I just kind of... we just listened to all kinds of music, slow jams, older, gospel music, and it got them to really talk about different, random things that I had no idea they were going to speak about. It was just supposed to be kind of a quiet session and they found similarities between different things that they've experienced and stuff like that. So, I mean, I think it can reach anybody. As long as there's interest, as long as it catches their interest, maybe the music will bring them to come to a session or something."

Do you think there will be people who are less interested or willing?

Maybe people who don't think they know how to dance in general or may have some of resistance because of that. I don't know, I can't really think of somebody who wouldn't."
specific talent or passion to benefit?

"I don't think as a participant. I think as an instructor, the actual therapist would, but as a person, I don't think so."

resistance or hesitance, what is that based on?

"Just the normal medical way of thinking I think it would be where you get most of the resistance. Because you can't measure it with easy numbers and things like that that can be tracked from time to time. It's more subjective, it's more kind of alternative I guess would be the word for it, or at least that's what it will be termed as. So, I think that's the main thing. It's hard to standardize and kind of get numbers for measurements, which is what people tend to focus on."

What would it take to diminish hesitance?

“A lot of work with it. I mean, opening up different sessions and actually... I mean, it’s always going to be qualitative, rather than quantitative, I guess. If it’s studied enough, and there’s enough research done on it, and people show over time that it’s been helpful, then hopefully there will be less and less resistance and it can be offered as more of an adjunct to general medication or whatever.”

You mentioned on your psych rotation you dealt with music therapy, what other interactions have you had with CAT?

“I’ve done art therapy with the same group of people, which was very interesting. I think art’s really, really helpful. I mean it’s been studied enough that it gets used, I know in a lot of sexual assault cases, especially with disabled victims who don’t really have a venue for describing what happens, but from their pictures you can kind of see whether or not their story matches, and things like that. The music therapy we’ve done. I don’t know if it was considered dance, but I know we’ve done dance, we’ve done a bunch of other things, so I can’t think of what they are. We’ve done meditations, relaxations and things.

What are patients and colleagues reactions?

“I mean colleagues, because I know I didn’t necessarily think like the meditation, relaxation would, like people would actually want to participate in it. I mean the participants, they’re always reluctant in the beginning. They’re like, ‘Oh, we have to do this again, another therapy session,’ things like that, but by the end of it they find it helpful and they know that part of the reason they’re there is to participate. So, eventually they give up their resistance and kind of go with the flow. Otherwise they wouldn’t have anything else to do. They get locked out of the room and they’re kind of just wandering, so might as well participate.”

Colleagues?

“I mean, yeah. I don’t, I mean most of my people are nursing, and I prefer nursing over medicine, clearly. So I feel like we’re more open to the more alternative approaches to healthcare as long as there’s patient satisfaction, quality.”

Why is that?

“Um, let’s see, without being mean to doctors. Well, I just think medicine is more focused on the body. Kind of like a car, kind of like they’re the mechanic for a car. You go in, you fix something. Whereas nursing, you spend a lot more time with patients and it’s a more holistic approach to just getting to know the person. So it’s person over just body. There’s always mental, spiritual, physical, it’s all combined. I feel like medicine is just that approach to fixing something that’s broken or illness and solving a problem.”

So do you think more holistic and qualitative view of an interaction with patients allows nurses to be more open-minded to things that could be helpful that aren’t necessarily medically based?

“Yeah, because I think there’s medicine as an underlying principle in a lot of these things, but because you can’t pinpoint it and you can’t measure it as easily as you could an EKG or something, it’s harder for people to accept it.”

advantages/disadvantages to dmt compared to traditional?

“Well, I guess the main advantage is just diversity of options, and just something different. I feel like a lot of people, you think of mental health and you think of all the drugs people have to be on and things like that. So, you don’t think of the actual fun aspect that can kind of take your mind away from whatever it is that’s involved up there. Disadvantages, I don’t really know. [nothing comes to mind?] No, not really.”

As defined by the American Dance Therapy Association, "Dance/Movement Therapy is the psychotherapeutic use of movement as a process which furthers the emotional, social, cognitive, and physical integration of the individual."

Does this change your perception of what dance therapy is?

"No, not at all. Psychotherapeutic clearly makes sense. I mean, I figured with movement in general and kind of guided therapy, there's bound to be some kind of integration of all of those things."

Does this change your understanding of what a session might involve or look like?

"Um, no. I mean, that's still kind of how I would picture it. Obviously, I mean the therapist would be more kind of guiding how people move and things like that. It's not just like a 'we're going to dance in front of a mirror' kind of class, which I would have assumed."

Does this change whether you would recommend it to a mental health patient/family member/friend? Yourself?

"No."