

Using the Body for Learning: An Overview of  
**DANCE THERAPY**  
**For Special Children**

### **Importance of Movement in Daily Life**

Much of our interaction with the everyday environment is established through perception and movement. Physical abilities are essential to successful learning because they allow the person to meet the physical demands of the environment. Newell C. Kephart considered movement the basis of intellectual development. He proposed that the inadequate development of certain motor skills may tend to inhibit the development of succeeding, more complex skills.

### **Movement Qualities and Needs of Special Children**

Since special children have higher incidence of vision, hearing and neurological problems, they exhibit poorer physical and motor abilities. Their movement patterns are often characterized by difficulty in locomotion, poor coordination, involuntary and sporadic movements, uneven energy expenditure and limited movement repertoires. They have no concept of left and right, poor spatial orientation, attention disorder and immature body image. The central problems that occur as a result of or concomitant with distortions in body image occur at three levels of the personality: 1) defects in the sense of identity; 2) misconceptions in self-perception and in the interpretation of the attitudes and reactions of others; and 3) relative immobilizations, rigidities, and tensions in parts of the body or in an overall diminished body tone. They do not have complete awareness of the total organization of their bodies, nor can they manage integration of the body parts.

Since some special children remain on the pre-verbal level, nonverbal techniques such as dance therapy is needed to reach and activate them. It is recognized as one of the best ways to help children how to communicate. It is used therapeutically to awaken and revitalize the body, reestablish a sense of trust in oneself and others, aid in re-socialization and group participation and provide an outlet for discharge of tension and hostilization.

## **Dance/Movement Therapy**

To dance is to discover a new world of sensory awareness. Awareness of movement is made possible by the kinesthetic sense. Dance among the arts engages the total physical being, and in so doing, makes an art object of the self.

Dance therapy is defined as the psychotherapeutic use of movement as a process that furthers the emotional and physical integration of the individual. Movement says something about an individual – his state or mood, his flexibility or rigidity – and that in some way movement interaction can enable a person to change or at the least, can permit him to have a new experience or sensation. The use of dance techniques, as dance therapy is a heightening of movement beyond the boundaries of ordinary motor activity. There are three major assumptions concerning its practice (Schmais):

1. Movement reflects personality
2. The relationship established between the therapist and patient through movement supports and enables behavioral change.
3. Significant changes occur on the movement level that can affect total functioning.

Dance therapy builds both sequentially and developmentally and developmentally from sensory awareness, to body parts awareness, to sense of self, to movement dynamics, to locomotor movement, to expressive movement. It utilizes the inherent power of movement to open a channel of expression and communication for the patient through rhythms, music improvisation, and other stimulation techniques.

## **Dance Therapy and Special Children**

Dance and creative movement education can provide opportunities for children to realize their potential and contribute to the following:

1. provide them a form of therapeutic recreation through creative movement, music and artistry
2. develop the child's physical abilities and control of these abilities complementing other therapies
3. enable the child to express himself through movement and creativity
4. develop self-confidence and increase feelings of worth and accomplishment

5. put the child in touch with himself with the boy, the emotions, the power of concentration, memory and logic
6. make dance an outlet for the child's stress and emotional frustration created by illness and disability
7. instill discipline of mind and body
8. kindle a sense of spontaneity, creativity and initiative
9. increase flexibility of thought and movement patterns
10. create new interest areas

Dance offers a unique opportunity for experience in cooperation (when they decide together how to do a dance), responsibility (when they do a dance which involves physically supporting another person's weight) and courtesy (when they watch patiently while others perform). It develops concepts of laterality, directionality and spatial awareness – concepts essential to learning reading and mathematics. Body-space integration involves, as well as the child's ability to move through space and to locate objects in space correctly, the ability to imitate body spatial relationships. It also develops concentration and control over their bodies. By gaining control, their levels of attention and performance of gross and fine motor skills can be increased. Remembering a sequence of movements while moving is a high level intellectual skill. In remembering and repeating a dance sequence, both long term and short memory are employed. Control of one's own body can also mean the beginning of self-control in general. Having controlled this most obvious part of his environment, control of temper and other emotions shall follow. As a child discovers new movement effected by his own efforts, so do sense of self and well-being grow proportionately.

## **Planning a Dance/Movement Therapy Program**

The form and nature of the dance program are based on the limitations of the individual and geared towards their maximum development. It is relevant, though, that when planning and conducting the dance program that the teacher keep in mind that the dance therapy for children should not lead to an amateur show, but to a happier child who displays increased physical endurance, a straighter body, more ease at playing, greater imagination, better self discipline, an awareness of life about him and easier relationships with his school fellows.

Certain foundational knowledge is important in working on a dance program for special children such as anatomy kinesiology, child growth and development, psychology and motor learning. Kinesiology is the science of movement, the knowledge of how the body moves, in how the parts function and relates. The dance therapist, of course, not only must be versed in the kinesthetics of the body, which may have been acquired by formal dance training

but must also have a trained understanding of anatomy, that is, of the parts and their natural; function in movements. Teachers must familiarize themselves with a variety of forms including modern, folk, jazz, social, ethnic, ballet and other creative dance for children. The ability of the teacher to sense the unique rhythm of the personal dynamics, to appreciate the influence of the expressed tempo and its emotional origins, and offer appropriate opportunities for the dynamic release of that emotion is the beginning of psychomotor intervention, as realized in dance therapy.

Guidelines for the teacher in designing a dance program catering to the child's capabilities include:

1. Analyzing the child's movement and repertoire. Analyzing the movement ability of the class members enables the teacher to sport students who will have difficulty in moving certain body areas and parts throughout the dance program;
2. Preparing the child for the lesson core to be presented;
3. Using reading aids, equipment, props, when appropriate;
4. Adapting and modifying the presentation in order to individualize.

It is recommended that a program contain the following components of dance:

- I. Elements of Movement
  - A. Time
  - B. Energy
  - C. Space and Shape
  - D. Transition
- II. Basic Movements
  - A. Locomotor Skills
  - B. Non-locomotor skills
- III. Movement Problem
- IV. Creative Movement and Performance

The use of music with dance activities has a number of therapeutic applications: it may overcome self-consciousness in regard to dance movements or inhibition in the presence of others; it may serve as a catalyst in activating unconscious memories and association; it may

stimulate new moods and impulses; it can revive or intensify emotional state; and most importantly, it can provide a pleasurable sensory and kinetic experience.

## Sample Exercises

### **Early Lessons**

Early lessons might include follow-the-leader experience or directive such as “lift your arms way up, wiggle your fingers, slowly bring your arms down,” and so on. Lesson objectives might include: exploring movement possibilities with hands, arms, head, feet, legs, torso; reinforcing concepts of body parts; stressing following directions; developing a sense of duration; developing small and large muscle coordination. This can include activities which involve the whole body in stepping and running, spinning and turning, galloping and skipping, locomotion on all fours, and leaping, hopping, and jumping.

### **Body Awareness**

Body awareness includes exploring possible actions of the hands and feet, such as beating on the floor, gasping and releasing objects, kicking and shaking, spreading and shrinking, rising and sinking, and introduction of other body parts, such as the knees and elbows. Activities on the effort aspect include experiencing quick and slow speed variations, and weight in the strength of hands against each other or feet pushing into the floor, contrasted with activities such as light-footed stepping and experiencing gradual and rapid changes in speed and weight.

### **Directionality**

Directionality encompasses the exploration of near and far space, of above, in front, side ways, on the ground, and behind – use of body parts to lead movements in space, use of straight, twisted or curved pathways, and use of high, medium and deep levels.

Successive lessons might develop social cooperation through partner work (another child, teacher, or aide), using body parts to touch specific places on the partner’s body; shaping particular body parts on partner, (shaping partner’s hands and arms then placing own hands and arms in same shape), or mirroring each other’s movements.

## Exercises

- In a circle, use gross motor activities “to wake up” large muscles of the body and get the “blood flowing” – bend, stretch, twist, reach, and shake. With beginning groups, this experience helps assess the ability to follow directions, willingness to participate, and physical capacity.
- Come to a standing position, emphasizing the change of levels. Move to the center of the circle and back using changes of level, speed (fast and slow), and direction (forward and backward), adding as many variables as are reasonable.
- With the participants standing in a circle, explain that when names are called the participants are to cross the circle in a straight line.
  1. Call names one at a time, in a sequence around the circle so anticipation and preparation is possible.
  2. After everyone has crossed, repeat crossing but with names called in random order.
  - 3.** Call names in random order and call more than one name at a time. Always explain and demonstrate every new set of directions. Deal with the possible “traffic” problem by showing how to slow down or speed up to avoid accidents.

Equipment and props are excellent aids for teaching dance in a mainstreaming situation. The props provide an interest focus, allowing reluctant children to become involved without exposing themselves. Props provide a mood, teach movement, encourage shy children, create security, and allow creative and imaginative play. Additionally, they provide a means for children to transfer new kinesthetic experiences to their own movement vocabulary while learning basic concepts and building verbal vocabulary. Balls can be used for rhythmic exercises; shakers, drums and tambourines can accompany the creative dance and scarves that extend the arm illustrate movement qualities while stimulating student enthusiasm for the creative dance performance. The therapeutic use of masks is also significant: the patient’s reaction to masks provide valuable information in terms of preference for certain masks, the rejection of certain masks, and so on.

Basically, the mask functions as a tool for the suspension of the conventional self, as a vehicle for identification, and a safety device for the outlet of repressed emotion, attitudes, and desires.

## **Closing**

In conducting a dance/movement program for special children, we are concerned with the behavior characteristics of his movements rather than in any absolute conceptions of grace, prowess, and aesthetics. The process is more essential than a finished product.

When a person dances, the body must move from one design to another; to think, the mind must move from one idea to another. Trained bodies move with efficient coordination. Trained minds function rationally. With both trained mind and body, the student, with special needs or otherwise, possesses movement foundation and problem-solving tools – essential tools in everyday life.