

# e-motion



**Association for Dance Movement Psychotherapy (ADMP) U.K.**  
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## EDITORIAL

As the colours of summer fade, and the warm shades of the autumn trees bring us into the here-and-now; and the glow of sunshine changes into a luminescent golden light, we enter an edition filled with purpose and sharing.

Please read the *News from ADMP-UK* as it offers information and opportunities to develop and be part of some forward thinking and exciting conferences; get involved and feel part of a wider community.

This edition begins with an article written by **Kedzie Penfield** aptly titled *'Movement at the Heart of It'*. Kedzie offers us reflections as one of the elders and fellows of ADMP, and writes with some wondrous memories of her beginning insights into the world of dance movement therapy. Kedzie invites us to follow her fascinating journey over the years up to the very present of what she calls being *"an eternal student"*, or perhaps, more aptly, a 'life-long learner'.

The following articles have a shared theme; the role of music in dance movement psychotherapy. **Caroline Frizell** has brought together a diverse range of writing on the subject of music in the dance therapy space. It is food for thought and reflects a diverse approach to the work of therapy. In her article *'DMP and Music'* Caroline reminds us that there is an intrinsic relationship between music and dance, and what follows is a range of viewpoints on how music can be used in relationship with movement anchored within a developmental framework.

Following this **Hannah Murdoch** writes with some suggestions and thoughts on a range of client groups and offers us her article *'Suggested ideas for music as an adjunct to DMP'*. She includes some of her own resources that have assisted her in her work and may give new ideas for those working with similar clients.

**Rosa Shreeves** writing *'Reflections on Music and Dance'* continues the thread in her open and reflective capacity, with useful suggestions for her diverse range of music options, along with her poetic writing 'Music Memories'.

Finally, we follow a clear pathway with **Jackie Waltz** – *'Music for Dance Therapy'*, suggesting her uses of specific music for specific work. It was our hope that by starting a reflective look at the use of music as one influence on the work of DMP, we may open a dialogue for people to respond and write in with other resources they have found useful, acknowledging the importance of sharing. So, go on, send in your thoughts or useful resources.

In our *Brief Reports from the Field* section, we have a sharing of information from **Bonnie Meekums** writing on her thoughts of attending the 4<sup>th</sup> European Congress of Psychomotricity - 'Crossing Borders' in Amsterdam May 2008. Her article *Crossing Borders* details her own journey and responses to attending the conference, and gives us some useful information on this related field of work. Bonnie herself gave a presentation on her own research pilot study which is detailed in her referencing.

**Dawn Batcup** shares with us her *Seminar Notes on Group Theory and DMT*. This is a useful overview and resource for those interested in group theory, and is a succinct and clear guide to the many theories that can inform our practice as dance movement psychotherapists.

We would like to invite you, the community, to reply, make suggestions or respond to the articles that you read in this newsletter, and would ask that you contribute to a dialogue as a way of opening up the wider community of dance movement psychotherapy. We will be placing a **New Section** – *"dancing dialogues – a Forum"* in the Winter edition, so please write in with your thoughts on any of the past articles in *e-motion*, or even questions, to us at: [tracey.french\\_emotion@yahoo.co.uk](mailto:tracey.french_emotion@yahoo.co.uk). These can be informal and short if you wish, and we are happy to receive them as e-mails.

We look forward to receiving your articles and words for the Winter edition,

Tracey French, Caroline Frizell and  
Goretti Barjacoba

*Editorial Team*



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### Apologies from the Editorial Team

In the welcoming article "Recently Graduated from Roehampton" a name was incorrectly printed in the Spring edition: Vol XVIII, no. 1

**Hebe Lucraft** is now a newly qualified and registered member of ADMP UK.





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## News from ADMT UK Council

### DATES FOR YOUR DIARIES:

**Psychological Therapies in the NHS** conference –  
Science, Practice & Policy  
Nov 27th & 28th 2008  
Savoy Place, London  
ADMP have four reduced priced tickets and these are available to the membership on a first come first served basis – contact the Chair at [admtchair@yahoo.co.uk](mailto:admtchair@yahoo.co.uk) as soon as possible to purchase one of these tickets. There is a specific code to be used for the purchase of these tickets. Other tickets can be booked online at <http://www.healthcare-events.co.uk/>  
Final booking date for reduced price tickets is Oct 10th.  
Further info available on the ADMP website.

The joint **Dance Movement Psychotherapy & Dramatherapy** conference day is on November 15th in London. Details of the conference events will be available on the ADMP website very soon.

Next **ADMP council meeting - 31st Jan 2009**. All members are welcome to attend these meetings. London venue will be confirmed.

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## Movement at the Heart of It

### Reflections from Kedzie Penfield SrDMT

As a child, I have a memory of looking at the adults around me and – almost as if I were deaf – seeing them move and interact in order to understand what was going on rather than listening to their words. At that time I was unable to articulate what I was seeing but I was aware of sensing what was being said as supported (or not) by the physical movement and posture of the speaker. Much later, training as a dancer in NYC, I wondered why I felt better – more fully myself – when I was in good physical shape and doing dance classes.

These two things - my life-long fascination with how a body's movement communicates and expresses a human being's expressive self and the question, "Why do I feel better when I'm dancing?" - took me to the profession of dance movement therapy. Now, almost forty years later, there is still no absolute clarity about a body's movement expressivity or a simple answer to the question, but I have some ideas about and experience in the profession arising from these explorations.

In my early twenties a friend said he was doing a workshop in something called dance therapy. I thrilled to the idea behind the words and immediately signed up for a workshop and subsequently for a training with Liljan Espanak. This small Scandinavian woman showed me one way we can work theoretically and physically with the body and its movement expression. In her own way she was an important clinician and enabled many of us to step into the (then) unknown profession of dance therapy. Through her we

also had the privilege of watching Alexander Lowen work with patients: an impressive and intimidating sight. One of the most impactful aspects of his clinical work was his power of observation and interpretation: "What do you think this movement of the head (the patient with whom he was working) means?" he asked us. (The patient had a habit of tilting his head in a swinging gesture from side to side). Various answers came from the spectators: "He's avoiding being hit" "He's comforting himself." "He's trying to see around something." "No," asserted Lowen. "He's like a dog on a lead pulling and twisting against the direction of pull." As the session progressed the patient's relationship to his mother did seem to be encapsulated in this image.

Lowen's work was usually body based however, and it was movement that interested me. This took me to the Dance Notation Bureau and a class with a woman called Irmgard Bartenieff who – then aged 71 – had me in an exhausted heap after an hour and a half. As a relatively fit and able young dancer I wanted to know how she had done that....and spent the next four years studying with her. She taught me to appreciate the unique quality of each individual's movement self and her wonder and excitement about movement never lessened. "It is like an onion," she exclaimed one day after teaching a particularly demanding class. We just keep peeling off the layers as we grow older."

In my apprenticeship with her, I heard about or accompanied her to clients' homes or she would return from a session



full of ideas and stories from it. “It is so interesting” she enthused on her return from one of these sessions. “I simply did the lower rib stroke (she often used connective tissue massage with Fundamentals sequences to get a body moving connectedly) in order to help my patient breathe properly through the Arm Circle. Suddenly through doing the movement she burst into tears.”

She felt that her area of expertise lay with the body so direct work with emotions, psyche or what I would now call “transference” was not her remit. “It is best to work in collaboration with a psychiatrist” she commented. Now we are trained to work in the combined areas of psychological and physical work but in those days the idea of being able to do both was rare and in the USA one had to be a Medical Doctor to do it. However the idea of achieving integration through movement is the same now as it was then.

Various clinical leader jobs followed for me and good fortune resulted in a collaboration with Dr. Max Jones, then a groundbreaking and innovative psychiatrist in the field of therapeutic communities. Through him I got a post as the first dance movement therapist in the NHS in Scotland at Dingleton Hospital in the Borders; one of the last Therapeutic Community hospitals in the UK. After a life of travel I found a home there although both the verbal and the non-verbal ‘languages’ were very different from my recent residence in Manhattan. In the Lowlands one verbal dialect was very different from that of another ten miles away. Non verbally the languages were more similar: proximity, touch patterns, size of kinesphere, even quality of movement – were very different from the American language I knew. Even the countryside had its effect: I remember

commenting to a colleague that “the madness here is not as hard as it is in NYC. Perhaps it is not possible to be quite so crazy surrounded by these gentle hills and green countryside.” It makes sense to me that an environment has an effect on our inner worlds as well as on our movement selves: no wonder Americans and Australians tend to have a larger kinesphere in their upper unit gestures: the country they live in is huge!

In the years that followed I worked as a therapist, dancer and teacher in public and private sectors throughout the UK and Europe. Despite originally being American I am more comfortable with the smaller, for me containing, environments I find myself in on this side of the Pond. Even East Germany where I lived and worked for some time in the 1980’s, had a clarity with its slightly rigid verticality that I found interesting. (I was there when the Wall came down.....talk about boundary stories!).

I’m one of those people sometimes called the eternal student who always seems to need to be learning something new so various trainings followed: MPA (formerly known as Action Profiling), massage, tai chi and psychoanalytic psychotherapy. Next on the list is Martha Davis’ MPI framework. Each of these gives a different way of understanding human beings but for me movement is at the heart of it all: the communicative, expressive action of our body-minds that gives us a way of working with people of any diagnosis at any level. As I grow older my own body changes continue to inform my experience; I hope that process will continue as long as I breathe. My mind goes back to Irmgard and I know she was right: it is indeed a process of “peeling off the layers” of the onion.





# Dance Movement Psychotherapy and Music

Caroline Frizell

There are many creative ways in which ADMP members enhance their work with a range of resources which serve to stimulate the imagination, open channels of connection and support the DMP process. This edition of *e-motion* initiates a sharing of ideas on the integration of music in DMP practice. Following an introduction on how music might impact on the process of DMP, you can read contributions from ADMP members Hannah Murdoch, Rosa Shreeves and Jackie Waltz, who offer a range of valuable ideas and thoughts on the role of music in their work. We would welcome more contributions to this in future editions, as there is a wealth of knowledge and experience to be shared within our community. If you have ideas regarding the role of music in DMP, a piece of music which might inspire others or would like to respond to any of the ideas raised, then please send them to *e-motion* on [tracey.french\\_emotion@yahoo.co.uk](mailto:tracey.french_emotion@yahoo.co.uk).

**Music and Dance** share an inherently intimate relationship in the human experience. The synthesis of sound and movement derives from the process of life itself and this interdependence contains a powerful catalyst within the therapeutic relationship. Life begins with a rhythmically orchestrated dance, as each individual commences a unique evolution *in utero*. The rapidly developing foetus explores space, tests a range of movement, grasps, sucks, floats and kicks at boundaries (deMause 2002) whilst surrounded by the ‘pulsating rhythm of the heart beat, the gushing sound of the aorta and the rumble of the intestines’ (Wärja, 1999 p.176-177). Thus, each of us begins life in relationship with the rhythmic dance of the mother’s body and the essence of that relationship permeates our identity at a visceral level, echoing throughout the unique life experience of every individual.

Colwyn Trevarthen illustrates how the ‘poetry’ of communication between mother and baby is a synthesis of vocal and kinetic expression, asserting that the two cannot be separated.

*‘Newborn infants respond socially to a human voice, the expression of a face, the touch of a hand, or the feeling of being picked up.’* (Trevarthen, 2002, p7)

He goes on to suggest that adult and baby share the same “time in the mind” and synchronise vocalisations and body rhythms in a remarkable reciprocal dialogue (Trevarthen 2002 p7). This synthesis of sound and movement is integral to his work as a Music Therapist, mirroring the early improvisation between mother and child.

However, music plays a significantly different role in

DMP from that in Music Therapy, for in DMP, it is the dance from which the story arises and is expressed. Music Therapy incorporates music in both an *expressive* mode, which actively explores feelings and relationships through music making, and a *receptive* mode, which explores the feelings images and memories evoked as a response to listening to music (Wärja, 1999). It is, perhaps, the latter which lends itself to the DMP process and in this receptive mode, music can have a powerful influence in its potential to arouse affective states, impacting on the flow of emotions within us. Music evokes images and memories and affects the autonomic nervous system, which balances our internal system with the external environment. Music can touch us at a deeply emotional level; it can galvanise the body into action or serve to calm the inner spirit.

Marion Chace integrated music into her practice with psychiatric patients as a way of unblocking feelings and music became a ‘...catalyst in engaging with patients – to enliven them and to reflect, develop or alter a particular mood.’ (Bloom 2006, p.32). In an analysis of Chace’s work from a psychoanalytic perspective, Elaine Siegal discusses how Chace used music intuitively to facilitate a therapeutic process through a ‘kinesthetic response to rhythm’ (Siegal, 1993, p.170), allowing an exploration of, and reintegration of, the pre-natal experience through a synthesis of movement and sound. Likewise, Claire Schmais refers to the ways in which music can facilitate the expressive release of repressed feelings as part of the process of integrating the internal experience with the external world (Schmais 1985).

Perhaps, if we listen carefully to this relationship between music and dance, we can also detect the vibrations which connect us beyond our immediate lives to our hunter-gatherer ancestors. Their very survival would have depended upon an implicit kinetic and sensory identification with the environment. As they dispersed into unfamiliar landscapes, this identification allowed them to build new relationships with previously unfamiliar plant, animal and mineral worlds. A synthesis of music and dance would have been key elements in the survival of individuals and groups, connecting communities to the wider universe and serving in the process of healing (Mithen, 2005). The relationship between music and dance, sound and movement would have been integral to a greater process of life, which held the tension between the call of the wild and the dance of human existence.

This potential of music to touch a visceral, primitive depth in the body can provide opportunities within the DMP process.



Jocelyn James illustrates how music can open a door to free expression with a poignant vignette as she describes her work with a withdrawn, non-verbal client, who is rigid and bound.

*'...on hearing Vivaldi's spring ...she began to weep. The streaming tears seemed to unblock waves of intense feeling and sensation. The release of such deeply held emotional tension allowed her body to soften and relax, liberating energy for movement. While still crying, she began to breathe more freely and flow quite naturally to the rhythm of the music. ....moving empathically with her, I noticed that she was completely aware of ....her own presence, whilst being open ....to engage with me for the first time.'* (James 1996 p. 214 )

Music, then, can offer rhythmic, tonal textures of the embodied story and contain a powerful charge which can fuel our imagination and connect us to our feelings.

As well as serving to liberate expressive movement from the unconscious, music can also provide a structural element to the process of exploration within DMP, thus becoming part of a containing framework. For example, 'rhythmic synchrony', as identified by Claire Schmais, can arise from the musical pulse, opening channels of communication. The rhythm of the music can facilitate a state of cohesion, serving both to stimulate and to organise shared movement patterns and to act as a catalyst for making connections (Schmais, 1985,p19). The structural organisation of music can provide a temporal frame in terms of the rhythm and phrasing, shape and pattern and as such can become part of a safe container. Dianne Duggan illustrates this structural potential in her work with adolescents who are learning disabled as music becomes an integral part of the holding frame and she further demonstrates how specific music becomes an important part of peer group identification for this client group (Duggan, 1995).

The music of nature can also open a number of possibilities. I remember working with a young boy who would regularly and systematically check through the CD case for a BBC recording of weather sounds. This he insisted on playing, full volume, in the background, whilst engaging in a make believe story. I was aware that as we played together he had one ear on the oscillating sounds of pattering rain, a summer breeze, clattering hail-stones and howling wind, in anticipation of track 10, which was entitled 'storm'. As track 10 approached his body began to tense and at the sound of the ferocious thunder-clap, he would scream and throw himself at me, clinging around me in a terrified paralysis. For weeks he enacted the same scenario and very slowly we were able to unravel his knot of fear as he was gradually able to process his terrifying fantasy that I would disappear; a fear which seemed to be held within the storm. Through this he was able to address his deep-rooted separation anxieties.

But...what of the music of silence? Silence can allow us to listen to what is inside us and to be present with our inner emotional flow. In his book on the nature of silence, Lane observes how '.....in silence I have a sense of becoming....' in silence '.....you are what you are.' (Lane, 2006 p.96). One of the challenges of silence, perhaps, is to confront what it is to be fully present in ourselves. In an age of rapid technological progress, we can find that we are subjected to perpetual noise, in which silence and stillness become voids needing to be filled. In preparation for a session, I might spend time sitting in silence in order to become fully present with myself. At times I might listen to music such as that of *Hildegard of Bingen*, abbess of a Benedictine abbey, visionary and musician, whose music arose from a life characterised by silence and contemplation. The simplicity of this music can touch a point of truth beneath the clutter of daily life, emerging from the silence and stillness within.

Silence is more than just the absence of sound and can be charged with emotional content. If we listen to the rhythm of the silence of our client, we can find that it has a steely sharp silver edge or is as warm as the midday sun. A silence might hover menacingly on the brink of disaster or could be peppered with swooping bats as they are conjured by the magic of dusk. The silence we hear might be steeped in the terror of lurking demons or else might open a space between therapist and client which is a clear blue sky on a summer's day. Silence, like stillness, can be a stringent test of the therapist's ability to be with, and to work with, what *is*. Katya Bloom suggests that although music can facilitate change by lifting clients out of stuck emotional states, she cautions that such an intervention might communicate an 'artificial or arbitrary pressure for change' (Bloom 2006, p.35).

Music, then, exists within our work as a subtle and diverse resource and in this brief introduction I've explored the intimate relationship between dance and music, which is inherent in the development of each individual and can be found in the essence of the human experience. It is in the history of our survival and has been integral to the building of communities and to healing and growth as we established and maintained our home on the earth. When working psychotherapeutically in the realm of non-verbal expression, the synthesis of movement and dance can unearth powerful unconscious memories, in which the pre-verbal experience can come into sharp focus. Music can inspire the body to move and provide a bridge between the internal and the external; it can touch a place beneath the anxiety and give access to the inner flow. Musical form can connect individuals to the group and can also become part of the containing structure of our sessions. The music of nature and the music of silence can also be woven onto the rich tapestry of the embodied story and I remain aware that on entering the labyrinth of this exploration there are still many avenues to be explored, such as the use of the voice or the role of percussion. In the following pages some ADMP



members have offered to share their thoughts on the role of music within their work, as well as providing specific pieces of music which they have found significant. If you too have ideas to offer the community on the role of music in your work, then we look forwards to hearing from you.

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# Suggested ideas for music as an adjunct to DMP

Hannah Murdoch

## *Some reflections and suggested resources:*

I mostly use *no* music at all, or if I do, it is for a reason. No music in my experience can give rise to more felt sense experiences and inner listening. Of course this is not always appropriate and music can support and express elements of experience otherwise lost.

For example, some young people I have worked with may choose pieces that support aspects of their experience, or that have an element of storytelling for them e.g. 'Anastasia – left alone', 'Britney Spears – Piece of me' 'Rihanna – Umbrella'. Strong beats and sometimes dances with choreographed moves from videos or films e.g. 'high school musical and the 'Now' CDs can initiate movement when there maybe high anxiety, particularly around beginnings. Often children can choose their own and are sometimes surprising, e.g. a 9 year old liked Ella Fitzgerald because of what she remembered about where she was when she used to hear it.

For groups of teenagers I have used pieces that hold, with strong middle range beats, often found in other world music. I use this with circle dances, again to hold beginnings, alongside the use of props. e.g. 'Leila – TransGlobal Underground remix'. Some teenage girls have also chosen R&B to move to. Mariah Carey has been chosen for one group improvised dance. As Dianne Duggan suggests, having a background beats that goes 1,2,3,4 or 1,2,3 can really help hold a piece together and give a base to work from and go back to.

With younger children under 6 I have used the old favourites such as head shoulders knees and toes to incorporate structured movement, build rapport and have fun. I have found that tranquil chill out CDs are good for endings with hyperactive children.

**Body Music and Instruments** tend to be the most useful for the one to one sessions with children, especially around developmental issues, I find. For example, using drumming, singing and other percussion instruments ( use your hands, thighs, click your fingers, hum, make up a song with a rhythm, even a silly one!) There are some good ones children learn at school that have a structure, like the clapping one I learnt at school many years ago, involving words and alternate hand claps standing opposite – this is good for contact and definition when things can feel disintegrated and undefined. Some background tracks that are not invasive can support some children for whom silence is too much (good also for them to make decisions and to experience taking

control regarding volume, stopping and starting etc). Nursery rhymes can also be good with some children (or older ones), when there is need for nurturing and maybe in conjunction with rocking e.g. rock- a-bye- baby.

With adults in groups I have used whatever feels appropriate for the age group, or issue. I tend to use music with fewer words and regular beats and again like the world music albums such as 'Coffee Lands'. More importantly I would use music to facilitate the energy that may or may not be expressed or even quite talked about. I will test it out with people and see how they get on with it if it feels appropriate e.g. Madonna or some upbeat Latin or Jazz.

I may use very quiet, ambient music in a relaxation or reflection period. Some classical pieces such as a few by Bach have been good. I love Deva Premal – 'Embrace'; she sings mantras which are profound and repetitive. I also like Bliss – 'A Hundred Thousand Angels', although this could be a bit too airy fairy for some tastes.

With Older adults with memory difficulties in a psychiatric setting I would always use music to unite and orientate. I have used songs to begin groups that are easy, old and memorable. Some children's songs have been good to use, such as a variation on London's Burning with introductions and names added. Even the most profoundly affected by Alzheimer's know this one and hum along. For this generation I have used old tea dances, Noel Coward, Frank Sinatra, and on occasion, football chants that the older gents and ladies seemed to know! The sing-along element has been really uniting for these often isolated folk, and brings many individual movement expressions that can be mirrored and integrated into group dances.

Although music can be really containing and can facilitate work on particular themes, I would always try to find ways to listen to the inner music and impulses of clients and to move from there if it is possible. Imposing music too readily or too soon can sometimes block a natural process from unfolding and may be about my anxiety rather than that of the clients. The art seems to be in creating enough space and stillness to listen, without the gap being so big that it feels uncontained.

Thank you and hope this is helpful. I could also do with some ideas if you have some, particularly for warm-ups that aren't too wordy and have a good steady holding rhythm.

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# Reflections on Music and Dance

Rosa Shreeves

When I am asked to write a few words about my thoughts on the function of music in dance, I begin with the obvious and then find it interesting to find what is currently intriguing me.

Often I do not use music; the impulse to move creating its own rhythmic patterns. Working with individuals or groups I may instigate music or respond to requests. Occasionally we will use percussion, voice sounds, words, these in any case often spontaneously arising from the movement process.

During Movement in the Landscape sessions we attune to the surrounding ambience and respond to the music of silence and the sound of movement.

For me *Music* takes many forms. And similarly music or words and likewise any other materials – fabric, objects, etc – might integrate within the dance. During this creative process other dimensions and metaphoric meanings may emerge.

What intrigues me is how our *relationship with* underlies our human interactions and is also fundamental to the arts and to nature. In terms of music something new arises from the *experience* of the space between the sound and the mover.

## Music Memories:

I feel it in my bones and muscles  
Visceral response to slow violin  
Haunting sadness of the flute  
That jaunty rhythm  
On my mind – percussing beat –  
Stop  
In a faraway playground  
Eighty children dancing  
Enraptured  
To the music of the band.

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## Useful CD's

- 1) The following CD was among those used in my Intercultural Workshop for ADMP in May '08 and many people were interested in having more details of it:

Claudio Music of Roger North – Volume 1 – Beyond CC55832 comprises a variety of fast and slow tempo pieces.



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'Dyad' was played for warming and connecting to the inner world of awareness and movement impulse.

Likewise Volume 2 – Tarantel, the second CD, contains a variety of rhythmic, flowing, mood or emotionally evocative music

Some of both CD's have been enjoyed by children, eg. Plonkity Plink.

Price: Single CD – £12 Both CD's – £20 plus £2 p&p

Contact: [roger.north@btinternet.com](mailto:roger.north@btinternet.com)

or send a cheque to:

Roger North  
24, Strand on the Green  
London W4 3PH

(The Guatemalan music in this workshop is not available)

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In addition

2) Used many times in many ways, this slow, sensuous, evocative piece, A Meeting by the River – "in the beginning there was sound":

WLA-CS-29-CD A Meeting by the River Cooder.Bhat

3) Passionate, energising, anti-doldrums music:

PACO DE LUCIA SEXTET Live ...One Summer Night Phillips 822 540-2 .

The book, *Moves*, has a section on Spontaneous Response to Music on page 59  
Bloom, K. and Shreeves, R. (1998) *Moves*. Amsterdam. Harwood.

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email: [rosashreeves@talktalk.net](mailto:rosashreeves@talktalk.net)





# Music for Dance Therapy

Jackie Waltz

## **The role of music;**

Choosing the music for my sessions is definitely one of the most important elements in my Dance Movement Therapy sessions. I find that music may in fact be as important as the movement in terms of therapeutic effect, seeing the DMT therapist-client relationship as intrinsically musical, like mother-infant 'attunement', (Stern, 1985, 1991). Music helps in structuring sessions and creating a therapeutic milieu. Most of my clients, especially the special needs clients, respond to music in a physical, emotional and highly kinaesthetic way. They respond directly to music's rhythm, shape, colour, melody and harmonies, mirroring these elements in their movement. Music puts them more at ease, and helps them to feel more comfortable in expressing their emotions and physicality, especially when it is familiar to them.

I choose different types of music for different client groups and also to suit individuals. The music reflects different tastes for different age groups and cultural backgrounds.

## **Working with the elderly;**

My elderly clients, for instance, love the 3 medley CDs I purchased from Erna Caplow-Lindner, co-author of *Therapeutic Dance/Movement, Expressive Activities for Older Adults* (Caplow-Lindner, Harpaz & Samberg, 1993). They sing merrily along to *Side by Side*, *Let me call you Sweetheart*, *Alexander's Ragtime Band*, and more. These CDs lend themselves exceptionally well to a wide range of movement: flicks, dabs, slashes et al, vitally important to encouraging mobility in the elderly and also come with booklets with lots of movement ideas, also games for special needs and cross-generations.

## **Developmental Movement;**

For a great multi-media tool showing developmental movement, check out the *KMP Strut*, available in DVD and CD, which charts the Kestenberg Movement Profile in rap form.

I find world music very suitable for dance therapy sessions, whether it is gypsy, African, Indian, gospel, country and western, Zorba the Greek, Israeli folk dancing, it's usually very rhythmic (most important-*Rhythm* definitely *is it!*) and very evocative. I find Afro-Celt very good if you want to do a longer and more explorative sequence. My special needs clients love Abba, Dirty Dancing, Billy Elliot.

## **Relaxation;**

Classical music is of course very good when you want some winding down music (it's not to everyone's taste, unfortunately in this day and age), I particularly like Grieg (*Lyric Dances*), Shostakovich (*Jazz Suite*), and Milhaud (*Creation du Monde*).

## **Live music;**

Making your own music is great as well, using percussion instruments, in which case I find it most useful with my clients to have quite structured tasks, i.e. playing definite rhythms or copying patterns first, and then going on to more open-ended improvisation. Clapping, finger-snapping, making sounds with your body and vocalizing are all additional ways of making music which is part of a dance therapy approach.

## **Books**

Stern, D. (1991) *Diary of a Baby*. London: Fontana

Caplow-Lindner, E., Harpaz, L. & Samberg, S. (1993) *Therapeutic Dance/Movement Expressive Activities for Older Adults*. Woodside, N.Y.: L/H Press

Armstrong, M.K., 2007, *KMP Strut*, DVD/CD, P.O. Box 56, Harrisville, NH 03450  
USA or [KMPStrut@verizon.net](mailto:KMPStrut@verizon.net)





# Conferences and Workshops

## Embodied Practice

*A dance movement experiential workshop which integrates body, emotions, ethics and the art form, for artists, arts/psychotherapists and health professionals.*

With dance movement psychotherapist and performer/choreographer

**Beatrice Allegranti PhD, MA DMP, SrDMP**

[www.embodiedpractice.co.uk](http://www.embodiedpractice.co.uk)

Date: 25<sup>th</sup> October 2008

Time: 10:00am-5:00pm

Venue: Lulham Dance Studio, Froebel College, Roehampton University

Booking: [www.letsengage.co.uk](http://www.letsengage.co.uk) or call: 0208 392 3541

The one day workshop offers a space to explore our autobiographical, relational and political selves. What kinds of autobiographical stories do we tell ourselves? How are these stories influenced by our life experiences and relationships? What happens when we increase our awareness of the hidden social hierarchies with our bodies? What happens when we allow ourselves to 'see' and 'be seen'?

The workshop will be facilitated with an attention to each individual's personal and embodied process whilst encouraging and maintaining awareness of professional practice whether this be in the realm of art or therapy/healthcare. The day is for all those who are particularly interested in the following:

- Addressing the concepts of 'public' and 'private' within the body
- Working with conscious and unconscious processes
- Tackling some of the assumptions and prejudices in our everyday verbal and non-verbal language
- Addressing the ethics of performance work and using the arts in health care; especially when drawing from personal autobiographical material
- Working with body and mind as an integrated whole and therefore making connections between 'felt-level' dance movement, language and power
- Exploring connection and separation with ourselves and each other

The day will involve a mixture of experiential exercises, playful activity and discussion.

**Beatrice Allegranti** is an interdisciplinary practitioner and researcher. She holds a PhD which brought together aspects of performance, psychotherapy and feminism. Currently, Beatrice is Artistic Director of the *Personal Text Public Body Lab*, Film-maker, Choreographer/Performer and Senior registered Dance Movement Psychotherapist ([www.embodiedpractice.co.uk](http://www.embodiedpractice.co.uk)). Beatrice is also co-ordinator for the part-time MA in Dance Movement Psychotherapy at Roehampton University, London.

For over fifteen years her interdisciplinary practice has included international performance for dance/theatre and film as well as training actors, dancers and therapists. Recent short films include: *aroundthebend* (2002) shown at Philadelphia Film Festival; *In My Body* (2005) selected for Video Channel a curated online film festival (<http://videochannel.newmediafest.org>) and *Personal Text Public Body* (2007) a touring film Installation shown in 2007 at: International Festival for Dance on Screen, Riverside Studios, London and in 2008 at: Museu Nacional de Soares dos Reis, Porto and Arts in Mental Health, Wanchai Cultural Centre, Hong Kong.

As a Dance Movement Psychotherapist Beatrice's clinical practice has been predominantly in the area of adult mental health within the UK National Health System. International facilitation includes: Institute for Dance and Movement Psychotherapy in Warsaw, Poland and Arts for Peace Foundation, Ireland. Beatrice continues to write, research, perform, direct short films and teach with a focus on integrating her performance and therapy experience.



## School of Social Community and Health Studies

# Body Orientated Psychotherapy: State of the Art

*Dr. Frank Röhrich, Consultant Psychiatrist, Body Psychotherapist and  
Honorary Senior Lecturer Queen Mary University London*

**A SIX week CPD short course**

This short course introduction to body psychotherapy will enable participants to gain an understanding of its specific contribution to mental health and wellbeing. The historic roots and theoretical underpinnings from developmental psychology, phenomenology of body experience and body image will be offered. Findings from research into psychosomatic symptoms and affective neuroscience will be discussed together with a presentation of diagnostic methods and intervention techniques. The course will include practical demonstrations of individual and group work.

A certificate of attendance will be provided for participants.

### Event Details

**Date:** Alternate Tuesdays - 23 September (2.00-5.00pm) 7 October, 21 October, 4 November, 18 November, 2 December 2008 (2.30-5.30pm)

**Applications due by Tuesday 9 September 2008**

**Venue:** Meridian House, 32 The Common,  
Hatfield, Hertfordshire, AL10 0NZ

**Fee:** £195 (Reductions for UH Staff and students)

Applications by 12 Sept 2008. To make a booking to attend please contact:  
Judy Turner [counsellingadmin@herts.ac.uk](mailto:counsellingadmin@herts.ac.uk) 01707 285856

Queries to Professor Helen Payne [h.l.payne@herts.ac.uk](mailto:h.l.payne@herts.ac.uk)



The British  
Association of  
**DRAMatherapists**  
www.badth.org.uk

The British Association of Dramatherapists and  
The Association for Dance Movement Psychotherapy UK  
joint conference to be held on Saturday 15th November  
2008, Central London

## The Symbolic Body

### Programme

**9.30 to 10.00 - Registration and coffee**

**10.00 to 10.15 - Introduction**

Geoffrey Unkovich, Chair - Association of Dance Movement Psychotherapy UK and  
Madeline Andersen-Warren, Chair - The British Association of Dramatherapists.

**10.15 to 11.45 - Are We Addressing The Matter of the Heart or The Heart of the Matter?**

Bringing anonymised case examples to life, this workshop will offer three perspectives on how clients might use The Symbolic Body in Dramatherapy and Dance Movement Psychotherapy to help tell their stories of threat to survival. It will also explore how we as clinicians understand and utilise this concept of Body within our practice. In a practical and creative exploration of the relationship between these two modalities, participants will have an opportunity to identify key similarities and differences. Here, experiential work will be underpinned by theoretical knowledge and contemporary research in the field. Whether you are a first year student or experienced therapist, we welcome you to this collaboration of bodies and minds!

**Vicky Karkou** is a Dance Movement Psychotherapist, researcher and lecturer, programme leader for the new M.Sc. in Dance Movement Psychotherapy at Queen Margaret University, Edinburgh and a postdoctoral fellow at the University of Hertfordshire. She co-authored the book: *Arts Therapies: A Research-Based Map of the Field* (with P. Sanderson: Elsevier) and is currently editing her second book titled: *Arts Therapies in Schools: Research and Practice* (Jessica Kingsley).

**Susan Scarth** is a Senior Dance Movement Psychotherapist, visiting lecturer - UK and Europe, supervisor, UK representative developing European Association. Currently Susan is a student on LIMS/BF New York CMA training, following her passion for Laban/Bartenieff Movement Studies.

**Genevieve Smyth** is a Dramatherapist, Dramatherapy supervisor, manager, researcher and international trainer. Beyond her NHS work and a private practice, Genevieve Chairs Dramatherapy Scotland, is BADth's Link Person for Scotland, a regional Arts Therapies representative and a writer within education and health.

**11.45 to 12.00 - Break**

**12.00 to 1.30 - Option 1**

#### A) Aphrodite the Goddess of Love and Creativity

Our journeys of expansion are inspired by powerful myths and stories.

In spite of her superiority the goddess is jealous of the human with whom her son Eros is in love. She tests her daughter-in-law Psyche's resourcefulness through her performance of four symbolic tasks, which enable her to grow and clear her path.

Help arrives in the form of metaphorical ants, the foresight of a green reed growing by the roadside, the ability of an eagle to dive into a forbidding steam filling a flask with water, and learning to say 'NO'

(PTO)



We will use the tools of writing and movement.

**Lea Bartal**, Senior Dance Movement Psychotherapist, Psychothesis, headed Movement Departments in Theatre Schools. She has wide experience of working with actors and the general public; leads workshops throughout Europe and Israel. Practises T'ai Chi, Chi Kung; paints and writes poetry. Honorary Member of Association for Dance Movement Psychotherapy UK. Co-author of *Movement Awareness and Creativity*, and *The Metaphoric Body*.

OR

**B) Adopting cultural symbols, in the wake of a wave** (Dramatherapy interventions with Sri Lankan children, surviving the Tsunami).

This piece will explore the use of Dramatherapy with Sri Lankan children living with trauma and loss after the Tsunami. More specifically, it will describe how re-enacting the event proved to be cathartic and how the children interpreted Dramatherapy techniques and interventions through their own cultural lenses.

**Debra Colkett** originally trained and worked professionally, as an actress and singer, before attending Hertfordshire University to study Dramatherapy. Her clinical experience is in Adult mental health, working with older people living with Dementia (writing a pilot project for the NHS), Female Borderline Personality Disorder (specialist unit), Forensic setting and more recently Adolescents residing in MSU.

**1.30 - 2.30 - Lunch (can be obtained in the cafeteria or locally)**

**2.30 - 4.00 - Option 2**

**A) Moving Mountains**

A workshop to explore the wealth of symbolic knowledge stored in the body. The expressive body is our only vehicle for life in this world. What we think, what we feel is unconsciously expressed through body movement and may be expressed, consciously and symbolically through dance. Our dances carry personal meaning and our cultural dances shape our society. Many cultures believed that their ritual dances could 'move mountains' and they were symbolically empowered. We can experience symbolic empowerment through dance and movement.

**Jeannette MacDonald**, BA (Hons) Psych., ARAD, SrDMP. Faculty member Rotterdam Dance Academy. MA Dance Movement Therapy. Faculty member of DMT Italian Summer School, APID. Faculty member of Warsaw DMT Institute. She is Consultant Dance Movement Therapist for the Creative Therapy Service (NHS) in Exeter and is in private practice in Exeter and London. Jeannette is clinical supervisor to senior colleagues, students in training and other arts therapists. Trained at the Royal Ballet School, London and a life member of The Royal Academy of Dance, Jeannette danced professionally in Europe and the UK before pioneering dance movement therapy within the English NHS (National Health Service). Practical Teaching Supervisor for Royal Academy of Dance. Chairperson of the Association for Dance Movement Therapy UK (ADMT UK) from 1998 - 2002, Jeannette has represented the profession at the HPC (Health Professions Council) working towards State Registration for DMP. Senior Lecturer, Clinical Placement Coordinator, MA Dissertation Supervisor, Laban Centre, London for PG Dip/MA DMT Course 2000 to 2002. She was a member of the CNAA Validation panel for the first postgraduate DMT course in the UK. She is interested in developing appropriate clinical experience for DMT students, Standards of training and developing the primacy of dance in Dance Movement Psychotherapy. Clinical specialties include, complex PTSD, body dysmorphia.

OR

**B) Body versus Mind: an embodied approach to working with eating disorders.**

Individuals with eating disorders often see their body symbolically. They have an ideal body that they strive for which for them symbolizes control and perfection. Attempts to alter this symbol may be met with much resistance. Dance Movement Psychotherapy offers these individuals opportunities to experience an embodied self, a 'here and now' experience of their bodies/selves through spontaneous movement. This then makes it possible for there to be a differentiation between the symbolic and embodied. This enables awareness of difference and creates an opportunity for choice. Movement and verbal conversations between the two aspects (embodied and symbolic) can take place, and their internal conflicts can be externalized.

We will look at how disowned and conflicted feelings, such as anger, play a role in maintaining the mind/body split and how play and physical expression help these individuals reown the split off aspects of themselves.





## AUTHENTIC MOVEMENT INTRODUCTORY AND ON-GOING TRAINING COURSES

With  
**Professor Helen Payne**

### **Dates:**

#### **Weekends**

Fri 2.00-Sun 5.15pm. 23-25 Jan 2009; 13-15 Mar; 8-10  
May 2009;

**Venue:** Letchworth Centre, Hitchin Rd, Letchworth,  
Herts. B and B available locally (for list, timetable, maps  
send SAE with booking form. Bring your own cushions  
and art materials.

#### **Residential**

12-16 Nov 2009. Request separate application form/  
timetable.

For further details and an application form please contact  
Helen 01438 833440 [H.L.PAYNE@herts.ac.uk](mailto:H.L.PAYNE@herts.ac.uk)

Helen Payne, PhD,  
Professor of Psychotherapy,  
School of Social, Community and Health Studies,  
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Meridian House,  
32 The Common,  
Hatfield,  
Herts AL10 ONZ  
tel: 00 44 (0)1707 285861





## Extra News from ADMP UK Council

Dear All Members,

Following the meeting of ADMP UK council on Saturday 20<sup>th</sup> September 2008 there is important information to share with you. Please read all the information included with this Council News update.

**Conferences** – We hope that you are all aware of the two conferences coming up that ADMP are involved with.

**The Symbolic Body** – This is the joint conference day with The British Association of Dramatherapists in London on **November 15th**. Details of this and a booking form are included with this mail-out and on the ADMP website. We hope that you support this day of a rich array of presentations and workshops.

**Psychological Therapies in the NHS** - This two day conference is in London on November 26th and 27th. ADMP have a few reduced price tickets available to the membership and these must be purchased by **October 10th**, so contact the chair **NOW** if you want a ticket at a reduced rate. [admchair@yahoo.co.uk](mailto:admchair@yahoo.co.uk)

**Non - Statutory Sector Pay Survey** – The British Association of Art Therapists have compiled a very easy to complete survey concerning pay rates in the non-statutory sector. Please do complete this survey in **October** of 2008 considering any work that you may do as a DMT/P in areas such as charities, private and independent practice. The link for this survey is

<http://www.surveymethods.com/EndUser.aspx?F0D4B8A1F4BAA1A4>

Or you will be able to do this via the ADMP UK website very soon.

**SRDMT CHANGES** – As announced at the AGM in June there is a need to make a change in the SRDMT registration for ADMP. Following the AGM of ADMP's Professional Registration Committee (PRC) and further ratification by council the timetable of changes is as below. There is work still being done by council and senior practitioners on the final version of the necessary changes to criteria, these will fall in line with HPC and the other Arts Therapies guidelines for becoming a Supervisor.

- ❖ Council ratified the PRC proposal that the final submission for any new applications or re-writes for SrDMP level would be August 31st 2009 (with

the new procedures starting September 1st 2009). Applications that are already in the system by August 31st 2009 will be processed according to the original SrDMT/P criteria and procedures. If they successfully satisfy those criteria the applicant will automatically be included on the new Register of Supervisors. All processes must be completed within one year of submission.

(The PRC will be disbanded from August 31st 2010).

- ❖ It should be noted that any SrDMT/P's awarded this level of registration prior to Sept 2009 would automatically be included on the Supervisor's Register, as well as any applicants who submit before the deadline (August 31,2009) who successfully fulfil the original SrDMT/P criteria.

From September 2009 there will be a period of transition to complete ADMP's supervisor training courses. So anyone wishing to train as a supervisor at this time will be recommended Supervisor training courses already in place with one of the other Arts Therapies. ADMP council will be more able to advise you about these courses at next years AGM in June.

**Website** – Council are working very hard to upgrade our website and we hope to have the new **ADMP** website up and running in the first few months of 2009. There is an awful lot to consider/revise on the website so a dedicated team are looking at the content and our needs in detail before this can go 'live'.

We all look forward to your continued support and response to all that we do on your behalf.

Take good care & Thank you for reading and participating in all we offer.

Geoffery Unkovich  
Chair – ADMP UK



# Brief Reports from the Field

## Crossing Borders

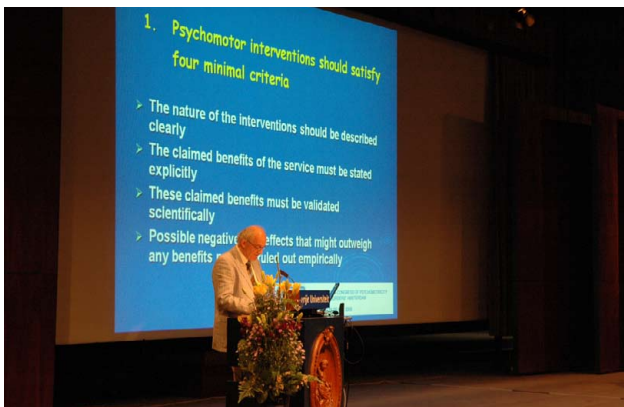
Report on 4th European Congress on Psychomotricity  
'Crossing Borders' Amsterdam May 21-23 2008

Bonnie Meekums, PhD, SrDMT, Hon Fellow ADMP UK

I applied to go to this conference because it has been some time since I was able to attend a conference that would expand my horizons in movement and dance. I wanted to find out what psychomotricity is, and what its relationship is to Dance Movement Psychotherapy (DMP). The title of the conference seemed apt.

The profession of psychomotricity dates back to the 1930s and now exists throughout Europe except the UK, with 15 members of the European Forum of Psychomotricity (EFP). The EFP was formed in 1996, the same year as registration of DMP practitioners became available in the UK for the first time through the then named Association for Dance Movement Therapy (ADMT, now ADMP to reflect the psychotherapy focus of the profession).

Psychomotricity is practised both in therapy and education, and has a strong evidence base. On their website ([http://www.psychomot.org/european\\_forum\\_psychomotricity.htm](http://www.psychomot.org/european_forum_psychomotricity.htm))<sup>1</sup>, the EFP state that: 'Based on a holistic view of the human being, on the unity of body and mind, psychomotricity integrates the cognitive, emotional, symbolical and physical interactions in the individual's capacity to be and to act in a psychosocial context'. DMP, on the other hand as defined by ADMP (<http://www.admt.org.uk/whatis.html>)<sup>2</sup>, is: 'the psychotherapeutic use of movement and dance through which a person can engage creatively in a process to further their emotional, cognitive, physical and social integration.' The ADMP website goes on to say that the profession is 'founded on the principle that movement reflects an individual's patterns of thinking and feeling.' So, the goals are very similar but DMP places a very clear emphasis on two things: the creative process and psychotherapy.



### The Friday closure speech

Photo courtesy of EFP accessed 1.7.08 at <http://>

[picasaweb.google.com/efp2008workshops/FridayClosure/photo#5205831079620598338](http://picasaweb.google.com/efp2008workshops/FridayClosure/photo#5205831079620598338)

I went in part to present some of my own research, but more importantly I wanted to meet people from other countries and engage in dialogue with them. The project began well. On arrival at my hotel I was thrown together with someone else who was not in fact booked into my conference, but was a Spanish chap working for an NGO. We were both waiting for our rooms to be ready. I had been travelling since half way through the night, and he had had no sleep at all having come from Israel. He gallantly nevertheless insisted that I take the first room available. We fell into easy conversation, having both been volunteers abroad in our youth. I wished I could have met up with him again but it was like one of those golden moments for which we should be grateful, that come and go like feathers on the wind.

Even more chance was the fact that despite the fact that we had made our own choices about hotels and paid for them, the only other two presenters in the little forum to which I presented were both booked into the same hotel. One was a Russian, the other Portuguese, and all of us are dance movement (psycho)therapists. We got to hang out together a fair bit, and welcomed into our gang a trainee in psychomotricity, a Filipina who now lives in Germany. So, one of my boxes was well and truly ticked; a truly international bunch.

One of these European colleagues, Graca Santos from Portugal, became a particularly important part of my time in Amsterdam. I attended her workshop as well as her paper, and she has invited me to develop an Erasmus (European) exchange between our two universities (mine is University of Leeds, hers is University of Évora). This is particularly exciting, as I found her research very useful and I look forward to developing further the opportunities for us to work together. We were both presenting about work with aggressive children, and had similar results following DMP in terms of the reduction of aggressive behaviours as rated by teachers and the development of empathy<sup>3</sup>.

By far the most inspiring speaker for me was the German Dance Movement Psychotherapist and psychologist Sabine Koch. Like all psychologists, she has a talent for designing simple and elegant experiments that explore *how* DMP works. Her keynote speech was entitled 'Embodiment: the influence of movement qualities on affect, attitudes and cognition'. Her research has shown for example that sharp movements produce more negative emotions than smooth movements. What is more, if people move in an approach mode, they evaluate a neutral visual stimulus more positively than when asked to move in an avoidance mode.



### Sabine Koch at the conference

Photo courtesy of EFP accessed 1.7.08 on <http://picasaweb.google.com/efp2008thursday/ThursdayMorningKeynoteLectures9001030/photo#5205887709766436194>

The conference has some really good entertainment, including gymnastics displays, a canal cruise and a party. There was also a good balance between sitting down and listening and being active in workshops as far ranging as DMP on the one hand and learning how to balance on equipment like very large balls, spin plates and do martial arts moves.

In my application for funding, I defined a successful outcome as:

- Having made at least one new contact that I can follow up in terms of shared research interests.
- Coming home feeling stimulated and renewed.
- Having learned some new information and / or practical approaches that will enhance my teaching.

I am looking forward to following up on the first of these. I certainly came home feeling stimulated and renewed, and have loads of new information and ideas on which I can build for both teaching and research.

Report compiled 4.7.08

**Acknowledgement: the travel cost of this project was supported by the Lisa Ullmann Travelling Scholarship Fund.**

(Endnotes)

- 1 Web information accessed 1.7.08.
- 2 Web information accessed 1.7.08.
- 3 A report of my research can be found at: Meekums, B. 2008. Developing emotional literacy through individual Dance Movement Therapy: a pilot study. *Emotional and Behavioural Difficulties*, 13 (2): 95-110.

## Group Theory and DMT

### Seminar Notes compiled by Dawn Batcup SrDMT

As Dance Movement Therapists, we draw on many theories to inform our practice as well as our own rapidly developing body of knowledge. Group theory is particularly relevant for us, as we most often provide DMT to people in groups. Starting with the family, people live, play and work in groups and yet the theories about them often leave people mystified and confused. In an attempt to demystify and clarify group dynamics so that they may be effectively thought about and applied in DMT practice, Susan Scarth and myself ran a short series of seminars on the MA DMT at Goldsmiths in 2006/7. What follows is a clinical vignette and summary of the group theory seminars.

### Brief Clinical Vignette

Presented is a snippet from an out patient group I used to run for adult mental health services in London for women with mental health problems. This was made up of women who had been referred for one of the Arts Psychotherapies by either the Community Mental Health Teams or one of the inpatients wards. I assessed all potential members and worked with up to six women in the group. Their ages ranged from 30 to 65. All had long and often turbulent mental health histories and various diagnoses, such as depression,

personality disorder and eating disorders. Many had made suicide attempts and there were those who occasionally resorted to harming themselves. Understandably, there was a reluctance to think in a psychodynamic way about their diagnosis or histories. Typically, the women found being in a group difficult and thought their problems were either unique or not important enough to share. Most had had a series of unsuccessful intimate relationships. Sometimes, the women in the group would experience my interpretations as an attack and would regularly challenge the group's boundaries. The group ran weekly for an hour and a half and women tended to stay for a year or two. I used a Chacian model to structure the movement and we would talk before moving. We also talked after the movement about what it had brought up.

Although the women could talk a lot, as they settled into the group they became increasingly able to use movement as a way of working things through in the session. For instance, in the approach to a two-week break in the therapy, they dismissed my reminders about this when we talked at the start of the group. During the movement part of the session, one of the women giggled playfully as she held a prop to the front of her as if she were pregnant. As she pretended to struggle with the weight of the bump, she caught the group's attention. Then, without warning, she dropped the prop heavily to the floor and walked away. Other group members



gaped. In reflecting upon the movement later, I said that there were lots of pregnant pauses as the group were either quiet or talked about everything but that pivotal moment in the movement. This led the woman who had been the protagonist to say that she loved the idea of pregnant pauses but was repulsed by pregnancy. I picked up on the contrast and made a link to the group members feeling dropped by me in the break. The group could at this point acknowledge this and talk about it.

Here it would seem that the movement and props enabled the group to overcome the defence against thinking about itself as identified by Bion. Instead, the women managed to inquire into the group's workings through a member playing out one aspect of the deeply held taboos of the mother's body, in this instance, symbolised by a pregnant and abandoning female therapist/mother.

In the group, I regularly reflected the women's bodily cues and verbal themes. I referred to this particularly at the start of the group to initiate the 'warm up' and in an attempt to find a way into using movement in a more 'free association' way. On one occasion, a verbal theme at the beginning about holding onto or letting go was turned into a nonverbal opening and closing of hands in order to make the transition into moving. This movement intervention brought people into closer proximity as they became fascinated by how the same thing could be done so differently. This had resonance with one of Yalom's ideas about interpersonal issues in the group that was learning about similarity and difference. Being together with others whilst also being different was clearly seen by the women in this example and perhaps this would not always be so easily seen when working solely in the verbal domain.

It was Foulkes who brought the attention of all group therapists to the resonance of themes, mirroring and the horizontal process, which has been central for DMTs. Today, we might redefine his concepts slightly to better fit with non-verbal mindfulness and communication by drawing on attunement (Stern, 1995) and empathetic reflection (Sandel, 1993).

## Major Group Theorists

### Background

Freud never practiced group therapy, but was aware of the significance of group phenomena in *Group Psychology and the Analysis of the Ego* (1921). The Second World War was a spur to the growth of group therapy. Groups were an economical way to cope with the large patient population among the military.

### Yalom

#### *Interpersonal Theories*

Yalom talked about the developmental phases, tasks or sequences for the group's interpersonal learning. He raised

key interpersonal issues, such as the understanding of similarity and difference between members. Forces that hamper intimacy and closeness, e.g. goblet issues, sub grouping and so on, were also highlighted. Yalom is perhaps most famous for the *Curative Factors* he identified in the group process. These were Interpersonal learning, catharsis, group cohesiveness, insight, development of socializing techniques, existential awareness, universality, installation of hope, altruism, corrective recapitulation of primary family group, guidance and imitative behaviour (Yalom, 1975).

### Bion

#### *Group- as- a-Whole*

Bion discussed analysis of the group. He argued that the therapist interprets the transference relationship of the whole group. Bion is well known for his thinking on how particular kinds of projections function as an attack on thinking and linking. For him, the physical and mental are undifferentiated, and this was the mind. Bion argued that the group defends against the key task of thinking about itself because to inquire into its workings is to enquire about the taboos of the mother's body. The group's *basic assumptions* hampering the effective group take three possible forms, dependence, pairing and fight/flight. Bion has influenced the model taught to therapists working at the Tavistock Clinic.

### Foulkes

#### *Group Analysis*

Foulkes proposed analysis through and of the group. He argued that the function of the therapist or group conductor was for facilitating communication (not interpretation). For Foulkes, communication was both in the group and with the psyche. He argued that the group's focus should be on the horizontal process. Foulkes brought our attention to the resonance of themes and mirroring. His theory combined psychoanalysis, Gestalt psychology and sociology. Foulkes said that groups function at three levels, current adult relationships, individual multi-personal transference relationships and shared feelings and fantasies. He was one of the leading founders of the Institute of Group Analysis.

#### *Analytic Groups*

In summary, analytic groups are non-directive, long term and concerned with personality change rather than just symptom relief. They aim to understand behaviour in the context of people's histories and work with making conscious the unconscious themes in the group. Analysis occurs in the group as the treatment of the individual within the group.

## Dance Movement Therapy Group Theory

### Chace.

One of the pioneers of DMT theory and practice, Marian Chace, developed her model from work commenced in 1940's in psychiatric hospital groups with long-term schizophrenic patients. She developed her model parallel



to Wilhelm Reich who were both *experimenting with psychomotor therapeutic interventions as a way to unlock thoughts, ideas, and feelings that they believed were held in the musculature in the form of rigidity.* (Levy 1988. p.25)

Chace was concerned with body action, symbolism and the *Therapeutic Movement Relationship*. This meant the involvement of the therapist in a movement relationship or interaction as a means of reflecting *a deep emotional acceptance and communication*, which was revolutionary. She also discussed the importance of the *Group Rhythmic Movement Relationship*. Chace is perhaps most famous for her work on devising and naming the structure for DMT groups, *the Warm up, Development and Closure*.

#### **Schmais.**

A student of Chace, Claire Schmais developed her model further and established the *Eight Healing Processes* in group development

Synchrony  
Expression  
Rhythm  
Vitalization  
Integration  
Cohesion  
Education  
Symbolism

Both Chace and Schmais have models that reflect Yalom's and Foulke's perspectives on group process

#### **Dosamantes.**

Irma Dosamantes was a student of Chaiklin and Schmais. She advocated Margaret Mahler's Separation-Individuation process, an object relations perspective that had relevance to Bion's model of group processes. She researched *Group Formation* in DMT groups and distilled the *Spatial Elements* of interpersonal relationships as:

*Pre-attachment phase*; this constitutes random positions with rigid or neutral boundaries.

*Inclusion phase*; the forming of subgroups of equal size with permeable boundaries.

*Power phase*; this comprises the polarization of subgroups of unequal size with the majority group emerging, the boundaries being permeable and rigid.

*Affection phase*; this is characterised by a circular form with subgroups characterised within the circle.

#### ***Self-reflection on the MADMT and Conclusion***

By way of conclusion to the series of group theory seminars on the MA DMT at Goldsmiths, students were asked to reflect on their own experience in groups, identifying and

making links to the DMT or group theory. Students were also asked to question whether groups do have behavioural patterns and stages and to be curious about the ways they may have been lead by the facilitator.

Alongside their personal experience, students had recently completed twenty-six weekly experiential groups, which contained around six to eight participants. They also had experience of a large group, twice a term, whose membership was the whole cohort of DMT students plus DMT staff members. Students were asked to compare and contrast these experiences and to discuss how it was similar to, or different from, their colleagues. In addition they were asked to notice if the role of the facilitator was different in each group and to note how this might have changed when they made a transition into moving from talking within groups. Students were then encouraged to clarify what was learnt and to think of possible theories, which explained the learning. In the following weeks, students presented to their peers about DMT, the major group theorist and their group experiences.

It is my opinion that, as Dance Movement Therapists, group theory is particularly relevant for us and, conversely, our unique approach means we have much to contribute to the demystification and clarification of group dynamics and processes for those not working psychotherapeutically with the body and movement.

#### **Reading for Group Theory**

Bion, W.R. (1959) *Experiences in Groups and Other Papers* New York: Basic Books

Bion, W.R. (1962) *Learning From Experience*, London: Heinemann

Bion, W.R. (1967) *Second Thoughts*. London: Karnac

Dalal, F (1998) *Taking the Group Seriously: Towards a Post-Foulkesian Group Analytic Theory*. London: Jessica Kingsley

Foulkes, S.H (1965) *Therapeutic Group Analysis* New York: I U press

Foulkes, S. H & Anthony E.J (1965) *Group Psychotherapy: The Psychoanalytic Approach*. Baltimore: Penguin books

Foulkes, S.H. (1975, 1986) *Group Analytic Psychotherapy: Method and Principles*. London: Karnac Books

Foulkes, S.H. (1965) *Therapeutic Group Analysis*, London: Allen & Unwin

Foulkes, S.A. & Anthony, E.J. (1984) *Group Psychotherapy: The Psychoanalytic Approach*, London: Maresfield



Freud, S. (1921) *Group Psychology and the Analysis of the Ego* in J.Strachey (ed. & Trans.) *The Standard Edition of the Complete Psychological Works of Sigmund Freud* (Vol 18, pp.65-143) London Hogarth press, 1955.

Rutan, S. and Stone, W. (2001) *Psychodynamic Group Psychotherapy* 3<sup>rd</sup> edition. London: Guildford

Stern, D.N. (1985) *The Interpersonal World of the Infant* New York: Basic Books.

Nitsun, M. (1996) *The anti-group: Destructive forces in the group and their creative potential*. London: Routledge

Yalom, I.D (1970) *The Theory and Practice of Group Psychotherapy*  
Basic Books: Harper Collins

Yalom, I D (1983) *Inpatient Group Psychotherapy*  
Basic Books: Harper Collins

### DMT Groups

Dosamantes, E. (1990) Movement and psychodynamic pattern changes in long-term DMT groups. *American Journal of Dance Therapy* Vol. 12 No 1 Spring/Summer pp 27-44

Dosamantes, E. (1992) Spatial Patterns Associated with the Separation-Individuation Process in Adult Long-term Psychodynamic Movement Therapy Groups. *The Arts in Psychotherapy* Vol 19 pp 3 – 11.

Johnson, D & Sandel, S (1977) Structural Analysis of Group Movement Sessions: Preliminary Research. *American Journal of Dance Therapy, Fall/Winter, pp 32 – 36*

Holden, S. (1990) Moving Together: the group finds a dance, *Group Analysis* Vol 232 (3): 265-76

Levy (1988) *Dance Movement Therapy: A Healing Art*. NDA AAHPERD ISBN 0-88314-380-1

Meekums, B. (2002) *Dance Movement Therapy A Creative Psychotherapeutic Approach* Sage publications

Ness, J (1982) *A Developmental Approach to Interactive Process in Dance Movement Therapy*. American Journal of Dance Therapy Vol 5 pp 43-55

Payne, H (1990) *Creative Movement and Dance in Group work* Oxon: Winslow Press

Payne, H (1992) *Dance Movement Therapy Theory and Practice* London: Routledge

Payne, H. (ed.) (2006) *Dance Movement Therapy: Theory and Practice – 2<sup>nd</sup> edition*. London: Tavistock/Routledge.

Sandel, S.L., Chaiklin, S & Lohn, A (eds) (1993) *Foundations of Dance/Movement Therapy: The Life and Work of Marion Chace*. Columbia, Maryland: The Marion Chace Memorial Fund of the American Dance Therapy Association.

Schmais, C. (1981) Group Development and Group Formation in Dance Therapy, *Arts in Psychotherapy* Vol 8: 103-7

Schmais, C. (1985) Healing Processes in Group Dance Therapy  
*American Journal of Dance Therapy*, 8, 17-36

Schmais, C (1981) Group Development and Group Formation in DMT *The Arts In Psychotherapy, Vol 8. pp.103 – 107*

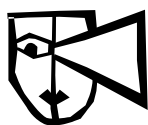
Stanton-Jones, K. (1992) *An Introduction to Dance Movement Therapy in Psychiatry*. London: Tavistock/ Routledge.

### Research Resources

Ute Karowitz has found this website useful – The Foundation of Integrated Health, talking about what is research evidence.

<http://www.fih.org.uk/go.rm?id=281>





## Book Announcements

### **Feeling Like Crap. Young People and the Meaning of Self-Esteem**

**Nick Luxmoore.**

We use the word all the time, but what exactly is self-esteem, and how do young people develop it? *Feeling Like Crap* explores how a young person's self is constructed, and what might really help that self to feel more valued and confident. Through accounts of his individual and group work with young people, Nick Luxmoore demonstrates how listening to, engaging with and being respectful of young people can provide the support they need to help them repair their sense of self and offer them new possibilities and directions in life.

When Grace was three, her parents split up and she went to

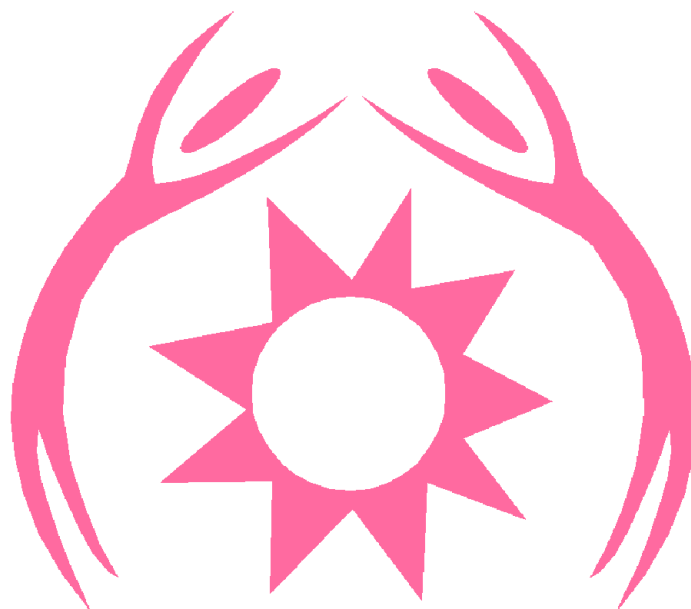
live with her father while her sister stayed with their mother. Allie has slipped behind with her school work since falling out with her best friend, and any positive feelings about himself that Conor may have dared to develop have been beaten out of him by his father.

This compassionate and thought-provoking book will be an invaluable resource for counsellors, teachers, youth workers, and anyone else working to help young people with self-esteem issues.

Book details:  
2008, 160 pages, paperback.  
ISBN: 9781843106821.  
£13.99/US\$24.95.

Find out more and buy this book:

<http://www.jkp.com/new/9781843106821>





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## Therapists and Supervisors

### **Dr Beatrice Allegranti SrDMT, MA DMT**

Offers individual and group supervision integrating Feminist and Dreambody Approaches. CPD short courses also available. Visit [www.embodiedpractice.co.uk](http://www.embodiedpractice.co.uk)

Contact [b.allegranti@roehampton.ac.uk](mailto:b.allegranti@roehampton.ac.uk) or call 0208 392 3377.

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### **Leah Bartal SrDMT**

Offers individual DMT and Supervision including Psychosynthesis, Jungian Background, Feldenkrais and Authentic Movement. Monthly workshops include writing and mask-making. North West London and internationally.

Tel/Fax: 0207 722 9768.

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### **Dawn Batcup, SrDMT**

Offers supervision or DMT in South London using a psychodynamic perspective. Dawn's experience is in mental health across the various specialisms, including Forensics.

Contact: [dawn.batcup@swlstg-tr.nhs.uk](mailto:dawn.batcup@swlstg-tr.nhs.uk) or Tel. 0208 682 6236

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### **Catherine Beuzeboc, SRDMT**

Offers individual sessions in movement psychotherapy and supervision in North London NW5. Existential / Humanistic orientation.

Tel: 0207 267 6253 or email: [c.beuzeboc@btinternet.com](mailto:c.beuzeboc@btinternet.com)

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### **Penelope Best SrDMT**

Offers individual and group creative process oriented supervision and consultation sessions in East London and east midlands (Milton Keynes). Contact: [pbestworks@aol.com](mailto:pbestworks@aol.com)

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### **Katya Bloom, SrDMT, CMA, MA, PhD**

Offers individual movement therapy and supervision in North London.

Tel: 0208 444 2071 or email: [kbloom@talk21.com](mailto:kbloom@talk21.com)

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### **Sue Curtis, SrDMT**

Available in South East London for supervision, training or workshops. Sue specialises in all aspects of work with children and young people.

Contact: Tel: 0208 244 0968 or [suecurtisdmnt@ntlworld.com](mailto:suecurtisdmnt@ntlworld.com)

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### **Yeva Feldman, SrDMT, MSc, Gestalt Therapist in advanced training**

Offers supervision (individual and group) in South West London and professional development workshops.

Contact: Tel: 07958 610234, email: [yeva.rob@gogglemail.com](mailto:yeva.rob@gogglemail.com)

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### **Tracey French, SrDMT**

Available for supervision and Individual DMT

Contact: [traceyfrenchdmnt@yahoo.com](mailto:traceyfrenchdmnt@yahoo.com)

Tel: 07760175756

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### **Caroline Frizell, MA, SrRDMT**

North London. Supervision and training Embraces inclusive practice and the natural environment.

Tel: 0208 886 2547 [frizarm@btinternet.com](mailto:frizarm@btinternet.com)

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**Gerry Harrison SrDMT** - available for supervision, especially for those

working in psychiatric settings.

Contact: [gerryharri@hotmail.com](mailto:gerryharri@hotmail.com) or 07977 094 789

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### **Linda Hartley, MA, SrDMT, BMCA, RMT, UKCP**

Offers personal therapy, integrating Authentic Movement, Body-Mind Centering and a transpersonal and body-oriented approach to Psychotherapy. Supervision available in and Cambridge and Norwich.

Contact: Tel: 01799 502143 or email:

[Linda@lindahartley.co.uk](mailto:Linda@lindahartley.co.uk) [www.lindahartley.co.uk](http://www.lindahartley.co.uk)

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### **Sarah Holden, BA hons, IGA, UKCP**

offers individual and group movement psychotherapy, supervision. South London.

Contact: tel 07956208276 or

[sarahholden@movementpsychotherapist.com](mailto:sarahholden@movementpsychotherapist.com)

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### **Martina Isecke SrDMT, Dance Artist, Psychologist**

Creative coaching and dance holidays at Lanzarote, Canary Islands, Spain. Offers supervision, DMT workshops, dance tuition.

Contact: Tel: 0034 6805 88728 or e-mail:

[tinaise@yahoo.co.uk](mailto:tinaise@yahoo.co.uk), [www.martinadance.com](http://www.martinadance.com)

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### **Fran Lavendel, MA, SrDMT, BMC practitioner**

Teacher of Authentic Movement offers movement psychotherapy, group work and supervision.

Contact: [lavendelmaclea@ednet.co.uk](mailto:lavendelmaclea@ednet.co.uk) or

Tel: 01968 676461

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**Jeanette MacDonald, SrDMT, ARAD**

Offers individual therapy and clinical supervision in London and Exeter. Also available for Advanced/ Professional Dance workshops and private coaching. Contact: Tel: 01392 873683 or email:

[info@exedance.demon.co.uk](mailto:info@exedance.demon.co.uk)

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**Dr. Bonnie Meekums SrDMT, UKCP Hon. Fellow ADMT UK**

Is available for both private individual therapy and clinical supervision in the North and North West of England.

Contact: University of Leeds, Wakefield Site, Margaret Street, Wakefield WF1 2DH. or email: [b.meekums@leeds.ac.uk](mailto:b.meekums@leeds.ac.uk)

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**Alyson Nehren MA, DTR, CMA, RSMT/E, SrDMT**

Distance supervision online or landline (at no telephone charge to you). Specialization in somatic and developmental approaches to Dance Movement Therapy. Integrating Laban Movement Analysis (LMA), Bartenieff Fundamentalssm (BF) and aspects of Body-Mind Centering®. Payment accepted via secure server.

Contact: [anehrensomatx@yahoo.com](mailto:anehrensomatx@yahoo.com)

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**Nina Papadopoulos, SrDMT**

Is available for individual DMT and supervision in East London.

Tel 020 85563180 or email: [ninadmt@yahoo.com](mailto:ninadmt@yahoo.com)

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**Professor Helen Payne, PhD, SrDMT, Fellow ADMT-UK, UKCP**

Professor Helen Payne PhD, has over 30 years experience with groups and individuals. Accredited Psychotherapist since 1992 (UKCP). Integrative approach and Authentic Movement.

Contact: Tel: 01438 833440 or email:

[H.L.Payne@herts.ac.uk](mailto:H.L.Payne@herts.ac.uk)

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**Athena Pikis SrDMT.**

Offers individual and group DMT and Counselling Sessions and Workshops in her country Cyprus. Also available for supervision.

Contact: Tel: (00357)22518765, (00357)99543461, address: 6 Kilkis Street, Flat 21, 1086 Nicosia, or email: [athenapiki@hotmail.com](mailto:athenapiki@hotmail.com)

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**Helen Poynor SrDMT. MA and RMT (ISMETA)**

Available for individual movement therapy and supervision in East Devon & Totnes. Also offers Walk of Life Movement Workshops in West Dorset/Devon. Halprin trained.

Contact: Tel: 01297 20624.

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**Sandra Reeve SrDMT**

Individual movement therapy and supervision in Dorset and Ireland. Move into Life workshops for personal and professional development through movement.

Contact: Tel: 01297 560511 [www.moveintolife.co.uk](http://www.moveintolife.co.uk)

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**Susannah Rosewater SrDMT**

Offers individual DMT and supervision in Chiswick W4. Her work is influenced by Authentic Movement, Humanistic Psychotherapy and Feldenkrais Method. Contact: 0208 747 0472 or [sue.rosewater@virgin.net](mailto:sue.rosewater@virgin.net)

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**Susan Scarth MCAT, SrDMT**

Offers Group Dance Movement Therapy and Individual Therapy in Edinburgh, Scotland. Also offers Training and Consultancy to organisations interested in developing knowledge of non-verbal communication and movement observation and analysis.

Contact: [sbscarth@hotmail.com](mailto:sbscarth@hotmail.com) Tel: 07908130754

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**Rosa Shreeves SrDMT, Dance Artist**

Offers individual therapy, supervision, choreography and consultancy in West London.

Contact: Tel. 0208 995 5904 or email:

[rosashreeves@rosashreeves.plus.com](mailto:rosashreeves@rosashreeves.plus.com)

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**Dr. Allison Singer SrDMT**

Available for individual and small group dance-movement therapy and individual clinical supervision in Lancaster and North London, NW3.

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 Chodorow, J. (1991) Dance Therapy and Depth Psychology: The Moving Imagination. London & New York: Routledge

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 Karkou, V. (1999) Who? Where? What? A brief description of DMT: Results from a nationwide study in arts therapies, e-motion, ADMT UK Quarterly, XI, (2), 5-10.

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