Tribal dancing, classical ballet, ballroom dancing, the ‘bugaloo’... all the ‘rhythms of the universe’ are not only expressions of emotions and form but—often unknown to the dancer—can have healing properties, shedding of inhibition, and shuffling off worries and cares, however temporarily, can help in recovery from mental illness. There is a growing acceptance of the potential of the dance in psychiatric treatment.

Dance—in all its various forms—sometimes has been called ‘the mother of the arts’ perhaps because it seems likely to be the oldest art form, an integral part of life which has been called ‘the rhythm of the universe’ and the ‘dance of life’.

Unlike other art forms, dance requires no equipment and no materials; it needs no musical instruments, no paint, no clay—only the human being—body, mind and spirit—undivided and undisguised. And yet it combines all art forms, movement, music, painting and sculpture, poetry and drama—all these have echoes in the dance.

Dance was probably used for healing purposes as far back as prehistoric times. The shaman (the tribal priest and witch-doctor) discovered the existence of rhythm through bodily movement and dancing was used by members of primitive tribes to encourage physical and mental fitness. The shaman also harnessed dance rhythms to induce trance-like states in the sick and so banish the demons which were believed to be causing the sickness—although it may appear incredible to us, it seems to have had positive results.

Dance continued as a method of healing throughout the centuries. Classical Greece was famous for its dancing—we have the legacy of eurhythms; medieval doctors too saw its healing potential. More recently, Dr. William Sargant wrote of the doctors who, after the First World War, welcomed the increasing popularity of the jazz movement which helped to reduce the effects of post-war neurosis and shellshock.

It was a Czech called Rudolf Laban who, early in the 20th century, saw the therapeutic potential in dance. Using his skill as a mathematician, he was able to define the human body as the centre of a 64-sided ‘sphere’ which, when combined with the natural forces of space and resistance, produced innumerable combinations of movement.

Although Laban originally intended his system of movement as a guide for people working in dance and drama professionally, other people soon started to take a keen interest in his ideas. Doctors, teachers, and industrial welfare workers began sending people to Laban and he began to study these patients, students
and factory workers. He kept records of their progress and his conclusions were set down in a paper, 'The Educational and Therapeutic Qualities of the Dance'.

He wrote: 'In simple fact, there was an improvement in the community spirit of whole classes. Cliques and solitary individuals, who had hitherto been competing and quarrelling tiresomely, became friendly and sociable. A further surprising effect was that the health of some of the children improved. Weaklings . . . became stronger and more vital through dancing. Nervous children became less frightened, quieter and more open to advice and correction. . . . Educational and remedial measures have a common factor. Both have to deal with individuals who, through various causes, lack some inner or external qualities needed in the struggle of life. They must be helped to rediscover certain powers and functions.'

From his work, Laban came to believe that, latent in everyone was a quality he called 'charm of movement'. Certainly great dancers like Pavlova and Nijinsky had charm of movement but so—maintained Laban—did an elderly, frail woman.

This 'charm' is hard to define but is something we have probably all seen briefly, from time to time, in people we meet—a graceful gesture, a lithe movement which is instinctive and unexpected in its setting.

Dance appears to have important contributions to make in the treatment of mental disturbance. Broadly speaking, it can be said to be applicable in three contexts: diagnosis, catharsis and therapy.

Where speech fails

For some patients, diagnosis is hampered by their inability to talk freely to a psychiatrist about their feelings. Alternatively, although they appear to be communicating easily they may be masking their true emotions. A patient may do this deliberately or he may be completely unaware that it is happening.

But movement does not lie. Tension, apathy, fear, anger—all reveal themselves in the dance. A patient taking part in a dance session can reveal many thoughts and feelings to the dance therapist who is trained to observe and interpret movement. The doctor, who is interested and sympathetic to the ideas of dance therapy, also can observe these sessions for himself. The diagnostic benefits may not always be direct; some people find that, relaxed by the music and movement, they are more able to talk to the therapist or the doctor, the relaxing of tensions releasing their previous inhibitions.

The cathartic element in dance—to release pent-up emotions—is probably one of its most primitive
elements. This goes back to times when it was thought that a sick person was ‘enthralled by evil spirits’ which had to be released and driven out. But—whatever the original reasons—the cathartic use of dance is of immeasurable benefit—provided that there is a therapist on hand who is aware of, and able to deal with, the sometimes very strong emotional reactions which are provoked in a dance therapy session. This professional control is particularly important if the medical world is to accept dance as part of the healing process. Catharsis, rightly guided and channelled by a therapist or doctor is a force for good, given free rein it can be dangerous and destructive.

Finally, dance is therapeutic. It can go further than just pointing to the symptoms (diagnosis) or releasing the suppressed feelings which may be causing disturbance (catharsis). In a dance therapy session—just moving to music, ballroom dancing, keep-fit or whatever—dance can provide a respite from worry and stress, freeing the mind from tension and allowing a healing peace to permeate his whole being.

Of course all dance therapists realise that their work can rarely effect a cure on its own. But, whatever sort of treatment a person is having—drugs, ECT, individual or group psychotherapy—dance can do its work alongside. Clearly, this requires the sympathy of psychiatrists who believe in the usefulness of dance therapy and are prepared to co-operate with—and if necessary actually work alongside—therapists with their patients.

**Prospects for British dance therapy**

Dance therapy is already firmly established in the United States. Over a decade ago a dancing teacher, Marion Chace, who had been attending psychiatry lectures at St. Elizabeth’s Hospital in Washington, persuaded the hospital authorities to let her go on to a ward for chronic schizophrenics, many of them silent and uncommunicative for over twenty years.

Although the immediate results were not spectacular, some of the patients began to communicate in monosyllables. Following on from her work, training establishments began to be set up and today there are courses in dance therapy at many of the American universities and there is a flourishing American Dance Therapy Association.

In Britain the movement is not as firmly established as in the States; nevertheless, it is making great strides. At the Laban Centre at Addlestone in Surrey, dance therapists are being trained in the tradition of Rudolf Laban—the ‘pioneer’ of dance therapy. Therapists from the American Dance Therapy Association are coming over to Britain as pioneers to work in hospitals and clinics. There is growing acceptance by the medical profession as it is being proved that patients can benefit from dancing.

There seems to be a very good case for involving young people on a voluntary basis in dance sessions. Dancing is such an integral part of the lives of young people—discotheques, parties, and so on, that, working under the guidance of a trained therapist, their energy and enthusiasm could be of inestimable help.

In fact, if we only stop and look around us, we can see that dance therapy is already widely accepted; in ‘Top of the Pops’, in the discotheques, in the West Indian reggae sessions—and still, believe it or not—in the local *palais de dance*! Everywhere people are allowing music and movement to relax their minds and bodies and proving its value as a power for healing and recovery.