

# Dance, Empowerment and Spirituality in Movement Medicine

by Eline Kieft

## Introduction

This article gives a very brief overview of the results of my PhD research on Movement Medicine (Kieft, 2013). Some parts of the section on 'What is Movement Medicine' are drawn from my article in the *Journal for Dance, Movement and Spiritualities* (Kieft, 2014). The motivation behind my PhD was a curiosity about people's search for meaning and (self-)understanding in western culture today. With the decline of traditional religious frameworks, the focus of this search has changed, leading to the remarkable rise of alternative spiritualities. Having danced all my life and at the time training to become a Movement Medicine teacher myself, I was particularly intrigued by the role that dance can play in dealing with the increasing demands of a fast and often fragmented world.

My thesis offers an ethnographic description of Movement Medicine, a contemporary approach to movement meditation that blends together and is informed by different ingredients such as shamanic healing traditions, psychotherapeutic elements and ecstatic dance. The practice emphasises movement, relationship with self, others and the world, ritual and ceremony. Through a combination of hermeneutic and ethnographic methodologies, including over five years of participant observation, 25 qualitative interviews and analysis of 190 articles in three volumes of the School of Movement Medicine's newsletter, I provide an analysis of the practice and people's experiences regarding wellbeing, personal growth and spirituality. In the first part of the thesis, I situate Movement Medicine within the socio-historic context of so called "growth movements" that emerged since the 1960s, and explore its background, philosophy, symbols and movement exercises, and the relation to other traditions and worldviews such as (neo-) shamanism and New Age. In the second part, I discuss the empirical data, focusing on perceptions of the body and embodiment; the practise of new skills and behaviour (including social and emotional skills, dancing through a dark night of the soul, transforming patterns and changing the stories we tell ourselves); ways to (re-)connect to the mysteries and to dance with spirit; and finally how to translate the experiences from the dance floor to daily life.

This article starts with a brief introduction to Movement Medicine, followed by a summary of the results of my thesis, and a section with critical reflections. This addresses some methodological research challenges, notions of postmodern spirituality, and issues within Movement Medicine. In the conclusions, I look at the role of dance in general, its potential contribution to contemporary culture, and the translation of insights regarding change and transformation to non-dance settings.

## What is Movement Medicine?

Movement Medicine can be practised in 1,5-2 hour sessions, often once weekly, or in longer (weekend) workshops of one or more days. Intensive workshops (ranging from three to ten days) and ongoing groups that for example meet two to five times over the course of a year, are a way to deepen the journey by dancing with the same group of people for a longer period. The structure of a class usually includes a warm up, called *Awakening the Dancer*, followed by dancing with the four elements Earth, Water, Fire and Air. Most classes and all workshops have a theme, which then guides the session afterwards. These themes are varied and for example include yin and yang; emotions; retrieving energy from the past; reconnection with nature; dancing with spirit and the ancestors; relationships; sexuality; dreaming; ritual; or specific groups for men and women only. Instructions strongly encourage individual

movement vocabulary (“finding your own dance”), and use metaphors and the imagination to draw this out, often related to processes in the natural world such as the growth of trees, animal behaviour, photosynthesis, and evolution.

Classes and workshops can take place anywhere, including village halls and community centres, dance or yoga studios, churches, sports halls and conference centres. Each space will certainly have an altar and most likely a musical installation. The group size will vary according to the teacher, and can be anything between three and 200 people. Teachers have a strong commitment to sustainability and, where possible, this will be reflected in flyers, possibilities to recycle, and fund raising activities.

It is difficult to find words that do justice to such a fluid, dynamic and variable practice. If you were to enter a Movement Medicine space, you can really dance any way you like, as the aim is spontaneous movement improvisation. In general, there are no set steps, routines, choreographies or formations, and therefore no “good” or “bad” dances. Some people may move energetically through the space, whereas others may dance an inward, delicate and stationary dance. This may even vary from moment to moment for each individual, as a person’s process can change abruptly from quiet and internal to big and extrovert, and consequently influence their movements.

There is a strong supposed link in Movement Medicine between movement and life; life is considered to be the ‘creative, dynamic interplay between stability and change, limits and growth, awareness of what is and movement towards what can be’ (Darling Khan and Darling Khan, 2009: xvii). This indicates movement between different parts of the individual psyche, but also a movement from the present towards the future. Bridging paradoxes within the individual is thought to increase self-awareness, which is considered necessary for finding collective solutions to global crises. Movement is underlined as the basic “medicine” (a concept frequently used in shamanic traditions), to remedy disconnection, release blocks that may cause inhibition and fear, and for energy and soul retrieval. A Movement Medicine space can be described as an altar for being and becoming, as an honouring and celebration of life in all shapes and flavours, a space of discovery, of practising new behaviours, of sharing the joy of dancing in community.

### **Journeys and insights**

My study shows that practising Movement Medicine indeed contributes to personal growth and wellbeing of body, heart, mind and spirit. It enables an integration of opposites and the creation of a new frame of meaning or reference, highlighting themes such as embodiment, connection, empowerment, healing and transformation. Participants describe insights, revelations and changes in terms of personal beliefs and patterns, their relationship to ancestral and family history, and to cultural patterns and mechanisms. They sometimes develop insights regarding job or vocation, and may experience revelations regarding the nature of life, cosmic experiences of oneness and “universal truths”, as well as various other *life lessons*.

The combination of different traditions that inform the practice, together with its symbolic and metaphoric language and the alchemy that happens within the group, opens different ways of viewing and managing life processes, and contributes to experiences of expanded consciousness and a sense of reconnection. The mixture of various techniques create multiple *entry points* or *portals* through which people can access meaningful experiences. These points include first and foremost the dance, but also ceremonial and ritual aspects, music, voice work, personal contact with the teachers and community. Each of these experiences is uniquely individual, and enables transformation that can range in intensity from a gently nudging or slow simmering adjustment, to shocking, life-changing impact after which nothing seems the same anymore. Sometimes it comes in one moment of sudden insight; sometimes

it takes years of dedicated practice. It can be catalysed by a single experience or a combination of things. This compares to Carl Jung's observation that the process of transformation 'may be compressed into a single dream or into a short moment of experience, or it may extend over months and years, depending on the nature of the initial situation, the person involved in the process, and the goal to be reached' (Jung, 1971 [1959]: 38-9). Transformation can furthermore occur at any *stage* of development, and may also depend on the type and severity of that which needs healing, on how much previous work the individual has already done on it, on the amount of support available, and on the impact of the experience.

Important is that insights do not just happen on the dance floor, but are often integrated into participants' daily lives in multiple ways, contributing to changes with regard to the body, self, relationships, work, values, actions and spirituality. The real and imaginary journeys that participants experience through Movement Medicine, show many similarities with other traditions such as the hero's journey in literature and mythology (Campbell, 1968 [1949], p.30), psychological journeys of alchemists and of the Fool through the Tarot cards, Sufi whirling dervishes, pilgrimages and other mystical journeys, and ritual journeys through the stages of rites of passage (Turner, 1974; Turner, 1982). Heroes set off into the unknown alone, to explore what matters to them, in search of whatever it is they yearn for. Through their experiences and initiations along the way, they are able to return with insights and value not only for themselves but also for their communities. Although the journey itself can be individual and lonely, it ultimately leads to connection, which compares to the individuation process leading 'to more intense and broader collective relationships and not to isolation' (Jung, 1981 [1921], p.448).

### **Some critical notes**

A topic like this raises many intriguing issues, such as the apparent paradox of embodied spirituality; the use of neuroscientific metaphors to describe processes of learning; leadership and the ups and downs of building a community; the connection to other somatic practices; notions of identity and self; relevance to "the mainstream"; similarities and differences with sectarian movements; gender notions; and ritual and metaphysical questions. These are discussed in detail within the thesis (Kieft, 2013). Here I will briefly highlight some methodological issues, notions of postmodern spirituality and a few critical reflections on Movement Medicine as a practice.

#### *Methodological Challenges*

Any research in dance will encounter difficulties in language-ing such an embodied and often non-verbal practice, whether in terms of participants finding words for their experience, or the researcher presenting the material in written form. It is important to pay attention to context, and recognise that descriptions are always approximate and subjective (Blacking, 1985, pp.64-6).

As research fields often consist of conceptual, rather than empirical spaces (Gore, 1999, p.210), determining both the site and its boundaries is a fluid process that can be considered, much like the fieldwork and subsequent representation, as a social event in itself. This was also apparent in my dual role as both researcher and student of Movement Medicine. The "insider" or "emic" point of view and "going native" are often criticised in terms of scientific objectivity, as a potential risk for the necessary distance to examine the deeper currents within the research themes (Grau, 1999).

Despite its challenges in terms of, among other things, potentially overly positive observations and interpretations of data and the complexity of managing several roles simultaneously (Chavez, 2008, pp.474-5; Merriam et al., 2001, p.411; Anderson, 2006, p.390), my personal experience was not simply added value to the

research (Sullivan, 2006), but essential to understand the complex nature of Movement Medicine, which could not have been investigated in the same way by an outsider (Greenwood, 2000, p.13). In my thesis I discuss questions such as degrees of insiderness, tension between roles, and what it is, exactly, 'that an insider is insider of?' (Merriam et al., 2001, p.411). Fieldwork itself is an inherently embodied experience in which we gather data through the many senses of our living, breathing body, and a call for sensuous scholarship (Stoller, 1997) creates an easy bridge into the territory of auto-ethnography, 'an approach to research and writing that seeks to describe and systematically analyze (*graphy*) personal experience (*auto*) in order to understand cultural experience (*ethno*)' and as a method is 'both process and product' (Ellis et al., 2011, italics in original).

Indeed I experimented with different forms of representation, for example with dividing the text into two columns that distinguished between data, description and analysis on one side and personal reflection on the other. I hoped the two columns would "dance" with and respond to each other, also intending to invite the reader to join this experiment by freely adding their own associations, inspirations, feelings, sudden thoughts and doodles, and to treat the work as a "living thing" (Enslar, 2010). Although I decided not to carry this further in my final thesis, it raised many questions regarding (the reasons for) traditional writing conventions, the value of experiments, and the delicate balance between openness and vulnerability, for others and myself.

#### *Notions of postmodern spirituality*

Paul Heelas (1994) considered the nature and value of religion in postmodern times, often shaped to fit personal preferences rather than following a doctrine. Can an individually designed religion still be meaningful? How do we rate the quality and depth of spiritual experiences, if enjoyment is a leading motive for choosing them? Can spiritual experiences be bought? In my view, engaging with existential questions is of all times and the proliferous growth of settings that support such engagement testifies that indeed they have not lost their relevance. Although established religions often provide a framework, they are by no means the only way to participate in a search for meaning. Reconnecting with the sacred can happen through many activities and is not dependent on specific religious specialists or contexts (compare Maslow, 1994, p.29). That current forms of such engagement are highly individual, does not diminish their potential as source of support, strength and insight. After all, the great religions too were once experiences of individual interaction with the mysteries that eventually solidified into dogma in order to repeat (and later monopolise) divine encounters.

Capitalism has been criticised as the bane of religion, but it also supports (new) spiritualities financially and through technology, providing contemporary opportunities for redefining our relationship to spiritual dimensions of life (Urban, 2000, p.271). Although Movement Medicine brings together tools and techniques that have been practiced worldwide for millennia, it too is a product of both postmodernism and New Age. However, it offers an alternative to contemporary culture, and an opportunity to address issues such as social justice, sustainability, gender relations, power dynamics, and develop healthy, thriving communities. Movement Medicine still has a strong white, middle class participant base, yet actively strives towards including people from other backgrounds through for example the Movement Medicine Sponsorship fund, as well as many fundraising activities.

New spiritualities too receive strong critique, especially regarding appropriation or translating (and watering down) practices to significantly different cultural contexts, thereby dishonouring their original tradition. It is also questioned how authentic and valid a spirituality can be that is borrowed from elsewhere and that incorporates many techniques (Kieft, 2013). Although many new spiritualities can be seen as a revival of our own spiritual roots (Eyers, 2016), learning whatever we can

from people who still live in respectful dialogue and exchange with nature is essential in facing climate change, resource depletion and loss of species. Shamanism is an inherently practical and pragmatic application of specific tools and techniques exchanged and adapted to local contexts. That does 'not diminish their essence and potential impact as a meaningful source of healing, reconnection and understanding, nor discredit their original context' (Kieft, 2017).

### *Movement Medicine as a practice*

Generally, Movement Medicine is internally congruent in its alignment of various aspects, ethics, and business ethos. A critical appraisal of deeper lying structures and conversations with participants however highlight some interesting areas, such as (but not limited to) those below.

First of all, up until the end of 2011, Movement Medicine was designed and developed solely by two people, the Darling Khans, from and within their marriage, as the "product" or culmination of their life and teaching experiences and visionary guidance. Their strong personalities and charisma are almost contagious, and they are often seen as role models. With their highly personal approach to teaching, initially it was hard to differentiate between the practice and their personalities. This is now changing, with currently just over a hundred qualified (apprentice) teachers and facilitators. The intertwining of personal touch and contents is also recognised in the approach of other leaders (see for example Prince and Riches, 2000, pp.98-102), but is not appreciated by everyone.

Also, in relation to the issue raised under postmodern spirituality, it can be questioned how strong a practice can be that includes so many different symbols and traditions. As a result of living in a global (virtual) community and being exposed to many cultures and traditions from all over the world, fusion or eclecticism has become common nowadays (see for example Samuel, 2001, p.76). This mixture of systems and approaches (Jakobsen, 1999, p.213) is especially characteristic for new spiritualities, which often derive teachings from contemporary as well as historic, eastern as well as western traditions (Sylvan, 2005, p.120-1). Rather than creating an incoherent structure, my research shows that this diversity enables participants from different backgrounds to engage with the practice from various angles.

Another issue concerns the use of technology, while the environment plays such an important role. The constructed image and interpretation of nature and the contemporary longing to reconnect with the wilds, leave room for different ways to participate in and with nature. Paradoxically, this does not even need to happen outside (Greenwood, 2005, p.210). As in the general "back-to-nature" movement, electronic technology is embraced in Movement Medicine as a resource both for networking as well as creating a soundscape that contributes to meaningful and transformative experiences (compare Sylvan, 2005, p.107) and therefore helps facilitate the reconnection to nature.

### **Conclusions and future research agenda**

The results of my study first and foremost highlight ingredients and conditions that assist transformation, such as movement, embodiment, connections with self, others and the different dimensions of our world, ritual, community, play, metaphoric language and a possibility of integrating opposites. It considers how people can strengthen, integrate and maintain sustainable changes in their personal lives as well as their wider communities. Key elements are re-establishing a positive sense of self and one's own authority, in combination with (and I believe that this is crucial!) reconnection to others, nature and the mysteries of life. These insights can potentially remedy some of the conditions of our secular, individualist, and post-industrial societies, such as feelings of disconnection, loneliness, emptiness, isolation and estrangement.

Although the findings have come through the medium of dance, they can often quite simply be translated to non-dance contexts such as schools, care homes, organisations for homeless people, trajectories of work reintegration of people after long-term sickness absence, prisoners, people recovering from addictions, teenagers and people with issues of low self-esteem. As such, dance can (literally or metaphorically) play an important role in contemporary society, not only as a model for (re-)creating culture in an active and engaged way through a sense of belonging, but also through overcoming differences and uniting people (Halprin, 1995, p.241; compare Ehrenreich, 2007, p.24) and by producing "other knowledge" that can ultimately influence society through arts, academia and politics (compare Buckland, 2002, p.181; Fraleigh, 1999, pp.196-7). Such experiences can help to enhance the general wellbeing of the population.

I feel very grateful for the depth and colour of material that I encountered within this PhD. It planted many seeds for the development of my current research portfolio at the Centre for Dance Research at Coventry University. In my understanding, themes such as health, healing and wellbeing, nature, community, embodied knowledge and movement as a way of knowing, spirituality and artful living are all very closely connected, and I sincerely hope these seeds will sprout and develop further. I am particularly interested in the effects of spirituality, ritual and community on processes of healing and transformation; the intrinsic power of dance with regard to supporting the restoration or growth of "whole" human beings; and the role of dance in the search for and creation of meaning and experience of the numinous.

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