



Trilogy of Body Imaginary: Dance/Movement Therapy for a Psychiatric Patient with Depression



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ABSTRACT

The purpose of this study is to discuss the application of dance/movement therapy to the case of Chun-Li, a 56-year-old woman diagnosed with major depression with psychotic features, and underscore the relevance of psychic meanings to the treatment process. The treatment consisted of three phases: phase one was focused on building the therapeutic relationship with Chun-Li through regimens and health-enhancing exercise that are rooted in Taiwanese folklore; in phase two, she was encouraged to pay attention to her body and make verbal interpretations in relation to her movements; and phase three was intended to help her embody the inner imagination, making contact with her inner conflict and revealing her traumatic event. In this paper, three aspects of the casework are discussed and related to the theories and practices of dance movement therapy: (1) the bodily relationship in ballroom dance; (2) the effect of the partnership in ballroom dance on Chun-Li; and (3) the imagination invoked by a moving body in dance. This article attempts to explain the meanings of significant body experience and body knowledge development through the transformation of the body.

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Dance/movement therapy, emerging around 1950 in North America, is an interdisciplinary field, composed of the creative and expressive characteristics of dance, as well as the knowledge and methods of psychotherapy. In this integrative discipline, dance/movement therapists are immersed in the language of the body rather than focus solely on verbal communication (Cruz & Berrol, 2004). Movements serve as an intermediary between the inner and outer world, whereby a patient may be able to truly contact his/her psyche and, thus, enable the function of *self-healing* (Dosamantes-Alperson, 1981). Body movements can trigger feelings and thoughts in a person, as well as facilitate their expression to the outer world around him/her. In the therapeutic movement process, one's feelings/thoughts may be transformed through the moving body and, in turn, the bodily expression of the feelings/thoughts changes (Schmais, 1974). Movements activate an interactive process between one's outward expression and inner feelings/thoughts, and serve as a gateway between one's inner and outer world. Through expressive movements, one becomes aware of oneself and opens the self to the outer world. The perception of one's self in relation to the outer world keeps unfolding throughout

one's own moment-to-moment, unique experience in the body; that is, the process of one's change is somehow corporal and differs from person to person.

In this sense, dance/movement therapy is tailored for each individual and group; the meanings of similar movements or movement rhythms would differ across individuals. For example, the gesture made with lengthened fingers and palms together, which Goodill (2005) called "prayer position hands" (p. 48), may signify different meanings to a believer than those to a non-believer. Thus, the interpretation of movement cannot be generalized when its meaning is related to personal conditions and history.

Inheriting the spirit of modern dance, dance/movement therapy is characterized as a therapeutic approach via creative, spontaneous movement. However, Taiwanese bodily self-expression differs very much from that of Westerners'. Tsai (Hsiao, 1998), a pioneer modern dancer in Taiwan, stated that she grew up in a body-restricted society and felt embarrassed by her bodily self-expression. The patient in this case study, Chun-Li(春麗)¹, is a Taiwanese as well, and the way that she used her body was typical in the body-restrained society. She preferred to follow and repeat a set of movements,

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¹ "Chun(春)" means spring and "Li(麗)" means "beauty" in Chinese language.

such as ballroom dances and some types of well-being exercises for health and longevity.

This article reported the author's work with Chun-Li, who was suffering from major depressive disorder. Following Chun-Li, the author (also the therapist) incorporated in the process the movement elements originating from traditional Chinese culture, such as traditional regimens, specific well-being exercises, and local ritual dance. In the following sections, the author will describe in detail and discuss in depth how she helped Chun-Li with the transformation of restricted bodily self-expression. Making use of her history with Chun-Li and Chun-Li's own stories, the author investigates what Chun-Li was embodying during dancing from various aspects, such as bodily relationships and inner imagination in dance.

Methods

Background information

Chun-Li (pseudonym), a Han Taiwanese woman was 56 years old when referred to the author (referred to as "I" in the results section) by her psychiatrist for dance/movement therapy. She was *drawing talismans*² at home to expel *the unclean*³ from the house and, thus, was brought to a psychiatric hospital 2 years before the therapy with the author. She was diagnosed with major depressive disorder with psychotic feature; since then, she has been hospitalized three times, each time for 2–3 months. After the last recovery from a depressive episode, she left the hospital, but continued individual psychotherapy with a psychiatrist for 1 year. She was referred to the author by this psychiatrist because she had expressed great interest in dance, especially ballroom dance. The new treatment was called a "dance class" and carried out in an activity room of a psychological service center, instead of at a clinic or hospital, in order for her family and her to avoid any stigma from their relatives or friends.

Phases of the treatment

The treatment was carried out once a week for 60 min per session, except for an approximately one-month pause every year during Chinese New Year, and lasted for 2 years. The author wrote a case note from every session and discussed with Chun-Li's psychiatrist about the treatment outcome when needed. The course of treatment was divided into three phases according to the treatment goals: phase one included 16 sessions, phase two 30 sessions, and phase three 22 sessions. The author obtained Chun-Li's informed consent to write the case study.

Treatment process

Phase one: you and I in dharma discipline—relationship building

In the interview, Chun-Li wore a colorful T-shirt, jeans and a pair of high heels, but appeared to have a lack of energy, with few changes in facial expression and vocal tone, eyes staring into space, lips drooping, and arms dropped down. In contrast, her husband, son, and daughter-in-law all looked energetic and excited, with smiles, eyebrows moving up and down, and bodies moving accordingly when talking. Chun-Li appeared to be restrained, consistently contracting the abdominals, keeping the torso straight,

and holding the whole body still in a fixed shape. She looked down with inattentive eyes and did not appear to be engaged in our talk; however, she did turn towards me and made eye contact when she responded to my questions, in the polite and respectful manner in which people are expected to respect teachers in this culture. In the first therapy session, she sat—with legs put together and feet made in a T-shape on the ground—on the sofa and talked about her physical illness, such as the aches of her finger joints and the pain of her lower back. These medically inexplicable syndromes had exacerbated her worry about the body. I asked whether she wanted to move her body and stated that she could step on the wooden floor. She responded, "I don't want to take off my high heels; besides, I didn't bring my slippers. Moreover, I feel so weak that resting on the sofa is fine." In the following sessions, her inquiries and responses were mostly, "My body is sore," "I feel weak," "I don't know," and "Nothing touches me." She kept wearing her high heels and slouching on the sofa, and repeatedly spoke about the illness of her body.

She once mentioned the terrible ache in her finger joints and showed it to me by extending her fingers. I mirrored her gesture, extending my own fingers, and then flexed my fingers one by one to form a fist and stretched the fingers again. She followed this movement but screamed, "Oh! They are sore and so tight that merely putting them forward hurts me." The simple gesture of opening and closing palms brought us closer. She then became motivated to improve her health through exercise and asked for suggestions from me.

We usually started the sessions with sitting on the sofa. We once, on the sofa, moved various body parts, and named the parts that were moved: fingers, toes, ankles, etc. I asked her what she *felt* in these areas. "So sore. So tight. The bones are old," she replied. With our relationship established, she asked me to teach her to exercise and even wanted me to dance for her. To clarify my role as not being a dance teacher, I redirected her and said, "If you would like, we could freely move our bodies." "Oh, freely move? That's play for kids," she said. To fulfill Chun-Li's needs, as well as continue to strengthen the relationship with her, a type of regimen exercise, "dharma discipline,"⁴ was employed. This set of movements has holistically helped people comfort their bodies and minds (Wujuw Miaotian, 1989). For example, "Shuai Shou Tong Mai,"⁵ (甩手通脉, literally "moving hands to unobstruct meridians") is a movement sequence, consisting of raising lengthened hands and arms to the height of the shoulders and then swinging them down backward in a standing position. She was guided to practice the movement with saying, "I want to get rid of these annoyances!" "Get rid of" became a goal for her, and she noticed that the high heels made her feel unsteady and uneasy during practice.

Her changes were reflected by her coming with sport shoes on and a blank book on which to take notes. She explained that she needed to write down what had been taught; otherwise, she could remember nothing and have nothing to review at home. "Look at me," she said with a smile. "Since getting ill, I have forgotten so many words. My memory is poor." She asked for my help with writing and reviewing Shuai Shou Tong Mai. Afterwards, the second

² Talismans are used in the ceremonies or rituals of Taoism, in which a spirit medium usually draws on a special paper using a calligraphy brush to exercise occult powers.

³ The unclean is also called "gui" (鬼) in Taiwan, which means phantom or ghost. If there is gui in a house, it is inauspicious for the residents of the house.

⁴ Dharma discipline was introduced by Bodhidharma, who lived from the 5th to 6th century; he was a Buddhist monk and believed to be a transmitter of Zen from Sindhu (ancient name of India) to China. There are 108 movements inferred in historical records, but only 36 movements are currently circulating (Chan Master Wujuw Miaotian, 1989). Practicing this well-being exercise may increase the circulation of body and reduce the turbid and ill Qi (氣, literally "energy, or breath").

⁵ In the Shuai Shou Tong Mai exercise, pulling hands backward, a person stretches the tendons and opens the meridians, enhancing the circulation of blood and Qi (氣, energy).

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