International Dance Therapy Institute of Australia

## DANCE MOVEMENT THERAPY CLINICAL TRAINING

#### **CURRICULUM TOPICS**

Dance Movement processes This module will explore how human movement	<b>Therapy</b> Origins of the historical and cultural context of dance movement therapy will be explored. The early USA pioneers (e.g. Chace, Espenak, Whitehouse, Schoop, Evan), and the Australian dance therapy context with specific populations(Loughlin, Ostroburski, Hill, Bluith et al).	Group process and creative processes Looks at the entity of the group as a holding
expresses who we are, communicates with others and reveals inner experience. We will introduce foundation dance movement therapy concepts including a language of movement (Laban); psychoanalytic concepts (conscious/unconscious); an energetic model of DMT & the process of unfolding (Leventhal); self-directed improvised dance/ movement; authentic movement, the felt sense and the role of the witness.		environment for individuals and as a dynamic in itself. Creativity and its place in therapy is
Human development as related to movement studies	Dance Movement Therapy as a Psychotherapeutic Model	Working in the Field Preparation for professional application to specific fieldwork populations and supervised practice. Becoming a Dance Movement Therapist, formulating one's own goals, interventions within population fieldwork and applying and conducting research. Trainees will explore the deepening embodied experience and its meaning.
This module will examine the movement factors in human growth and relational development through the life cycle. Reference will be made to a psycho- physical-spiritual unity of movement, social and emotional development and behaviour, and the concepts of embodiment,body-image and body boundaries.	This module situates DMT within the broader field of psychotherapy.	
	The link is made between psychological theories and dance movement practice.	
	Observations made during fieldwork placements will bediscussed in regard to formulating dance movement interventions.	

#### (2) DANCE MOVEMENT THERAPY TRAINING (24 MONTHS)

#### **Supervision and Fieldwork**

"Clinical supervision provides an opportunity to reflect on and receive feedback on therapeutic work for the purpose of professional growth andaccountability. Supervision is a contractual, collaborative process which monitors, develops and supports supervisees in their clinical role. In clinical supervision the central focus is on both the optimum treatment outcome for the client and the professional development and self-care of the supervisee. The process of clinical supervision is seen to encompass a number of significant components, including a formal agreement between supervisor and supervisee. It is an opportunity for the supervisee to present relevant material regarding their clinical practice via case discussion, recordings of client sessions, role plays, etc., allowing a space for reflective review by the supervisee and feedback by the supervisor. The supervisory relationship and process of supervision are congruent with the developmental needs of the supervisee (PACFA, 2017)."

Trainees will complete a total of 50 hours of fieldwork (10 hours of supervision and 40 hours of self-initiated fieldwork) throughout the two years of the DMT Clinical Training, with a minimum of two distinctly different populations for a minimum of 15 hours for each population; and at least 10 hours of supervision in total.

The first 10 hours of observation in the field is organized by IDTIA and completed during Year One. Trainees in Year Two will be responsible for organizing their own on-going DMT fieldwork of at least 40 hours, which may be voluntary or paid.

Trainees are required to attend 8 hours of group supervision and two individual supervisions during the course of their self-initiated fieldwork. The supervising Dance Movement Therapist evaluates the trainee student's awareness and sensitivity to the needs of their population/s; ability to facilitateactivities for the group; manner and presentation; ethical and professional standards; and ability to reflect on DMT processes.

# Advanced Theoretical and Clinical Issues in DanceMovement Therapy

This topic will be presented by Dr Marcia B Leventhal. Trainees will be introduced to theory which appears to impact upon DMT as a primary therapeutic modality, including Quantum Healing Dance TM, Psychodynamic Applications and Clinical Skill Development. To be considered and developed through lecture, experientials and personal development processes. Trainees will prepare an assignment exploring the Newtonian and Quantum from the point of view of 'self' and poses the question "creating your own dance therapy model – what is forming, what is your vision of dance movement therapy?"

### The Body, Somatic Awareness and DMT

The intention of the course is to present an introduction to basic functional anatomy, kinesiological principles and the developmental sequencing of movement from a cognitive and

experiential perspective. An objective is to research the questions: "How does knowledge of basic anatomy inform your working model of dance movement therapy?" and "What is the rationale for how basic body processes can become the foundation for habitual and maladaptive movement patterns and defenses?".

Ideo-kinetic processes are explored throughout the course to facilitate somatic integration.

#### **Dance Therapy Practice**

Students will draw on learning from their own dance therapy projects, consider relevant theoretical approaches and reflect on models described by local skilled practitioners as well as their peers. The populations covered will include mother and infant, school aged children and early adolescents, the elderly and those whohave experienced non-finite loss. A minor and major assignment is based on the dance therapy work with populations. Trainee students will also prepare tutorial topics.