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The use of metaphors in dance movement therapy

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This text focuses on the specific structure of metaphors in terms of movement processes. The processing of symbolic movement material through structures derived from dance as an art form is investigated. Metaphors that support nonverbal attunement between patient and therapist, and how the use of metaphors and creative processes help establish the inter-subjective relation in dance movement therapy are described.

Keywords: dance movement therapy; metaphor; creative process; non-verbal attunement; intersubjective space; hermeneutics; embodiment

Introduction: moving images—images moving?

A photograph is a contradiction in itself. Basically it is a piece of white paper on which lifeless forms represent a moment of life and yet these ‘still lives’ have the ability to arouse great emotions within us. Photographs have the wonderful possibility of showing the zillionth part of a human life in all its detailed shape, vulnerability and emotionality. Photography is raw, merciless, revealing and beautiful (Jiří Kylián, in Buwalda & Kylian, 2006, Preface).

In the same way that a photograph combines both the aspects of representing a movement and at the same time arousing internal movement, working with symbols and metaphors in dance movement therapy can have a two-sided appeal. An image given as a source for dance improvisation is working from outside towards the inner movement of the dancer. On the other hand, the dancer can give us a notion on how he is moved or what it is that is moving him (from inside out) by using images, symbols and metaphors.

Dance symbols and metaphors can give one a physical sense about how to join the dance of another person. The image reveals the quality of the experience and, at the same time, it triggers a potential experience. By joining in with the movement, we can share the perception of the situation by the author/dancer/choreographer. And by being danced, the metaphor reveals this quality as an experience to both dancer and witness.

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The structure of metaphors in movement processes

Dance communicates in images

In former days, the art of dance was a collective experience, and it still is in traditional cultures; everyone was involved. The separation between dancers and audience developed in our cultural area only in the late period of ancient Greek culture. The actions of the witnesses became more and more limited, until they finally ended up in the chair, as theatre audience.

There are of course still forms of common dance and social dance, dance subcultures (like street dance), mega-dance events (like raves) and folkdance. But even there we can see a tendency towards role separation between the dancers and the public (e.g. the ‘dance battles’ of the street dancers, which are a performance of the dancers’ personal skills). In the Western culture, imagination and expressive behaviour have been moved to purpose-built locations. The arts are no longer part of our daily life. Collective (dance) experiences have become replaced by interactions between choreographer, performer/dancer and the public.

Nevertheless, the audience of a show will generally share the emotions that are represented on stage and this is what demonstrates the strength of a good choreographer: the capacity to find a language of movement that communicates to the public the intentions of a dance through movement symbols and images. In this process, two things are important:

- An appeal is made to the (internal) movement experience of the witness (I call this ‘the little dance in the chair’). The functioning of mirror neurons takes an important part in this process (Gallese, Eagle, & Migone, 2007);
- Movement metaphors and movement symbols are used to communicate the quality of the dance experience.

Classical ballet for instance creates the illusion of ‘lightness of being.’ Real women appear light as a feather and are carried over the stage as if they were gliding. They don’t seem to have any contact with the ground. It is the men who inhibit the weight and with that they also have the power to jump and support. This gives the audience a notion of a female, living in lightness, for whom contact with the nourishing ground is provided by men (Zacharias, 1962). In folkdance we find quite the contrary as the more powerful movements are not reserved only for male dancers. One of the clearest examples that we probably find is in African dance where the movement repertoire communicates the quality of strong contact with the ground (Sachs, 1984).

The use of metaphors can also be observed in improvisation, dance expression and authentic movement. None of these are therapies in themselves, but are possible pathways in the therapeutic process (Stanton-Jones, 1992). When we dance, we move (from) the metaphor, instead of just listening to it or just looking at it: that is to say we step inside the images as we move them. Dancing the metaphor generates actual feelings and sensations; while dancing in the imagined context, we experience actual movement sensations. We are at the same time dancing in the metaphor (expressing the image given in...
movement) and dancing from the metaphor (using it as a source to develop movement improvisation). In doing so, we ‘enliven’ the metaphor, we bring it to life and live in it, thus enhancing a strong experiential quality (Sheets-Johnstone, 1999; Ohno & Ohno, 2004; Olsen, 1991; Pallaro, 2000). As we will see these experiences can be the starting point for verbal reflection in therapy (see The role of metaphors in the therapeutic process).

**Metaphors in body and movement**

Specific cultural environments are known to influence our symbols and metaphors. Usually the dance culture of a country or area will display a rich source of movement metaphors that are ‘common sense’ in these areas. People share these symbols in a very natural way. Growing up in such a cultural context we become acquainted with these symbols without even noticing. In anthropological studies on dance and movement behaviour in different cultures, we can find many examples of this (Sachs, 1984).

Other movement metaphors and symbols have a more archetypical character. We can understand them regardless of our cultural background. The use of these archetypical metaphors allows us to travel through different cultural layers. Examples are a woman cradling a child, or two men standing in front of each other and ready to fight. These images are likely to be understood by people from diverse cultural backgrounds. Jung (1980) describes these archetypes extensively. Apart from cultural and archetypical metaphors, there are symbols and metaphors of a personal character; like an icon or a memento, they carry a meaning from personal experience.

Metaphors used in dance movement therapy sessions may come from widespread sources, they may already represent a movement theme, and they may as well represent images or themes that are not originally a movement theme. Just to give a short impression, I would like to examine some of the metaphors about body and movement. Metaphors about the body can be found in cultural history, for example in the Middle Ages, Christianity had many metaphors on the impurity of the body; or the Hinduist ‘chakra’ as an image for the physical doorway to enlightenment.

Personal metaphors about the body can be found in images that a person develops about her own body, like someone having ‘dirty hands,’ or someone feeling ‘mellow’ in the bones, or feeling the body as ‘permeable as a veil.’ These personal images can have a benign or a malign connotation, which obviously makes a difference in the use we make of them in a therapy situation. Metaphors concerned with movement processes can originate from archetypical images. In his novel Siddharta, Herman Hesse (1953) describes the transformation of one of the characters into Buddha as a physical process; in Virginia Woolf’s Orlando (1998), the main character not only changes personality, but also his/her gender. Other images of movement or transformation of physical appearance or personality can be found in fairy tales like ‘Cinderella’ or film stories like ‘Spiderman.’
Archetypical metaphors in literature are not limited to physical transformations. They can also describe changing physical experiences. Examples can be found in literature on ‘rites of passage’ or crossing ‘country borders,’ like the children’s experiences in C.S. Lewis’ *The chronicles of Narnia* (2000), or in Lewis Carroll’s *Alice’s adventures in Wonderland* (1992), and the experiences described by writers of travel literature.

Another source of images and metaphors with a strong movement aspect can be found in natural phenomena like the sea, the ebb and flood of tides, rivers, climbing a mountain, the textures and contours of the ground, wind, the opening and the closing of a flower.

Personal images that represent the imprints of moving experiences are also a source of metaphors: people feel that they carry a ‘burden on their shoulders’ or people who feel they are ‘on the run.’ These images are often reflected in their spoken language. There is a Dutch saying that one could ‘jump a hole into the air’ for happiness, physically impossible as this might be. In dance, we not only use these personal images to copy the movement or the posture, but we bring them into motion; thus they come to ‘play’ in the sense that Gadamer (1977) describes play as the ‘self representation’ of the ‘playful movement.’

**Metaphors in the dance therapeutic process**

The method presented below is applicable in both out-patient and in-patient settings in a ‘narrative’ type of therapy. It has shown to be very helpful when working with people suffering from problems on DSM IV axis I, like identity problems, attachment trauma, posttraumatic stress disorder, anxiety and mood problems. The method is less suitable to treat psychotic patients, schizophrenia and borderline disorders. In therapies with patients suffering from these disorders, we would prefer to work on a clear sense of body and movement, and develop self-perception and awareness of boundaries of self.

**The role of metaphors in the therapeutic process**

Images, whether they come from our inner world or exist in our community, give us the opportunity to look at a situation as a whole, to experience holistically the situation in all our fibres and senses. As mentioned before, metaphors give us a notion of the quality of the experience. If you were asked to close your eyes and reach out for an imaginative cup, you would move your hand in a different way than if you were asked to reach out for an apple. Imagining different objects, or thinking in images, already evoke different physical responses. It is in this way that metaphors communicate their intrinsic sense from one person to another.

In dance movement therapy, we search for the personal symbolising movement of a patient in order to help her to express her inner feelings. As a therapist, we use metaphors to get a notion about the quality of the inner experience and to share it with the patient, without knowing their whole story. We use this notion to develop the therapy in a subtle, non-verbal layer.
of communication. Patients offer symbols and personal metaphors through their movement. The dance movement therapist answers through movement, so the metaphoric meaning does not have to be specifically revealed or explained. Therapeutic tools, derived from concepts about body, space, effort analysis and dance experience, provide the therapist with instruments to join the patient’s movement processes. The ‘deep structure’ of symbols and metaphors can be explored and developed in and through dance. While dancing, the patients reveal their movement structure. Thus the non-verbal level becomes the container of their experience of their inner world. By reflecting on the dance, the patient can discover hidden narratives and, at the same time, well-known structures can be seen in a new perspective. Subsequent verbal processing of the movement material is part of this therapy. Often the verbal processing follows the deep structure of danced symbols and metaphors and thus patients can develop an embodied way of talking about their experiences, feelings and thoughts during their dance (Dreyfus, 1996).

**Therapeutic work through creative processes**

In dance movement therapy, we work with structures that are developed from dance as an art form. The dance material offers a broad spectrum of movement aspects that can be used in dance movement therapy, such as rhythmic movement, working with floor patterns, and developing body awareness. The type of therapy focused on in this paper aims to develop embodied symbolising and nonverbal communication. Structures taken from dance, as an art form, are particularly helpful to guide patients through the process of symbolising. The therapy offers a creative dance experience to help patients discover their personal movement material. There are no rules to label any particular movements as right or wrong: only the dancer herself can decide. In therapy, the aim is not to come to an artistic result (a dance performance) but, instead, emphasis is given to the patient’s personal experience and their ‘inner’ dance process.

Tools originating from dance improvisation are used during the therapeutic process to develop the patient’s personal movement material. Improvisation can generate predictable movement material, but also spontaneous material and material that, in its complexity and unexpectedness, could never have been planned beforehand. There are numerous ways for the dancer to discover new experiences and movements she never used before. From these movements, there might derive sensations and perceptions thus far unknown to her.

To benefit from the healing qualities of sensing, expressing and addressing, we work in ways that are known from improvisational structures in dance as described for example by Tufnell and Crickmay (1990), and Tharp (2003). The therapist:

- creates a welcoming atmosphere to make the patient feel save enough to come up with personal movement material;
- helps the patient to develop perceptiveness by paying attention to body signals or small movements;
supports the patient to develop movements, and to let images evolve from these movements;

supports the patient to explore movement themes and images, to accept ‘getting lost’ in the imagery, and to dare take imaginative risks (‘what if . . .?’);

creates an accepting atmosphere by exploring whatever may come up without necessarily knowing where it might lead;

supports the patient to build movement sequences to recognise personal structures and themes.

**Addressing and expressing the inner world**

By bringing the above-mentioned qualities to the therapeutic situation, the therapist supports the patient to make contact with her inside world, to express her inner feelings by movement and to communicate these movements to another person (who could be the therapist or another person in the group). Improvisation, as well as composed movement sequences, can occur during a patient’s personal dance process. There may be a resulting ‘product,’ but more often there will only be a temporary improvisation, movements that only exist in that specific moment.

This type of therapy, along structures of the creative process, can be looked upon as the dancer’s experiential research for a new or renewed relationship with her environment. This renewed relation might occur as a change of mood, a change of body sensation, or a change in contact with persons. Other than the usual images may come to the patient’s mind, new sounds may even be perceived.

These new experiences found in the dance therapy situation can help to restructure the patient’s previous experiences. The ‘creative process’ therapy aims to integrate older, often biographical, material with newly discovered possibilities. It is this integration that often provides the patient with a meaningful new context (Samaritter, 1990, 1994).

**The role of the therapist/the therapeutic relationship**

In dance movement therapy work, the therapist should take an adaptive and inviting attitude that allows the patient to develop awareness of personal movement impulses. Aspects taken from ‘body, space, effort analysis’ (Bartenieff, 1983) could help deepen the quality of movement and hence the possibilities of kinaesthetic perception. In dancing the metaphor, the quality of the images becomes explicit in the expressive movement. The therapist’s ability to adapt to the patient, in and through movement, allows communication within this metaphorical world, without a need for verbal structures. Thus, unexpected movement material may develop a complexity that is not planned, but that just arises from the situation. The dance itself may form a landscape that deepens the experience of imagery and metaphor.
In this context, the therapist should be the welcoming witness. She will keep company with the patient in the process of ‘the inner’ moving or being moved to ‘the outer’ form of dance. The therapist can be a dance partner in a duet that develops from the images brought up by the patient and the danced answer of the therapist. The therapist can also be a ‘challenging partner’ who invites the patient to deepen their movement process and, in doing so, tries to deepen the emotional quality of the experience. Symbols and metaphors can serve as a bridge here, as they can support the therapist to connect with the patient in non-verbal responsiveness and to move from her own echoes that arise from the patient’s images. As the patient learns to address her movements to the therapist, she will also improve her skill to communicate with the outside world. Dance is thus used in its most original form: as a means of articulation, expression and communication.

A hermeneutic perspective on movement metaphors

By dancing in the responding presence of another person, the patient can connect her inner themes to the outside world. This may enable her to form the transition between her personal life history and an actual relation with the therapist through the movement situation. The therapist is not only moving (emotionally) with the patient’s dance, but is also experiencing her own internal movement response. Thus she is actively bridging from the inside of the metaphor (the movement experience arising from the images of the patient) towards the outside of the metaphor (from that which the therapist picks up and brings into the movement dialogue).

In this situation, the aesthetic ‘illusion’ is actively used. The therapist is using the real context of moving together while at the same time she is moving within the images of the patient. In doing so, she is using the concrete level of movement in connection with the illusive level of image. Thus the memorised experiences are brought into a new context. The patient’s metaphors, arising from the memorising body, are placed in a new environment by sharing them with the therapist in a dance, by the therapist’s movement answer, or by being witnessed by the therapist. In the shared dialogue between patient and therapist, the dance will develop and the emotional and expressive quality can be changed.

The movements coming from inner images thus obtain a new context or ground through the therapeutic dialogue. This offers the possibility for the patient to look upon these experiences from another perspective. The experience of attentively looking/sensing throughout the movement experience allows the patient to actively give meaning and significance to the experience. We look upon this process as basically hermeneutic. The static position of identity can be overcome and changed into a more dynamic position. As we described before, in composing her dance, the patient is present as an acting and defining subject. As a dancer, she is at the same time acting and experiencing in the context of the therapeutic relation. It is in this inter-subjective sharing and acting between patient and therapist that the corrective emotional experiences (Alexander & French, 1946) take place.
Discussion

We have seen that the work with metaphors provides the possibility to work in the very essence of dance movement therapy: the embodied dialogue between patient and therapist. The patient shares her inner world with the therapist by dancing from images, metaphors and symbols. The welcoming attitude communicated by the dancing or the witnessing participation of the therapist provides the patient with the opportunity to share her inner world and experiences in terms of movement. The experience of being welcomed whilst addressing her deep movement experiences to the therapist provides the patient with the opportunity to change her personal concept of being in the world. During this process of symbolising, biographical themes are actualised through body memory. The therapist supports the patient by providing the context and relation according to her meta-theoretical framework. The patient will be guided through the unfolding movement situation that will develop to its own logic and is characterised by a ‘self directing’ quality.7 The outcome of this process cannot be set beforehand. During a therapy process the therapist will support the patient with an open attitude, welcoming what she is bringing up, helping her to recognise the sources of her inner feelings. The working momentum in this type of dance movement therapy lies in the patient and the therapist moving together from the patient’s movement material.

The ‘moved image’ reveals the experiential quality of a certain situation (Gendlin, 1968). Moving with the image of the patient will have an effect on the observing or participating witness (the therapist) as well. Active participation in the movement process of the patient will reveal the therapist’s own perceptions and movement answers. By attentive observation of his own movement, the therapist can get an empathic notion of the dance’s experiential quality for herself and for the patient.8

Conclusion

The use of metaphors in dance movement therapy offers the possibility to share the movement experience with the patient, and hence to achieve a notion of the patient’s self-representation (Fonagy, Gergely, Jurist, & Target, 2002; Schore, 1994). The movement experience in itself is a most elementary feature. The therapist supports the patient with movement interventions, so that the specific experiential quality can come to the foreground. Embodied participation (Payne, 2006) guides the therapist to the inner feelings that are at the origin of the patient’s images.

In the movement duet of patient and therapist, the patient’s images develop and the patient can experience herself as a conducting subject who, through her dance, actively contributes to the dialogue. The movement process enables the patient to shape, compose and express her experiences of the relation both with the therapist and with the outer world. The embodied metaphors support the process of symbolising inner experiences as well as the process of connecting them through the danced relationship with the therapist to the outside world.
Thus, by their double-sidedness, the metaphors contribute an additional depth to an embodied therapeutic relationship.

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Notes on contributor
R.A. Samaritter (1956) is a senior dance movement therapist and a supervisor working in psychiatric outpatient settings with adolescents and adults in a Dutch mental health service and in her own private practice. She was one of the founders of the dance movement therapy as part of creative therapy education in the Netherlands. Psychodynamic approaches to dance movement therapy have her special interest. Recently she is developing a doctoral research project for the University of Hertfordshire on intentional attunement in people with autistic disorders.

Notes
1. Gadamer et al. (1977) looked upon play as an elementary function of human life. It implies:
   - movement without purpose;
   - inner movement of the person (as a property of life);
   - there are self structuring tendencies in play (it does have a certain usefulness);
   - this becomes visible and manifest in a performance without any aim;
   - what makes the rules in a performance without aim seems to be ‘Vernunft’/rational attitude;
   - this attitude makes it possible to work on repetition: from repeating this performance of personal play the individual can develop identity;
   - play is the eventually self-representation (‘Selbstdarstellung’) of the movement that is being played;
   - thus the player is referring to himself through the play.

2. Petzold (1988) developed the ‘integrative movement therapy,’ wherein he conceptualised the term ‘body memory.’ He describes how by moving images may be provoked that arise from scenes of the past and how vice versa by imagining scenes or symbols our body tends to react with movements connected to these scenes.

3. Bartenieff (1983) described Laban’s concepts on body, space, effort and their use in therapy. Many dance therapists use his concepts to structure their interventions.

4. We compare the structural aspects of metaphors to the ‘deep structure’ as described by Chomsky (1965) in his work on linguistics. These concepts were carried on by Lakoff and Johnson (1999), and Johnson and Rohrer (2006).

5. Kris (1989) introduced the concept of ‘aesthetic illusion’ to describe how the ‘make-believe’ of a performance generates real feelings in the participating audience.

6. We follow the concepts of Binswanger (1962) and Gadamer (1977), who described hermeneutic activity deriving from experience and contact. See also Mooij and Widdershoven (1992).

7. The self-organising quality of the therapeutic situation was analysed and described by Goudsmit (1998).
8. The process of intentional attunement to the movements of a partner is possible due to the action of mirror neurons. They provide us with the base for empathy: Gallese et al. (2007).

References


