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Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities.

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A Thesis Presented in Fulfilment of the Requirement for the Degree of Doctor of Philosophy, February 2021

Creative Arts and Music Therapy Research Unit

Faculty of Fine Arts and Music

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Abstract

My PhD project sought to explore the possible ways in which dance movement therapy (DMT) might be used by women in the criminal justice system for health and wellbeing purposes. My thesis presents findings from a participatory, feminist-informed research study that was based in the regional city of Geelong, Australia. As part of this research, I invited two professional women from the Department of Justice - Susan and Alyce - to become "co-researchers" in the study. As co-researchers, Susan and Alyce helped to develop access pathways for criminalised women to participate in the project.

Women serving time on community correctional orders were invited to participate in a series of community based, drop-in DMT workshops as part of an emergent research design. The intention was to centre women's experiences of using DMT to learn more about how individuals might choose to engage in this service in a criminal justice context, and why. The centring of women's direct experiences in this study aligns with calls for more participatory, women-centred studies that are guided by the lived realities of those directly experiencing criminalisation processes (Carlton & Segrave, 2013). From an activist perspective, this includes acknowledging the social and political contexts in which criminalisation and therapy take place, and challenging dominant norms and assumptions in both criminal justice and DMT (also referred to as dance movement psychotherapy, or DMP).

The theoretical influences informing this work draw on a mix of feminisms, including intersectional theory, feminist new materialism, corporeal feminism, and Barad's (2008) "material-discursive" framework. Also instrumental to my process were theoretical concepts from my previous academic training in cultural anthropology, such as Geertz's (1973) ethnographic method of "thick description" which I expand on in this thesis from a more 'embodied' and 'embedded' perspective. The importance of bodily-

led approaches to research is therefore central to my thesis, and my doctorial study combines somatic modes of inquiry with more traditional modes of qualitative analysis.

Methodologically, my project followed a participatory research design and employed ethnographic methods to document, analyse and communicate my fieldwork experience and the data arising through these interactions. Principles of action research and feminist-informed participatory research are articulated in my thesis, and processes of collaboration are reflexively presented in the form of poems, movement videos and photographs. Challenges and barriers to authentic collaboration are discussed and the ethical, political and moral dimensions of fieldwork are critically examined in this study. Structural and systemic imbalances are critiqued and issues to do with power, privilege and oppression are reflexively worked through as part of the overall knowledge production process.

The research findings are based on what I learned from each of the women participating in this study. I explored the following themes as they emerged from the data: *fun, fitness* and *relaxation.* These findings are used to voice a rationale for a renewed focus on *dancing* in DMT/P. A theoretical model, which I refer to as an *exercisePLUS+* approach, was developed out of the findings and discussed in my final chapter. This model emphasises the concept of physical fitness/exercise in DMT/P and describes how fitness goals, combined with a phrase-based dance teaching, can provide an alternative framework to that of the dominant psychoanalytical application of DMT/P. Practitioners wishing to work outside of the biomedical mental health treatment model may find this theoretical model useful.

My model challenges dualistic notions of healthy/unhealthy and locates the notion of 'health' within a broader framework of social equity and inclusion. As such, the theoretical developments presented in my thesis focus more generally on social

participation, fitness and wellbeing, yet also include more internal, psychological approaches to DMT. The model includes reference to neurophysiological understandings of trauma, yet problematises the over-reliance on medical discourse in trauma treatment, DMT/P and mental health. An alternative approach is therefore presented with a renewed focus on social equity and inclusivity, community participation, and access to health promoting activities, such as non-institutionalised forms of dance therapy.

As well as critiquing the dominance of psychoanalytical frameworks and arguing for a more interdisciplinary focus, I also position my study as a further development of social justice DMT (Cantrick et al., 2018). I argue that DMT/P is a flexible modality which has the capacity to dance across the *full* spectrum of healthcare: from preventative health, through to acute illness, within rehabilitation contexts, and in alignment with social justice principles. My contribution to knowledge is a critique of dominant models, as well an example of what DMT might achieve outside of the shadows of the biomedical model. My thesis can therefore be read as call to diversify DMT/P theory and practice, including the further development of critical and feminist approaches to therapy.

Recommendations for practice and further research include the following: a) the need for continued discourse regarding power and oppression in therapy, specifically in relation to "body politics" in DMT/P (Allegranti, 2011; 2013); b) ongoing critical engagement with Eurocentrism and the legacy of colonialism and imperialism in healthcare, including DMT/P; c) the further development of critical trauma discourse/s in DMT/P which challenge and expand on the existing theories of trauma and the body, and d) a renewed focus on *dancing* in DMT/P which combines exercise and fitness with a psychosocial approach as per the *exercisePLUS+* theories presented in this thesis.

Declaration

This thesis comprises only:

(i) the graduate researcher's original work;

(ii) due acknowledgement has been made in the text to all other material used;

(iii) the thesis is fewer than the maximum word limit in length, exclusive of tables, maps, bibliographies and appendices.

Signed:

Name: Ella Dumaresq

Date: 1.02.2021

Statement of ethical approval

The research was considered and approved by the Humanities Law & Social Sciences Human Ethics Sub-Committee.

Approval #:1851118.1, May 2018.

Preface

(i) This research was carried out in collaboration with others, namely Susan Dandy and Alyce Morton, both from Geelong Community Correctional Services, Geelong.

(ii) The nature and proportion of the contributions of Susan Dandy and Alyce Morton was limited to the process of developing recruitment pathways.

(iii) Susan and Alyce are named as “co-researchers” in the study as per action research principles. The written work is the original work of the author.

(iv) Third party editorial assistance was provided in preparation of some chapters in this thesis. Chapters 6, 7 and 8 were proofread by Wendy Dumaresq, who is not knowledgeable in the academic discipline of the thesis but provided basic editorial support such as spelling and grammar.

(v) This research was funded through the Research Training Program, formerly known as the Australian Postgraduate Award.

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- My healthcare team: for helping me get back on my feet after injury and mishap;
- My body, for always teaching me something new;
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Abbreviations

AoD – Alcohol and other drugs

CoMT – Community Music Therapy

DMT – Dance movement therapy

DMP – Dance movement psychotherapy

*DMT/P Dance movement therapy/psychotherapy

DoJ- Department of Justice

Geelong CCS – Geelong Community Correctional Services

GLM – Good lives model

RNR – Risk-needs-responsivity model

***Note:** At times I used the abbreviation DMT/P to signify that I am referring to broad discourse/literature which includes the definition of practice used in the United Kingdom (i.e. DMP). More often than not however I am choosing to use the abbreviation of 'DMT' as this aligns with my geographic location and terminology as an Australian-based researcher and practitioner.

Chapter 1. Introduction: Community access, art and activism

The very beginnings of this project were inspired by my experience of working as an Allied Health Assistant for a community-based organisation in Melbourne, Australia. In this role I worked alongside people with acquired brain injuries with the goal of assisting clients to participate in a range of community-based activities. This included attending art making groups with clients as well as a range of other activities such as community dance, swimming, yoga, tennis, grocery shopping, cooking and family visits.

This experience taught me a great deal about the many challenges and barriers to community participation in both the arts and physical recreation/leisure that people of all ages living with acquired or traumatic brain injuries may face. My time with this organisation helped shape, to a certain degree, my interest in doing community-based research with a focus on inclusion, belonging, and social participation through the arts (i.e. using my skills and knowledge as a dance movement therapist).

Drawing from this experience, my first 'research' impulse was to study literature describing the various populations in which acquired brain injuries are particularly present. As I begun to read and contemplate a PhD topic, I discovered – to my horror - that head injury rates are exceedingly high amongst prison populations in Victoria, Australia. I learned that incarcerated women, particularly indigenous women, are described in the literature as having much higher rates of head injury than the general population. According to one study which screened incarcerated participants for symptoms of acquired brain injury (Jackson et al., 2011), a staggering 79% of females indicated a strong likeness of having sustained a head injury at some point in time (p. 5). Given that acquired brain injury affects roughly two per cent of the general population (Jackson et al., 2011, p. 22), I found this data to be alarming, and suggestive

of complex radicalised and gendered inequality within the criminal justice system itself (Baldry 2010; 2013; Baldry & Cunneen, 2014). While the studies I originally engaged with were written around a decade ago, a recent news report from February 2020 indicates that ABI numbers are still sitting around two per cent (Hermant, 2020).

My interest as a graduate researcher was sparked as I engrossed myself with this literature and explored the distressing nexus of imprisonment, acquired brain injury, and indigeneity. Along with this, a strong sense of activism accompanied my thinking, as well as my emotional and bodily responses to the literature. As a result, I began to explore ways in which I might design a research study that would allow me to invite criminalised women - and their supporting communities - to collaborate with me. The focus of the study would be to explore the value of DMT in this specific, sociological, and under-researched context.

Given the relatively limited time frame of a PhD project however, I decided not to constrain my research focus to acquired brain injury, indigeneity, and imprisonment but instead opted to explore DMT with a broader female[1] population, sited within a post-imprisonment (community) context.

Motivation for this study

As well as the influence of my role as an Allied Health Assistant, my motivation to pursue this study was twofold. On one hand, I was inspired by the work of Australian criminological scholars, Marie Segrave, Bree Carlton, and Eileen Baldry

[1] I would like to acknowledge that terms such as female/male suggest a binary understanding of gender – however LGBTQIA+ perspectives emphasise gender diversity, inclusivity and use non-binary language to describe gender identities and sexual preferences. While I refer to *women* throughout my thesis, I would like to acknowledge that not all women identify with this term, and that womanhood has multiple expressions and holds different associations for each individual.

whose research helps shed critical light on the structural and systemic inequities faced by women in the Australian prison system. I explore the work of these women in my critical inductive literature review in Chapter 3 and discuss the role of feminist and activist perspectives within this research.

It is important to hold in mind that the main focus of this study is not necessarily to affect social change, but to maintain a critical stance regarding "dominant narratives" in the creative arts therapies (Hadley, 2013). Furthermore, I seek to challenge and disrupt binary pairs such as researcher/participant and therapist/client throughout my thesis in order to align with critical and unoppressive research principles. As such, my motivation for this research is political, yet my activist stance is not central to the inquiry itself – rather it is a 'lens' which I integrate on many different levels throughout the life of the project.

It is also important to note that the institution of the prison and topic of criminalisation itself has come under increased scrutiny in recent times, particularly in regard to social movements such as *Black Lives Matter*. Activism in response to racialised and gendered criminalisation is far from new Australia, with indigenous communities, prison abolitionists and critical scholars having spoken out against structural and systemic inequalities for many years now. Many of these people are contributing towards important activist movements and raising critical awareness of this issue in local communities all around Australia, as well as internationally. While my thesis does not specifically undertake an analysis of racialised inequity and oppression, I do endeavour to make transparent my own political stance in this research. I make this transparent in order to communicate how my personal and political worldviews inform the knowledge generation process, particularly in regard to my chosen methodology which is framed as a broadly participatory approach. My social and political values

have fuelled my desire to undertake collaborative, community-centred research and this belief system finds a comfortable fit with participatory research principles and processes, which I articulate in Chapter 4.

On a profession level, my values and intention behind doing participatory research is to contribute toward research literature within DMT/P by developing theoretical and practical suggestions for community-based practice. While there are strong theoretical frameworks to rationalise the use of DMT/P as a specialised form of treatment in more medical contexts, there is much less emphasis on the role of DMT/P outside of a treatment model approach to date. I therefore identified a gap in DMT/P research literature and perceived a shortage of alternative, non-expert approaches in the research literature. While the neighbouring field of music therapy has developed strong theoretical frameworks to support non-expert approaches to therapy (for example, see McFerran, 2020) this remains underexplored within DMT/P literature. Alternative approaches therefore to communicate a rationale for what DMT/P practitioners do in community or other non-biomedical settings, and why.

Medical frameworks, including psychotherapeutic discourse, often position the therapist as the 'expert' and emphasise therapist interventions and techniques when describing therapeutic change (Rolvsjord et al., 2005), which is a perspective I seek to challenge and by offering an alternate discourse around how and why therapy might be beneficial. Understanding how people choose to invest in, participate or engage in, and appropriate the "health affordances" (DeNora, 2007) of dance as a therapeutic resource was of interest to me as I approached this study. This meant taking a step back from my expert role and inviting people with direct lived experience of criminalisation[2] to teach

[2] See Chapter 4 for information regarding study inclusion criteria. The term 'criminalisation' in my research refers to anyone who has lived, direct experience of either incarceration or has/is serving time on a community correctional order.

me about how they perceive DMT and the ways in which they would like to appropriate or use it in order to support their self-expressed health and wellbeing desires. I anticipated that by taking a collaborative, non-expert approach, I might learn something new and different about DMT which could potentially challenge my taken-for-granted assumptions and expectations as to how DMT might be of use in this context.

One of the taken-for-granted assumptions that I critique in this thesis includes the over-emphasis on psychoanalytic concepts in the field's literature which supports the use of internally-focused approaches to DMT/P. The hidden goal of working with inner psychological states has not always been apparent to me as a practitioner. Prior to commencing this study, I have more or less accepted the psychoanalytic tradition as central to DMT/P and have been guided by psychoanalytic concepts in my practice. In this project however, I have used an autoethnographic approach to critically interrogate my personal experience of bringing ideals from my DMT training into the institution of the criminal justice system. This reflexive narrative allows me to communicate some of the challenges involved in shifting from ideal visions of DMT toward a situated and responsive attempt to bring dance therapy into the lives of women in the Australian justice system. A different model of DMT has therefore emerged from my fieldwork findings – one that is focused on the role of dance teaching in DMT and which celebrates the notion of fitness, social participation and puts forward an expanded notion of wellbeing. This is intended to disrupt the binary (biomedical) notion of healthy/unhealthy as well as therapist/client and other dualistic constructs. While I include more internal, psychological approaches in my theoretical model, which I describe as an *exercisePLUS+* approach, my aim is to provide a critique throughout the

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Participants this study engaged in a series of drop-in DMT workshops and both had previous experiences of incarceration and were both at the time serving a community corrections order.

thesis regarding the dominance of the psychoanalytical model informing DMT/P. Moreover, I provide a theoretical alternative which can be further developed and experimented with by practitioners who wish to challenge the health/y binary within the context of community preventative health.

Background to this research topic

Research shows that rates of female incarceration in Australia have been rising over the past decades (Baldry & Cunneen, 2014). According to the literature, there are three main demographics in which imprisonment has increased. These are:

1) the imprisonment of indigenous peoples;

2) the imprisonment of people with mental/cognitive impairment; and

3) imprisonment of women (Baldry & Cunneen, 2014, p. 278).

There is evidence that once imprisoned, women are likely to enter a cyclical pattern of incarceration and release (Carlton & Segrave, 2013). Programs developed to address the needs of female ex-prisoners in Australia have traditionally been informed by a 'what works' model which aims to reduce offending by focusing on behaviour and choice at an individual level. This approach, though widely implemented, has been critiqued by some scholars and justice advocates who argue that the contextual factors which drive "offending" are not represented or addressed in the dominant desistence models (Carlton & Segrave, 2013).

Social inequity, lack of community-based service provisions, structural disadvantage, marginalisation and Australia's ongoing history of colonialism are among the many significant factors which are contributing toward increased female incarceration rates. In addition, critical scholars suggest that the majority of research focussing on women's post-release fails to capture and respond to the complexity of

women's lived experiences (Carlton & Segrave, 2013, p. 2), which includes material and social inequity, exclusion and ongoing marginalisation and disadvantage.

While some promising shifts have been made over recent years, such as gender-responsive reforms, there remains a *what works* mentality in which male-centric models of practice are adapted and imposed on women (Baldry 2010, p. 254). This approach often fails to meet the complex needs of women cycling in and out of the 'revolving doors' of prison settings and reveals a lack of genuine and appropriate therapeutic support for women.

As a result, critical scholars have encouraged participatory research projects which centre around women's experiences of imprisonment and release (Cartlon & Segrave, 2013). Given the lack of theoretical research exploring post-release therapeutic support for women (Carlton & Segrave, 2013, p. 151-2), I have crafted a project which seeks to answer calls for more feminist-informed research into women's post-release support.

Aim and scope of the study

I was guided by participatory research principles throughout the duration of this research. These principles include a commitment to addressing issues identified by participants, or participating communities, through iterative, collaborative cycles of inquiry (Freire, 1968). This dialogical, flexible and action-oriented approach is inspired by the legacy of Paulo Freire, a Brasilin educator whose critical pedagogy is influential in many participatory research designs (see Methodology, Chapter 4).

Another guiding principle was the intention to bridge academic knowledge with everyday practice, or community expertise. This is another touchstone of participatory research (Reason, 2006) and reveals an attitude toward research in which

expertise is shared between academic researchers and community "players" (Bolger, 2013; 2015). In this research study the players are:

- Myself as the academic researcher
- Co-researchers Susan Dandy and Alyce Morton from the Department of Justice, who are introduced in Chapter 4, and
- Participants in the DMT group, whose feedback is central in the presentation of findings and analysis chapter (Chapter 6)

The number of participants in the DMT group was relatively low with only two women consenting to be involved in the study. These women, whose pseudonyms are 'Min' and 'Kaz,' are introduced in Chapter 4 (Methodology). The 'low' number of participants is in many ways reflective of wider systematic socio-political issues that I address in later chapters. These include not only the personal challenges faced by women, such as substance use and mental health concerns, but the broader contextualising realities which further compound existing trauma, inequities and struggles. Critical feminist scholarship is used in my thesis to examine how structural oppression and exclusion present serious barriers to criminalised women's participation in society – not only in this study, but within the wider community.

Given my social equity and critical stance as a researcher, I have used an emergent to research design to help guide the process of doing a community based, collaborative study. Rather than articulate pre-determined goals or research trajectories, I have sought to involve the participating research community throughout the development of this study. This reflects a participatory approach in which research questions are expected to change across the course of the study, along with research relationships, study purposes, and what is considered important to address in the study itself (Reason, 2006, p. 197).

While the specific aims of the research are expected to evolve and change throughout the course of the inquiry, the overarching intentions for this project remained relatively consistent throughout. These intentions included a desire to collaborate with women engaged in the prison system, as well as 'supporting communities' (i.e. case managers), in order to explore possible ways in which dance movement therapy might support health and wellbeing goals and desires.

Research questions

The key questions guiding this study were developed in partnership with co-researchers at Geelong Community Correctional Services (Geelong CCS), who consented to become collaborators in this shared research venture. The questions articulated within my 2018 ethics application were:

- How might a dance therapist work in partnership with supporting communities such as service providers and outreach workers to create enabling conditions for women to access dance movement therapy (DMT) within the community?
- How might DMT support women in the criminal justice system in ways that are responsive to the health and wellbeing needs, expectations, and desires of its users?
- What role might a dance movement therapist play in supporting women to access and participate in a greater variety of ongoing physical movement and wellbeing related activities in the community over time - including after the completion of the formal research project?

The questions themselves changed over time however, which is reflective of the dynamic and fluid approach stipulated through participatory research principles. The main intention of the questioning remained the same however: *What can we learn from women with lived, embodied experience of criminalisation, about the*

ways in which they might choose to use and engage with DMT? And, what does this teach us about the possibilities for DMT in this particular sociological context?

The approach to inquiry

This study sought to make a practical contribution within the community by exploring through participatory research the specific ways in which research participants might choose to engage in dance movement therapy. A non-expert stance was taken in this study, meaning that I, as the academic researcher, sought to learn from women with direct lived experience about their views and expertise in terms of what DMT might afford them in this specific context.

This collaborative stance was inspired by theory and philosophical perspectives from the neighbouring discipline of music therapy. Since the turn of the century, community-centred approaches in music therapy have been gaining force through a discourse and practice widely referred to as Community Music Therapy, otherwise known as CoMT (Ansdell, 2002; Stige & Aaro, 2012). Principles of CoMT guiding my approach to inquiry include the following points, articulated by music therapy academics, Stige and Aaro (2012):

- Participatory
- Resource-oriented
- Ecological
- Performative
- Activist
- Reflexive
- Ethics-driven

CoMT approaches pay particular attention to specific, contextualised situations and seek negotiates the therapeutic process accordingly (Stige & Aaro, 2012, p. 25). This has informed my own non-expert stance as a researcher-therapist. Values of openness, transparency and collaboration underpin contextual approaches to therapy. From this perspective, the main source of therapeutic change is not attributed to the therapist's interventions but more so to the process of collaboration itself, and the activation of a client's personal resources (Rolvsjord et al., 2005). As such, this model challenges traditional power relations in the therapy context, as well as research setting, and introduces a critical perspective around the notion of empowerment within therapeutic relationships (Rolvsjord, 2006).

Rather than assume empowerment as a *given* within the therapeutic context, this research project seeks to illuminate power discrepancies in the therapy/research and to position research participants as experts of their own experience. This aligns with feminist approaches to knowledge building in which binary assumptions, such as therapist/client, are critiqued in order to transform scholarly knowledge (Lykkes, 2010). Furthermore, women's experiences are centred, and dominant norms are challenged throughout (Reid & Frisby, 2011).

Overview of the thesis

This thesis is structured in eight chapters, several of which contain video footage of dance-based material to help communicate central ideas and concepts. In terms of thesis structure, I begin my narrative of the research journey in Chapter 2 with a background discussion and theoretical positioning piece. In this chapter I introduce key epistemological perspectives which relate to my previous academic training in the social sciences and humanities, as well as DMT/P. Core philosophical and theoretical standpoints drawn from cultural anthropology, as well as German philology (the study

of historic and literary texts) have had a powerful influence on the ways in which I have approached this PhD topic. This chapter communicates how my previous studies have informed my methodological approach as a graduate researcher and introduces key critical perspectives around power, representation and knowledge which are consistently woven throughout my dissertation.

This positioning piece lays the ground for an inductive literature review in Chapter 3. Drawing from feminist perspectives and inspired by embodied research methodologies, I offer a located and full-bodied approach to constructing a critical, inductive literature review. I use my own bodily and emotional responses to the literature to further my analysis process and examine existing literature from a critical angle. This chapter also makes transparent my own political stance and explores some of the tensions embedded in socially engaged projects: The balancing of political perspectives and social justice ideals with the values and responsibilities of doing therapeutically oriented health research with vulnerable populations.

Building on the work of Australian critical feminist criminologists and sociologists I explore what it might mean to centre women's lived, *embodied* experiences within participatory research projects. At the same time, I interrogate my own activist stance and reveal the belief systems underpinning my approach, with reference to a range of feminist perspectives, including the core concept of 'embodiment' which is informed not only by feminist philosophies, but is rooted in my practitioner knowledge as dance movement therapist.

Chapter 4 communicates my main methodological approach and presents an overview of the principles, approaches and processes used to structure this research. This section describes key participatory research goals and articulates the epistemological structures and processes used to generate knowledge through iterative,

collaborative and emergent cycles of shared research. Other methodological influences are presented, such as the role of embodied research methodologies in this study, as well as the approaches to writing that are informed by autoethnography. This chapter expands on some of the ideas presented in my background chapter by describing how feminist, participatory and social justice principles inform the work methodologically.

In Chapter 5 I discuss how the process of doing participatory research gave rise to a second literature review. Co-researchers Susan and Alyce shared with me their desire to have access to a systematic literature review in order to advocate for DMT in this system. Although my research methodology is qualitative and emergent, I decided to listen closely to my co-researcher's wishes and recommendations and made the decision to incorporate a more objectivist style literature review in my thesis, in direct response to my co-researchers' requests. I draw on the qualitative framework of "crystallization" (Ellingson, 2017) as my theoretical rationale for writing my broader literature review in alignment with more quantitative research approaches. This chapter is divided into three papers, each representing a different paradigmatic perspective ranging from objectivist, to interpretive, and concluding with a critical perspective. My rationale for including an objectivist approach in an otherwise qualitative research project is articulated further within this chapter and I discuss how my decision to include an objectivist, aggregative literature review is firmly aligned with emergent participatory goals and processes.

Chapter 6 describes the process of data production. The term data 'production' is used rather than data 'collection' to align with a feminist understanding of knowledge, or diverse bodies of knowledge. Rather than insinuate there to be one singular truth 'out there' waiting to be 'collected' I am choosing to use the term *production* to point toward a generative understanding of how knowledge is both

constructed and often contested. Data is not viewed as a static or extricable 'truth' in this study but rather, is positioned as a porous and often slippery concept in-and-of itself. What counts as data in my study often involves multiple – often contrasting – points of view and includes bodily and intuitive ways of knowing.

In this analysis-of-findings chapter I present the formal research data and offer an interpretative and inductive analysis of key themes emerging from the DMT workshops. I provide information on how each drop-in DMT workshop was facilitated and present each participant's feedback, which are central to the study and informs the development of theory in the following chapter. Informed by feminist traditions, the findings are presented in such a way as to centre women's lived experiences and responses to highlight the partial, open-ended, subjective and multi-layered nature of engaging in interpretivist methodologies. I use a reflexive, dance-based medium to convey my interpretations of the data which then serves as a springboard for analysis. The analysis itself focuses on understanding participant feedback, which helps to shed light on what (some) women 'want' from dance movement therapy. Each woman articulated her understanding of what she perceived as valuable, and I extend on each of these participant-identified themes in my discussion chapter to follow.

Chapter 7 then discusses the three main themes emerging from the data and examines these ideas from a more interdisciplinary perspective. Drawing on literature from DMT/P, as well as dance studies, physical therapies, and exercise science, I examine the findings from a non-psychotherapeutic perspective in order to provide an alternate lens through which to construct meaning in DMT/P research. I examine how some of my practitioner beliefs and values, such as my personal orientation towards psychotherapeutic work, have been deeply challenged by not only the formal data, but the process of collaborating with criminalised women and their supporting

communities as a whole. In this chapter I offer a reflexive movement video which I use as an arts-based platform to discuss the embeddedness of my own practitioner assumptions, biases and expectations in regard to the *possibilities* of DMT in this context. I detail my own personal discomfort in realising that my some of my previously held frames of reference as a practitioner might be problematic in the context of facilitating brief, drop-in DMT workshops for women in the community. In doing so, I critically deconstruct taken-for-granted ideas informing my approach as a DM therapist-researcher and approach the findings from a perspective that resists some of the more psychoanalytically informed constructs of the "creative/expressive paradigm" in the creative arts therapies (Johnson, 2009). My discussion centres around understanding the research findings as they relate to existing discourse in DMT/P, particularly trauma-informed frameworks, whilst challenging the over-medicalisation of trauma discourse. I offer Ginsberg's conceptualisation of "healing-centred care" (Ginwright, 2018) as an alternative to dominant psychoeducational approaches to trauma-informed models. Furthermore, I present a feminist-informed rationale to support the further development of non-institutionalised applications of DMT/P theory and practice. I offer the suggestion that alternate, non-expert approaches may be valuable not only within the contexts of women's criminalisation, but across other 'at risk' community sectors also.

Chapter 8 translates this theory-based discussion into a more practical framework and resource for practitioners. After further considering the implications of the research findings and arguing for a re-centring of *dance* within dance movement therapy, I provide a practice resource for community-based DMT practitioners in the Australiasian region. This presents a strong focus on the some of the possibilities for DMT in preventative health. This chapter also incorporates some practice principles

and recommendations including adapted forms of dance, such as tango, ballet, or other structured dance styles into a DMT practice frameworks. I discuss the need to balance improvisational and expressive movement in DMT with more structured, skills-based, dance-centred approaches which may be used to support physical outcomes in DMT such as balance, co-ordination, fitness, neuromuscular health and other physical/functional therapeutic goals. By locating DMT as an approach which can dance flexibly across full spectrum of healthcare – from prevention, through to acute illness and into rehabilitation – I hope to offer some practice recommendations for applying DMT outside of the dominant centre (acute illness/treatment model). Moreover, I argue that prevention and rehabilitation are two areas that could be further developed in both DMT theory and practice.

In my conclusion I summarise the main research outcomes and consider how the findings from this research might be applied within other community settings, particularly in contexts in which power relationships are asymmetrically skewed. Overall, this thesis can be read as contribution toward further developing social justice perspectives in DMT work (Cantrick et al., 2018) as well as an inquiry into partnering with women whose direct experiences of engaging with DMT in a criminal justice context are of central concern. It is also an exploration of what it could mean to approach DMT research from a more interdisciplinary perspective and in doing so, my research positions DMT as both a creative arts therapy as well as a therapeutic form of physical engagement. Given that alternative approaches to rehabilitation in criminal justice are looking increasingly toward the arts *and* physical engagement (i.e. capoeira, martial arts, yoga) for more humanistic responses to offending (Joseph & Crichlow, 2015), it may be of interest for DMT practitioners to explore the physical, or exercise components of DMT from a fresh angle. This aligns with current directions in both

mental health[3] as well as criminology, which acknowledge that having good quality community access to sports, leisure, recreation and the arts are critical in building protective factors in a criminal justice context – as well as supporting mental and physical health concerns which often intersect with criminal justice work such as drug and alcohol use, and anxiety/depression (see Chapter 5). Theoretical and practical implications for are stated in Chapter 8, and all supplementary materials can be located in the appendix.

[3] See Karkou et al., (2019) on recent shifts within national mental health guidelines in the UK and the positioning of exercise in regard to the treatment and prevention of depression. I elaborate on this more in Chapter 7.

Chapter 2. Background and positioning piece: A critical look at "thick description" and the body

This chapter introduces some of the key philosophical and theoretical perspectives which inform my PhD project. In particular, I highlight the ways in which theoretical influences linked to my previous research background in cultural anthropology and German studies have informed my doctoral research approach, particularly in reference to my epistemological positioning as a qualitative researcher. Both anthropology and German studies (language, culture, literature, philosophy) have shaped my thinking, given that I completed my honours[4] thesis in these disciplines before training to become a dance movement therapist. The theoretical threads which emerged out of my 2012 honours project have continued to shape the way I think about research, and my doctoral dissertation extends on this previous learning. The majority of this chapter is therefore focused on the influence of both anthropology and German studies on my current PhD research, particularly in regard to the philosophical study of knowledge. In research terms, epistemology refers to the way in which understanding, or knowledge, is formed, constructed, or deduced – depending on the specific worldviews or paradigms informing the knowledge generation process. Coming to DMT from the humanities and social sciences, I recognise that I have been trained in a largely qualitative and constructivist paradigm. A strong critical stance informs my

[4] In Australia, undergraduate students may choose to complete an honours thesis, which is a research-led project constituting of an additional year of study. Following a first-class honours award, students are considered eligible to apply directly for a PhD stream. This has been the case for myself, meaning that my academic pathway has been one in which my honours research has paved the way for further studies at a PhD level. My DMT training and practice has taken place in the time in-between my honours research this doctorial study. I therefore wish to make transparent the strong influences of anthropology/German studies on my current thought as a DMT researcher-practitioner.

work, particularly in regard to issues centring around the role of language, power and with language within knowledge production. Throughout my thesis I extend my epistemological stance to include a sharp focus on *embodiment* as an epistemic resource. This conceptual, as well as practical understanding of the body as a source of knowledge stems from my DMT training and is further enriched through feminist discourses which are woven throughout my dissertation.

The influence of Clifford Geertz and Johann Gottfried Herder on this study

The influence of American cultural anthropologist, Clifford Geertz and his literary style of writing will be of central focus in this chapter. In particular, Geertz's method of "thick description" (Geertz, 1973) will be introduced and interrogated, in order to reflect both my alignment with, as well as my critique of, a Geertzian approach within ethnography. "Thick description" refers to Geertz's attempt to highlight the reductionist nature of existing anthropological approaches of his time, which is expressed through his methodological emphasis on the symbolic and interpretive nature of ethnographic. This focus on the interpretive nature of doing fieldwork challenges some of the more positivist assumptions informing traditional approaches to anthropology and reflects a shift within the field toward a more inductive, partial and semiotically-focused approach to cultural anthropology.

Throughout my PhD project I have drawn on Geertz's semiotic, or hermeneutic methods, to support my own interpretive processes as an ethnographically informed, qualitative researcher. The role of ethnography as a methodological framework is communicated fully in Chapter 4 (Methodology). This chapter provides an overview of some of the foundational influences of ethnography in my research. Geertz's approach is critical to my understanding of interpretivism and this chapter communicates some of the influential aspects of Geertz's paradigm on my own approach whilst challenging

some of the embedded assumptions of a symbolic, interpretive framework.

I seek to position the practice of "thick description" as valuable approach to ethnographic fieldwork which I believe can be leveraged as a tool to enrich DMT research as well as other applied forms of research. With reference to DMT praxis (i.e. both theory and its application), as well as feminist philosophies, I explore how a Geertzian framework might be expanded toward a more embodied and embedded orientation to qualitative research. I will elaborate more on these notions of 'embodied' and 'embedded' in the latter part of this chapter, as these terms feature consistently throughout my thesis.

As well as exploring and critiquing aspects of Geertz's ethnographic method, this chapter introduces the work of 18th century German philosopher, Johann Gottfried Herder (1744-1803). Not only was Herder known for his writing, poetry and philosophical contributions, but some scholars argue that his writing can be understood as representative of an early ethnographic forms of analysis, making him a potential forerunner of what has become known as hermeneutic anthropology (Dieters, 2002). Herder's work, like that of Geertz, lends itself to a range of disciplinary perspectives and his focus on the sensory qualities of communication – body, movement, sound – have made a particular impact in the way I think about research, writing, and the representation of ideas. In many respects, my feminist and critical stance overlaps with some of Herder's, particularly his pushing for more somatic ways of knowing within the canon of western philosophy.

Herder's writing and musings on the role of language, the senses, his philosophical holism and his challenging of European 'universalising' assumptions situate him as quite a radical for his time. While contemporary hermeneutic anthropology is not widely associated with Herder's work, my 2012 thesis sought to

examine how aspects of Herder's ethnographic approach can be located in Geertz's more contemporary approach to cultural anthropology. For example, Herder's use of lyrical, experimental prose bears close semblance to Geertz's own literary approach, and both theorists seek to systematically a evoke a sensorial understanding of the data, which is heightened through a flair for poetic description.

While I have drawn a great deal from both Geertz and Herder's poetic approaches to hermeneutic ethnography, there are epistemological limitations within an interpretive approach that I wish to point out in order to further build the critical arguments presented throughout my thesis. DMT, like other health disciplines, employs interpretive research methods as well as more objectivist designs, yet this chapter seeks to expose some of the hidden assumptions embedded within the 'interpretive turn' in order to consider key epistemological considerations through the lens of feminist theories and critical thinking. Central to my argument within this chapter – and throughout my thesis – is the need to include more of the 'body' within critical, qualitative, reflexive research. This echoes feminist calls for more embodied ways of knowing within academic, in order to disrupt the dualism of Cartesian thought, and in the spirit of decolonising academia and carving out spaces for epistemologies of difference within the institution itself.

Writing style: The tenacious hold of the cool, neutral tone

Given that I have previously studied in the tradition of European anthropology, including time spend abroad in Germany, I notice in myself a tendency to write in a somewhat distanced or detached way. Out of habit, I place a great deal of emphasis on the passive voice. Many of the classical anthropology texts I studied during my undergraduate degree were written in a cool objective tone. From a decolonial perspective, these early ethnographic accounts read as uncomfortably imperialistic and

objectifying. The binary separation of the 'knower' from the 'known' is strongly rooted in classical Eurocentric thought and manifests, in my experience, in a writing convention which is quite difficult to overcome or subvert. However, as a humanities student I was also exposed to many critical perspectives and varied worldviews. By studying literature, philosophy and languages alongside the social sciences I developed a fascination for different ways of knowing. Most notably, I recall learning about indigenous ontologies and ways of knowing as an undergraduate student. This was a profound experience and I can still viscerally recall the paradigm shift that accompanied this learning as a student of Australian Indigenous Studies.[5] In these classes I learned to better understand, deconstruct and critique the dominant narratives which continue to shape Australian history: Narratives of dispossession and oppression, which are operationalised through the dualistic construct of self/other; nature/culture; rational/irrational and a whole host of other binaries that uphold colonial structures and institutions.

As a student of Australian Indigenous Studies, I was moved by the argument that this same dualistic tradition is alive and well in academia. Dualistic thinking and objectivist discourses have historically been used to silence more subjective ways of knowing such as personal narrative, feeling, and emotion. A privileging of discourse (i.e. written texts and rational arguments) has long been the standard of scientific rigour, meaning that the visceral, tacit, and corporeal realm of knowledge production have been systematically marginalised. Even my attempts to write in more personal and proximate ways can't resist the temptation of the aloof, distant academic voice. I have echoed the words of other ethnographic writers' numerous times when exclaiming to my

[5] In particular, the guidance and scholarship of anthropologist Dr. John Bradley (Monash University) has been hugely influential and has forever changed the way I see the world as a white, settler Australian of European decent.

supervisor: "…see how powerful the conventions are?" (Ellis & Bocher, 2000, p. 7.35). Nonetheless, I have chosen to refer to my own body and emotions consistently in this research in order to align with a decolonising movement in academia. I use poetic, creative, first-person narratives wherever possible to help balance out the dry, discursive style I have adopted from some of my former studies. This is an act of self-location in which I place myself purposefully and reflexively in the text. Like many other qualitative researchers, I employ researcher reflexivity in order to better understand the research questions (Finlay, 2002) and acknowledge my own role as a researcher in the formation of knowledge presented in this PhD.

Locating the 'self' in qualitative research

By intentionally locating myself in relation to the study at hand, I also seek to challenge the pervasive myth that ethnographic research is neutral (Coffey, 1999, p. 12). My use of researcher reflexivity includes arts-based responses which I offer throughout my thesis. In some chapters, I include video links in order to communicate and perform some of embodied, reflexive understandings as a qualitative researcher. There is no formula for 'writing the body' into research texts, so naturally, the process is one of ongoing exploration and experimentation. The effort is challenging, yet enlivening, with much room for continued innovation, debate, reflection, and experimentation. Creating space in academia for alternate forms of knowledge to co-exist alongside categorical, descriptive, predictive epistemologies is, in my perspective, a valuable endeavour.

I am therefore choosing to use a first-person narrative in order to align with my epistemological beliefs and values in regard to the partial, subjective, located, dynamic, entangled, embedded and often contested nature of knowledge. This orientation to truth – or truths - is aligned with more recent shifts within anthropology, as well as other social science disciplines, in that feminism and other critical philosophies have

introduced a greater emphasis on diversity, tensions, and open-ended approaches to shared research pursuits (Coffey, 1999, p. 9).

A brief look at anthropology: Shifting disciplinary conventions

Coffey refers to Denzin and Lincoln's (1994) work to describe some of the theoretic shifts in anthropology over the last century. According to Coffey, anthropological perspectives can be characterised by a shift in focus from a strongly positivist outlook toward more interpretive and constructionist frameworks. Denzin and Lincoln (1994) characterise a series of disciplinary shifts within anthropology as such (as cited in Coffey, 1999):

1) **Positivism**, from roughly the 1900s until the Second World War,

2) **Modernism**, where more widespread use of qualitative perspectives regarding social processes and control is recognised in the literature,

3) **Blurred genres**, of which Clifford Geertz's work is a prime example of blending multiple theoretical and stylistic paradigms,

4) **Critical**, whereby textual practices were critiqued in what the field commonly refers to as a 'crisis of representation,' and

5) **Continuing diversity** and tensions within ethnographic research.

Denzin and Lincoln also suggest that a sixth moment is continuing to emerge in which messier, more open-ended feminist-inspired texts are making an impact on the field's evolving identity (as cited in Coffey, 1999, p. 9). There are many more movements, discourses and definitions of ethnography/anthropology within more contemporary research literature, however this remains outside the scope of my thesis to examine further. My intention here is to provide a brief overview of some of the past trends in ethnographic research, yet this should not be read as a comprehensive account of where the field is currently at. Contemporary anthropology is an extremely diverse

field, which resists the somewhat neat classification of ideas and epochs presented by Denzin and Lincoln. As Coffey states, ethnography has always been underscored by tensions based on theoretical diversity: None of the epochs listed above have ever been homogenously positivist or interpretivist but reflect a field which is dynamically changing and evolving in terms of approaches to ethnographic fieldwork and analysis.

The crisis of representation

One example of this dynamically shifting discourse is located within a debate regarding the *right to represent* others in academic research is associated with what has been called the 'crisis of representation' in the social sciences. Here, the discursive paradigm has come under scrutiny in social studies, and the epistemic construction of the text, or discursive analysis, become the central focus of critical, reflexive inquiry (Clifford & Marcus, 1986).

In a collection of critical essays published in the seminal volume: *Writing Culture: The Poetics and Politics of Ethnography*, Clifford and Marcus (1986) present a vast array of social and political critiques which address this question regarding the politics of representation. In this volume, critical debate centres around the Eurocentric, colonial, objectifying tendencies of the anthropological gaze and the related act of 'writing culture' which is regarded as a form of epistemological colonisation. This pushback against the implicit imperial bias within anthropology erupted in the late 1980s, setting the stage for a timely debate regarding the ethics of writing about, and representing, the 'other' in anthropological discourse.

This shift in anthropological thought reflects a growing awareness around the colonial origins and influences within the field, which has become topic of reflexive self-criticism within the field itself (Davies, 1999, p 11). According to Davis, this critique has led to an arising interest and positive regard for the role of reflexivity in

research. Any study of the 'other' must entail a study of one's 'self', including the dynamic relationship between researcher and participants (Davies, 1999, p. 12). More and more, some schools of anthropological inquiry are finding ways to make transparent the ways in which the very presence of the ethnographer, or anthropologist, invariably influences and shapes the ways in which research, data production, analysis and the presentation of findings are communicated. There is an increasing amount of reflexive research being undertaken within anthropology as more experimental approaches continue to emerge. Such approaches seek to de-centre the traditional, dualistic norms of objectivist knowledge production, and in doing so, new modes of writing have sought to communicate the "situated, partial, local, temporal and historically specific" (Coffey, 1999, p. 11) contexts in which fieldwork takes place.

I align my PhD research with more recent critical and feminist and frameworks such as Grosz (1994; 2010), Braidotti (2010a; 2010b), and Barad (2008). The influence of these theorists on my study is detailed more in Chapter 3, where I draw on new materialist concepts and material feminisms to critically explore the literature from a situated and embodied standpoint. Furthermore, I am informed by the work of dance movement psychotherapist, Allegranti (2013; 2015; 2019), who questions many of the taken-for-granted assumptions embedded in DMT/P and provides alternatives to some of the more Eurocentric notions that inform both research and practice. Guided by these feminist thinkers, I seek to decolonise some of my own understandings of DMT and mental health work. This is particularly the case in Chapter 7 as I interrogate the role of psychoanalytical thought with reference to my own experience of translating ideals from my DMT training into a practice context with women in the justice system.

Thick description: First impressions

Reading Geertz as an undergraduate student, I recall my deep sense of pleasure

and enjoyment as I engaged with a genre of anthropological writing that was fresh and new to me. I found relief in Geertz's writing as viewed his work as a welcome change to the more objectively written texts I had been studying.

Geertz's approach to writing seemed to be steeped in metaphor and lively accounts of fieldwork. It harboured the incredible capacity to be entertaining and delightful, whilst deeply theoretical and analytic. I marvelled at the creative and humorous way in which Geertz would incorporate his own lived experience into a tightly woven, analytically rigorous text which read somewhat like a novel, as well as theoretical treatise.

Geertz's more lyrical style of writing was seminal to anthropology in the 1980s. By integrating creative writing skills into theory-based accounts of cultural anthropology, Geertz played courageously with the parameters of his own discipline. He seemed to break old rules and create new ones with his literary style. Unlike more traditional approaches which essentially hid the anthropologist from view, Geertz methodologically included his own self in the telling of each ethnographic story. By blending poetic writing with empirical analysis, Geertz produced anthropological work which was both highly subjective as well as theoretically sound. This coming together of art and science in a blurred genre text impacted me immensely at the time, and I recall my deep enthusiasm in coming across this more narrative and evocative style of writing.

Understanding thick description in relation to 18th century German philosophy

As a result of my combined interest in both anthropology and German studies, in 2012 I found myself dedicating a whole twelve months to the study of contemporary hermeneutic anthropology and its philosophical relationship to the German intellectual

tradition, specifically 18th century German philosophy. In particular, Herder's work formed the basis of my honour's research, alongside that of Geertz's hermeneutic anthropology. Concisely stated, I focused my research on exploring the role of the anthropologist, as articulated by Geertz, in light of the role of the poet, as described by Herder. For Geertz, as well as Herder, the anthropologist – whose role is similar to that of Herder's poet – seeks to read and interpret culture through a hermeneutic lens.

The interpretive process is grounded within a worldview that aims to read, understand, and communicate the meaning o*f* symbols, whether that be a cultural performance, individual or collective behaviours, words, gestures or artifacts: A hermeneutic paradigm seeks to understand the symbolic meaning embedded in things. An example from DMT is the assumption that movement is symbolic of, or representative of, an inner state of being. From a non-binary perspective, this presents an epistemological challenge in that symbols - including the body-as-symbol, are assumed to be somewhat inert and passive – representative *of* something and given up to the active 'knower' to decode, interpret and ascribe meaning to. I explore this perspective in my following chapter in light of feminist, posthumanist scholar, Barad (2008) and her work on the philosophical tradition of "representationalism." This critique of symbolism also re-emerges throughout my thesis as I explore some of the ways in which DMT assumes a symbolic paradigm for therapy, through which inner states are externalised through movement and considered to be representative of psychological experience. My critique of the movement-as-symbol paradigm in DMT is voiced in Chapters Seven and Eight and is strongly informed by my previous research experience through where I critiqued the inbuild limitations of a hermeneutic approach. My critique rests on an understanding of power relations, which I articulate in this background chapter.

Herder's influence: Revitalising knowledge production through sensory perception

Although little known and often under-recognised for his intellectual contributions, Herder's work reflects a deep commitment toward challenging the Enlightenment ideal of Reason. This is presented through his writings on holism, pantheism, and the sensorial, communicative qualities of the human 'animal.' As far as Herder is concerned, human beings are rational creatures *as well as* fully embodied, sensual and responsive beings with a unique capacity for empathy, understanding and care.

One of Herder's most prominent contributions is his treatise *On the Origins of Language* (1772). In this text, Herder theorises about the emergence of human language and proposes that language is overall a cumulation of the senses, particularly that of tactile and auditory awareness. Herder's respect and fascination with language is expressed through his reverie for oral traditions – i.e. poetry, song and spoken histories – and his writing celebrates the sensorial nature of folklore, oral performance and other non-discursive types of knowledge transmission.

Herder's philosophy of language developed largely in response to rapid epistemological shifts that were taking place within central Europe during the 18th century. With the arrival of the printing press and the distribution of written texts, Herder voiced deep concern for the loss of a more traditional mode of communication - sensorial and performative ways of knowing – and cautioned against the philosophical assumption that rationality, or reason, could only be obtained through engaging with written, objective concepts and ideas. Herder positioned the act of reading, writing and scientific knowledge as distinctly cold, distant and depersonalised which he contrasted to oral culture and more performative traditions of knowledge production.

Bringing the body back into focus

Herder's writing speaks out against some of the monolithic, universalising ideas of the Enlightenment and warns that overreliance on written text has moral and ethical consequences. His philosophy problematises an approach to writing that is distant and objective, arguing that the more relational, sensory modes of knowledge transmission are equally important. Herder's writing shines critical light on the limitations of an overly rational, text-based culture and suggests the richness of human experience may be severally diminished when objectivist worldviews are exercised at the expense of other ways of knowing. In doing so, Herder's philosophy carves out space for the body within knowledge production, which is a stance more recently elaborated on by feminist and other critical scholars. Through his own sonorous, poetic, animated writing, Herder strives to bring the reader *back to their senses* and grounds his prose in a more embodied approach to philosophical discourse.

Herder's sensory-based, metaphor-rich and relational approach to writing has become central to my understanding of knowledge and its construction. As a feminist informed DMT researcher, I understand knowledge to be multilayered, complex, political, contested, and overall, held within the body. Throughout my thesis I draw on the work of various feminist scholars such as Grosz (1994, 2010) and Braidotti (1993; 2006; 2010; 2013; 2019) whose philosophies position the body as an important epistemic resource in feminist research. In some respects, I find my own appreciation for these more contemporary critical philosophies to be greatly enriched through my engagement with Herder's work. Like many contemporary feminist and critical scholars, Herder deeply challenges the problematic mind/body separation of his own time. His commitment to using poetry and sensory-rich language to disrupt the more neutral, rational discourse of Enlightenment philosophy was quite radical for his time

and in many respects, he can be considered quite the maverick for his time.

Herder's influence on my thinking is evident in my use of arts-based, poetic refection throughout my dissertation. Drawing from Herder, I aim to work with an understanding of knowledge which strongly includes corporeal, affective and emotional ways of knowing. Like Herder, and Geertz, I am choosing to include more poetic language throughout my thesis to convey some of the more personal, bodily and embedded processes of feminist-informed research. This aligns with my beliefs as a DMT practitioner, which centre around and understanding that body movement is a primary way of knowing (Sheets-Johnson, 2011; 2012).

Returning to Geertz: Some epistemological limitations of thick description

Now I return to Geertz's work on "thick description" and explore some of the limitations of a hermeneutic approach in light of Herder's philosophy. Primarily, Herder's concern that a text-based paradigm excludes the body and the senses in knowledge production is key to my argument. Throughout my thesis I re-emphasise the role of body in knowledge production from a feminist perspective (Alaimo & Hekman, 2008; Coole & Frost, 2010) and interrogate the limits of the discursive tradition from an embodied standpoint. This aligns with not only feminist and other critical philosophies but reflects some of Herder's arguments, which are now centuries old.

This section of my positioning chapter includes excerpts from my honour's thesis. I offer summaries of my main critique of Geertz's hermeneutic anthropology and his method of "thick description". I argue that textual metaphors inadvertently contain a reductionistic tendency, where culture, bodies, movement, behaviour can be read, decoded and interpreted as a symbolic *of* something – which forms the basis for a dualistic relationship between subject and object.

Influenced by critical scholarship which explores the political and ethical limitations of the culture-as-text paradigm within hermeneutic anthropology, I interrogate some of the ways in which an interpretivist approach such as "thick description" harbours unequal power relations between researchers and participants. This can also be understood within the context of therapy, where a therapist assumes an expert-stance and attempts to 'read' and interpret human movement/behaviour as code for inner psychological states. This point is argued strongly in chapters Seven and Eight (Discussion, and Implications for Practice respectively). The line of argument in these later dissertation chapters can be traced back to my honour's thesis, which I present in the sections to follow.

The separation of subject and object: Reducing things to signs and symbols

While I have chosen to utilise the method of "thick description" within my attempts to understand, translate and analyse my PhD fieldwork, I nonetheless briefly explore some of the constraints of this approach.

On the one hand, the interpretive turn within the social sciences has undoubtedly allowed for more creative modes of representation to emerge within the social sciences, including the use of embodied reflexivity which will be introduced following my critique of Geertz's work. Ethnography as gained a great deal through shifting the researching gaze from an outwardly positivist worldview toward a more interpretive lens. However, there remain epistemological assumptions embedded within interpretivism which could be addressed through the integration of more reflexive and embodied approaches fieldwork. This includes analysing and presenting findings.

Philosophically, interpretivism hingers on the belief that things, objects, events, people, phenomena, texts etc. can be read, interpreted, and translated. As Barad (2008) states, "there are assumed to be two distinct and independent kinds of entities –

representations, and things to be represented" (p. 123). The logic of representationalism is one that assumes an artificial separation between the subject (the reader) and the known (the text or object) and which ensures that every 'thing' is turned into an object, or "into some form of language or cultural representation" (Barad, 2008, p. 121).

Applying this critique, Geertz's use of thick description can be understood as an interpretive endeavour which unwittingly creates and perpetuates the same objectivist logic paradigm, he himself is actually trying to shift away from. By reducing culture to the metaphor of text, Geertz assumes the detached role of the reader perpetuates an ontological and epistemological divide which separates embodied, embedded experience from the analytic process itself.

The Greek God *Hermes* and the trickery of interpretation.

Hermeneutics, associated with the ancient Greek God, Hermes, refers to the act of translating meaning from one realm to another – from the underworld in Greek mythology to the mortal realm of the living. Hermes, in Greek mythos is also the trickster whose role as the interpreter is often associated with foolery, misconceptions, and shrouded truth. In its mythological origins, Hermes speaks to an understanding of truth as partial, shifting, incomplete, and constantly open to renewal, redefinition and rereading.

In regard to Geertz's thick descriptions of culture, his interpretation of the Balinese cockfight reads as neat, complete, and somewhat finite. Some critical scholars within anthropology have suggested that Geertz's interpretations reflect an element of hermeneutic trickery, in that Geertz inserts himself in his text in order to tell the story and then quickly removes his personhood as his writing shifts into analysis (Crapanzo 1986; Fabian, 1983). While Geertz highlights his own active participation in the event of the cockfight in order to establish the validity of his firsthand account, his analysis of

the event assumes the narrative stance of a somewhat omniscient, uninterrupted, monological voice. While the rich, evocative, poetic, and playful accounts of his fieldwork assure us of Geertz's participation as a fully present, responsive human being in the field, his subsequent analysis reinforces some of the positivist tendencies of structural anthropology, which Geertz is actually trying to resist.

The ethnographer as the 'expert' knower?

For example, Geertz positions himself as the expert reader and authority on Balinese culture when he describes the way in which he regards culture as a text, stating: "The culture of a people is an ensemble of texts, themselves ensembles, which the anthropologist strains to *read over the shoulders of those to whom they properly belong*" (Geertz, 1973, p. 452. My italics).

As Geertz states, the role of the researcher in this interpretivist endeavour is to observe, decrypt, and translate a cultural event, which is described as – and reduced to – the status of a text. The act of covert readership evoked through the image of Geertz peering over the shoulders of those to whom this text properly belongs portrays an unequal relationship between knower and known. This is reflective of an epistemology that centres around the "positional superiority" (Said, 1978) of Geertz as the expert knower. Drawing on Said's notion of positional superiority, I critiqued Geertz's approach in my honour's thesis[6] as follows:

> "The fact that culture is text for Geertz which can be read 'over the shoulders' of those to whom the text rightfully belongs raises one very significant epistemological weakness of Geertz's thought. Omniscient and omnipotent, the

[6] Dumaresq, E. (2012). "Reading Geertz in Light of Herder: the culture-as-text paradigm in modern anthropology." Unpublished thesis, Monash University, Australia. Citations in Harvard style.

> anthropologist gazes secretly onto a cultural text, purporting to read what someone else has supposedly written. The spatial orientation of the anthropologist standing behind, peering voyeuristically over another's shoulder does not entail two people standing next to one another reading the same text but involves an "asymmetrical relationship with the anthropologist standing behind and above the native, hidden at the top of the hierarchy of understanding" (Crapanzo: 74). This maintains what Said refers to as "positional superiority" (Said: 7), a hierarchical relationship between self and other employed traditionally by the West to assert power and control over its 'other'. Carried over into anthropological discourse Said's notion of positional superiority is a poignant telling of the anthropologist's relationship to the 'other.' Traditionally, anthropological practice which maintains monologic practices of representation do not assert a relationship *to* the other at all, but creates a power relationship which entails "power over" rather than "power to" another (Valentine and Peck: 4). The act of 'othering' is simultaneously one of 'smothering' (: 4) where the 'other' is never granted space to speak and narrate according to his or her own terms." 21).

Power, language and representation

As I explored in my previous research, the unequal power relations revealed through this interrogation of the textual metaphor unearths a subtle tendency within interpretivist approaches to speak 'for' and 'about' others rather than 'with' and 'to' them. This raises concerns regarding issues of language, power and representation in research. In regard to a hermeneutic approach within anthropology, the following excerpt of my honour's thesis provides a summary of my critique which I use as the basis for my theoretical positioning as a PhD researcher:

> "Embedded in this approach to cultural understanding are serious questions regarding authorship, cultural representation and power - each a reflection of the contentious act of writing itself. Geertz's symbolic anthropology has received an enormous amount of attention over the years, with some of the criticisms levelled against him being, as mentioned above, symbolic positivism, separating culture from action (Roseberry: 1023), indulging in an "interpretive fiat" (Schneider: 813) and producing a "definitive reading" of Balinese culture (Crapanzo: 51). As well as this, the hermeneutic approach of reading culture-as-text has come under close scrutiny in past years as anthropology has reflected on some of the main tenets of its discipline, generating critiques which challenge notions of ethnographic authority and the monological narrative style of an author who speaks not 'with' but 'for' and 'about' others. Though Geertz clearly states his intention is to converse with natives (Geertz "Thick Description": 13), he ultimately only manages to speak 'for' and 'about' - rather than 'with' - which supports the argument that, although seeking to speak with others a hermeneutical approach to anthropology always ends with the anthropologists listening to his or her own voice." (Deiters "Anthropologie": 167). (Dumaresq, 2012[7], p. 18-19)

Based on this critique formulated during my honours research, a central aim of my PhD study is to shift away from an expert stance which positions the researcher/therapist as the all-knowing authority, and to create space for mutually engaged, or "corporeally entangled" (Allegranti, 2015) approaches to research-practice. The concept of corporal entanglement in dance movement (psycho)therapy rests on an understanding that bodies are "co-created and porous" meaning that subjectivity is

[7] Unpublished thesis

developed corporeally and affectively, in relationship with other bodies (Allegranti, 2014, p. 58). This involves taking a material-discursive (Barad, 2008) approach to analysis which recognises that bodies 'matter' within the writing of academic projects, including the construction of texts. I explore the coming together of bodies and textuality further in the following chapter when I introduce feminist and new materialist frameworks (Grosz, 1994, 2010; Barad, 2008; Braidotti, 2010; 2013). The ethics of re-centring of lived, embodied experience within qualitative and ethnographically informed research is largely informed by my previous research and further enriched by feminist perspectives.

Terminology: Reconfiguring "thick description" to reflect a full-bodied and participatory approach to research

While Geertz's use of thick description has certainly helped pave the way for a more poetic, nuanced and rich accounts of ethnographic field work, it is important to understand the constraints or assumptions build into a linguistic, hermeneutic model of interpretivism. This issue will be taken up once more within the following chapter where an embodied approach to discourse analysis will be used to drive the theory-building effort – rather than rely on a purely linguistic approaches common within social constructivist frameworks.

As a bodily oriented researcher-practitioner, Geertz's "thick description" presents a challenge to some of my fundamental views and beliefs about bodies, relationships, and knowledge generation. Throughout my PhD study, I seek to engage with knowledge building processes that refuse to privilege language over kinaesthetic experience, discourse over bodily 'material' aspects of human experience, or researcher expertise over the expertise of participants and their supporting communities.

In some ways, a Geertzian commitment to thickly describing fieldwork allows

for a rich and poetic articulation of the work, as it encourages a more lively coming together of theoretical insight and personal experience. However, my intention throughout this thesis is to not retract my own subjectivity and to remain situated, embedded, and reflexively involved throughout the process of undertaking this doctorial research.

As such, I seek to expand on Geertz's method of thick description to include my own embodied experiences wherever possible. This will be especially important throughout my analysis, if I wish to remain in the text as an active, partial knower. The way in which I use "thick description" is therefore slightly different to the way in which Geertz applies this theory. My own thick descriptions will include bodily and reflexive insights throughout my PhD project. I seek to experiment with creative ways in which to write my own subjectivity into the text and aim to resist the strong tendency to neutralise my own positionality and personhood within the study. My intention is to utilise this methodology in a way that honours, as well as extends on, Geertz's hermeneutic approach. The methodological decisions I have made in this PhD project are closely related to my past studies and yet, my training in DMT takes me beyond linguistically dominated approaches toward a more bodily and relationally centred approach.

As I experiment with modes of researching and theorising that work *with* the body, rather than against or over the top of, I seek to restore the centrality of embodiment as an epistemic tool. This commitment toward the centrality of the body is fundamentally linked to my identity as a DMT researcher-practitioner. It is also informed by previous research, as articulated in this chapter.

So far, I have offered a critical reflection around the influence of anthropology, hermeneutics, and German philosophy, as these past experiences inform my current

PhD project. The remainder of this chapter introduces some of the more recent influences within my theoretical positioning, which have emerged over the course of writing my dissertation. The theoretical influences presented below feature strongly throughout my thesis and can be understood as an expansion of my pre-existing ontological and epistemological stance. Central to each of these theoretical 'lenses' is an active interest in the role of *embodiment* which I introduce now from a range of different perspectives. Each school of thought has informed the way I have theorised, and applied, 'embodiment' as a core principle throughout my dissertation.

Embodiment: A multidisciplinary term

As a dance movement therapist, the concept of embodiment is central to my practice and underscores my foundational beliefs and values around the nature of lived experience. In DMT, the term embodiment commonly refers to an "understanding of the body and its movements as being integral to knowledge" (Koch & Fischman, 2011 p. 60). The understanding that bodies perform epistemic tasks by "thinking in movement" (Sheets-Johnstone, 2011) is vital to my work as a practitioner and carries forward into my work as a researcher. 'Embodiment' is becoming more and more ubiquitous across the health and social sciences as well as within the humanities. Examples of embodied approaches to knowledge generation can be found within a range of fields such as dance movement therapy (Allegranti, 2009; 2013, 2014; 2015; 2020; Hervey, 2010 & 2012; Tantia et al., forthcoming); body psychotherapy (Caldwell & Johnson, 2012a; 2012b; Johnson, 2014); anthropology and ethnography (Csordas, 1993; Desjarlais & Throop, 2011; Coffey 1999); movement research (Spatz, 2017); qualitative research (Chadwick, 2017; Ellingson, 2017) as well as in feminist studies (Ahmed, 2017; Braidotti 1993; Grosz, 2010; Lykkes, 2010). This also includes material feminism which locates embodiment, or the body, as the starting point for reflexive analysis (Alaimo &

Hekman, 2008; Coole & Frost, 2010). My theoretical understanding of embodiment draws on each of these theoretical perspectives, which are elaborated in the following sections. Furthermore, the politics of embodiment in the arts therapies, or "body politics" (Allegranti, 2013; Sajanani, 2015) is raised, as this framework is linked to many of the feminist critiques of in/justices which are articulated throughout my PhD.

Embodiment: A theoretical perspective from criminology

As this project is situated within a criminological context, it is worth mentioning that embodied inquiry is a relatively peripheral discourse within this particular field. As I highlight throughout my dissertation, the concept of 'best practice' in criminal justice field is strongly associated with objectivist, recidivism frameworks. This is an issue in criminology, yet it is not intrinsic to the field. There are more diverse perspectives in criminology research – some more critical, abolitionist, and decolonial – yet within the justice system itself, positivism is dominant framework for applying recidivism frameworks in practice.

I have voiced a critical stance in regard to the dominance of the 'what works' paradigm within criminal justice practice, which is a reductive framework for understanding and responding to women's experiences of criminalisation. My stance aligns more closely with a prison abolitionist perspective, which I present in the following chapter in light of critical criminology literature. The aim of my research is not to abolish prisons however, but to shed critical light on women's experiences of using DMT in a criminological goal context. I use first-person, reflexive techniques in my writing to convey some of the affective and emotional challenges of practicing DMT in a hierarchical, oppressive system.

My use of personal reflection through my writing both challenges the detached positivism of the justice system and respond to calls for more reflexive, emotion-based[8] research in criminological studies (Jewkes, 2012; 2014). Jewkes, an autoethnographic scholar in the field of criminology, argues that reflexive and emotional approaches to prison research are needed in order to challenge the disembodied, objectifying stance of dominant criminological narratives (Jewkes, 2014, p. 390). By positioning emotion as an "intellectual resource" for criminology scholars, Jewkes makes a strong case for autoethnographic approaches in prison research and suggests that the lived experience of the researcher can be utilised as an epistemic platform to enrich analysis (Jewkes, 2012). This challenges the methodological orientation in criminal justice research which tends to minimise emotional experience and downplays the researcher's role and positionality in the research process (Jewkes, 2012, p. 63). An extension of Jewkes' argument would include an *embodied* and emotional approach to criminological studies – one which recognises the bodily dimensions of emotions.

Somatic modes of inquiry have been recognised as a useful tool for critical scholars who wish to shine a critical light on social issues in research (Johnson, 2014). For example, when researching into the lived experiences of criminalisation, an embodied and affective lens can help to critical light on the very structure of oppression itself, known in abolitionist discourse as the "prison industrial complex" (Carlton & Segrave, 2013). I explore an activist and prison abolitionist stance in my following chapter in relationship to the work of critical and feminist criminologists. While Chapter 3 interrogates the topic of activism, prison abolishment, and the role of lived *embodied* experiences in feminist and critical criminology research, I wish to note that my

[8] I have interpreted to also include the bodily-felt nature of emotions, which aligns with my embodied inquiry approach.

research does not advocate for prison abolishment *per se*. While I hold this view personally, I have not endeavoured to undertake abolitionist research with my PhD. I hold a strong social justice perspective throughout and often highlight the inequity and oppression of the prison system, however my research focus remains on partnering with criminalised women to explore how DMT might be leveraged for health and wellbeing purposes in this context. This is different to doing research centred around the need to abolish prisons in the first place.

There is a plethora of research in the field of criminology that handles itself with the important question of prison abolishment and justice reforms, and I wish to acknowledge all of the valuable activism surrounding this issue, particularly many of the indigenous-led movements that have highlighted the need for urgent reform of the justice system in Australia. This is an emotional topic for both activists as well as researchers. Research and activism performed by prison abolitionists is shaped by the painful awareness of the insidious ways in which institutionalised racism, gendered violence, and punitive practices are deeply rooted in an ongoing history of colonial dispossession and imperialistic control in Australia. I therefore wish to acknowledge the important work of many indigenous activists, scholars and community allies whose leadership, recommendations and voices must be heard and acted upon with urgency.

While my political ideals align strongly with the rationale of prison abolitionist perspectives, activism is not the central focus my inquiry. I use a social justice lens (Cantrick et al., 2018) to shine a light on inequity within my thesis, however, my intention is not to affect social change per se, but to listen closely to the voices of women in my study. wherever possible. As a participatory researcher I bring my political self into the research process, however, it is not my intention to foreground my political ideals at the expense of participant voice and direct lived experience.

Embodied and arts-based research in DMT

In most of my chapters I integrate embodied and subject, arts-based responses in order further illuminate some of the challenges, tensions, and contradictions of 'doing therapy' in a criminal justice context. The role of embodied research methodologies is central to my theoretical approach, particularly in response to issues to do with power, relationships and privilege. Chapter 4 (Methodology) discusses the influence of embodied research methodologies in greater detail.

Hervey (2000) has been one of the first in the field to publish about embodied research approaches. Hervey highlights the connection between dance, as a way of knowing, and the need for greater artistic inquiry in qualitative research. According to Hervey, embodied approaches to research are considered part of an overall arts-based research paradigm. The term "embodied artistic inquiry" is used by Hervey (2000; 2012) to denote the use of dance and other somatic modes of exploration as central to the epistemological processes.

Embodied approaches are already familiar to dance movement therapists and this knowledge can provide fertile ground for developing alternative research paradigms to the dominant objectivist models (Hervey, 2000). Hervey's concept of embodied artistic inquiry includes the use of art (primarily dance) to collect, analyse, and/or present findings. Hervey's somewhat early articulations of embodied research approaches suggest a theoretical lens which honours the creative process and is firmly inspired and shaped by aesthetic values. Central to Hervey's conceptualisation of embodied inquiry is the inclusion of embodied experiences as a form of data in and of itself (2012, p. 207). This includes not only the lived experience of participants, but the researcher's own corporal responses and states in relationship to the project.

The embodied, artistic, relational approach communicated through Hervey's writing is a seminal theoretical perspective within dance movement therapy, in terms of applying a theory of 'embodiment' as an epistemic way of knowing. It is aligned with participatory research methodologies and is compatible with the positioning of research participants as co-researchers in that all members are invited to engage in a collaborative, creative process of designing and participating shared research exchanges (Hervey, 2012, p. 208). Participatory research will be further introduced in Chapter 4.

Leveraging embodiment as an epistemic resource in DMT research

While dance movement therapists demonstrate sophisticated skills in terms of attuning to their own bodily experiences within the therapeutic context, there is scope to expand on this within the context of DMT research. As Gross-Cohen and Eisikovits (2018) suggest, the physical experiences of dance movement therapists are often "conspicuously missing" (p. 57) from the research literature in DMT despite the strong emphasis on noticing and attending to one's own corporal responses as a practitioner. DMT is not the only field in which the body is often reflexively missing from research. My following chapter will explore the implications of this in relation to criminological literature, and I will use my own body to perform a critical, inductive review of some of the key literature informing my PhD work.

By situating *embodiment* as central theoretical thread throughout my project, my intention is to draw attention to the ways in which embodied intuition can be harnessed in order to connect more tacit, or implicit modes of understanding with discursive analytic approaches. Embodied responsivity and reflexivity are key empirical processes in my dissertation and will be further introduced in relation to participatory research (see Methodology, Chapter 4). The topic of the body within DMT research is a growing field of scholarly inquiry. A soon to be published handbook (Tantia et al., forthcoming)

will no doubt explore this further and provide a welcome resource for practitioners wishing to leverage their own embodied insights, processes and knowledge within research pursuits. Furthermore, the role of embodiment is emerging more in DMT literature in direct relation to the social justice issues. See Chapter 4 for a discussion around "social justice DMT" (Cantrick et al., 2018) and the value of embodiment as a critical, reflexive research tool in socially engaged research.

The role of embodiment in DMT research has grown over the years to include more critical and activist perspectives. While earlier articulations of embodiment in research focus more on the use of the body/dance to collect, analyse and present data in arts-based research (Hervey, 2000), more recent perspectives locate the concept of embodiment within a social justice paradigm and encourage a sense of activism within the work (Allegranti, 2020; Cantrick et al., 2018).

Extending on Hervey's conceptualisation of embodied research practices, dance movement psychotherapist and artist/researcher, Allegranti has raised a call for more "embodied, collaborative, artistic methodologies" within the creative arts therapies in order to transgress the hold of western dualistic thought in academia (2015, p. 81). Examples from Allegranti's work include a variety of embodied research approaches which seek to demonstrate ways in which the lived, corporeal domain of human experience sits within the epistemological process of generating situated, aesthetic and non-dualist modes of inquiry.

Allegranti leverages the communicative power of moving, relating bodies by producing performative academic texts which seek to transcend the limitations of binary logic (2009; 2013; 2014; 2015). Using video, dance performance, photography, poetry and prose, Allegranti demonstrates how embodied relationships enrich the research process and support feminist and participatory methodologies by grounding knowledge

generation in specific, kinesthetic, intersubjective exchanges. By highlighting the kinesthetic and relational aspects of knowledge generation, Allegranti (2013) reveals how bodies are personal, as well as political. The gendered and socio-culturally constructed realities of the body-in-motion is central to Allegranti's research on feminist approaches in dance movement psychotherapy, as well as dance and capoeira studies (Allegranti & Silas, 2020 forthcoming). This perspective strongly informs my work.

Body politics and intersectionality in DMT

The concept of body politics is not yet widely written about in DMT, however Allegranti (2011; 2013) highlights the ethical need to pay specific attention to issues relating to sex and gender in the arts therapies, as well as other human services and research. Framing the notion of body politics as a "call to arms," Allegranti (2013) encourages practitioners to critically examine some of the underlying ontological assumptions that shape our understanding of bodies, movement and therapy. Allegranti articulates an expanded definition of embodiment which includes the 'politics of the body': race, gender, class, ably, age, culture, and sex. Her writing on body politics, which includes examples from DMP, brings into focus important critical questions around body normativity and the impact of a white, heteronormative worldview within therapy.

For example, Allegranti (2013) challenges the socially constructed ideal of the Eurocentric body in DMP, which does not include diverse biological and political differences such as sex, gender and class, but rather assumes a 'generalised' body at its conceptual core. This idealised version of the human subject - white, able-bodied, heterosexual (and historically male, as per my discussion around the Enlightenment subject earlier in this chapter) - lives at the heart of many disciplines, including DMT/P, given that the professionalisation of the field is embedded in white Northern American

and central European traditions. As such, Allegranti calls for urgent attention to the relationship between a body's biology and the ethics and politics of embodiment, or body politics (p. 396), in order to help mitigate against the distressing effects of entrenched inequity and gendered, racialised practices. This is call is echoed in Johnson's (2015) work – a critical somatic scholar and therapist – who states: "it is essential that the embodied dimensions of privilege, discrimination, and marginalization are brought to the surface of our awareness and that we become more skilled at navigating them honestly, respectfully, and with grace" (p. 81).

Body politics therefore allows researchers and practitioners to better understand how the body is a "site of political struggle" (Sajnani, 2013, p. 382). In the context of DMT and other arts therapies, this can help shift the focus from individual pathology toward a more inclusive understanding of how the personal, and the political, interact. In other words, an intersectional analysis of human health works to uncover not only the personal dimensions of wellbeing, but connects individual health to the broader social, political, and materials contexts in which people exist. As such, 'intersectionality' is often used in feminist frameworks (Lykkes, 2010) to help communicate how the oppressive realities of daily racism, sexism, imperialism, heterosexism, ablism, agism, and classism are themselves a form of bodily experienced and socially enacted form of oppression (Allegranti, 2013;) and trauma (Johnson, 2015). In terms of research in the arts therapies, body politics (or intersectionality) provides a useful language for examining the ethical and political complexity that comes with researching into the lived experiences of those who face discrimination and marginalisation (Sajnani, 2013, p. 385).

My own body politics: white, cis-gender, heterosexual, 'settler' Australian

Based on my appreciation for body politics in DMT, I have sought to maintain a critical understanding of my own locatedness as a cis, white, educated, heterosexual, middle-class woman who is living and researching on unceded lands in a (neo)colonial system. As someone who fits neatly into the mould of the dominant, normative, white, Eurocentric subject/body, I understand my experiences of power, privilege and social/political status to be often very different to that of the vast majority of criminalised women in Australia. Given my own white privilege, I have sought to think carefully about how the ideals, practices and assumptions I bring to my research and therapeutic work, which are inadvertently Eurocentric in many ways. In response to this awareness, I have endeavoured to engage with my own 'whiteness' (which is an ongoing inquiry) in order to experiment with possibilities for DMT that are more inclusive, responsive, collaborative, mutual, and shaped by my unfolding interaction with women in the justice system. While I do not explicitly refer to body politics and intersectionality when describing my experience of working with two criminalised women ('Min' and 'Kaz'), the values underscoring the 'politics of embodiment' have strongly informed my choice of a participatory, feminist methodology.

For instance, the practice of working reflexivity and educating myself about my own embodied identity and privilege, builds on the work of Brazilian educator, Paulo Freire (19698), whose critical pedagogy is formative to my methodology. I will introduce Freire's legacy in my methodology chapter (Chapter 4), but for now wish to highlight the 'whiteness' which frames my own bodily politics and to communicate how an engagement with feminist intersectional theory has guided my decisions to adopt a feminist-informed, social justice lens in my work. This also connects to my desire to experiment with alternative practice models for DMT – models which challenge the norms of the dominant (white) biomedical framework and the pre-eminent

theories that fail to acknowledge social context in therapy. In Chapter 4 I will describe my process of using feminist, embodied and participatory process to develop the theories and practice framework presented in Chapter 8. While I did not engage extensively with women of colour or BIPOC[9] communities during my research period, I nonetheless held a critical perspective in terms of race, gender, class and other intersectional markers, and valued the concept of body politics as a way to conceptualise a feminist-participatory approach to DMT. A recognition of my own body politics, in relation to the study context, has guided my attempts to collaboration and learn from individual women whose experiences and recommendations have shaped this process of shared learning. This will be further articulated in Chapter 4 (Methodology).

A material-discursive understanding of embodiment: Barad's terminologies

Following on from the politics of embodiment it is important to introduce some key terms from Barad's (2008) "material discursive" framework I used in the following chapter to further articulates the interconnectivity between politics and bodies. In Chapter 3, I used Barad's (2008) notion of material-discursive phenomena to explore how my own embodied states, such as movement and feeling states, respond to certain ideas from the research literature – many of which are political discourses.

Barad hyphenates the terms "material" and "discursive" to show how material beings, such as human bodies, enter into complex meaning-making relationships with other bodies; bodies are not wholly material in this sense however, and language is not wholly discursive in Barad's line of thought. From a Baradian perspective, humans are always entering into a process of *becoming* with other bodies (Allegranti, 2013) – including other human, non-human, material and immaterial beings. As such, Barad refers to bodies as "material-discursive phenomena (2008, p. 141), which destablises the

[9] Black, indigenous and people of colour.

very notion of the bound, sovereign individual discussed earlier in this chapter. Drawing from Barad's material-discursive approach to meaning-making, my own understanding of embodiment includes discourse as part of its material flows. In Chapters 3 (Literature review) and 6 (Analysis) in particular, I attempt to *dance-myself-into-the text* in a material-discursive gesture. Like Allegranti (2013; 2015; 2019; Allegranti & Watt, 2014) who applies this framework in her research, I seek to move between writing and moving / moving and thinking in recursive loops in order to make visible the numerous ways in which my own political body is simultaneously embedded, implicated, shaped *by* as well as shaping the data within the corporeal-conceptual process of knowledge generation.

Intra-action; becoming;* and *onto-epistemology

Intra-action: Expanding again on my positioning around embodiment, I find myself drawn to these worlds of Barad: "we are part *of* the world in its ongoing intra-activity" and "we are a part of that nature that we seek to understand" (p .146). While I do not use these concepts extensively throughout my thesis, the notion of *intra-action* is formative to my methodological approach of dancing-myself-into-the-text, particularly in the following chapter as well as Chapter 6. Unlike the word 'interaction' which connotes two separate entities/individuals and assumes an a priori existence of independent beings (Barad, 2008, p. 133), Barad employs the term intra-action to describe how we are never separate from the things we seek to know. I response with Allegranti' (2013, p. 397) when she states: "as a researcher I am not separate from the data, but I am in Barad's terms, becoming with the data."

Becoming: the notion of becoming from a Baradin perspective can be understood in terms of the intra-active process which celebrates the "mutual entailment" (Barad, 2008, p. 140) of discourse and materiality. Neither bodies, or language, is

epistemologically or ontologically independent from the other in this school of thought. As a researcher the idea of being *within* the world and participating in its manifold relationships is a paradigm that naturally extends to my understanding of knowledge production and epistemology. By highlighting my own process of 'becoming' in this study I seek to make explicit the ways in which my own thought processes and embodied responses have influenced the ways in which I have conceptualised, understood and presented the data. The concept of becoming *with* the data challenges the notion of knowledge as fixed and static, instead revealing an open-ended understanding of knowledge which is relational, in flux and always open to constant (re)interpretation and further iterations of meaning-making.

Onto-epistemology:

The merging of ontology and epistemology in Barad's philosophy is a key element of her material-discursive framework. As described through the concept of intra-action, Barad's understanding of knowledge production takes place within a given world, or context, meaning that the coming-to-know is always a situated, relational and partial task. This process, for Barad, involves a mutually entangled relationship between ontology (what exists) and epistemology (what can be known). The separation of ideas, concepts, beliefs, discourses, theories, from what there *is* in the world– objects to be studied and known – is a characteristic of a philosophical dualism which seeks to reduce things to signs, symbols, or objects to be classified and therefore known. In order to restore an intra-active relationship between subject/object, mind/body, thought/language etc, Barad introduces the term onto-epistemology to reinforce the material-discursive understanding that knowledge is formed *in* and *with* the world, not separate to, or apart from the 'things' being studied. Barad calls this "the study of practices of knowing in being," and suggests that this is "probably a better way to think about the kind of

understandings that are needed to come to terms with how specific intra-actions matter"(Barad, 2008, p .147). Like Allegranti (2013) I believe that this coming together of moving bodies and language is important for arts therapists (p. 397), particularly DMT practitioners who work body movement and language in intra-active ways. Therefore, I apply these ideas in the following chapter where I take a material-discursive approach to analysing an important anthology of critical feminist writings on women's imprisonment.

Anthropological influences in DMT: The lived body

Before I move on to a discussion of the literature however, I will round off this chapter by shifting back to the influence of anthropology in my thesis, including the concept of "thick description" which I expand on from a DMT perspective as well as through a feminist, material-discursive lens.

The blending of anthropological notions in DMT is not new to the field, however my theoretical stance differs to that which has previously been stated in terms of how anthropological approaches might inform DMT (Hanna, 1990; 2004; Panagiotopoulou, 2011). As Hanna suggests, anthropological influences can provide a rich framework for practitioners to draw from in terms of understanding ways in which movement behaviour and nonverbal communication are culturally encoded. My interest in incorporating an anthropological lens in DMT is not based on movement observation frameworks however but has emerged out of my previous research project. My weaving together of anthropological approaches and DMT perspectives reflects my desire to explore how ethnographic writing – specifically "thick description" might be enriched by the knowledge and skills held by dance movement therapists. I seek to move away from more detached movement observation models such as Laban Movement Analysis,

in search of a more personalised language to convey how my own kinesthetic experiences as a researcher drive and inform the analysis process.

In terms of anthropological perspectives on embodiment, the literature itself is broad and encompasses many different theoretical approaches (Desjarlais & Throop, 2011, p. 89). The most relevant of these theoretical frameworks for this project is a phenomenological perspective which relates to the concept of the "lived body" as articulated by French philosopher, Merleau-Ponty (1945). This concept also informs a great deal of DMT/P philosophy – whether explicitly or more tacitly - and aligns with the in-the-moment and relational orientation of the overarching psychodynamic tradition in DMT/P.

Balancing an embodied approach with a semiotic paradigm in anthropology

In terms of its contribution to anthropology, the concept of the *lived body* has helped to reorient anthropological discourse toward a more phenomenological framework and promotes a more "somatic mode of attention" (Csordas 1993) through which to approach fieldwork. The influence of phenomenology within anthropology has been particularly noticeable during the 1970s and 1980s (Desjarlais & Throop, 2011, p. 95). This includes the work of Geertz and his hermeneutic approach.

The coming together of embodiment, textuality, and representation in anthropology allows for more localised, intersubjective account of knowledge production in which the bodily dimensions of fieldwork are foregrounded and made central to the inquiry (Csordas, 1993). The shift within anthropology toward a more embodied theoretical approach challenges the more traditional emphasis on cultural interpretation and disrupts the culture-as-text paradigm by destabilising the objectifying gaze of the expert interpreter and pointing toward the shared, intersubjective encounters which shape anthropological description. Earlier in this chapter I explored some of the

ways in which textual metaphors can inadvertently render culture, or the body, as an object which presents itself to the ethnographer (i.e. the reader) as a static text to be read and decoded.

According to Csordas (1993), the challenge for contemporary anthropology is to balance an embodied paradigm alongside more traditional semiotic approaches, such as the culture-as-text or hermeneutic approach. This can be challenging due to the theoretical tensions between textual and phenomenological approaches. While semiotic theories lend themselves to deciphering, deconstructing and interpreting a cultural or bodily phenomenon and therefore risk positioning the body as static or inert, phenomenological theory tends to wait for meaning to emerge out of lived experience. It emphasises the constantly unfolding nature of meaning-making and celebrates knowledge as layered, often symbolically expressed, and metaphor-laden.

There is a tension between a semiotic paradigm and a bodily-material paradigm which I explore in this research. I approach this by exploring how my own embodied, phenomenological insights inter-act (Barad, 2008) with the more discursive activities of doing academic research. I explore this coming together of bodies and text in my following literature review chapter in which I draw from feminist theorist, Barad (2008) and her "material-discursive" framework. I use this theoretical perspective to support my approach to constructing an embodied (performative) and as well as discursive (text-based) review of the literature.

Philosophical influences from the humanities: Spinoza and Deleuze

Finally, I conclude this chapter by raising a philosophical question posed by Jewish-Dutch philosopher, Spinoza, which is also central to my theoretical understanding of embodied inquiry. Spinoza, who is best known for his intellectual contributions on

ethics (Spatz, 2015), asks a question that is deeply relevant to the field of DMT/P as well as feminist or bodily-oriented researchers. Spinoza asks: *What can a body can do?*

Spinoza is not so much inquiring into what a body *is*, as to what a body can *do*: what capacities for action, transformation, and relationship do bodies hold? Similar to Barad's theorisation of embodiment, which involves a constant dance of 'becoming', or intra-action with and within the world, Spinoza's question of *what can a body do* also celebrates the onto-epistemic power of bodies and highlights the affective dimension of embodiment: the capacity to affect[10], and to be affected, through what Barad (2008) refers to as mutually entailing relationships. Rather than ask what bodies *are* in any definitive or diagnostic sense, Spinoza resists describing the body in a functional sense and instead opens up the question of what potential affects, energies, exchanges, and relations are made possible through the very possibility of *being* a body.

The question of 'what a body can do' is a key philosophical question that is relevant to my research approach. I am informed by Spinoza's question of what a body can *do*, rather than what a body *is*. This has reverberation for therapy, I believe. For example, Spinoza's philosophy of the body a static, diagnostic reading of what a body 'is' (i.e., a body which might otherwise be interpreted as anxious, nervous, depressed, etc). Rather than re-produce pathologising, categorising and deficit-framing narratives of women in the justice system I wish to instead focus on the immanent potential of these

[10] It is important to note here that by affect I do not mean the common psychological use of the term, which is widespread within therapeutic discourse, particularly mental health work. A Spinoza-Deleuzian conceptualisation of affect does reduce affect to a personal psychological mood but views affective drives as viscerally experienced states, which travel from body to body (human as well as non-human) through immediate, bodily affect, or contagion (Masumi, 1987, p. xvi).

women's bodies to produce, generate, do, make, create, think, feel, imagine, desire, express; this stands in stark contrast to the hyper-individualised and medicalised frameworks which dominant the criminal justice sector. From a therapeutic perspective, Spinoza's emphasis on immanent potential and aligns with my practitioner values, particularly in regard to the fluid, unfolding, surprising and even challenging nature of working with body movement and somatic inquiry.

This philosophy, which centres around the body and its various capacities for action and inter-action (Barad, 2008), is reflected also in the work of French philosophers, Deleuze and Guatarri (1987). Although I do not engage directly with Deleuze's philosophy, I am influenced by Deleuze's process-ontology which emphasises a process of becoming over being. That is to say, Deleuze challenges fixed notions of 'what is' in order to destabilise rigid and hierarchical notions which uphold a dualistic view of reality.

A Deleuzian understanding of the body and affect theory directly inform corporeal feminism (Grosz 1994, p. 165) as well as other 'new materialist' branches of feminist thought, which are influential in my own PhD research. While I do not weave Deleuze's work into my theoretical arguments *per se*, I do draw on Braidotti's affirmative feminist ethics (see following chapter), as well as Barad's concept of "onto-epistemology" (2008) to discuss my analysis of the literature in Chapter 3.

This understanding of embodied affect is a much closer proximation of how I understand somatically experienced states within dance movement therapy. From my experience, the use of the term 'affect' within mental health does not capture the more visceral, and pre-personal (non-psychological) nature of any feeling state. Through a Deleuzian lens, bodily affect can be personal as well as collective. Feelings, emotions, moods, impulses are not containable within a bound, sovereign 'self' but move and flow between things, between people, in mutually affective and affecting ways. As a therapist,

this orientation to affect theory is useful in it understands psychological and mental states as coterminous with biological states: Moreover, it reveals the "mutually entailed" (Barad, 2008) relationships through which embodied beings inter-act. This posthumanist perspective disrupts the humanist ideal of the autonomously acting agent within therapy and replaces this with a framework for thinking about embodied inter-action which centres on principles of interdependence, mutuality, ethics and becoming. While I do not position this PhD study as a posthumanist study, I do wish to highlight the underlying influence of Deleuzian thought and posthumanism within much of the feminist literature I have engaged with, particularly Braidotti, Grosz and Barad whose theoretical understandings are introduced within the following chapter as a means of supporting my critique of the literature.

To follow on from Deleuze's philosophy and Spinoza's question of *what can a body do* I now introduce the way in which I have interpreted this question of what a body can do (?) along the lines of contemporary feminist thought, which provides the basis for my activist-informed stance as a participatory and critical researcher.

The productive power of bodies in material feminist theory

As feminist writer, Grosz (1994) states: The question of what bodies *can do* and create together is an ontological, as well as an epistemological consideration. I can still hear my own thoughts forming in response to this philosophical question as I approached my PhD topic: *My body, your body, the bodies of women exiting prison: What might a collective of bodies do and make together?* Grosz's thinking around the generative and productive power of bodies to do, and think, and act differently is a core influence in my theorising around the role of activism within dance movement therapy and social justice research.

For Grosz, rethinking subjectivity from the ontological premise of embodiment entails an understanding of agency which locates power - the capacity for action - within the body itself. This affirmative relationship between embodiment, agency and power encourages a different logic through which the issue of women's liberation might be approached. Grosz (2010) asks, "is feminist theory best served through its traditional focus on women's attainment of a freedom from patriarchal, racist, colonialist, and heteronormative constraint? Or by exploring what the female - or feminist - subject is and is capable of making and doing?" (p. 141). The 'problem' for feminism according to Grosz is not only women's lack of power or freedom, but the question of how one might create a more equitable future through shared acts of making and doing:

> "The problem, rather, is how to expand the variety of activities, including the activities of knowledge-production, so that women and men may be able to act differently and open up activities to new interests, perspectives, and frameworks hitherto not adequately explored or invented. The problem is not how to give women more adequate recognition (who is it that women require recognition from?), more rights, or more of a voice but how to enable more action, more making and doing, more difference. That is, the challenge facing feminism today is no longer only how to give women a more equal place within existing social networks' and relations but how to enable women to partake in the creations of a future unlike the present." (p. 154).

As I will explore further in my chapter to follow, Grosz critiques more resistive forms of rights-based activism and focuses instead on the ways in which creative epistemological pursuits might offer new directions for feminism: Particularly in reference to embodied practices. From a feminist perspective, a renewed focus on embodiment may help leverage new resources, concepts and questions for feminist work

to pursue (p. 140). This is crucial, I believe, in terms of exploring the possibilities of what researchers, practitioners, and other allies and supporters of women, might do and create together, in response to women's suffering and oppression.

Chapter 3. A full-bodied approach: Performing a critical inductive review of *Women Exiting Prison*

My following review of the book *Women Exiting Prison: Critical essays on gender, post-release and survival* (Carlton & Segrave, 2013) is informed by the philosophical belief that bodies hold productive and generative potential. Drawing from Grosz as well as other feminist theorists I explore the literature through a lens embodiment (and the key ideas relating to embodied discussed in the previous chapter) and consider ways in which the literature both challenges, as well as perpetuates, some of the taken-for-granted norms within women's criminalisation studies. This includes an understanding of the body as a passive, socio-politically constructed object which I seek to problematise and disrupt through the use of my own bodily and emotional responses, which I integrate through a full-bodied approach discourse analysis. This informed by my previous studies and hermeneutically constructed critique of Geertz, in light of Herder, presented in this background and positioning chapter. It is also informed by Barad's material-discursive framework which I put into action in my performative literature review of *Women Exiting Prison* (Carlton & Segrave, 2013). In this chapter I examine the ontological, epistemological, and axiological relevance of incorporating embodied responses, insights, and perceptions into the process of knowledge production. In doing so I explore the significance of the body as a philosophical, ethical and methodological consideration for further feminist-informed research. This approach is intended to enact Barad's concept of 'intra-action' in that I use my own body and somatic states to help inform the construction of ideas and critical discourse presented in response to the literature.

My use of the word *body* in my relates to both the physical and biological structures of the self, as well as emotional, sensual, affectual and cognitive processes. I

conceptualise the body as having an active role in intellectual tasks, such as constructing a critical literature review, and have therefore sought to highlight how some of my own bodily felt tensions, sensations or contradictions have informed this process of critiquing the literature at hand. Starting from the premise of my own partial, situated and embodied subjectivity, I hope to perform a small gesture toward more of the body within academic discourse and practice. I have used an embodied approach to generate this review in order to demonstrate some of the ways in which my own bodily insights and processes have been harnessed to enrich the literature review process.

This body-focused method has been inspired by previous emotion-based approaches to constructing a style of literature review known as a critical interpretive synthesis (McFerran et al., 2016). A critical interpretive synthesis seeks to approach the literature from a critical perspective by systematically examining the text through an iterative, interpretive approach to inquiry (Dixon-Woods et al., 2006). Unlike systematic reviews which seek to aggregate what has already been said about a certain topic, a critical interpretive synthesis aims to generate new conceptual material from the literature under review by synthesising what has been said and generating original theory and critical perspectives in response. This approach seeks to challenge taken-for-granted ideas and assumptions embedded within the literature itself (Dixon-Woods et al., 2006). It is therefore a method grounded in critical discourse analysis in the sense that is seeks to unearth hidden ideologies, beliefs and values contained in the literature through a close examination of the textual features and other discursive elements within the literature. While I have been schooled in the social sciences and have a deep appreciation for critical discourse analysis, I simultaneously agree with feminist theorist, Barad (2008) when she says: “Language has been granted too much power” (p. 120). Feminists projects benefit

from the integrated use of bodies, emotions and minds in order to challenge the hierarchy of knowledge that privileges the written word over the tacitly held knowledge of the flesh.

Originally, my intention was to construct a critical interpretive synthesis (CIS) of the literature, yet this has shape-shifted over time into a more inductive, embodied, arts-based review which does not conform to the typical style of a CIS framework. As I mentioned, my approach has been informed by recent attempts made by music therapists to expand on this method by foregrounding the ways in which emotional and embodied insights inform research decisions and help guide analytical inquiry (McFerran et al., 2016, p. 3). I have attempted to elaborate on what it means to integrate bodily-felt emotional responses into the literature review process by developing a kinaesthetic approach grounded in my training and practice as a qualified dance movement therapist. This aligns with some of the principles of other feminist-informed DMT/DMP research. For example, Allegranti (2015) states: "…we need all of ourselves - our bodies, our creativity, our poetic and aesthetic sensibilities - and we need each other, if we and our work are to make a difference" (p. 81).

My review of the literature is therefore an attempt to bring my full-bodied awareness into the writing process, in order to highlight the layered ways in which embodiment can be leveraged as a tool within social justice-focused research. Furthermore, this aligns with discourse from other somatically based disciplines, such as the movement toward "embodied social justice" (Johnson, 2017) in body and somatic psychotherapy. A paradigm of embodied social justice in other therapeutic discourses, in education and in a range of other human services. I use this theoretical framework in my research to help question and problematise unequal power imbalances, challenge dominant narratives and practices, and to consider my own positionality, privilege and biases in relation to the research topic.

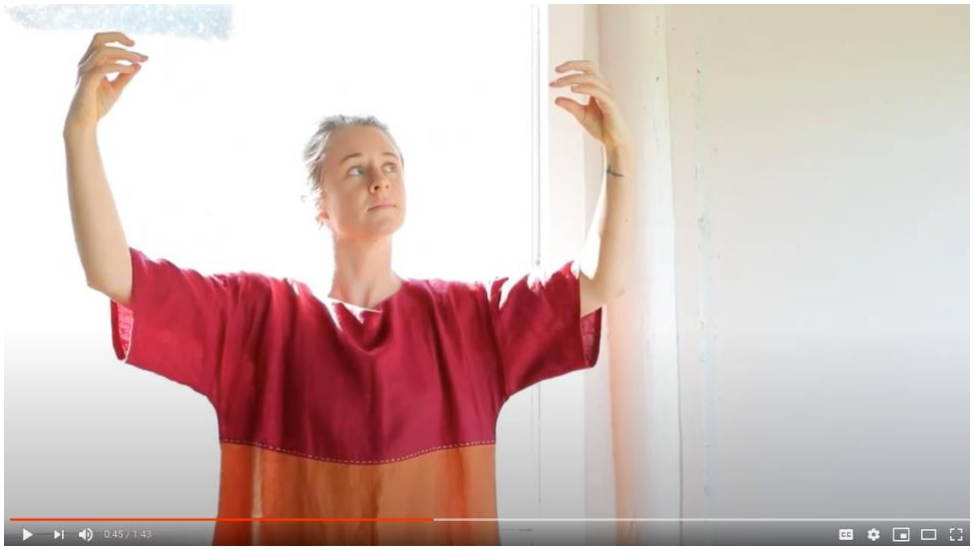
A full-bodied approach to the literature

Within the field of criminology, calls have been made for more reflexive, autoethnographic and emotional accounts of working in the field, in response to dominant discourses which tend to present knowledge as "arid" and devoid of emotion (Jewkes, 2014). In response to this call, and in alignment with my views and beliefs around the value of bodily-based methodologies I have aimed to approach the literature from a more embodied standpoint – both philosophically as well as analytically and epistemologically.

My *full-bodied* approach to the literature can be read as contribution toward ongoing feminist discourse which seek to highlight that "real bodies" (Braidotti, 2010b, p. 202) really do "matter" (Barad, 2008) within empirical knowledge production. In order to explore this philosophy in a practical sense I have used my own somatic responses the literature to help develop further analytic questions and critique. This is supported by feminist calls for a 'body materialism' or an 'ontology of the body.' I draw from Barad's (2008) "material-discursive" framework for this analysis, which supports the idea that embodiment and language are co-implicated and ontologically inseparable. The notion of material-discursive refers to the way in which a vast array of materialities come together to create meaning-making systems. This includes not only bodies and language but a diverse complication of forces: human as well as non-human. Bodies, spaces, objects, buildings, policies, feelings, can all be thought of as material-discursive phenomena and according to Barad, the relationship between discourse and materiality is one of "mutual entailment" (2008). Drawing from Barad's framework I incorporate my own bodily and emotional resonances within this chapter in order to put the concept of material-discursive to work. In doing so, I present a text that includes corporeal traces in the form of poems, photographs and videos. Similar efforts are made elsewhere in my thesis, such as Chapter 6 (Analysis) where I 'dance myself into the text' in material-discursive manner.

As well as Barad's concept of material-discursive relations, the influence of Braidotti's feminist ethics (1993; 2010a; 2010b) is also central in my philosophical positioning, as is the "corporeal feminism" of Grosz (1994). I have drawn from each of these feminist thinkers to support the embodied standpoint I argue for in this review. To elaborate on and further support this intention I have inserted a video link here. This video provides a performative understanding of my responses to the literature through a gestural dance/movement narrative piece.

Video 1. Ella performing an embodied response to the literature



This video will be referred to again during this chapter and the narrative/poem will be revisited as a platform from which to analyse the literature. The video itself reveals how poetic, aesthetic, bodily and creative sensibilities (Allegranti, 2015) can be woven into research processes in order to allow for different ways of knowing to emerge within analytic thought. I have used poetry and creative movement as a way of exploring my own personal and political positioning in relation to the literature and exploring my own activist stance in relation to existing feminist and critical discourse. The use of somatic inquiry has helped shape my discursive arguments presented in this chapter. By sharing my arts-based process and outputs I hope to communicate how, by

integrating my bodily responses to the literature, I have sought to locate myself philosophically and reflexively in relation to existing feminist discourse in criminology.

Introducing the literature. *Women Exiting Prison*: Critical essays on gender, post-release support and survival

This specific publication of critical, feminist criminological writing has been hugely influential in my theoretical understanding approach to researching with women in the justice system. While my research finds a strong alignment with the perspectives presented in this volume of work, there are aspects of the literature I critique in this chapter. This relates to my hybrid positionality as both a therapist and activist thinker: While I have found the activism and social justice perspectives presented in this literature incredibly meaningful and important, I also interrogate the literature in order to understand what might be missing from these perspectives. By using my own bodily responses as I guide, I explore some of the benefits as well as constraints of exercising an activist stance within the context of therapeutic research-practice. This is based on findings arising through my situated and personal experience of engaging in a bodily, reflexive and poetic way with the literature.

In this volume of collated works, Australian academics, Bree Carlton and Marie Segrave, offer a collection of sharp critical perspectives on some of the systematic and structural issues driving women's post-release realities in Australia, and also in this United States, Canada and United Kingdom. *Women Exiting Prison* has been acknowledged in many book review for its valuable critical commentary in relation to the complex contextual barriers affecting women post-prison (Leverentz, 2015; Mallock, 2014; Worral, 2014; Wright, 2016). By exploring the political, social, cultural, racial, and economic factors contributing to women's serial imprisonment and release, Carlton and Segrave – along with contributing authors - encourage readers to look beyond the

dominant narratives in criminal justice and to critically question some of the problematic aspects of criminological frameworks which otherwise appear to go largely under acknowledged. *Women Exiting Prison* recasts the issue of imprisonment and release as a social responsibility, rather than individual struggle, and employs a feminist intersectional framework to articulate a sharp and compelling critique of the justice system followed by recommendations for change and transformation.

This fresh, critical perspective provides an alternate lens through which to view female incarceration and problematises take-for-granted assumptions which circulate within the more distanced, objectivist criminological discourses. In many ways, this book has been instrumental in regard to solidifying my own activist stance as a practitioner-researcher. I identify strongly with the desire to challenge and disrupt many of the dehumanising and oppressive operational systems which place women within prison and compound pre-existing inequality through institutionalised forms violence, subordination, exclusion and further marginalisation.

Women Exiting Prison courageously challenges some of the deeply rooted and taken-for-granted hegemonic ideals underscoring in criminological research and practice, such as the dominance of an evidence-based model which ultimately decontextualise 'offending' from relevant social, economic, political, cultural realities. Through careful sociological analysis, authors contributing to this volume provide a macro level narrative: One that tells a "consistent and compelling story" (Carlton & Segrave, 2013, p. 206) of neoliberal intervention and state control. The scholars therefore advocate for prison abolishment and more equitable conceptions of justice. The table below presents an overview of key themes addressed within each chapter:

Table 1.

Overview of book chapters and themes

Chapter	Themes
Preface Carleen, P. "Introduction."	• Primary focus is not imprisoned women and their rehabilitation, but on a "range of other questions" such as economics, politics and more radical conceptions of social justice (p. xv) • Introduces intersectional frameworks into criminological research
Introduction Segrave, M & Carlton, B. "Gendered transcarceral realities."	• Outlines "conceptual priorities" (p. 5) for engaging with post-release complexity, such as neoliberalism; responsibility; gender-responsive justice; intersectionality • Outlines "pragmatic concerns" (p. 8) such as measuring "success" and challenges for activism
1. Bumiller,K. "Incarceration, welfare state and labour market nexus: The increasing significance of gender in the prison system."	• Explores the relationship between prison systems, welfare state and neo-liberalism • Critique of the criminal justice system as a "gendered system of social control" (p. 14)
2. Kendall, K. "Post-release support for women in Wales and England: The big picture."	• Examines neo-liberal policies and practices in England and Wales • Argues that the progressive potential of gender justice has been "absorbed by the neo-liberal agenda" (p. 35)

3. Carlton B & Baldry, E. "Therapeutic correctional spaces, transcarceral interventions: Post-release support structures and realities experienced by women in Victoria, Australia."	• Critique of the "predominance of male-centric paradigms that guide thinking on women's post-release experiences and support needs in Australia" (p. 57) • Outlines the neo-liberal social, political and economic realities drive a risk/needs approach (p. 57) • Argues that support interventions can amplify women's experiences of institutionalization (p. 56)
4. Hannah-Moffat, K & Innocente, N. "To thrive or simply survive: Parole and post-release needs of Canadian women exiting prison."	• Interrogation of parole board discussions through thematic analysis (p. 80) • Argues that although women are responsible for making choices to change their lives, "they must be given the opportunities and systemic resources to support those changes and to thrive, not just 'successfully' complete their parole without incident" (p. 95)
5. Baldry, E. "Continuing systemic discrimination: Indigenous Australian women exiting prison"	• Explores how the Australian context of colonialism drives and sustains high rates of indigenous incarceration • Makes suggestions for change, including asking Indigenous Australian women to partner as researchers in participatory studies (p. 103)
6. Kerr, J & Moore, L. "Post-release reality for women prisoners in Northern Ireland: The challenges of 'resettlement' in a society emerging from conflict."	• Critically questions concepts of 'reintegration' and 'community' (p. 120) • Problematises the 're-entry' industry by arguing that "it is clear that for many women they are not being resettled into community, as they were never settled prior to entering the prison system" (p. 131)

7. Corcoran, M & Fox, C. "A bit neo-liberal, a bit Fabian: Interventionist narratives in a diversionary programme for women."	• Draws on feminist and Foucauldian critique and contemporary governance theory • Examines the ways in which disciplinary practices and control measures have migrated from correctional centers into the community (p. 141)
8. Kilroy, D et al., "Decentering the Prison: Abolitionist approaches to working with criminalized women."	• Recommendations for working with criminalised women in a transformative context • Suggests that "advocacy, activism and support in the community offer broader scope for transformative change, especially when the experiences and voices of criminalised and imprisoned women play a driving role" (p. 156-7)
9. Shaylor & Meiners. "Resisting gendered carceral states."	• Examines gendered barriers to women upon release from US prisons • Explores how gender is used to "expand neo-liberal carceral regimes" (p. 183) • Critique of the re-entry industry
Postscript Carlton, B & Segrave, M "A radical vision for system and social change."	• Reinstates that this volume of work has been framed around women's experiences of exiting prison and has enabled the telling of a "consistent and compelling story that belies the dominant narrative of gender-justice" (p. 206).

Key themes and theoretical perspectives presented in *Women Exiting Prison*

A common theoretical concept woven throughout this text centres the around the notion of the "prison-industrial complex." As an ideological construct, this refers to the ways in which prisons and correctional centres function as a neoliberal mechanism of control. Drawing from Foucault (1975) and other critical theorists, the authors consider ways in which the 'technologies' of intervention and institutionalisation employed within prison or correctional facilities function as insidious mechanisms of state control and surveillance. Examples from the text are provided within Table 1 which provides an overview of three common themes articulated within the literature.

Another theme centres around an overall critique of dominant narratives which shape 'best practice' within the prison industry. Through the lens of intersectionality, authors take a close look at the ways in which race, gender and class interact with the preeminent discourses and practices within the criminal justice system. Frameworks such as the risk/need model, desistence theory and gender responses models are interrogated from a feminist perspective and the shortcomings of the system are made clear. Driving this critique is the understanding that within a neoliberal context, correctional practices have become increasingly focused on the individual and place an overwhelming emphasis on individual responsibility. In doing so, these authors argue that the broader issues which affect, or even drive, the criminalisation of individual women continue to go underacknowledged and addressed. Many of these issues relate to gender, race or class inequality and the literature brings into focus the historically racialised and gendered ways in which the prison system has operated. Disrupting and dissolving dominant narratives and practices within criminal justice is therefore a central aim of the critique.

A third salient theme is a call for more women-centred research. According to many of the authors who have contributed to this volume, there is a pressing need to carry

out feminist-informed research in this area in a way that privileges and centres the lived experiences of individual participants. Research on this topic should take into account sociological factors, according to the authors, and include at least some element of analysis and critique regarding the systems through which criminalisation occurs. Overall, research should not position women as 'objects' of study but include participants as experts of their own lived experience. An overview of these themes is provided now in Table 2.

Table 2.

Three key themes and examples from the text

Key themes	Example from text	Summary of theme
1. Critique of the 'prison-industrial complex'(PIC)	The prison-industrial complex refers to the "creation of prisons and detention centres as a perceived growth economy in the era of deindustrialization" signifying an interlocking economic and political relationship which creates social norms and legitimises the expansion of prisons (Shaylor & Meiners, 2013, p. 184).	The concept of the PIC within this literature functions as a central organising theme through which the multifaceted, complex and systemic control mechanisms of gendered punishment are analysed. The PIC refers to the insidious ways in which the state evolves alongside the market to develop new technologies of intervention, institutionalisation and subordination. The neo-liberal "carceral state" is understood as an apparatus of the PIC which continues to punish women even after their release. This demonstrates how the transition from prison into community becomes a cyclical affair and is often characterised by continued oppression and serial incarceration.
2. Challenging dominant paradigms in criminological policy and practice through intersectionality	"In many ways the impacts of the efforts to implement gender-specific justice mechanisms reveal a story of a devastating failure: In place of complexity we have seen the narrative of post-release simplified; in place of compassion	Dominant frameworks and paradigms such as gender responsive models, a risk/needs framework and desistence theory are critiqued within this volume for being essentialising of women (Shaylor & Meiners, 2013, p. 184),

	and support we have seen programmes that entrench marginalization and institutionalization" (Carlton & Segrave, 2013, p. 206).	overly responsibilising of the individual (Kerr & Moore, 2013, p. 126) and focusing disproportionately on need and the behaviour of individual (Carlton & Baldry, 2013, p. 62). Hence, predominant discourse and practice within correctional services are critiqued for deflecting social responsibility and failing to address the structural, material and systemic contexts of women's cyclical patterns of incarceration and release.
3. Developing new research that draws upon women's lived experience	"This new research must recognize the expertise women have regarding their own experience and drawing on that within the establishment of research agendas." (Carlton & Segrave, 2013, p. 205) *and* "Women cannot and should not become the 'object' of research, and the benefits of their contribution need to be tangible, even if small, improvements to their lives" (Carlton & Segrave, 2013, p. 205)	In order transform the dominant androcentric approaches which guide prevailing frameworks, these authors argue that new ways of researching with women need to be developed. Research should draw on women's experiences and recognise the broad socio-political contexts which shape women's incarceration. Structural or systems focused analysis is of interest. The importance of "developing research that privileges women's lived experiences of state intervention and imprisonment" (Carlton & Segrave, 2013, p. 204) is recommended.

Embodied response to the literature: A poem

*A feeling travels **quickly** underneath my skin,*

*a sudden acceleration of **heat**; I am thinking quickly*

*and it feels **hot** and **narrow** and **sticky** and **sharp***

My attention extends outward, attaches to something external:

the ideological construct of the 'prison industrial complex'.

Thinking trembles under the weight of critical theory

I can't sustain this act of deconstructive thinking

*The bottom falls out; **an impasse***

I can't think or feel through this nihilism

Hitting the limits of critical theory

My poem details my bodily experience of engaging with this particular volume of activist-informed literature. As I immersed myself within the literature, I thoroughly enjoying the task of thinking critically about this topic. At the same time however, I recognised a sense of apathy or inertia arising from deeply exploring the complex workings of institutionalised violence, racism, trauma and gendered oppression in relation to criminology. This act of engaging in critical theory and probing my own activist assumptions was incredibly thought-provoking and allowed me to consider my research topic from a complex sociological angle. At the same time however, it also led to a feeling of having reached an impasse.

To me, this impasse was conceptual as well as quite physical. As I read the literature and engaged deeply, on a bodily level with the overall critique, I found myself growing weary and discouraged, as my anger and passion gradually gave way to a sense of helplessness in response to such ramped and entrenched structural and systematic inequity. As I reflected deeply on the many injustices faced by women in the justice system through the lens of critical theory, I began to feel a sense of helplessness and uncertainty as to what I could possibility offer as a researcher in this troubling institutional context. As I engaged in a full-bodied way with the literature – which included sharing my reflexive movement responses with one of my supervisors and analysing my somatic behaviour – I found myself hitting up against the inbuilt limits of critical theory (Braidotti, 2010a).

Braidotti describes this act of engaging with deconstructive, critical thought, as an exercise in oppositional thinking. By this, she refers to intellectual approach in which dialectic reasoning is used to form a counter-hegemonic or opposing argument which subverts and challenges a dominant narrative or framework. In the spirit of activism, this

approach to knowledge generation pushes back against the dominant centre and seeks to call out and resist the oppressive tendencies of a regime, paradigm, social norm or practice. This act of deconstruction, opposition and resistance is important however it leaves me with a strong sense at times of feeling helpless and overwhelmed. Critical theory is a deeply embedded aspect of my previous academic training, yet it can leave me with a sense of – *where to from here?*

What about the body?

This literature I have reviewed aims to push back, disrupt and resisting dominant narratives and frameworks, and uses critical theory to develop strong sociological critiques of the system. There is a sense of predictability in assuming a dominant narrative, whether that be the status quo or the counter-hegemonic argument. I do disagree with the analyses presented in *Women Exiting Prison*, but reading this literature did enable me to realise that my own sense of activism is tempered by my practitioner sensibilities; while I am critical of the system, my intention is to hold my sense of activism gently in order to not obstruct the research process by placing my own intellectual beliefs – such as the notion of the prison industrial complex - at the heart of the collaboration.

As an activist informed researcher, I have found the arguments in *Women Exiting Prison* compelling and powerful and I agree that context matters when researching with women in the justice system. Reading this work as both a research and therapist however, I have reflected on the possibility that my social justice stance and critical perspective could easily become dominant in this project if I were to align my work fully with the theoretical ideas presented in this volume. While social justice is important to me, my intention is to use this as a lens, rather than a research focus. My intention is to partner with women in the

justice system and to learn alongside others in a way that informed by social justice perspectives – yet I do not wish to make activism the central goal of work, given that my intention is to share power, rather than assert my own belief systems onto the work in a pre-determined manner.

As I engaged with this literature, I became more aware of some of the tensions between my activist self and my therapist self: This manifested as a palpable feeling of unease in my body which I presented in my poetic response. While I agree with, and am thankful for, critical perspectives put forth in this volume, I have also grappled with some of the underlying tensions between doing social justice work and therapy during my interrogation of the literature. This publication focuses more on macro level concerns, whilst therapy is traditionally considered a more micro realm practice. In therapy, as well as other human services fields, the relationship between micro and macro level concerns are being critically re-examined however as more and more discourse is revealing how cultural, political, economic and historical contexts shape the very ways in which practitioners engage people in therapy. Anti-oppressive frameworks offer conceptual as well as practical tools for deconstructing power and privilege in the therapy space and present a highly contextualised and critical lens through which to approach therapeutic practice from a social justice perspective. Literature from the somatic therapies field have articulated powerful commentary around the bodily experience of trauma, for example, and reveal how micro and macro processes inform one another in health contexts. In DMT/P, social justice approaches strive to articulate the ways in which context, culture and implicit biases do matter in therapy, given that microaggressions are bodily communicated and somatically experienced phenomena (Cantrick et al., 2018) In the neighbouring field of somatic therapies, Johnson's

(2017) recent book is another example of embodied approaches to social justice work. Publications such as these reveal the shift that is underway in DMT/P and related disciplines, in the sense that therapeutic practice is critically considered in relation to the broader social and political environments which influence practice. Therapy can no longer be siloed off from the structural, discursive, material and ideological environments in which it is applied. As Cantrick et al. (2018) state: It is not enough to speak of embodiment alone. As therapists, we must be aware of the implicit ways in which we 'other' and oppress and work toward shifting these relationships of power toward a more equitable dynamic – meanwhile challenging dominant norms as we continue to experiment and develop our own unoppressive models, frameworks and approaches. This entails becoming aware of the ways in which power and oppression are enacted not just 'out there' in the world but within the ordinary and proximate settings in which we work.

In regard to the literature under review however, there is very little reference to bodies, or to the corporeal and affective experience of criminalisation and oppression. While the main focus is centred around building a strong critique of systemic oppression, the more personal, or "intimate" (Johnson, 2018) experience of oppression remains underarticulated in this work. This is largely due to the fact that the authors are concerned with presenting a broader sociological critique of the justice system – one which does not centre around the individually of the lived body or the more subtle, experientially perceived details of a woman's life. As the authors specifically note, the focus of publication is not to explore individual stories of incarceration and reintegration but to shed critical light on some of the more structural and socio-political-economic factors which shape and drive punitive practices. The aim is to tell a larger story than that of the individual.

Engaging with this larger story of structural injustice as valuable for me during these early stages of my research project. It allowed me to better understand and critically examine the ways in which institutionalised power, violence and oppression both drive, and compound, women's experiences of trauma and marginalisation. Although I found the sociological analyses fascinating to engage with, at times I noticed a latent sense of unease within my own body as I explored the literature more deeply. Although this book allowed me to become more well-informed and able to understand and articulate a number of sharp feminist arguments in response to punitive practices and discourse, I could not help but feel at times that something valuable was *missing* from the literature. As a hybrid researcher-practitioner, my critical stance finds a strong sense of alignment with these critical perspectives, yet I often felt in my own body that something was absent from these critiques. I felt that more attention to the personal and qualitative details of women's experiences were needed in order to ground the social justice perspectives within a more direct relationship to criminalised women's own voices and embodied, lived realities on the ground.

Reading this work as my therapist 'self', I craved a more nuanced understanding of the qualitative, personal and immediate experiences of women as I was explored the literature. It seemed to me that women themselves were missing from the text on the whole, despite the academic intention to centre research around the lived experiences of criminalised women. What I longed for as a therapist-researcher was situated, specific, reflexive and co-constructed accounts of women's stories, including their hopes, desires, expectations and recommendations as to what they themselves identify as valuable and important.

Where women's voices were privileged within *Women Exiting Prison*, they appeared to function as a narrative device which helped to provide a stage for the telling of a larger

story. The overarching critique of the neoliberal, carceral state, otherwise theorised as the "prison industrial complex" appeared as a prominent discursive feature in this text, and intellectually rigorous arguments as to why this system must be challenged, disrupted and ultimately abolished were central to the overall logic of the literature. While I learnt a great deal by engaging critically with this topic as a researcher, I sometimes felt the activity of 'doing critical theory' was a somewhat disembodied, intellectual experience. Rather than engage with individual and varied accounts of different women's experiences, my intellectual focus was encouraged to land elsewhere, on questions and critique relating to politics, economics, neoliberalism and complex theoretical analyses of state control and surveillance. The primary focus is, admittedly, not to explore individual cases of imprisonment and rehabilitation but rather to explore a "range of other questions" (Carleen, 2013, p. xv) which centre around political and economic critique.

Interrogating the literature through the lens of material feminism

These 'other questions' I believe, could be expanded on, with recurs to the bodily and emotional experiences of women, and researchers alike, in order to further demonstrate how these ideas and concepts are transmitted, experienced, performed and embedded within day-to-day contexts on the ground. In order to bridge sociological and systems critique with the lived experiences of daily life, I turn to the theoretical framework of material feminism to explore how micro and macro perspectives might mutually inform one another in research pursuits such as mine.

Material feminists call for a more materialist mode of analysis and new ways of exploring and critiquing material reality (Coole & Frost, 2010, p. 2). This can include seemingly 'immaterial' things such as language, consciousness, subjectivity, agency, mind,

soul, imagination, emotions, values and meanings (Coole & Frost, 2010, p. 2). While social constructivism has tended to theorise matter along the lines of a structural Marxist approach and therefore emphasises the impact of macro level concerns on human lives, the 'new' materialist philosophies argue for a more embodied approach to analysis.

Although much has been said to date about the body and power relations, there remains relevantly little attention given to material efficacy, or agency, of bodies within social or political analysis (Coole & Frost, 2010 p. 9). As a result, new materialism - the philosophical tradition which encompasses the work of Barad, Braidotti, Grosz and many others – recasts critical awareness toward the immanent vitality and potentiality of bodies, in both a real and tangible sense as well as theoretically and philosophically. This intellectual movement with the arts and humanities urges scholars to creatively experiment with the ways in which bodily capacities, affects[11], and collaborations might produce new and yet unknown directions, knowledge, and resources for shared research and practice within an activist tradition.

In relation to the topic of women's criminalisation, this would entail the dual task of not only focusing on the insidious shaping, constraining characteristics of state power and its oppressive effect on the human body (Coole & Frosts, 2010), but positioning the body as a generative force which might resist and change, or transform, existing power relations through what Braidotti calls "affirmative ethics" (2010a), which includes the creative acts of making, relating, experimenting and learning through local, situated and non-hierarchical practices and social justice-focused projects. By integrating the rigour of social

[11] I.e. the power to be 'affected.' Not a personal or psychological mood, but a pre-personal bodily drive, according to Massumi in his preface to Deleuze and Guatarri's *A Thousand Plateaus: capitalism and schizophrenia* (1987, p. xvi)

constructivism within a more bodily, and affectively driven mode of analysis, new materialism expands on sociological critique by anchoring this within the lived, embodied, relational and mutually co-constituted realities of bodies-in-action. As Coole & Frost state: "…we have associated new materialism with renewed attention to the dense causes and effects of global political economy and thus with questions of social justice for embodied individuals" (p.31-2).

Therefore, from a new materialist perspective, notions such as 'neoliberalism' or 'patriarchy' no longer qualify as overarching explanations or one-way causal, mechanistic constructs (Fox & Alldred, 2017, p. 61). New materialism challenges the usage of such terms which can often function as explanations *in-and-of themselves* without revealing the sorts of capacities these social processes might produce within the micropolitical world of ordinary inter-actions (Barad, 2008), events and activities (Fox & Alldred, 2017, p. 560). I am interested in this perspective shift which takes constructs such as neoliberalism, and refocuses the question around what this system does and how it behaves in a way that is not abstracted from human experience or posited as a transcendent, meta narrative, but a day to day, concrete reality.

For example, the concept of neoliberalism as form of "gendered system of social control" (Bumiller, 2013 p. 14) is a powerful academic construct that appears throughout the literature. While I agree with the gendered, racialised and oppressive machinations of the criminal justice system operate along gendered lines, I found the notion of neoliberal control to permeate the writing and act as a sort of ideological meta narrative. As a foundational analytic concept, the idea of neoliberalism seems to me to function as a somewhat elite intellectual argument to support an activist agenda, which I now question from a

participatory, embodied standpoint. The positioning of the neoliberal critique as central to this work seemed to overshadow the potential for diverse, varied and perhaps even contrasting accounts of individual experience, in terms of what criminalised women themselves might offer.

As a therapist, I have wondered: Is my activist agenda in touch with the day to day realities and self-interests and agendas of women exiting prison? Perhaps 'disrupting neoliberalism' and 'prison abolishment' it is not too high on the priority list for women in the justice system, who may be faced with more immediate concerns such as obtaining support for childcare, employment, access to mental health care, support for drug/alcohol use or family violence situations. This literature offers a much needed critical perspective, and I wonder now if a further iteration of this work could include more of a focused look at what women themselves have to say; what women themselves feel in their bodies; what women themselves 'want' in relation to post-release support and therapeutic care. Being guided by women themselves as we produce our critiques, analyses, and recommendations for change is one way of speaking more directly to the lived realities of those who experience the injustice of these systems firsthand.

Expanding on social constructivism: *The lived body* and material feminist theory

A material feminist ontology of the body differs somewhat to social constructivist perspective and can be seen as an extension of constructivist thought rather than a radical departure. Social constructivist perspectives have been hugely productive for feminism and will continue to play an important role in challenging dominant paradigms. As we can see in this literature, social constructivist models undertake critical examinations of the role of language and discourse in order to interrogate the complex ways in which social reality is

formed through linguistic practices (Alaimo & Hekman, 2008, p. 1). However, as I have found through my own somatic responses, this strong semiotic focus on the role of language in relation to knowledge and power can actually foreclose attention to "lived, material bodies" (Alaimo & Hekman, 2008, p. 3) and can alienate lived experience from discourse production. Without recourse to real bodies, analysis can feel like a quite distancing and disembodied enterprise.

My attempt at analysing the literature with recurs to my own personal, embodied responses is in many ways continuous with certain aspects of social constructivist thought, yet it also entails small shifts and renewals. It is a continuation of constructivist perspectives in the sense that it builds on the belief that "context matters" (Segrave & Carlton, 2013, p. 6). Issues to do with gender, race and class must be taken up as important points of analysis within feminist work (Segrave & Carlton p. 6) as well as within our therapeutic approaches and practice (Allegranti, 2013). My critique of the literature departs from a constructivist understanding of the body however in that I seek to emphasise the *lived body* (Grosz, 1994, p. 18) and move away from rhetorical devices which position The Body as a passive trope for cultural inscription, subordination and domination. The concept of the lived body finds roots in Merleau-Ponty's phenomenological worldview and therefore brings a renewed focus to qualitality-felt, lived experience. By centring women's lived experiences, including my own subjectivity as a researcher, I hope to develop research that combines direct experience with sociological critique, without privileging one over the other.

By foregrounding the conceptual principle of the lived body, I argue that a return to the "bodily roots of subjectivity" (Braidotti, 1993, p. 6) is especially important for feminist

projects which centre around women's lived experiences and expertise. This also aligns with social justice perspectives within DMT that emphasis layered and intersecting ways in which embodied experiences are political, as well as personal (Allegranti, 2013; Caldwell & Johnson, 2012; Cantrick et al., 2018). This renewed emphasis on bodily 'materiality' within feminist thought (Alaimo & Hekman, 2008; Coole & Frost, 2010) holds promising potential for further research, practice and collaboration with women, especially in instances where the situated, partial, and embodied experiences of participants are of specific interest and concern.

In striving for a more embodied approach, I do not mean to suggest that the discursive tradition or social constructivism is in any way deficient or lacking. Drawing from material feminist philosophies, my aim is to point toward some of the ways the body has been neglected within the deconstructive tradition and to experiment with ways of knowing that are aligned with both a discursive, as well as bodily-material paradigm. While social constructivist modes of analysis have been incredibly useful for feminism, it has become important for me to question the philosophical implications of any text-based analytic paradigm due to the inbuilt assumption that language holds the most power.

My previous chapter explored this elevation of language within western academic thought and critiqued some of the limitations of a textual paradigm within hermeneutic anthropology. My following critique of the literature to follow can be read as an extension of the argument presented within my previous chapter: That language has been granted too much power (Barad, 2008). I provide some specific examples of discourse analysis within the sections to follow which I hope will shed light on some of the ways in which language produce subtly objectifying affects, even if unintended.

Passive subjects, docile bodies: The linguistic turn in the social sciences

Women Exiting Prison presents grounded, discursive arguments by interrogating the complex relationships between language, disciplinary power, and correctional control. For example the issue of "control-based language" (Carlton & Baldry, 2013, p. 61) and "parole discourse" (Hannah-Moffat & Innocente, 2013) is examined by contributing authors and language is dissected so as to reveal the insidious ways in which oppressive language reflects hierarchical relations subordinating tendencies at the level of practice. In the tradition of deconstructive critique, Foucault's governmental theory provides one framework, for example, in which contributing authors have sought to illustrate the invisible ways in which power and surveillance continue to oppress, even outside of the prison walls (Corcoran & Fox, 2013, p. 140). The issue of power is central within the literature as each author seeks to critically deconstruct and interrogate language, discourse, policy and theoretical frameworks which are used to rationalise punitive practices.

I have therefore used a similar deconstructive technique to examining *Women Exiting Prison* through the lens of critical theory. As part of my overall review of this literature, I have engaged in some aspects of discourse analysis in order to better understand and critique elements of the text. As a linguistically informed method, discourse analysis involves the careful interrogation of a text, with the intention of uncovering underlying assumptions, beliefs, and agendas embedded within the text itself. This mode of literary analysis is familiar to me from anthropology and hermeneutic studies which has been made evident in my previous background chapter. Drawing from a discourse analysis approach, I have attempted to take note of words and phrases which appeared salient to me as I engaged with this literature under review.

The term "criminalized[12] women" for example, stood out to me immediately. Understandably, feminist researchers do not use the common term *offenders* when referring to women in the justice system due to the obvious individualising, stigmatising and 'othering' capacity of this otherwise ubiquitous, deficit-framing term. To claim that women are not criminals, or offenders, but are *criminalised* is an incisive use of language which immediately summarises and illuminates the standpoint of the authors as feminist prison abolishment advocates.

This use of language is sophisticated: It interrupts the common terminology and points toward the "socially constructed nature of criminal labelling and stigmatization" (Corcoran & Fox, 2013, p. 140). The reader is subtly introduced through this key terminology to a gradually unfolding understanding of criminalisation as a gendered and racialised process. As such, the authors highlight the many ways in which the justice system is failing women and as a result, this text positions our attention toward activism as the logical and necessary (dualistically constructed) counterpoint to this insidious form of systemic and structural oppression.

While this phrase serves to counteract salient neo-liberal notions of individual responsibility that are bound up in the commonplace term *offender*, the grammatical use of the passive within the term *criminalised* emphasises a 'power over' dynamic which I mentioned earlier. By discursively positioning women as *criminalised* a one-way flow of power is evoked. This portrays a constraining, repressive form of power, the attainment of which is located "outside the subject" (Grosz, 2010, p. 140). Although women "cannot and should not become the 'object' of research," according to Carlton & Segrave (2013, p. 205)

[12] I use the British-Australian spelling of *criminalised* throughout my dissertation.

the rhetorical use of this term paints a picture of the ever docile and pliant feminine body - singular, homogenous - who is 'shaped' by socio-political realities in a unilateral sense.

In this sense, I argue that the "criminalised" body serves as a trope for the narrating of a meta critique centred around the pitfalls of neoliberal systems. By focusing on the processes which drive criminalisation such as disadvantage and oppression (Carlton & Baldry, 2013, p. 62) the literature presents women as subject 'to' oppression rather than agentic subjects in their own right. Other examples drawn for the text include the argument that women are "subjected to gendered discipline, regulation and surveillance" (Kerr & Moore, 2013, p. 118) or have been "constrained for most of their lives" (Baldry, 2013, p. 63) by structural arrangements. The female subject in this line of critique reveals a body that can be all to easily acted on, coerced and constrained by external forces (Grosz, 1994, p. 9).

As I have explored through my somatic inquiry and discursive analysis, this mode of critique situates power, change and reform at a structural level and corresponds to feelings of *helplessness* and *despair* which emerged throughout my embodied, reflexive approach to reviewing the literature. An emancipatory perspective which aims to liberate women can, I discovered, paradoxically participate in the continued oppression of women by reducing the diverse, varied and embodied experiences of individuals to a singular ideological cause. In this sense, women's lives and women's bodies can be co-opted and constructed as symbols of neoliberal oppression and used as a platform for activist agendas.

While making a very important critique of gender-based inequalities, my experience of engaging with these ideas seemed to take me far from the lived, felt, corporeal aspects of women's lives. At times I wondered if there might be some risk of objectifying women's lives by using their narratives to tell the overarching ideological story of the ways in which

capitalist regimes punish, intervene, and control individual lives. Without recurs to embodied difference and variation, the contexts and details of women's multiple experiences of exiting prison may be reduced to a homogenising account of lived experience. As I have experienced through embodied inquiry, an activist stance which focuses on systems reform can activate the energy of thinking in a way that, in my own somatic noticing, felt disembodied and distancing.

The absence of or diminution of the body within this literature presents an opportunity for feminism and critical theory to reconsider the role that bodies, emotions and affect play within research and practice. Although the perspectives presented within this volume do not seek to detract from women's autonomy, power, or agency, I have found that the construction of these salient counterhegemonic arguments can in fact minimise attention given to personal, diverse and possibility contradictory accounts of individual women exiting prison. A more materialist perspective would call for a "phenomenology of diverse lives as they are actually lived" and do so in a way that acknowledges how this project may even be at odds with normative theories or activist ideologies (Coole & Frost, 2010, p. 27). My main concern with this text is, that the compelling activist standpoint combined with an analytic focus on macro level super structures which shape women's experiences of oppression can evoke an understanding of power which may be at odds with a critical emancipatory vision.

My experience of critically reviewing this literature from an embodied standpoint revealed to me the visceral sense of helplessness which can be aroused in cases where macro level concerns are highlighted and the salience of economic, political systems as a limiting, punishing force is foregrounded. For me I found this can overemphasise the constraining, blocking, alienating and disenfranchising power relations in which human lives are

imbricated. My concern is that this location of power within external structures, or within language, can risk positioning women as passive victims whose lives are constrained and compounded by systemic and structural oppression. This can perpetuate yet another variety objectification which contradicts the very logic of a feminist drive which seeks to disrupt and transform such objective and reductionist tendencies. The shrinking of complex lived experience to a symbol or cause is risky for feminist analysis, as this approach inevitably participates in the logic of representationalism which material feminists strongly object (Barad, 2008).

Social justice and activism

My stance regarding the role of activism within DMT/P research and practice is informed by feminist theories and other critical schools of thought. I am drawn to a question posed by Grosz (2010), who asks where feminism would be best served by enacting a resistive form of counter-hegemonic power, or by pursuing the more affirmative and productive questions of *what a body can do*. As Grosz states, the capacity for action and reflection are embodied tasks which are foundational for the creation of new knowledge and new practice (p. 141). Here the emphasis shifts toward the affirmative, generative potential of socially engaged forms of embodied practice which might be used to create spaces in our communities for what Grosz calls an "opening up the present to the invention of the new" (p. 141).

This also relates to what Braidotti (2010a) calls putting the "active" back in activism. I have been inspired by Braidotti's articulation of what it could mean to shift critical attention toward the small and situated acts of empathy, interaction and exchange within community building projects and small acts of activism. Bradiotti's feminist ethics refers to the immanent

capacity that we each have as embodied subjects to act and think in creative and affirmative ways. Agency, change and transformation are located between people in this lineage of thought and may be actualised through relational processes of interaction and mutual exchange. By focusing on these small, ordinary acts of togetherness, according to Braidotti, we can participate in transformative interactions through an exercising of "micro-political modes of daily activism" (Braidotti, 2010a). In the context of this study, the daily lives and interactions with women in the justice system are the focus of inquiry, rather than institutional oppressions and structures. In the context of critical somatic research this can also be thought of as a "micro-sociological" perspective (Johnson, 2015, p. 81) which engages with politics at the level of the body (Allegranti, 2013; Sajnani, 2013). For myself, as a feminist-participatory researcher, this has meant examining my own Eurocentric ideals and biases and seeking to interrogate some of the ways in which my own belief systems as a practitioner might be experienced as subtly oppressive by women in the justice system – such as my former psychoanalytical bias and its embeddedness in a medicalised/institutionalised framework, which I examine in Chapter 7. The concept of embodiment, and the politics of "becoming bodies" (Allegranti, 2013) is central activist approaches to DMT and further research on criminality, gender, race and oppression can help to bring this perspective forward and grow this area of critical awareness in the field of DMT.

I agree with Cantrick et al. (2018): Referring to embodiment alone as therapists does not equate to empowerment. I will explore this further in my methodology section (Chapter 4), but for now, wish to state my intention to incorporate a lens of 'embodied social justice' (Johnson, 2017) throughout my research. In some ways this reflects many of the views put forth in *Women Exiting Prison*, yet my intention is to get more specific about what it might

mean to do unoppressive practice within this highly institutionalised system. Unlike the theorists whose work I am exploring in this chapter, my PhD is not centred around a prison abolishment goal, yet I do align my views with the argument that the prison system is great need of radical reform. Developing principles and recommendations for unoppressive therapeutic practice is a good place to start. Therefore - rather than retell the story of gendered inequity and neoliberal control, I wish to focus this research on the "multiple, complex and potentially contradictory sets of experience" (Braidotti, 1993, p. 7) that individual women bring to this shared project. This reflects the participatory goals and values which are further communicated in Chapter 4.

Taking an affirmative stance

The editors of this volume state that the task of engaging in activist visons of creating systematic change can seem overwhelming, to the point where action itself can be immobilised (Carlton & Segrave, 2013, p. 205). My own bodily responses attest to this possibility. A resistive form of activism, as discussed, may be necessary in terms of intellectually understanding the complex workings of structural injustice, yet, it remains importance to resist from casting women as passive subjects whose lives are constrained and shaped by macro level structures alone.

Braidotti's focus on the micropolitical realm of action requires taking an "affirmative" stance. Affirmation, in the Spinoza-Deleuze philosophical tradition is not about holding naïve hope but refers to the task of remaking unjust sets of conditions through small, transgressive acts, of which art making is one possible vehicle for change and transformation. By "re-casting critique as affirmation" (Braidotti 2010a, p. 45) the focus of social justice work might extend beyond solely the acquisition of rights, prison abolishment or reform

toward new questions and possibilities. What could be explored, created or imagined together, in collaboration with women in the justice system? What range of possibilities might dance movement therapy afford individuals and communities and how might we be led by the voices and experiences of those with lived experience?

This literature review has led me to question of what it might mean to embrace an "feminism of difference" (Grosz, 2010, p. 142) in both practice and research, where the focus is not necessarily emancipation from the prison system, but the co creating new possibilities? How might dance be used as a therapeutic resource in a way that is not so much about addressing a 'problem' but rather, is orientated toward experimentation, curiosity, play, flourishing? As Hannah-Moffat and Innocente (2013) points out, the focus of therapy and other community supports needs to shift from not only surviving, to thriving (p. 78). Research focused on thriving and building hope through participatory projects (Baldry, 2013, p. 112) are examples of taking an affirmative stance within a deficit-based system.

Feminist politics of location

As I have explored through a methodology of somatic inquiry, a feminist 'politics of location' starts by acknowledging the situated, embodied structures of lived experience (Braidotti 1993, p. 7) The bodily material dimensions of subjectivity, such as physiological responses, mental states, feelings, emotions, and affective tendencies are integral contributors within the practice of knowledge production. Based on this philosophy of embodiment, I have argued in this chapter that the critical, deconstructive focus on language and discourse presented in this literature could be expanded upon to include an increased focus on phenomenological, lived experience. By this, I specifically mean the physical, mental, emotional, affective and relational processes that inflect lives with nuance and variation.

This, after all, is what I care most about as a dance movement therapist. As hybrid researcher-practitioner I hold that view that bodies matter just as much as language, culture, and discourse analysis. As Barad (2008) states, the relationship between bodily material and discursive practices is one of "mutual entailment" (p. 140) as neither can be explained in terms of the other. By imbuing categorical knowledge (social science prose) with personal narrative (literary, poetic language) I have attempted in this chapter to create a richer, situated, arts-based account of my own processes of interpretation, critique and textual analysis as this relates to the literature under review.

My thinking on the role of bodies, emotions and affect within this review has been informed by corporeal and material feminism, posthumanism, and my practitioner knowledge derived from dance movement therapy. Responding to calls for a renewed emphasis on material bodies within feminist work I have considered the ways in which notions of lived experience might be expanded upon in order to incorporate real bodies within knowledge generation. By inviting corporality back into the pursuit of knowledge production, might we, I wonder, as allies of women in the justice system, begin to expand our range of activities and responses in order to creatively, as well as critically, challenge the hegemony of dominant narratives, whilst not losing sight of the qualitative details and contexts that make up a life? Might more embodied approaches help contribute, in a procession of micropolitical ways, to a more equitable society which responds to women's serial imprisonment and release from a basis of social responsibility and compassionate ethics, rather than resistance and struggle?

By framing lived experience as an ongoing bodily event and paying attention to women's lived, *embodied* experiences of engaging with the justice system, contemporary

research may go further in its analysis by balancing personal, affective insights and perceptions with more outwardly facing sociocultural critique. As the editors of this volume recommend, new research could ideally "recognize the expertise women have regarding their own experience" and draw on this within the establishment of research agendas (Carlton & Segrave, 2013, p. 205). This speaks to an understanding of knowledge production which is feminist-informed and values collaboration. In participatory research project, the partial and situated knowledge that individual people bring to research explorations is a central methodological consideration (Herr & Anderson, 2005). By expanding the notion of lived reality to include the materiality of bodily experience, new questions and practices may emerge for participatory practice in ways that are hopefully guided by women's direct experiences and expertise, and responsive to the self-identified issues, challenges, feedback and desires articulated by women themselves.

Centring women's lived, embodied experiences in feminist research

In centring women's lived, embodied experiences in research I wish to stress that bodies are fundamentally material, therefore not textual, therefore firmly not metaphorical (Braidotti, 2006, p. 200). The qualitative details of people's lives should not be reduced to a semiotic code 'for' oppression in participatory, body-centred, feminist research. Rather than thinking of these women's experiences as representative of, or effects of, macro level causes I intend to strive toward a mode of critical thinking that engages with the "complicated causalities" (Coole & Frost, 2010, p. 27) which flow back and forth between dominant narratives, criminological practices, theories, ideas, interventions, policies, people and places by grounding this in everyday practice. I wish to do this in a way that is guided by

participatory goals whereby new critical questions and directions may arise in response to ongoing interactions of *planning, action, reflecting* and *evaluating* (Anderson & Herr, 2005).

Overall, I have found the arguments presented in this volume incredibly insightful and meaningful in terms of challenging the powerful evidence-based paradigm in correctional practice, which places individual responsibility on women yet ignores the structural and systematic layers of inequity which contribute to women's imprisonment. These sociological critiques could be expanded upon I believe to include the varied, lived, bodily experiences of women's lives. The lived, material, particular realities and perceptions of women are of vital importance for continued explorations in this field. The bodily, emotional and affective dimensions of experience cannot be separated from feminist analysis if the personal is to be included in sophisticated critiques of the political, cultural, social, historical and ideological factors that shape therapeutic practice.

Chapter 4. Methodology: *What can a body do?*

Processes, approaches and theoretical influences

This chapter introduces action research and participatory research methodologies used in this study. It also outlines some theoretical ideas linked to feminist philosophies and embodied research methodologies, which are significant influences guiding this project. My PhD project has been guided by an emergent research design. As such, the specific research questions and trajectories of the study have emerged throughout the course of the project in organic, iterative and collaborative ways. Emergent research designs differ from more objectivist approaches in that no clear protocol is used, meaning that research questions and goals are developed in partnership with collaborating members throughout the duration of the project.

From a retrospective perspective, the emerging research trajectories, questions and findings appear clear, neat and even self-evident at times. However, in truth, the collaborative process has often felt messy, unwieldy, chaotic and sometimes confusing. Collaboration is a dynamic process which in participatory research involves engaging with multiple perspectives, agendas, expectations, recommendations and ideas. Different points of are negotiated in an ongoing way as academic researchers seek to maintain a close and direct involvement with key "players" (Bolger, 2013, 2015), or stakeholders, throughout the life of the project.

In order to provide the clearest methodological overview possible, I describe three main research cycles in this chapter. The notion of "cycles" is an action research concept and will be discussed throughout this chapter. Three distinct methodological cycles are presented, including:

1) A *feasibility* exploration with Organisation #1 (Victorian Association for the Care and Resettlement of Offenders);
2) establishing *enabling conditions* for the study with Organisation #2 (Geelong Community Correctional Services);
3) formal *data production* sited at Organisation #3 (The Stepping Up Consortium).

Across the lifespan of this research I have collaborated with three separate organisations and institutions, one situated in Melbourne and two in the regional city of Geelong, Australia. Partnerships with Organisations #1 and #2 were guided by an action research methodology, whereas my final partnership with Organisation #3 was guided by a more general participatory approach. This means that formal 'action research cycles' (Herr & Anderson, 2005) did not take place within this final setting, yet a dialogical and collaborative approach remained central.

My discussion around methodology, approach and process will focus mainly on Organisations #2 and #3, considering no formal data production took place in partnership with Organisation #1. However, the relationships developed with Organisation #1 were critical to this project and paved a way into a complex system in which I was an 'outsider,' and allowed me to build a research relationship with the Department of Justice in Geelong.

Action research

Action research is an emergent research design which seeks to explore, and address issues of concern identified and expressed by individuals and communities participating in the study (Reason, 2006, p. 192). Participants are identified as "co-researchers" (Herr & Anderson, 2005) in action research studies. Action research is form of participatory research that is guided by a 'spiral' of action steps. This spiral involves cyclical iterations

of collaborative planning, action, observation and reflection and is fundamental to the research design and knowledge generation procedures (Herr & Anderson, 2005, p. 5).

A participatory approach is essential to an action research methodology (Wicks, Reason, Bradbury, 2011) as co-researchers as invited to collaborate throughout all stages of the study. Co-researchers and the academic researcher work together during each phase of the action spiral to collaboratively observe and evaluate emerging findings. Each new understanding of the data helps to generate the next wave of planning and action, which all co-researchers decide on together.

The decision to undertake action research reflects my own political standpoint, in that action research often takes place in settings which are characterised by unequal distributions of resources and power (Herr & Anderson, 2005, p. 4). In contexts such as the criminal justice system in which resources and power are asymmetrically skewed to begin with, I have chosen to use an emancipatory approach to research which is strongly influenced by the liberationist perspective of Brazilian educator, Paulo Freire (1968). Drawing from the philosophy of Freire, the essential purpose of action research is to address issues of concern which are raised by individuals and communities, and to build democratic spaces in which to explore and address these challenges in practical ways (Reason, 2006). It is in this way that theory and practice, as well as academia and activism, come together to form an integrated approach within socially engaged research (Wicks, Reason & Bradby, 2011).

Empirical processes in action research

Action research offers an extended epistemology which includes experiential and practical ways of knowing (Wicks, Reason & Bradby, 2011). This orientation to knowledge

reflects an embodied and embedded constructivist perspective that celebrates "many ways of knowing" (Heron & Reason, 2008). Phenomenological and hermeneutic traditions inform action research studies. Therefore, self-awareness, moment-to-moment reflexivity, and an ongoing examination of one's own positionality, biases, and assumptions is expected (Wicks, Reason & Bradby, 2011). Empirical data in action research is constructed through cycles of action and reflection, which require the use of ongoing researcher reflexivity. The outcomes of each action cycle are assessed in relation to the plans and intentions informing the action itself: These cycles constitute the empirical or evidential dimension of the study (Reason, 2006, p. 196). A decision log of action research cycles and the shared decision-making processes used in this project are available in the appendix. These documents further evidence the use of action research and participatory research methodologies throughout this research.

Feminist-informed participatory research

In response to emerging research findings, my methodological approach shifted slightly in Cycle 3. This shift entails a subtle reconfiguration of the design from an action research approach to a feminist-informed participatory approach. This slight methodological adjustment occurred in direct response to the action research process itself. During the research process, the collaborative cycles of planning-acting-observing became difficult to achieve due to many challenges and limitations within the participant recruitment process. In action research studies, it is essential that the action spiral is followed as this lays the foundations for sound empirical data to emerge. However, during data production this approach become too narrow, given that issues presenting around recruitment.

Due to the many recruitment barriers detailed in this chapter, I learned to let go of the need to undertake strict cycles of planning-acting-observation-reflection with participants. As a researcher, I learnt that I needed to relax my expectations around engaging criminalised women in an open and collaborative manner. The underlying principles of action research continued to inform my approach; however, I released the expectation of engaging criminalised women as co-researchers. Instead, we explored a more fluid ways of working. While participants in the DMT workshops did not engage as co-researchers in the study, a participatory design continued to inform the responsive, collaborative and contextual approach to doing research/practice in this setting. This meant no longer following the structured action research spiral as the project evolved into a feminist-informed participatory research approach, I based my methodological decisions on the emerging discoveries.

The integration of feminist theory into participatory projects supports researchers to focus critical attention on the role of gender within power relations. This may mean placing an emphasis on contextually specific stories, and highlighting the particular ways in which intersectional markers such as gender, race, ethnicity, ability and economic status interact with dominant narratives and taken-for-granted assumptions about society, patriarchal structures, power differentials and even emancipatory beliefs themselves (Lykkes, 2010).

Feminist theories allow researchers to address issues to do with gender, as well as highlight women's personal experiences and challenge patriarchal structures (Reid, Colleen & Frisby, Wendy, 2011). In addition, both feminist and participatory approaches encourage the careful use of researcher reflexivity, which is associated with the illumination of issues to do with power and oppression. I have drawn on the work of Finlay (2002a; 2002b),

Chadwick (2017) and Ellingson (2006, 2017) who offer a theoretical basis for the use of reflexivity in a health context, and align my use of reflexive writing with social justice perspectives in DMT (Cantrick et al., 2018) and the neighbouring field of body psychotherapy (Johnson, 2014; 2017).

As well as the use of reflexivity, other feminist/participatory principles underpinning my methodological include honouring voice and difference, sharing power, exploring new forms of representation, and as mentioned above, the ongoing use of reflexivity in terms of "writing oneself into the text" (Reid, Colleen & Frisby, Wendy, 2011). By using different modes of representation, such as the writing of the researcher 'self' into the text, feminist writers use their own personal subjectivity in order to cultivate new ways of thinking about women's experiences in response to oppression (Reid, Colleen & Frisby, Wendy, 2011). I have drawn on my skills and knowledge as a DM therapist to 'write' myself into the text in a more performative sense. Namely, I have used embodied artistic inquiry (Hervey, 2012) and other arts-based approaches in order to include my own bodily experiences in the reflexive process.

Embodied research methodologies

My PhD project aligns with the emerging field of discourse and practice in DMT and DMP referred to as embodied research methodologies (Tantia et al., forthcoming). Embodied research methodologies are used to encourage the authentic integration of bodily insights and knowledge into academic research pursuits. These methodologies are not limited to DMT/however as interest in embodied research approaches are evident in other fields, such as qualitative health research (Caldwell & Johnson, 2012a; 2010b; Chadwick, 2017; Ellingson, 2016) the humanities and feminist philosophies (Braidotti 1993; Grosz,

2010; Ahmed, 2017), as well as in other forms of somatic-focused research (Spatz, 2015; 2017; Thanem & Knights 2019).

Earlier articulations of embodied research methodologies in DMT

In dance movement therapy, embodied approaches to research have been described by Hervey (2000) in a way that reflects some basic principles of an arts-based research paradigm. Hervey (2012) uses the term "embodied artistic inquiry" to capture the ways in which dance and other somatic modes of inquiry can be applied as central methodological resources. Embodied approaches to inquiry are already extremely familiar to dance movement therapists, argues Hervey, meaning that this form of practitioner knowledge can provide rich soil for exploring the role of embodiment as a research paradigm (Hervey, 2000). Hervey's concept of embodied artistic inquiry includes the use of art (dance) to collect, analyse, and/or present findings. It also points toward a research approach that utilises a creative process and is inspired and shaped by aesthetic values. According to Hervey, this approach should draw on the embodied experiences of researchers *and* participants as a form of data (2012, p. 207). This embodied, artistic, relational approach is aligned with participatory research methodologies and is compatible with the positioning of research participants as co-researchers, in that all members are invited to share in a collaborative, creative process of designing and participating in shared research exchanges (Hervey, 2012, p. 208).

More recent applications of embodied research methodologies in DMT

Extending on Hervey's conceptualisation of embodied research practices, feminist researcher-practitioner and artist, Allegranti (2015) has raised a call for more "embodied, collaborative, artistic methodologies" (p. 81) within the creative arts therapies in order to

transgress the hold of western dualistic thought in academia. Examples from Allegranti's work include a variety of embodied research approaches which systematically integrate lived, corporeal experiences within the methodological process in order to produce performative academic texts which seek to transcend the limitations of binary logic (2009; 2013; 2014; 2015). Using video, dance performance, photography, poetry and prose, Allegranti demonstrates how close attention to embodied relationships, or "corporeal entanglements" (2015) can enrich the research process. In doing so, this framework supports feminist and participatory methodologies by grounding knowledge generation in situated, intersubjective, kinaesthetic, political, gendered and socio-culturally constructed realities.

By situating embodiment as a research paradigm and methodology, my intention is to draw attention to the ways in embodied intuition and sense-making can help illuminate and make transparent some aspects of the research process which otherwise may not be articulated. In particular, my thesis shines a light on the ways in which complex social issues can be examined in response to lived, embodied experience (Tantia, 2014). While dance movement therapists have the skills to attune to their own bodily experiences within the therapeutic context – and to articulate this in practice – there is room to expand this capacity in a research context by exploring embodied responsivity as an empirical process within qualitative research.

Embodiment in social justice-informed research

As well as the epistemological value of incorporating somatic approaches in research, the concept of embodiment also connects strongly to diverse social justice perspectives. Researchers from DMT as well as aligned fields, such as body psychotherapy,

have highlighted the importance of working from an embodied relational perspective in participatory projects. As Johnson (2014) notes:

> "Community-based or participatory research methodologies will ask communities what questions they need answers to, or what problems they need to address. From an embodied relational perspective, researchers should also engage their bodies (and the bodies of others) in the process of developing the research question. What do our bodies need to know? How do our bodies respond when reflecting on a particular research question?" (p. 86)

Drawing on this perspective I have used my own somatic responses throughout my research to help guide each aspect of the study and to explore what my body, and the bodies of others, needs to know. This includes developing the research questions, through to collecting data, analysis and presentation of findings (Johnson, 2014). By incorporating an awareness of how bodies hold and share power throughout the research process, socially engaged projects such as mine can utilise somatic awareness as a touchstone of critical analysis and knowledge generation.

Embodiment and empowerment: Guiding principles, not given facts

In my project this means decentring the notion of expertise and understanding criminalised women (and their supporting communities) as experts of their own personal, and/or professional experience. Journeying beyond the role of the expert therapist (Rolvsjord, 2006, p. 12-13) or researcher (Johnson, 2014) requires mutuality and a strong intention to collaborate and share power. While empowerment may be a central goal of both therapy and social justice work, it is important to maintain a degree of critical awareness around this notion in both practice and research.

An example of this can be found in Rolvsjord's writing on resource-oriented music therapy, where she argues that music therapy *per se* does not intrinsically equate to empowerment: "Mutuality and active participation in musicking might be important parts of empowerment in music therapy, but this does not necessarily mean that music therapy is always empowering" (p. 2).

In order to locate the notion of empowerment in a therapeutic context it is important to consider how dominant narratives and other socio-political influences shape, enact or perpetuate unequal power relationships in therapy. In a similar vein, Cantrick et al. (2018) state that the notion of empowerment and also *embodiment* require continued scrutiny and attention in the field, saying: "We do not wish to promote internalized dominance by inadvertently empowering clinicians to believe that simply speaking to embodiment alone is enough." (p. 196)

Embodiment, as well as empowerment, are principles to be aspired to, rather than a given facts. Embodied research methodologies are a vehicle through which critical examination of these ideas can take place in research. Embodiment and empowerment are two values – or assumptions - that I hold as a practitioner. These are constructs however, and from my perspective, they are not intrinsically *good.* As Cantrick et al. (2018) suggest, it is possible to perpetuate inequity and oppression through small, unconscious microaggressions in the context of therapy. I therefore apply the notion of empowerment and embodiment as springboards from which to think about, reflect on, feel into, and interrogate, the ways in which power shows up in therapeutic contexts. The following principles articulated by Cantrick et al. (2018) inform my reflexive body-based and critical approach:

- Embodiment also refers to critical reflection: Practitioner/researchers are encouraged to reflect on their own embodiment and intersectional identity in relation to clients/participants;

- Embodied awareness includes understanding the bodily impacts of trauma and oppression, both at a micro (therapy) as well as macro level (context);

- An expansion of theory is need in DMT/P and other counselling modalities, in order articulate the ways in which an activist stance might inform both research and practice.

Drawing on these ideas, my research processes include a commitment to interrogating how power shows up in the research relationships, as well as paying close attention to how structural and systematic influences impact wellbeing (both my own and that of participants). I specifically enjoy the invitation offered by these authors (p. 191) to pay attention to how I am using my own body in research: *Am I using my body as inclusively as I could be, or not?*

Wherever possible I have employed embodied, arts-based reflexive processes to examine the possibilities of my capacity to assert "embodied microaggressions" (Cantrick et al., 2018), such as the uncritical expression of power and privilege which may further entrench oppressive relations and structures. Chapter 8 (Implications for Practice) offers some further suggestions and recommendations for unoppressive practice in DMT/P. This is based on emerging findings from the data, particularly the feedback and responses of women attending the DMT sessions.

Doing socially engaged, unoppressive research/practice has provided me with an invitation: To conscientiously examine and interrogate some of my own internal biases and assumptions as a researcher-practitioner, including my own assumptions and theoretical frames of references as a therapist. To help communicate how my own internalised assumptions, beliefs and values have shaped the process of doing participatory research, I have turned to autoethnography and the writing conventions it offers in terms of making the 'self' transparent in ethnographic fieldwork.

Influence of autoethnography in this work

Autoethnography offers a creative framework for scholarly writing. As a discipline, it is located somewhere between anthropology and literary studies (Denshire, 2014, p. 832). Ellis and Bochner (2006) identify two different approaches in autoethnography, one being 'evocative' and the other being 'analytical'. According to Ellis and Bochner, evocative approaches utilise the author's personal experience, including physical feelings, thoughts and emotions (p. 737) as a platform for connecting to broader social phenomena, whereas analytic approaches employ slightly more objective methods within the writing style. I have drawn from Ellis and Bochner's descriptions of evocative ethnography in my attempts to weave poetic reflections and literary-style prose into each chapter in the form of an arts-based reflection.

Autoethnography is a "fictive tradition" (Denshire, 2014, p. 836) and my dissertation combines a variety of different literary conventions and approaches throughout the study in order to communicate research findings in the most evocative, lifelike and meaningful way possible. For example, in Chapter 5 (Systematic Literature Review) I employ the methodological approach of crystallization (Ellingson, 2009; 2017). This is a

multi-genre framework used within autoethnography or narrative ethnography to construct rich, polyvocal texts. This approach helps to bring diverse and sometimes contrasting theoretical perspectives together whilst also highlights the researcher's own vulnerabilities and problematising the very process of making knowledge claims (Ellingson, 2017). Another example can be found in my analysis chapter, in which I incorporate the method of 'ethnopoetics' (Blommaert, 2006) in my fieldwork descriptions in order to capture an impressionistic, partial and open account of participant responses. Ethnopoetics offers opportunities for analysing voice in ethnographic research through a more visceral, performative methodology and is strongly informed by folklore studies (Blommaert, 2006, p. 181).

In each chapter I incorporate an arts-based response to the data in the form of movement, dance, video, poetry, or creative writing/journaling. While much of my thesis is written in the style of social sciences prose, which can seem somewhat removed or distant, my autoethnographic accounts and arts-based responses are presented in order to bring the prose to life in a more personal way. By incorporating subjective body-based experiences into my writing I aim to experiment with different forms of representation, and explore how multi-genre writing might open up new types of knowledge, which is both personal and political, situated and yet deeply connected to broader social concerns. My intention throughout is to amplify my own bodily and emotional states. By using my own researcher body as a repository of "somatic data" (Caldwell & Johnson, 2012a, p. 134) I use personal reflection to interrogate salient power issues associated with practicing DMT in a criminological context.

Recruitment and ethics approval

Two separate ethics applications were submitted, one in 2017 and one in 2018. As this study was an emergent process, so too were the ethics approval processes. An initial ethics application was submitted and approved by the University of Melbourne's Human Ethics Sub-Committee in 2017. Following an approved amendment to this application, a recruitment period was attempted in late 2017.

Due to an unfortunate and sudden funding retraction on behalf of my partner organisation however, my research partnership with Organisation #1 fell through and ended abruptly in December 2017. This was a sad and frustrating end to a longstanding program, and points toward the fragility and under-resourced nature of women's post-release services. This initial cycle (Cycle #1) is detailed below. No data production took place within this phase, however it served as a valuable *feasibility* exploration which then fed into to a successful research relationship with Organisation #2.

First cycle of research: Feasibility exploration with VACRO

During this research cycle I spent a significant amount of time becoming involved with the Victorian Association for the Care and Resettlement of Offenders (VACRO), an organisation based in the central business district of Melbourne. This organisation had indicated a desire to collaborate with me on this research study. VACRO offers a range of different services to people engaged in the justice system. The VACRO Women's Mentoring Program had run for many years and matched previously incarcerated women with female volunteers from the community, with the intention of providing relational support and mentorship for women during the chaotic time of post-release and beyond. Matches were made according to mutual interests and based on participant's preferences in

terms of age, cultural background etc., as well as geographical compatibility. My decision to approach VACRO in the first place was based on the realisation that this program was rather unique and could offer one of the few non-mandatory (non 'correctional') or 'grass roots' opportunities to explore my research topic in a community-based context.

At the time of my involvement with this organisation VACRO had been offering a women's mentoring program which specifically focused on providing social support to women exiting prison, by matching participants up with a volunteer 'mentor.' The concept of mentoring, and the benefits and limitations of the VACRO women's program are explored in a study by Brown and Ross (2010). The authors suggest that high drop-out rates are one of the main constraints of a mentoring system such as this. According to the authors, women exiting prison are likely to spend a great deal of time attending to immediate material needs, making the maintenance of a social mentoring relationship near impossible (Brown & Ross, 2010, p. 225) as participants grabble with pressing survival issues on an everyday basis.

Due to the challenges in sustaining participation in the women's mentoring program, VACRO identified a DMT program as a potentially valuable way in which to engage women in from a person-centred perspective. Together with the women's mentoring program manager, I formed a working relationship with this organisation where we explored ways in which to invite women in the program to become co-researchers in this study. During my time "hanging out" period (Bolger, 2013; 2015) at VACRO, which essentially refers to an intensive relationship building phase explored elsewhere in this chapter, I sought to learn as much as I could about the program. I was guided by action

research cycles of shared planning, acting, reflecting and evaluating to explore possible ways of embedding the project within the existing organisational structures.

The relationship building phase consisted mainly of meetings with the program manager, attending monthly case management meetings, and meeting several mentors for coffee to talk and exchange ideas. In September 2017 I began running introductory dance movement therapy workshops for mentors, who were invited to act as a bridge within the recruitment process and provide support and encouragement to their 'mentees' to become involved in the project, should they wish to. Shortly after beginning to engage mentors, with the hope of recruiting program participations, the women's mentoring program received news of a funding cut. Staff were made redundant, including the program manager, and the program promptly ended in rather a distressing way for all involved. In December 2017 I formally ceased my research relationship with VACRO and began to explore other possible research partnerships, now with a serious degree of time pressure at 1.5 years into my research.

Fortunately, before ceasing our research collaboration, I was offered some important advice by the program manager at VACRO who very much wished to see this study succeed in terms of engaging women. I was advised to contact a regional organisation: Geelong Community Correctional Services (CCS), which was located close to my new home on the Victorian Surfcoast Shire. I had recently relocated within the Geelong region which, luckily for me, helped open up a whole new landscape of regional community services. Based on our learnings at VACRO, the program manager and I identified two key points which appeared to be necessary in terms of my successfully engaging Geelong CCS

and women interacting with the court system with whom I hoped to invite into the study as participants:

1) **The Support Community:** In order to build the right conditions for this research to take place, it would be necessary to involve the 'supporting community' of volunteers, outreach workers, case managers and other professionals who engage with women in the justice system at a community level.

2) **The right language:** In order to refine my elevator pitch I would need to study criminological frameworks such as the risk-need-responsivity (RNR) framework and the Good Lives Model (Corrections Victoria, 2016a) as a means of attracting a research partner and establishing a working relationship with this organisation. According to my contact at VACRO, I would need to be able to articulate a knowledge of behaviourist frameworks which underscore the of the risk/need model within criminology. At the same time, I was advised to emphasise the role of DMT in supporting the more humanistic, client-centred principles of the Good Lives Model, which is often used in conjunction with the risk/need model in criminology[13].

[13] I explore and compare these two frameworks in my systematic literature review and describe how research from DMT provides empirical evidence for both behavioural and humanistic approaches to therapy. I also offer practical recommendations in Chapter 8 which align with these criminological frameworks whilst maintaining a critical perspective regarding the hegemony of behaviourism in institionalised therapeutic contexts.

Second cycle of research. Geelong Community Correctional Services

With this in mind I approached the Department of Justice (DoJ), Geelong, in late December 2017. I was advised specifically by the former program manager at VACRO to make contact with Geelong Community Correctional Services (Geelong CCS), given that they work with women serving time in the community as well as women on parole. Geelong CCS responded immediately to my email and we met shortly before Christmas to discuss the project. The participatory research design was of particular interest to staff at CCS who demonstrated a strong desire to collaborate and share their professional expertise as co-researchers.

In a letter of support which accompanied my ethnics application, Susan Dandy (Manager of Court Practice, Geelong) noted the value of a participatory approach and expressed a keen commitment to partner in this project. The following feedback reveals the strong enthusiasm and commitment of CCS, spearheaded by Susan, who would become a co-researcher in the first major cycle of research:

> "…doing a participating type research and [being a]co researcher is particularly appealing, as history tells me that projects – which are too strict and do not have a good understanding of our environment do not succeed long term. I think this approach allows for fluidity and growth and is clearly client centred. The success of the pilot will be as individualised as the female offenders who participate. We have canvased a lot of interest from my location and our other partners i.e. ReConnect workers who work with offenders in prison, [as well as] our Parole team who work with females leaving custody." (S. Dandy, Letter of Support, January 2018).

Introducing the participating community: Geelong Community Correctional Services

At the time of my involvement with Geelong CCS, approximately 20 staff were working as operational case managers alongside a team of 7 supervisions, whose role it was to guide and support the case managers in their day to day activities. In early 2018, Geelong CCS had approximately 850 "offenders" engaging with the office. This included a reporting office in the Colac area which caters for people living between Lorne and Apollo bay, as well as toward the regional area of Lizmore. Co-researcher Susan Dandy was responsible for managing Prosecutors and Assessment teams who carry out court related operations at both the Geelong and Colac Magistrates Court. In addition, the Geelong CCS office works alongside Parole and Specialist streams as well as Community work and other Partnerships teams.

As a researcher I had access to a number of Community Correctional streams as well as Department of Justice Business Units which covered a range of activities including that of Sheriffs, Consumer Affair, Mediation and recently, Youth Justice. These contacts were used to leverage support at an institutional level, in the sense that that Working Group worked hard to inform staff about the project. This resulted in many invitations to undertake 'shadowshifts' with case managers where I would be invited to sit in on meetings in order to about the context and meet some of the women serving time on community orders. While all this information influenced the research trajectories, I did not use my meetings with case managers and clients as formal data. The insights gained through these experiences served to orientate me to the system and provided a basis from which to invite women into the practice component of this study: The DMT sessions themselves.

The "hanging out" period: Establishing a Working Group

Following the onboarding of Geelong CCS as a research partner, a "hangout" period (Bolger, 2013; 2015) was initiated in early 2018. Similar to other action research projects, this hanging out period allowed me, the academic researcher, to build relationships with potential co-researchers and to learn from those embedded within the system about the research context. Other community-based action research studies have identified hanging out as a necessary precursor to collaboration (Bolger, 2015).

The first hangout cycle involved the formation of a Working Group. The goal of the Working Group was to meet regularly (i.e. once a week) to discuss the research project and brainstorm possible ways of creating the conditions in which the study might be actualised. During this time, I visited the Geelong CCS office regularly to liaise with key community players from the Department of Justice. I also met with representatives from affiliated community networks such as The Salvation Army and Barwon Health, along with a representative from the Department of Human Housing to discuss the project and learn from local health and governmental professionals about the best ways forward, in terms of engaging women in the most collaborative way possible.

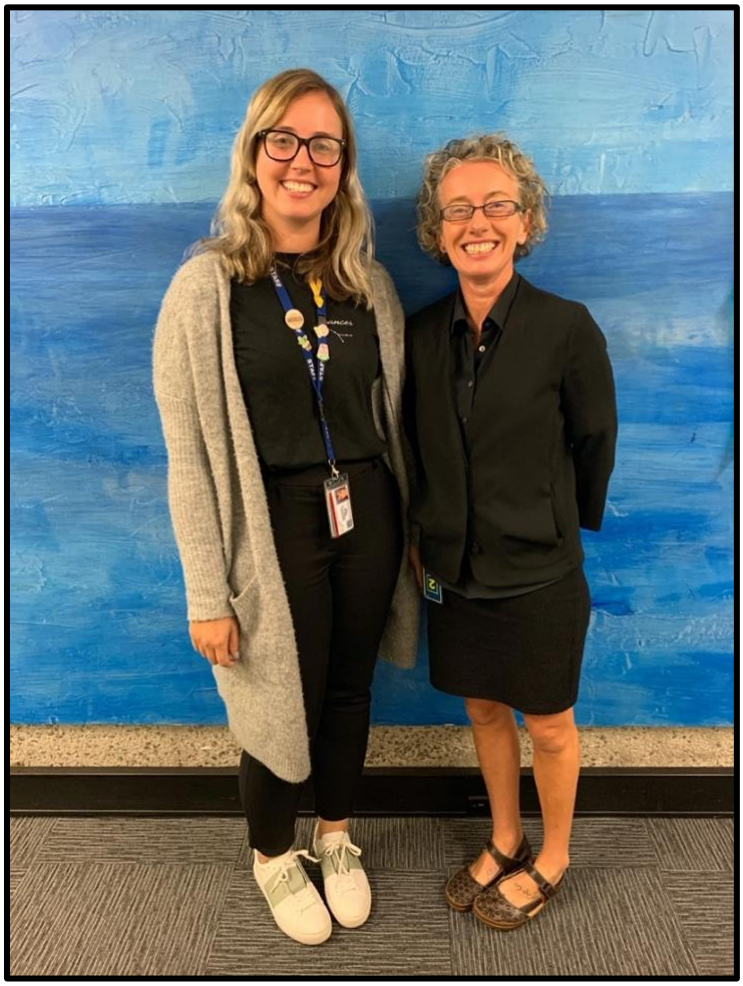
Members of the Working Group who consented to become co-researchers in this study were:

Susan Dandy (Manager, Court Practices, Geelong CCS)

and

Alyce Morton (Advanced Case Manager, Geelong CCS)

Figure 1: *Alyce Morton (left) and Susan Dandy (right) in the Geelong CCS office*



A handful of other members participated in our Working Group meetings at various times throughout the five to six months in which I undertook field work within the DoJ. However, Susan and Alyce were the main contributors who consistently undertook action research processes in partnership with me, such as planning, acting, reflecting and evaluating each wave of research. The action research 'spiral' was followed to help guide the activities of the Working Group and is fundamental to the research design (Herr & Anderson, 2005, p. 5). Working Group activities and decision-making processes are documented systematically in the appendix in the form of a Decision Log, which again was inspired by the work of Bolger (2013).

Over the course of approximately five months, Suse, Alyce and I met regularly to plan, act, observe and reflect on our process of embedding this project within the organisational structures of Geelong CCS. During this time, I was invited to undertake a series of shadow shifts with case managers in order to learn more about the role, and to meet women on correctional orders. I participated in this activity at least once a week, which included numerous invitations to attend a range of 15-minute case management meetings between a case worker and a female client. This activity allowed me to begin to meet women in the system and understand more about some of the everyday challenges of engaging in the criminal justice system, including the ways in which intersecting health challenges such as drug and alcohol use, mental health difficulties, family violence and trauma interface with the highly institutionalised environment and impersonal approach characteristic of punitive systems. In a sense, these interactions enabled me to gain a better insight into the potential role of DMT in this specific context and amplified my desire to work as unoppressively as possible, given the objectifying and hierarchical system in which I was seeking to embed this project in the first place.

Exploring recruitment possibilities: Developing enabling conditions

For approximately five months I spent one full day per week in the community corrections office, working closely with Susan and Alyce and other key stakeholders. We shared the goal of co-creating *enabling conditions* for the research to take place. This included undertaking shadow shifts, meeting with Working Group members, running introductory sessions for staff, studying public policy and other key documents, and liaising with community players from other organisations. A template of my fieldwork document is available in the appendix. The excel spreadsheet used for fieldwork included detailed

information regarding action research cycles, activities of Working Group, and data emerging through the iterative participatory process. Other methods for keeping a record of data include the use of different arts-based mediums including poetry, video, creative writing.

Together, the Working Group explored different approaches to recruitment. Through a process of shared decision making, we decided to that I would offer a handful of introductory DMT workshops within the community. We theorised that this would allow for opportunities for women to meet me in a casual, non-academic settings and to sample some activities from dance movement therapy. As well as offering workshops, we also came up with some different approaches, which I detail below in dot-point before expanding on in the following section:

A): Running community based DMT workshops in a transitional home for women, some of whom were on a Corrections order which was connected to local Salvation Army services;

B): Offering one-one-one talk sessions as the Department of Justice which were focused around health and wellbeing. I called these sessions Body-Mind-Boosters (more detail provided in section to follow);

C): On-site DMT sessions at the Department of Justice. I invited women attending a psychoeducation group to a number of sessions in response to some interest arising in the group regarding dance therapy;

D): Lunchtime workshops for case managers at the DoJ to help inform staff of the project, and to educate the supporting community about the role of DMT as a potential health resource.

E): I held various presentations and information sessions for local organisations, Barwon Health and Stepping Up, both located in Geelong. The relationship with The Stepping Up Consortium turned out to be very valuable as I was invited to hold my DMT sessions in their friendly community/therapy room. This eventually led to a successful recruitment pathway. We recruited participants from within an existing therapy program at Stepping Up, which is a community-based drug and alcohol centre (more detail to follow).

As well as reaching out to the above organisations and initiating various attempts at recruiting, I also spoke to program leaders at the local indigenous cooperative, Wathaurong, about the research study. The opportunity for this occurred during my time at the DoJ, where I volunteered and engaged in activities that were likely to help build relationships, allowing me to better understand the systems and communities with whom I was seeking to partner with. During this time at the DoJ, I was invited to help plan a participatory workshop which was aimed at building better relationships with Wathaurong leaders and stakeholders in the local community. Although this did not lead to a recruitment opportunity *per se*, I did value this opportunity to speak to some leaders within the Wathaurong community, given that my initial motivation for this PhD project was largely activated by the severe overrepresentation of indigenous people in the Australian prison system. For full documentation of my recruitment attempts, see appendix.

Before I introduce the participating community, the following section outlines each of the activities listed above in order to provide a comprehensive understanding of the diverse and varied ways in which I attempted to recruit participants. This should allow the

reader to understand the various attempts made to recruit and illuminate some of the barriers as well as enablers to participation in this study.

Recruitment attempts: What worked, what didn't

A): Community workshops in Salvation Army transitional housing

At the beginning of this project myself and co-researchers Alyce and Susan formed a relationship with the local Salvation Army. The Geelong branch had expressed a keen interest in becoming partners in the research. Unfortunately, the key stakeholder we were liaising with left the organisation just before we entered a recruitment phase. Without a clear contact person to consult with, we did not have great hopes or expectations for recruiting women through the Salvation Army. Nonetheless, I arranged to hold a number of community-based DMT workshops at the Salvation Army transitional housing accommodation in March and April, 2018. It was hoped this would attract potential research participants, some of whom were living in this residence.

I offered approximately six sessions in an effort to try and make contact with potential participants as per my recruitment strategy. We had hoped to reach a number of women engaged in the justice system through these workshops, as there were a small number of women serving time on a community corrections order whilst living in the residency. Different participants showed up to around half of these sessions, and other times no-one showed up for the workshop. Each time the group was a mixed group of women, all of whom came with their children. Participants were all from culturally and linguistically diverse communities and backgrounds. Some groups were very large, and others were small. Sometime there were 20 people, including whole families, and other times just one or two mothers and their children. The workshops were advertised within the

community and sought to target organisations engaging with criminalised women, such as mental health and drug/alcohol. One week a group of adults with varied abilities and disabilities arrived for the session, so each week looked a little different depending on who was dropping in.

After running the workshops for around two months, it was evident that this was not a successful way to reach potential participants. In early April, a gastrointestinal virus begun to circulate in the community. For several weeks the centre was closed to the public. My co-researchers and I took this as an opportunity to brainstorm other recruitment ideas. Before ending my volunteer time with the organisation, I offered my services as a DM therapist to the *Salvation Army*, however this was not taken up due to funding constraints. This approach to recruitment was therefore not successful.

B): 15-minute Body-Mind-Booster sessions at Geelong CCS

A large part of my time spent at the D0oJ over a five to six-month period involved undertaking shadow shifts with case managers. This entailed attending and observing 15-minute case management meetings. One case manager and one female client was always present, as well as myself. As I began to understand more about how these meetings worked, and the theories of practice informing case management, I began to explore possibilities for incorporating my DMT skills within this pre-existing approach.

As we continued to implement the action steps of shared planning, acting, observing and reflecting together[14], Alyce, Suse and I continued to try out different ways of engaging clients. Together we developed the concept of the *body-mind worker*: Someone who would

[14] See appendix for a Decision Log which details the collaborative process of working with Suse and Alyce as per action research principles, including the 'action spiral' design.

be available to speak with women about physical and emotional health and wellbeing as part of the case management approach. An email sent by Alyce to the case management team details the rationale behind this approach:

> "Good Morning All,
>
> As discussed in this morning's meeting – I have attached the flyer from Ella.
>
> If you have any **females** coming in on **Tuesday's** – grab Ella and book them in for a quick mind-body boost after their appointment.
>
> Ella is hoping to tap into **responsivity** issues and **mind-body health** for our females.
>
> Ultimately – she is hoping to engage them to attend a full group workshop with her, however, initially she is hoping to simply promote **positive lifestyles and balance in their mind-body decisions/reactions etc.**
>
> Not to be confused with program conditions or community work, however, Case Managers can utilise some of the work Ella is doing in the initial stages of **intervention and case planning** for our female offenders – specifically around the **leisure/recreation and pro-social attitude areas.**
>
> If you have any questions, feel free to have a chat with myself, Charlotte, Suze or Ella when she is here and keep an eye out for the next staff session." (A. Morton, personal correspondence, 11th April 2018).

The words Alyce has highlighted in bold here are key areas that case managers seek to address when working with clients. These reflect some of the principles stated in the risk-need-responsivity (RNR) model which is the dominant theoretical framework used to support recidivism in correctional contexts. In my following chapter I discuss the RNR

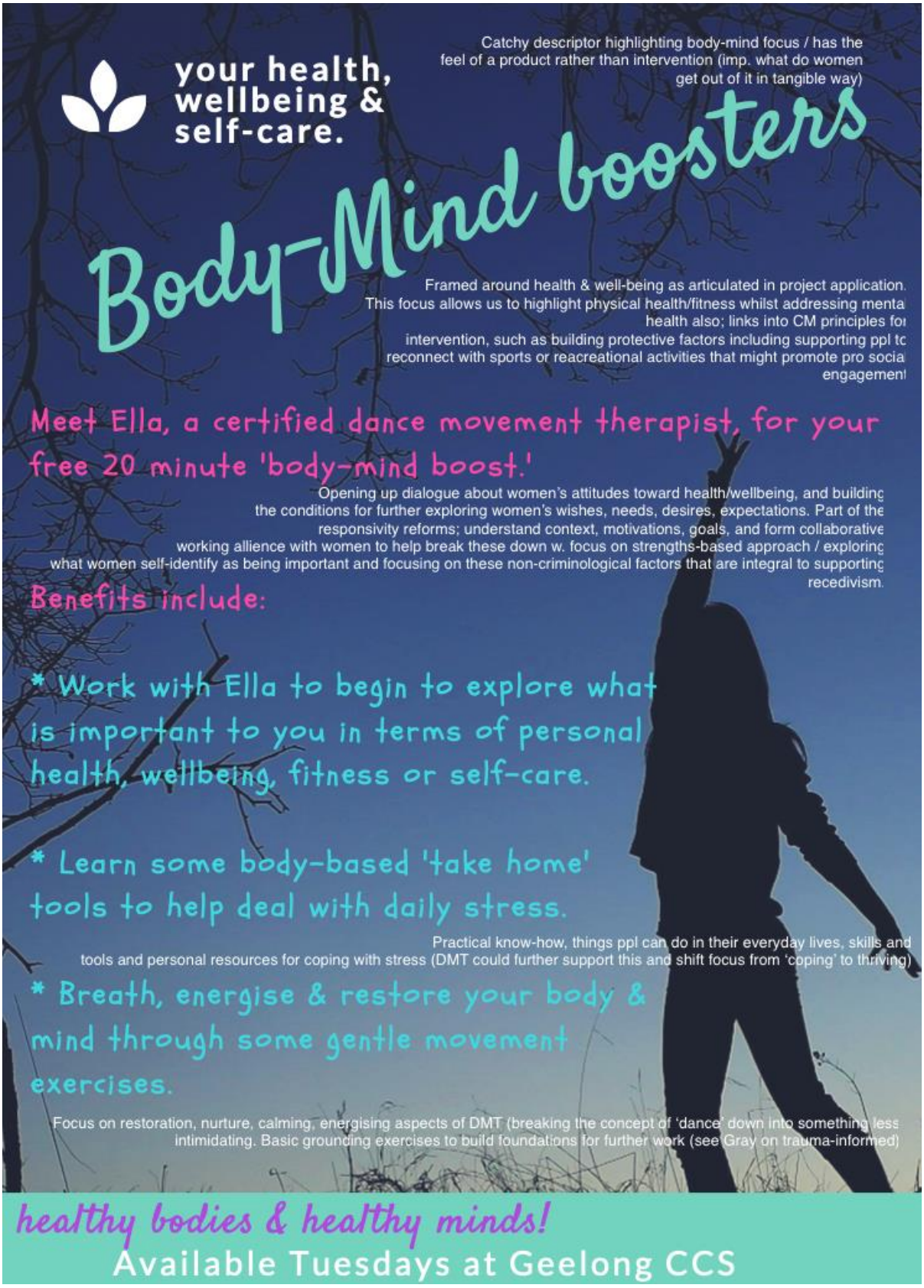
model in more depth and connect this framework to existing research in DMT/P. Drawing on Alyce's expertise and skills as an advanced case manager I learned to 'speak the language' of the system when communicating with staff at Geelong CCS. This was an important part of our recruitment strategy due to the fact that case managers acted as a bridge between myself and potential participants. Much of the work during my time at the DoJ revolved around communicating with case managers about the project itself as well as the potential benefit of DMT. While this research is not aligned with behavioural change models, it was important to learn how to couch this practice within the dominant discourse used at the DoJ *as well as* offering alternative points of view that reflected my humanistic and strengths-based approach as a therapist.

As this email to staff indicates the Body-Mind-Booster idea was taken up enthusiastically by staff at Geelong CCS. The idea behind this approach was to offer 15-minute meetings with female clients where I would introduce myself as a dance movement therapist as well as researcher. I planned to offer these sessions to anyone wishing to chat about body-mind health and the idea was that these sessions could tag onto the back of the usual case management meeting, should there be interest in what I was offering. The Working Group hoped this would be an opportunity to touch base with women who were actively expressing an interest in learning more about our DMT project. We hoped would help build relationships which would enable me to understand more about the health/wellbeing needs and desires of some of the women engaged in the justice system. Like all of my hangout (Bolger, 2013) activities at the DoJ, the intention behind this was to gain insight into the *possibilities for DMT* in this specific sociological context and to be

guided by the both the expertise of the supporting community as well as women the women they worked with.

A flyer advertising the Body-Mind-Booster sessions was displayed at the DOJ, as well as at neighbouring organisations such as Barwon Health (community mental health services), Stepping Up (community drug and alcohol centre) and the Centre for Assault and Sexual Abuse (community based services for trauma, sexual abuse and intimate partner violence).

Figure 2. Annotated flyer: Body-Mind-Booster sessions


your health, wellbeing & self-care.
Catchy descriptor highlighting body-mind focus / has the feel of a product rather than intervention (imp. what do women get out of it in tangible way)
Body-Mind boosters
Framed around health & well-being as articulated in project application. This focus allows us to highlight physical health/fitness whilst addressing menta health also; links into CM principles for intervention, such as building protective factors including supporting ppl to reconnect with sports or reacreational activities that might promote pro socia engagement
Meet Ella, a certified dance movement therapist, for your free 20 minute 'body-mind boost.'
Opening up dialogue about women's attitudes toward health/wellbeing, and building the conditions for further exploring women's wishes, needs, desires, expectations. Part of the responsivity reforms; understand context, motivations, goals, and form collaborative working allience with women to help break these down w. focus on strengths-based approach / exploring what women self-identify as being important and focusing on these non-criminological factors that are integral to supporting recedivism.
Benefits include:
* Work with Ella to begin to explore what is important to you in terms of personal health, wellbeing, fitness or self-care.
* Learn some body-based 'take home' tools to help deal with daily stress.
Practical know-how, things ppl can do in their everyday lives, skills and tools and personal resources for coping with stress (DMT could further support this and shift focus from 'coping' to thriving)
* Breath, energise & restore your body & mind through some gentle movement exercises.
Focus on restoration, nurture, calming, energising aspects of DMT (breaking the concept of 'dance' down into something less intimidating. Basic grounding exercises to build foundations for further work (see Gray on trauma-informed)
healthy bodies & healthy minds!
Available Tuesdays at Geelong CCS

Although this idea was strongly supported by staff, few clients elected to use the Body-Mind-Booster sessions during the remainder of my time at the DoJ. While some clients expressed apparent interest or desire to attend, only one woman twice attended sessions with me. In these sessions we spoke about some of her health and wellbeing desires: She described wanting to feel stronger and fitter, and wanted to take up a more challenging form of yoga. She reported to be very interested in attending a DMT workshop as she regarded this as a possible way to achieve her health goal of feeling physically stronger. She was also familiar with mindfulness[15] practice and connected this to the notion of DMT, which appealed to her interest. This client also described wanting access to trauma-specific therapy, based on both her experience of being in prison and other traumas she had endured. As part of the brief sessions, I created some wellbeing worksheets which helped to guide our discussion. We also used some some breathing exercises as part of the quick check-in, as I wanted to ensure that each session could offer a simple take-home tool for stress reduction. Despite her openness and desire to attend further workshops, I did not see her at any of the community DMT sessions that were subsequently run.

C): On-site group DMT sessions at Geelong CCS

Given the fact that neither the community-based workshops nor the Body-Mind-Booster sessions had successfully leveraged a good amount of participation, the Working Group decided to try another approach. I was put in contact with the clinical psychologist who facilitated and managed the women's psychoeducation group at Geelong CCS. This

[15] Tanhane's (2020) master thesis critically explores the practice of mindfulness in relation to CATs practice and offers some useful recommendations for practice. See reference list.

psychologist had alerted me to the fact that some of the women in her group were interested in the idea of DMT, and I was therefore invited to come and speak to the group about project. I also offered to facilitate a drop-in introduction workshop for group members. The workshop was designed to flow on from the week's psychoeducation program and I was asked to come in to the DoJ on a Friday afternoon to run the session. Despite some women expressing a desire to participate, no participation was achieved through this approach. I explore this in my arts-based response (creative writing piece) later on in in this chapter.

D): Lunchtime DMT workshops for case managers

Case managers played an important role in the development of recruitment pathways, in the sense that they provided the only point of contact between myself and potential participants. Alyce and Suse therefore invited me to run a number of lunchtime self-care workshops for staff with the hope that case managers would learn more about DMT and the potential benefits it could offer the women they work with. We expected that by educating case managers about DMT, staff members might feel more informed about the research project. We hoped that by having an experience of DMT themselves, case managers might be better equipped to communicate with potential participants about the research and DMT activities. The lunchtime workshops were run twice, and they greatly helped to build rapport between myself and the wider team of case managers. The Working Team believes that this activity had some positive impact on the recruitment process, due to the fact that some case managers felt more informed and therefore shared more information about my upcoming DMT workshops with potential participants. This approach to recruitment was associated with some degree of success.

E): Research presentation: The Stepping Up Consortium

Finally, I ran a number of presentations for a few local organisations throughout the six months leading up to the formal data production cycle. After many attempts to run a successful DMT group in the community, we eventually secured the support of one organisation, Stepping Up. This activity was successful and led to a recruitment possibility which was eventually used for formal data production. More about this organisation and recruitment is to follow shortly.

Developing enabling conditions? An arts-based reflection

Below is an excerpt from my arts-based journal. It captures some of the challenges and frustrations of the recruitment process, and highlights some of the barriers to collaboration – along with my emotional and bodily response to these constant challenges. This creative writing piece was written in response to another 'failed' attempt at engaging women. It detailed a time in which we were trying to run DMT workshops out of the Geelong CCS office with the hope of recruiting women from an existing mental health support group, sited within the Corrections office. Despite there being an interest in DMT, this recruitment approach was not successful. Following this final last attempt to recruit women through the Department of Justice itself, our Working Group made the decision to hold the actual DMT sessions away from the Departmental building itself. The depiction below provides some context as to why our attempts to engage women on-site at Community Corrections were unsuccessful:

…As I drive closer to Geelong city centre, my eyelids start to feel heavy, like sodden folds of drapery pressing down in my eyes. Tiredness pours out of me in every direction as I pull

up in front of the Department of Justice. I've been here for 5 months now, trying to find ways of engaging women as participants in this study.

As I get myself ready I notice a wringing in my stomach, a resistance in my flesh. I'm running out of ideas, running out of time…. Am I forcing my way into a system that is fundamentally resistant to my being here in the first place? Despite the incredible women behind this project and the energy, enthusiasm and support of my co-researchers, Alyce and Susan, I can't help but feel we are struggling to create the right conditions for doing this research. If this doesn't work today, I'm not sure what we'll try next. I don't want to let them down – and they sure don't want to let me down. We really want this to work, but how?

I park nearby and hop out of the car. Try to think uplifting thoughts. Maybe today they will come to the workshop? Maybe… I don't think I can endure another 'no show' but I brace myself for this possibility, nonetheless.

A heaviness swims in all my cells. As I make my way toward the imposing Departmental building I think dense, circular thoughts:

… Why is gravity falling through me in this way?

… Why am I dragging my body along with me, like a tired old dog?

… Why is showing up such a battle today, the day before, the last month or so?

… What is this resistance? I felt fine before. Fine and energised and optimistic.

"Come on, you've got this." I say to myself.

Snapping out of it, I enter the building. A greyish mood seeps off the concreate walls and infuses my being, dulling me, depressing me, instantly. In the lift, no one makes eye contact, no one speaks. Suspicion is rife in this curious little boxy space. Staff and

"offenders" travel together, in this one rickety, pokey lift. Eyes downcast, feet shuffling. Throats clear, smart phones beep and punctuate the jagged consensual silence. I'm not wearing a uniform - I could be anyone off the street. I could be here on a corrections order – why not? What sets us apart, all these bodies in the lift? Here in this elevating space we clump together, case managers, clients, me. We coagulate like injured cells, not giving anything away, boundaried, firmly clotted, closing off to the world and to each other. Soon we'll all spill out of here, pouring through the metallic doors, assuming our different identities and performing our different roles. Hierarchies will form and forge as we exit this this strange liminal place: The elevator which no one trusts.

I wait for midday to run an Introduction to Dance Movement Therapy workshop. Once again, no one attends. The women pile out the door as soon as the psych-ed session finishes, apologising for not being able to join today… avoiding eye contact… slinking away down the corridor, apart from some who almost seem embarrassed (for me?).
"It sounds really great love," one says apologetically as she bolts out the door.
"Good on ya love" say woman smiles at me slips by.
"Got to pick up my kids / meet a friend / catch the bus" others say. Sorry can't join… maybe another day??

I feel their collective urgency and have a similar urge to run out the door, down the rickety lift, out into the day, into the relieving salt air smells of Geelong city waterfront. However, I linger a moment in the therapy room, trying to actually imagine running a DMT session here. No windows, sickly fluorescent lights, barren: A sterile, impersonal space. The barely perceptible traces of this morning's group therapy process seem to linger in the

atmosphere, the room stuffy with emotional debris. No wonder they want to escape! It's a bland, imposing room: To me it feels like a cell.

"If I weren't being paid for it," says one supervisor, "I wouldn't want to be here either." She has just returned from a lengthy leave period, somewhat refreshed, but I wonder how anyone lasts in this job. From what I gather, staff burnout rates are high. "Good people doing the best they can in a worn-out system," I think to myself.

I reflect on this a lot over the next few months. When you are in that building, you become the System. You begin to think and feel differently. It's as if all the grey feelings seep into you - all the stale air; all the florescent lights; the waiting around for nothing to happen; the sudden escalations of tensions in the waiting area; the worn out coffee machine; the worn out people; the impersonal faces juxtaposed with friendly faces; the buzz and whirr of bureaucracy happening all around. It gets inside your skin, it reaches far into you and squeezes your brain and hardens your heart.

Anger, resistance, helplessness, despair: Despite all very best our collaborative efforts, it seems we've landed in the dark. A depressive loop of nothing much happening. Endless reams of red tape, obstruction, and institutionalised weariness.

I am whirring with frustration and helplessness. We've got to try something new… but what?

Third cycle of research: Trying 'something new' with The Stepping Up Consortium

As my creative writing response reveals, the DoJ building simply was not an appropriate place for a DMT group to be sited. Following this final round of recruitment attempts which were unsuccessful, Suse, Alyce, and I decided to try something different.

We discussed the need to locate a more accessible and welcoming environment: A less heavily institutionalised site within the community itself.

Suse recommended approaching a local drug and alcohol rehabilitation centre, Stepping Up and requesting use of their space for our project. The Stepping Up Consortium is a community-based organisation that supports clients experiencing drug and alcohol challenges, family violence and mental health issues. Susan recommended partnering with Stepping up and inquiring into the possibility of embedding the research study within an existing program: A six week (voluntary) rehabilitation program which includes mindfulness and art therapy services. This program, officially called Time for a Change is an intensive, non-residential day treatment program which aims to offer a safe space for people wishing to explore issues relating to substances abuse. While the program is voluntary, there are quite often women attending the group as part of a parole or community corrections order, in which case attendance is mandatory. According to my co-researchers, there would be approximately three female clients from CCS attending the upcoming Day Program We therefore focused our attention on building a relationship with Stepping Up and establishing a connection that could allow us to recruit participants through this organisation.

With the support of Stepping Up, who kindly offered us use of their multipurpose community space, we decided to offer a DMT session each Friday at 12.30pm for six-weeks. This coincided with the end of the weekly Day Program therapy sessions which concluded at 12pm each Friday. The DMT group was open to anyone engaged in the Stepping Up program, however only participants meeting the research criteria would be issued a consent form, should they wish to contribute to the study. Potential participants

therefore needed to be women engaged with Geelong CCS. Case managers at the DoJ were able to alert me as to which clients were attending the drug and alcohol program and offered to share information with their clients about the DMT sessions and research project. The DMT workshops were anticipated to be one hour long, but as a participatory project, the group would decide together how long they wished to participate in the activity. The flexibility of the research design allowed us to adapt our timeframe each week, depending on people's schedules, energy levels and other commitments such as picking children up from school. On average, each workshop lasted between 30 and 45 minutes.

Description of the research setting

Introducing the drop-in DMT group

Between May and June 2018, I facilitated six brief, drop in workshops a local drug and alcohol rehabilitation centre, Stepping Up, in the regional city of Geelong, Australia. Data emerging out of these sessions was used for formal data analysis. Of the six DMT sessions, three workshops were successful in engaging participants, and three were not. The first workshop, as well as the fourth and fifth session attracted participants, whereas the sessions in between were 'no shows.'

The group itself met three out of six times and different combinations of participants attended each time. On three occasions, there were no participants and the workshop was therefore cancelled. Overall, three women from Community Corrections attended the group at least once. Two of these women attended the group twice, and both these women (pseudonyms: Kaz and Min) agreed to be become participants in their study. Their feedback and responses from two dance movement sessions became the basis for my

formal data production. I recorded their responses in the form of written ethnographic field notes which I jotted down directly following each DMT session.

Figure 3. Slide from a conference presentation showing the multipurpose therapy space

Three other participants also joined the group, but these visitors did not meet the study criteria. Therefore, their feedback and responses are not mentioned in this study. One visitor attended all three drop-in workshops, and another attended two workshops. The final visitor was a man who attended one workshop. Although the group was designed for women, we decided as a group to include anyone who wanted to join, given that the DMT workshops we offered to all participants within the Time for a Change program.

Participants appeared to be middle aged women with no prior dance experience. Both were currently on a community corrections order, and both had at least one experience of incarceration. One woman (Min) appeared to be of white-bodied Australian background, and the other women (Kaz) appeared to be from a cultural background other than white

settler Australia. We did not discuss personal background or ethnicity in our brief sessions however so my description here is largely assumptive and inferred from what I noticed in terms of physical appearance only. Both participants spoke about hardships, particularly noting the stress of leaving prison and meeting correctional obligations and appointments.

Purpose of the drop-in group

The purpose of the drop-in group was to explore the potential health and wellbeing benefits of dance movement therapy by taking a fresh look at what participants wanted from their DMT experience. This meant taking a non-expert stance in which I sought to learn from women about how they perceived dance therapy, and what this might mean in terms of developing user-led experiences that reflect the self-defined desires, wishes and expectations of those with lived experience of criminalisation. Dance and movement activities were derived from DMT theory and practice and included warmups, movement improvisation, creative dance exploration, relaxation and breath work. A full description of activities, and theories informing each activity, is outlined within my analysis chapter, including a trauma-informed lens which was applied throughout.

Knowledge generation processes

I used an excel spreadsheet to capture my ethnographic fieldnotes following each session. Due to the brief engagement and difficulty recruiting participants, I was not able to film sessions or record workshops in any other way. I relied on my own recall and interpretation of events and accordingly, have emphasised interpretive research methodologies throughout my thesis in order to highlight the partial, open and situated nature of my embodied and embedded position as researcher/practitioner. Ethnographic descriptions were recorded and formatted under the following tabular headings:

- **Field notes** (a general summary/overview of who was there and what happened);
- **Movement observations** (my observations of movement behaviour informed by a LMA framework);
- **What we did** (description of activities and how people chose to participate or not);
- **Why we did what we did** (reflecting on choice of activities and approaches based on theoretical perspectives in DMT);
- **Feedback** (participant responses: Either during session or afterward, during 'chat time');
- **What I learned from this experience** (reflecting on what each participant taught me about DMT);
- **Reflexivity/embodiment** (observing my own embodied responses through written notes, and once, through a video movement response as described in my analysis chapter);
- **Separate columns for emerging themes and further research questions** (each theme arising in the session informed my approach in the following workshop and was later synthesised within my analytic process, detailed in Chapter 6 (Finding and Analysis).

Describing knowledge generation: Analysis processes

Starting with raw ethnographic data noted in my excel sheets, I extracted key concepts and grouped them according to a term or phrase. These groupings gave way to main themes, which I then used as the starting point for my discussion. Themes were derived from participant feedback and responses and related to the perceived benefit or value of DMT, as articulated by the women attending drop-in sessions.

This approach was emergent and interpretive, meaning that I did not use a pre-determined protocol for making sense out of data. Drawing from ethnographic methodologies I employed Geertz's (1973) method of "thick description" by richly describing what I observed and noticed, and I recorded these impressions in my ethnographic fieldnotes. As detailed in Chapter 2, thick description is a method inspired by a literary approach to cultural anthropology. It supports the weaving of metaphor and poetic description into ethnographic studies in order to help bring the research context to life in a more visceral, creative way.

I expanded on Geertz's methodology by incorporating my own embodied insights and somatic responses into the research process, therefor blurring the boundaries between 'observer' and 'observed.' In terms of analysing data, I used an iterative process to study the findings and sought to work dialogically with participants, checking my interpretations against their feedback at each meeting. As our engagement was brief however, I did not have extensive opportunities to confirm or contrast my own point of view in relation to research participants and have emphasised my epistemic standpoint throughout this thesis as partial, highly subjective and open to further (re)interpretation.

I have made clear methodological decisions, particularly within my analysis chapter, to emphasise my interpretive, located, subjective and open-ended approach to data analysis. This aligns with a critical, feminist and constructivist view of knowledge and points toward the partial and open-ended nature of knowledge generation. By integrating my own reflexive movement responses and bodily responses into the analytic process, I aim to present epistemological findings in such a way as to offer a transparent and located perspective which somewhat problematises the very nature of doing shared research.

In order to highlight the partiality of my analytic meaning-making processes, I have used literary conventions in combination with embodied aesthetic inquiry (Hervey, 2012) to illuminate the limitations of my own interpretivist approach. In other words, my attempt to represent participant voice as authentically as possible inevitably circles back to my own subjective interpretations and readings of the data. Informed by contemporary approaches in anthropology I have used reflexive writing and performative methods within my analysis process to foregrounded what Markham (2016) calls the "deliberately vulnerable" character of interpretivist methodologies. This aligns with feminist philosophies and other critical analytic methods which celebrate the multiple, layered and often contested nature of knowledge production. By situating my own experiences and making transparent my personal ontological, axiological and epistemological challenges within the research process, I have sought to develop what Ahmed calls "sweaty concepts" (2017): Theory that emerges out of a practical experience, is shaped by bodily and intuitive insight, and communicates the corporeal dimensions of tacit knowledge.

Trustworthiness of findings

I have used an autoethnographic framework to consistently locate myself within the study and to illuminate a contextual approach to therapy which places emphasis on culture, collaboration and local context (Rolvsjord et al., 2005). This contextual approach in therapy and qualitative health research reflects an embedded and embodied approach in which the personhood of the researcher is written into the text. The participatory principles guiding this research are reflective of a democratic approach which values diversity and plurality of knowledge types; this methodological approach therefore aligns strongly with a contextual approach to therapy.

Unlike quantitative research which in which academic rigour is assessed according to the level of objectivity achieved in the study, interpretivist research methodologies can be best reviewed in terms of an embedded, embodied framework. In contextual frameworks, researchers and participants are seen as co-contributors. Reciprocity, exchange and mutuality are important factors of evaluating research rigour and trustworthiness in participatory projects.

I have used a collaborative research design which also aligns with principles of narrative ethnographic fieldwork. Narrative ethnography can broadly be assessed in light of its contribution to the field as well as aesthetic merit, reflexivity, overall impact, and emphasis on lived reality. Trustworthiness, from a participatory perspective refers to the degree in which a project is collaboratively executed. Furthermore, a trustworthy study should at all times be concerned with the task of addressing issues of concern that are self-identified by communities in which the study takes place (Reason, 2006).

The self-aware principles of autoethnography align strongly with the need for trustworthiness and reflexivity within participatory research. Reflexivity is employed to help ensure the study remains as dialogical, responsive, iterative and collaborative as possible and at the same time offers a situated platform through which to communicate the research findings. In the context of health studies, autoethnographic writing can also shed new critical awareness around power relationships and place a significant amount of focus on perceived binaries in health care settings, such as patient –therapist and client-practitioner (Denshire, 2014, p. 840). As a feminist-informed study, another important criterion for the assessment of research rigour and trustworthiness is the centring of

women's experiences (including my own) throughout the study, from inception of the idea right through to the representation of findings.

Ongoing researcher reflexivity

The use of reflexivity is an important aspect of qualitative research and is a hallmark of participatory research as well as critical and feminist approaches. According to Finlay (2002a) reflexivity can be utilised as a tool for examining the position and impact of the researcher, as a way of promoting insight through exploring personal responses and interpersonal dynamics. This is used to evaluate the research process including methods and outcomes (Finlay, 2002a, p. 532). The challenge of reflexivity, states Finlay (2002b) is to "use personal revelation not as an end in itself but as a springboard for interpretations and more general insight" (p. 215).

Reflexivity has been used in this study to connect the personal with broader interpretations and meanings, to examine power relations and disrupt taken for granted binary notions, to unearth hidden assumptions and beliefs, and to elicit intuitive responses to the data. Reflexivity is also a measure of empirical trustworthiness in participatory research and is closely associated with openness and transparency. I have used embodied approaches to reflexivity as a methodological resource to aid decision making processes. In participatory projects such as this, reflexivity is important as researchers are expected to interrogate the question of "who ultimately benefits from the actions undertaken" (Herr & Anderson, 2005, p. 4). This includes a focus on the role of the researcher, including the thoughts, beliefs, biases, expectations and values that implicitly inform the sorts of questions asked, and the data gathered.

Summarising the methodological approach

As an emergent research design my methodological approach has shifted slightly throughout the lifespan of this project in direct response to arising findings and emerging research trajectories. An action research approach was used to guide the process of recruiting a partner organisation and developing a Working Group, which was used to help build the conditions through which recruitment became possible. This was undertaken in partnership with Susan Dandy and Alyce Morton from Geelong CCS. After establishing the most likely approach for recruiting research participants, including finding a community organisation in which we could embed the DMT group, our approach ceased to follow obvious action research cycles. As co-researchers, Suse and Alyce had fulfilled their formal role in the project (i.e. creating the structural conditions through which enact the study), we therefore opted to cease our regular meetings. This enabled me to focus on running the DMT research group and collecting data. A feminist-informed participatory approach was then used to guide the data production, with critical perspectives guiding the emerging theoretical knowledge. This involved centring the voices and experiences of participants and using embodied reflexivity to examine my own responses, assumptions, beliefs and biases in response to the findings as they became clear. Ethnographic field notes were kept and used for the data analysis process. An interpretive approach was taken to data analysis and findings are communicated in a way that reveals an embedded and embodied approach, in alignment with participatory research as well as feminist and other critical epistemological standpoints.

This process of engaging women in the justice system and their supporting communities has taught me the value of a participatory approach, specifically in regard to

my own ‘outsider’ status. Through the organisational and structural support of co-researchers, we were able to develop a way of embedding a DMT project in the existing network of services that engage with criminalised women in different, often intersecting, ways. Many barriers and challenges arose throughout this process, particularly in regard to engaging and recruiting women. I explore this throughout my thesis from a critical perspective in order to illuminate some of the systemic and structural inequities faced by women in the justice system.

Finally, it is my intention that embodied reflexivity, coupled with an ethnographic and critical approach might help to disrupt some of the dominant narratives within criminal justice. Furthermore, perceived binaries in DMT discourse such as client-therapist and researcher-participant are critiqued throughout my dissertation. Methodologically, my approach takes up the call for more participatory research projects which engage criminalised women through participatory research, centring their experiences and being guided by their expertise, voices and expectations.

Chapter 5. Systematic literature review: Using "crystallization" to construct a multigenre review of the literature

In dance performance terminology, this chapter functions as a *triple bill*: A presentation of three distinct styles which come together to create a singular show or performance. In the dance world a triple bill often refers to three separate performance works which are presented within the same show. This ranges from more classical genres such as ballet, to earthy and interpretive contemporary dance, through to experimental modern choreography that defies traditional aesthetics of both ballet and contemporary dance. The latter can be quite abject and political, shining a light on social issues and using the arts to critique the status quo.

Using the idea of the triple bill as an analogy for the way in which I have constructed this chapter, I present three different papers in this chapter which are focused around further exploring the literature. Each paper is written from a different epistemological perspective, and in doing so, each paper pursues slightly different aims. The first aim is to present a literature review to support the use of DMT/P in forensic settings in a way that appeals to the objectivist logic of the medical model. This review is informed by recidivism theories which emphasise cognitive-behavioural change at the level of the individual. I have critiqued this model elsewhere in my thesis, and yet I turn toward it now in order to produce a more objectivist style literature review which is aligned with the paradigm of practice in which my research has taken place. My decision to include a more objectivist perspective in this chapter has been informed by my collaborations with Geelong CCS and reflects a participatory approach. I have listened to the views of key stakeholders and sought to produce a report to meet a specific interest of my co-researchers

who have expressed a desire to continue to advocate for the use of DMT within the Australian prison system. This has required me to position findings from the DMT/P literature in relation to the risk-need-responsivity (RNR) model which is the predominant theory used in criminology to support recidivism.

The second paper is also a type of literature review, and a more qualitative interpretation of the literature. I have used a more interpretive approach to review the literature in this paper which complements and expands on the findings in Paper 1. This second review is informed by principles drawn from humanistic psychotherapy, such as the role of person-centred therapy. It reflects some of my practitioner beliefs and values which contrast to the more behavioural perspectives stated within the initial review. Importantly, this qualitative review of the literature aligns strongly with a commonly recognised model for community rehabilitation, known in criminology as the Good Lives Model (GLM). This framework emphasises creativity, self-expression and connection as key elements of post-release support and introduces the notion of thriving – and not simply surviving – the post-release experience. The GLM is commonly used in combination with the RNR model in correctional contexts. Whereas the RNR model seeks to reduce risks associated with criminal activity and respond to needs, such as support around substance abuse, the GLM seeks to build protective and is a more strengths-based and community oriented in its theoretical approach.

The third paper presents a critical, activist and embodied reflection on the dominance of objectivism within the criminal justice sector, describing some of the challenges I have experienced as a feminist-informed, participatory researcher. This discussion is relevant to anyone interested in the ways in which power and privilege show

up in practice, and I extend on this discussion throughout my thesis. As Cantrick et al. (2018) argue, social justice informed DMT/P means expanding the role of the practitioner to that of a community activist who works to confront the structural and systemic impacts of oppression by remaining vigilant to the ways in which oppressive frameworks are perpetuated and sustained (p. 198). This final paper includes an arts-based response to further amplify the visceral, personal and political implications of doing DMT work in a hierarchically structured and institutionalised setting, such as the criminal justice sector.

Methodological approach

Methodologically, this approach of blending different viewpoints is informed by the qualitative framework of crystallization[16] (Ellingson, 2017). Crystallization offers a creative and empirical approach to knowledge production, where a range of different analytic processes are woven together in order to understood and articulate data in a range of different ways. In a PhD project such as this, which spans both academic and community expertise, I consider it useful to knit together contrasting viewpoints to help illuminate the process of negotiation which underscores collaborative research attempts. Working dialogically with stakeholders, whilst remaining situated in a critical standpoint - is a difficult, confusing and often humbling task. I have tried to make this chapter as clear for the reader to follow as possible, without demanding that the audience slip and slide between multiple viewpoints at once. As such, I suspend my critical voice until the final paper where I explore the dominant narratives (Hadley, 2013) which shape 'best practice' in criminology and related sectors.

[16] I am using the US spelling as I am referring to a specific methodology described by Ellingson.

Each of these papers can be read as stand-alone commentaries and are likely to be published as articles, independently of one another. Overall the chapter offers a polyvocal response to the literature and recognises the distinctly participatory nature of producing knowledge from a variety of perspectives, some of which represent preeminent discourses, and some which reflect more a more critical positioning.

Paper 1. A descriptive systematic review of the literature relevant to DMT/P, criminology and the overlapping areas of mental health, intimate violence and drug/alcohol use

In this paper I seek to aggregate findings from relevant literature which evidences the use of DMT/P to support recidivism. Findings from DMT/P studies are then linked to the specific aims and goals of current best practice within the field of criminology. Recognised criminological frameworks and paradigms are used as the basis for this analysis, as recommended by co-researchers, Susan and Alyce. In dialogue with Suse and Alyce, I have sought to make clear links between findings from the literature and the main objectives and goals of rehabilitation, as articulated by the Victorian State Government. This aspect of our research together illustrates a collaborative approach in the sense that I have sought to expand my thinking beyond a critical stance in order to respond to community concerns and to provide outcomes relevant to those involved in the study.

In this context, evidence-based practice is the dominant lens employed for the evaluation of therapeutic programs, and I have needed to soften my critical stance in order to produce a variety of evidence compatible with the predominant ideas and expectations that shape this sector. While I have chosen to utilise the language of objectivist,

reductionist frameworks to advocate for the use of DMT/P within this paper, I have done so in a located, strategic way. As a participatory researcher, I have listened to community expertise and have sought to bring together findings which may help make DMT/P more visible to key stakeholders, based on the recommendations of community partners. While the approach taken in this paper does not reflect my own onto-epistemological stance as a researcher, I have included this review in my thesis upon the recommendation of co-researchers, whose views and expertise has been essential throughout this research. Producing tangible outcomes for co-researchers is key to participatory research projects and I intend to publish and share this literature review with my co-researchers who have indicated this to be a valuable research for themselves and their team of case managers, parole officers and court managers.

Introduction

Imprisonment and release, as well as time spent serving a community correctional order, are typically difficult and chaotic experiences for many people engaged in the justice system (O'Grady and Tuastad, 2013). For women in particular, the challenges are complex and manifold and often involve difficulties stemming from drug and alcohol usage, intimate partner violence and/or mental health concerns. These three areas often overlap with criminal justice sentences and have been identified by staff at Geelong CCS as key interrelated factors experienced by many female forensic clients.

In order to address these intersecting issues, this review of the literature focuses on the use of DMT/P in within criminological contexts as well as within alcohol/drug rehabilitation, family violence settings and mental health contexts. While the literature

under review includes male and female[17] populations and groups, the overarching purpose of this review is to explore how DMT/P might be a valuable resource in specifically helping to support women engaged in the justice system who are likely be faced with one or more of the above challenges.

An earlier literature review on dance movement psychotherapy (DMP) within forensic settings (Batcup, 2013) focuses on the use of DMP within prisons and other medium secure forensic units. This previous review also includes literature relevant to mental health, alcohol and other drug use (AoD), and intimate partner violence, presumably building on a similar understanding of key intersecting issues. According to Batcup, DMP works symbolically with clients to help people explore and gain critical distance from bodily-felt feelings and emotions. Through therapeutic dance and movement, Batcup argues, negative emotions and behaviours may be transformed into more pro-social attitudes and behaviours which may help reduce recidivism.

This chapter seeks to build on Batcup's earlier review in order to gather together further evidence from an objectivist perspective regarding the efficacy of DMT/P for this sector. The literature reviewed supports Batcup's suggestion that DMT/P may help to reduce recidivism and should therefore be considered a specialist assessment and treatment method within forensic settings (p. 5).

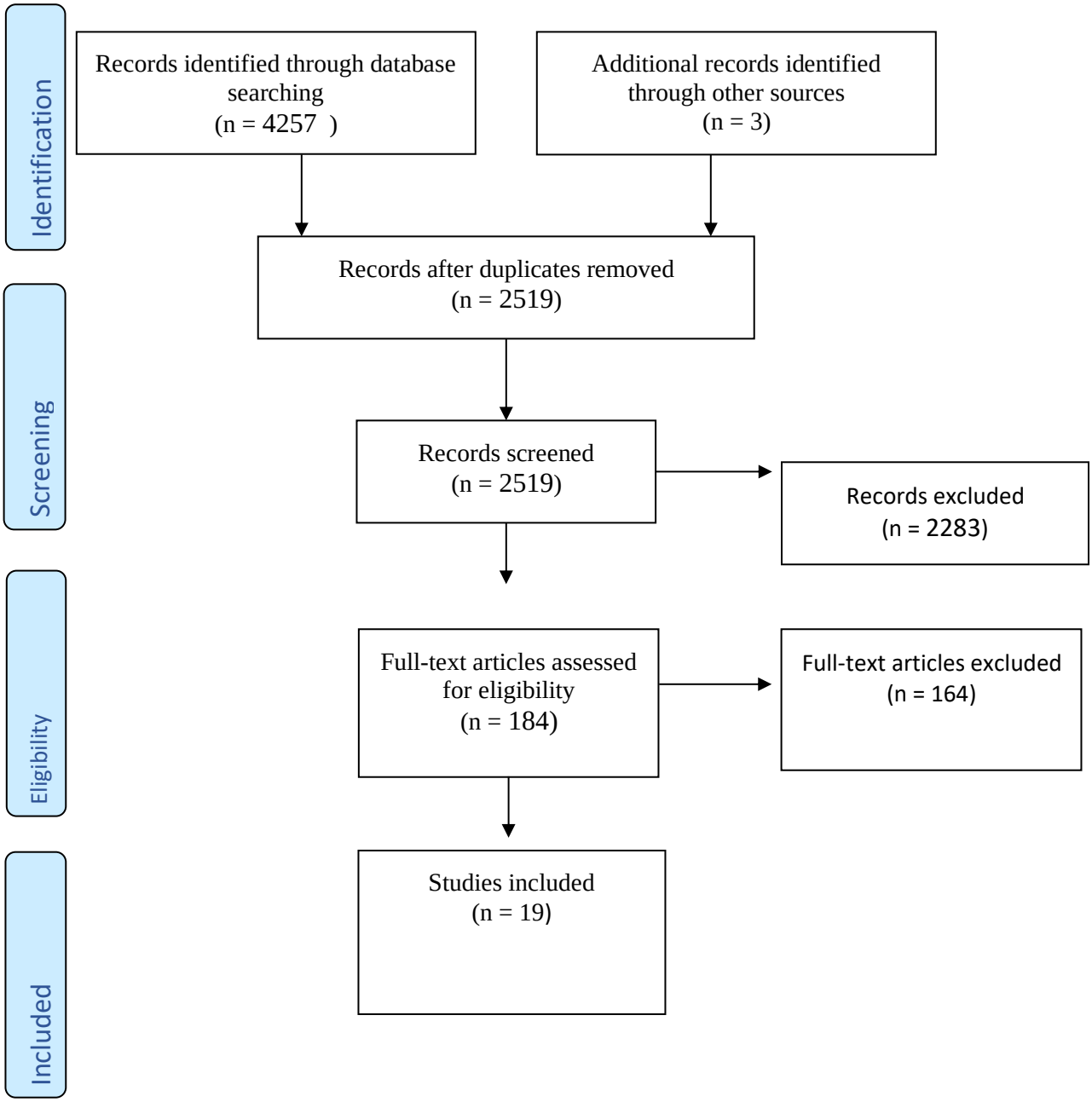
Current policies and guidelines within criminology emphasise evidence-based practice, and this systematic review has been compiled in order to communicate empirical

[17] There is a need to address gender binaries in the criminal justice system and further research would be of value. From a critical perspective, research is needed in order to disrupt and challenges these entrenched dualisms which perpetuate institutionalised violence against gender diverse peoples.

findings related to the use of DMT/P within correctional environments as well as within contexts associated with the interconnected areas of mental health, AoD, and intimate partner violence.

A PRISMA diagram (following) provides an overview of the literature searched for the purposes of this review. This resulted in a total of 19 articles included om the review as per the selection criteria:

Figure 4. PRISMA flow diagram



From Moher, D, Liberati, A, Tetzlaff, J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Review and Meta-Analyses: The PRISMA Statement. PLoS Med 6(7): e1000097 doi: 10.1371/journalpmed100009

Aim

To provide a descriptive systematic review of DMT/P literature relevant to the interrelated fields of criminology, mental health, drug/alcohol addiction and intimate partner violence. Furthermore, to link findings from the literature to criminological frameworks in order to evidence the use of DMT/P as a recidivist strategy.

Research question

The overarching research question for this review is: What are the findings relevant to dance movement therapy (DMT) and/or dance movement psychotherapy (DMP) within the fields of criminology and the overlapping areas of mental health, AoD, and intimate partner violence?

- Sub question: How might these findings support the policy goals and rehabilitation aims relevant to this sector, as articulated by Corrections Victoria?

Methods

Study design

This review is informed by an objectivist approach to systematically reviewing the literature. Both qualitative and quantitative studies were included in this review. Systematic literature review methods were informed by the PRISMA checklist. The PICO framework was also used as a basis for data extraction.

Studies relating to the use of DMT/DMP within the following contexts were examined: Criminology, mental health, drug and alcohol use, and intimate partner violence. Only studies which clearly stated either DMT or DMP as an approach were included.

Systematic Review Protocol

Inclusion/exclusion criteria

- English language only
- Uses specified methodological design to address clearly defined research question
- Includes participants of all ages
- Includes participants located in context of criminology, mental health, drug and alcohol rehabilitation or family violence
- All genders and ages (client population)
- Utilises DMT or DMP approach, and is facilitated by registered DM therapist
- Full-text locatable by the researcher

Search strategy

The following databases were searched: Academic Search Complete, CINAHL, Cochrane Central control trial register and Cochrane systematic reviews

EMBASE, ERIC, Medline, PsycINFO and Sportdiscus. The cut-off date was 7th of January 2019, with no cut of limit for earlier studies.

Search terms

dance therap* or dance movement therap* or dance movement psychotherap* or dance psychotherap*

Data analysis

Abstracts were scanned against the inclusion criteria, and full-text articles selected. This process is depicted in the PRISMA diagram, provided in Figure 4.

Categories for data analysis included:

- Research focus
- Population
- Design
- Intervention
- Methods (data production)
- Findings

Results

5 articles where included from criminology, 12 from mental health, 2 from AoD, and 0 from intimate partner violence. In total 19 articles matched the selection criteria. 4 of which were qualitative studies and 15 quantitative research. Practice observations, practitioner reports, and other forms of non-empirical research were not included in the systematic review according to inclusion criteria. Practice observations are however summarised later in this chapter (see Paper 2).

Table 3

Systematic review of findings

DMT/P & criminology = 5 studies						
Author/year	**Research focus**	**Population**	**Design**	**Intervention**	**Data collection**	**Results**
Koch et al. (2015)	Evaluate whether a combined dance & drama therapy intervention is effective for emotion recognition and regulation, increase in body awareness, reduction of aggression, development of empathy and/or improvement of interpersonal relations or participants	Male inmates n = 47	Pilot study, with a pre-/post-test waiting-group design	Dance/movement and drama therapy-based training in a workshop-format	Self-report questionnaire and implicit-association test (IAT)	Increase in body awareness and social competence, experienced distance to their own aggression, and experienced a higher degree of closeness to the group and trainer (all important in violence prevention). No changes occurred on anger and on explicit as well as implicit aggression measures.
Koiv, K., & Kaudne, L. (2015)	Explore the impact of CATs including DMT on young women	Young females in forensic setting	Quasi-experimental design; intervention-control group	Integrated arts therapies	Strengths and Difficulties Questionnaire (SDQ) and a modified	Statistically significant reductions in frequencies of aggressive behaviour and emotional & behavioural problems;

	in a correctional institution.	n = 29 Ages 14-17	pre-test/post-test design		Behavior Checklist (BC)	increase in pro-social behaviour.
Meekums, B., & Daniel, J. (2011)	Exploring efficacy/effectiveness; or of the nature and experience of arts practice with offenders.	Women and men of different ages in forensics settings	Literature synthesis	Arts and arts therapies (includes reviews on DMT)	Systematic review and meta-analysis approaches	Arts and arts therapies found to be associated with improvements in arousal levels, emotional literacy, and quality of life. *No data specific to DMT offered, however. More generalised (creative arts therapies practices).
Smeijsters, H., & Cleven, G. (2006)	Explores the use of arts therapies in reducing recidivism. The aim was to develop treatment methods with a sufficient amount of clinical trustworthiness	Arts therapists working in forensic settings	Qualitative, naturalistic inquiry	DMT as well as drama, music, art.	Semi-structured questionnaires, interviews and focus groups	Responses from practitioners indicates that the methods used in DMT are geared toward working with aggressive behaviors on a bodily level by allowing clients to experience the somatic sensations linked to destructive behaviors and finding alternate ways to express oneself through movement.
Smeijsters, H., Kil, J., Kurstjens, H., Welten, J., &	To present a treatment theory (i.e. practice-based research) which explains	Young offenders in secure care setting	Naturalistic/ constructivist research methodology in	DMT as drama, music, art.	Open interviews, group techniques, Delphi	Practitioner responses suggest DMT is used to support self-image and emotions (both core problems

Willemars, G. (2011)	how arts therapies target and help transform risk factors into protective factors		combination with grounded therapy methodology and action research principles		techniques and participatory observation.	linked also to protective factors). Helps to express, regulate and discharge anger and aggression.
DMT/P & alcohol/drug use = 2 studies						
Fisher, P. (2005)	Exploring experiential learning in DMT	Clients in addictions recovery	Qualitative, ethnographic study	DMT	Observations, a research diary and in-depth interviews	Healthy escapism; getting out of head and into body; inducing altered mind state without the use of drugs; safely losing inhibitions; learning from within; self-expansion; accessing creative play; freedom of expression (identified by clients as products of DMT).
Reiland, J. D. (1990)	Examine changes to women's perceptions of self, other and environment through DMT	Women, all inpatients of a short-term (four to six weeks) alcoholic unit of a private psychiatric hospital. n = 4	(Not clearly stated)	DMT	Drawing-of-the-Human-Figure Test.	Improved self-perception occurred (but very small trial size).
DMT/P & mental health = 12 studies						

Barton, E. J. (2011)	To evaluate a combined DMT and yoga-therapy intervention focused on self-regulation and self-awareness.	Outpatients in psychosocial rehabilitation w. severe mental health challenges n = 8 (ten people participated, 8 consented to being part of the study).	Formative evaluation, qualitative	DMT and yoga-therapy	Qualitative methods including interviews, surveys, and verbal group feedback. Includes observations from clinical staff as to changes in participant behavior & skills	Improved pro-social behaviors, stress management, and communication skills.
Brooks, D., & Stark, A. (1989)	To measure affect changes following DMT intervention	Hospitalised psychiatric clients n = 40	Pilot study with control group	DMT	Multiple Affect Adjective Checklist (MAAC)	Decrease in depression and anxiety.
Fenner, P., Abdelazim, R. S., Brauninger, I., Strehlow, G., & Seifert, K. (2017)	To evaluate evidence for DMT and other arts therapies and build	Clients with mental health disturbances	Literature review evaluating RCT studies across different arts therapies	DMT (also includes music therapy RCTs)	Evaluative review	No evidence for or against the effectiveness of DMT in treating patient's depression (or dementia). DMT shown to be effective in improving negative psychotic symptoms of schizophrenia and reducing negative affect and anger control in people experiencing psychosis.
Kiepe, M. S. Keil, T. (2010)	Assess the effects of dance therapy for	Clients with social, physical or psychological impairments	Systematic literature review (RCT studies)	DMT	Systematic review methods	Some evidence that DMT is beneficial for people with depression, including decreasing psychological

	adults with mental and physical illnesses in comparison with standard care and other types of intervention					distress and changes in neuro-hormones.
Kiepe, M.-S., Stockigt, B., & Keil, T. (2012)	Measure the effects of DMT and ballroom dance on adults with mental and physical illness compared with other standard treatment	Population included clients with depression as well as other mental & physical health challenges	Systematic literature review (RCT studies	DMT; ballroom dance	Systematic review methods	Psychological distress was reduced by DMT for clients with depression.
Koch, S. C., Morlinghaus, K., & Fuchs, T. (2007)	Investigation of specific effects of DMT on psychiatric patients with depression	Psychiatric clients with additional diagnosis of depression n = 31	Three-group repeated-measure design	DMT (circle dance); music; exercise bike	Post-test self-report	Dance group showed less depression ($p < .001$) and more vitality ($p < .05$) following intervention. *Motivation, coping, strength, energy and enjoyment increased, while depression, lifelessness, anxiety, tension and tiredness decreased.

Koch, S., Kunz, T., Lykou, S., & Cruz, R. (2014)	Evaluation of effectiveness of DMT and the use of dance for the treatment of psychological problems	Evaluated 23 primary trials n = 1078	Meta-analysis	DMT (and some dance trials)	Meta-analysis methods	DMT and dance are effective for increasing quality of life and decreasing clinical symptoms such as depression. Particularly good results for the reduction of anxiety. Increase in subjective well-being, positive mood, affect, and body image.
Kuettel, T. J. (1982)	To compare the effects of participation in a DMT group with a control	Students of psychiatric nursing n = 17	2x pilot studies	DMT	Self-report (Feelings Questionnaire) to measure affective change	DMT group reported fewer feelings of anxiety and depression, and greater feelings of affection, confidence and somatic distress.
Mala, A., Karkou, V., & Meekums, B. (2012)	Mapping of literature in order to ascertain whether or not there is strong literature around the effectiveness of DMT for depression	Nine studies evaluated	Scoping review	DMT	Scoping exercise	Need for more evidence-based literature on DMT and Depression.
Martin, L. et al. (2018)	Exploring efficacy of	Includes six DMT studies		DMT or dance	Systematic review methods	Significant reduction of stress signs or stress coping

	creative arts therapies in stress Prevention and stress Management	(plus other arts therapies) n = 430	Systematic literature review	interventions; also music therapy & art therapy		abilities.
Meekums, B., Karkou, V., & Nelson, E. A. (2015)	To examine the effects of DMT for depression with or without standard care, compared to no treatment or standard care alone, and compare the effectiveness of different DMT approaches.	Three DMT studies n = 147	Systematic literature review	DMT	Systematic review methods	May be beneficial but no reliable evidence of effect of DMT on depression.
Punkanen, M., Saarikallio, S., & Luck, G. (2014)	To explore whether short term DMT sessions might help decrease depression and anxiety	Clients with depression n = 21	Pre- and post-test design	DMT	Psychometric questionnaires	Short-term group form of DMT intervention may help people with mild, moderate or severe depressive episodes and improve their level of depression as well as comorbid anxiety.

Findings

The results presented in Table 3 were further examined through a process of deductive thematic analysis. A summary of key findings associated with the use DMT is presented below.

DMT/P and forensic literature

Encourages pro-social behaviour

A pilot study by Koch et al., (2015) provides evidence that DMT/P may help to improve social competency. Another quasi-experimental study similarly reports improved pro-social behaviours following an integrated arts therapies intervention, of which dance movement therapy was one modality used (Koiv & Kaudne, 2015).

May help decrease anti-social behaviour (aggression & violence)

A decrease in episodes of aggressive behaviour are evidenced in Koiv & Kaudne's study (2015). Another study reported increase in social competence and body awareness, as well as improved capacity to gain distance from aggressive behaviours. According to the authors, this is considered critical in violence prevention (Koch, et al., 2015). A grounded theory study explored treatment methods based on clinical evidence, suggesting that DMT/P can be used to help clients find alternate ways of expressing feelings related to strong body states through movement (Smeijsters & Cleven, 2006). More studies exploring this theory are needed. DMT/P has also been used in a forensic setting with young people and has been identified as a useful tool to help express and discharge anger and aggression, leading to improved emotional regulation (Smeijsters et al., 2011).

Supportive of mental/emotional wellbeing and improved quality of life

In one systematic review regarding the efficacy of arts therapies with forensic clients, arts therapies (drama, music, dance, art) were associated with improved arousal levels, emotional literacy and increased quality of life. While DMT/P was discussed, clear evidence for the modality was presented in this study (Meekums & Daniel, 2011). DMT/P has also been associated with supporting emotional regulation as well as self-image in young people in the justice system (Smeijesters et al., 2011).

DMT/P and alcohol and drug addiction

In a qualitative, ethnographic study Fisher (2005) found DMT/P to help support clients in an alcohol recovery program in various different way. A thematic analysis reveals that DMT/P may support clients to enter into a healthy sense of escapism without the use of drugs, where creative play and freedom-of-expression help to create an alternate sort of high for those seeking escapism. Clients also reported a feeling of self-expansion, a sense of learning from 'within' and identified with the idea of getting 'out of the head' and into the body. In another study, Reiland (1990) explored changes in self-perception through DMT/P. This study points toward improvements in women's perceptions of self, other, and their environment. These findings are supported in this study with reference to attachment theory. The study was small in scale but suggests that DMT/P can assist in improving self-perception and therefore help create healthier attachments in women with alcohol abuse challenges.

DMT/P and mental health

Reducing symptoms of depression and/or anxiety

Two studies suggest evidence regarding the use of DMT/P in reducing depression or symptoms of depression in populations of different ages (Brooks & Stark, 1989; Kiepe & Keil, 2010). These studies include one pilot study with control group (Brooks & Stark, 1989) and one meta-analysis of RCT studies (Kiepe & Keil, 2010). In a systematic review on DMT and depression, Meekums, Karkou & Nelson (2015) found DMT/P to be potentially beneficial in treating depression, yet due to the small number of studies reviewed and low quality of evidence these authors call for further research. A modest handful of other studies include positive results for DMT, anxiety and depression, with evidence to support reductions in these mental health issues following the use of a therapeutic dance intervention (Koch, S. C., Morlinghaus, K., & Fuchs, 2007; Koch, Kunz, Lykou, & Cruz, 2014; Kuettel, 1982; Punkanen, Saarikallio, & Luck, 2014).

Stress reduction and anger control

A review of literature relevant to creative arts therapies and stress management also supports the idea that DMT/P as well as other arts therapies can significantly aid in the reduction of stress signs and support stress coping abilities (Martin et al., 2018). A formative evaluation by Barton (2011) similarly found DMT/P to improve stress management as well as strengthening pro-social behaviors and communication skills. Another study reported encouraging results in interpersonal competence (Koch, Morlinghaus, & Fuchs, 2007). This same study reported other positive findings such as increase in quality of life, enhanced positive mood, affect, and improved body awareness. A literature review also provides evidence of DMT/P improving psychotic symptoms in schizophrenia and anger control in people experiencing psychosis (Fenner et al., 2017).

DMT/P and family violence

No studies met the inclusion criteria for this section.

Linking the findings to the criminological risk-need-responsivity framework.

The criminal justice sector focuses on a Risk-Need-Responsivity" model (Corrections Victoria, 2016a, 2016b). This is a framework used to better understand risk factors, which are then targeted through careful case management. The following section will explore commonly regarded risk factors contributing toward offending before going on to link research findings with these areas of risk and needs management.

According to professional guidelines, there are thought to be eight central factors which are understood to lead to repeated criminal activity (Corrections Victoria, 2016). These key areas are of the highest priority for correctional workers, especially case managers, to consider when planning an intervention. The central risk/need categories, according to professional guidelines, include criminal history, anti-social personality patterns, pro-criminal attitudes and thoughts, pro-crime associates, family/partner relationships, lack of pro-social leisure/recreational activities and substance abuse (Corrections Victoria, 2016a, 2016b). These core concerns are known as "criminogenic needs" and are considered to be "problem areas that are changeable and so can be targeted to reduce the risk of reoffending" (Corrections Victoria, 2016b, p. 5).

Appropriate supports and referrals are sought by case managers to help reduce these risk factors. In Table 2 some additional risk factors are presented. These are referred to as "non-criminogenic needs" (Corrections Victoria, 2016b, p. 7 within the professional guidelines. These factors include accommodation or employment possibilities, practical issues such as transportation and childcare, and/or challenges to physical health, emotional

health and psychological wellbeing. Correctional staff will usually refer clients to a diverse range of support services to help address these needs.

Table 2 illustrates clear links between DMT/P outcomes and criminogenic and non-criminogenic needs. Through a process of deductive categorisation, the data suggests that DMT could support at least 4/8 core risk-and-need factors identified by Corrections Victoria. The evidence also includes a strong argument for the use of DMT/P in addressing non-criminogenic concerns, especially mental health challenges and in particular, those relating to anxiety and depression.

Table 2

Linking DMT/P outcomes to the risk-need-responsivity model

Case Management Goals	**Empirical research from DMT/P studies**
8 criminogenic needs **(risk factors)**	Using DMT/P to address risk and need factors
1. Criminal history	N/A.
2. Anti-social personality pattern	DMT/P can support clients to gain a sense of distance from their own aggression and deepen self-understanding through improved bodily awareness (Koch et al., 2015). DMT may help to reduce episodes of aggressive or violent behaviour (Koiv & Kaudne, 2015) in forensic populations and can be used for anger control in psychosis (Fenner et al., 2017). Furthermore, the use of Motivational Interviewing (MI) can be integrated into DMT/P models. It has been found that this combination of methods is beneficial in supporting clients to identify and differentiate of thoughts, feelings, sensations and actions through a creative and embodied approach (Kirane, 2018). This may help support insight and awareness around anti-social personality patterns, laying the foundations for further therapeutic work.
4. Pro-criminal attitudes and thoughts	DMT/P has been showed encouraging results in terms of improving pro-social attitudes and behaviours, including social competencies (Batcup, 2013; Barton, 2011; Koch et

	al., 2014; Koch et al., 2015; Koiv & Kaudne, 2015). The use of DMT may help to address factors relating to pro-criminal attitudes and thoughts and offer a creative modality through which to encourage pro-social communication through dance and movement.
4. Pro-criminal associates	N/A. Lack of evidence to support this area of risk/need.
5. Family/partner relationships	Practice observations suggest that DMT/P may help to "re-choreograph" (Devereux, 2008) dynamics of abuse in family relationships where women and children have experienced domestic violence. Attachment-based DMT/P approaches may play a role in assisting clients to self-regulate emotions by providing education around how the body itself can become a resource for healthier self-regulation (Devereux, 2008) and for coping with the bodily trauma associated with abuse and oppression. DMT/P may support clients through physical and nonverbal means to increase feelings of self-worth and agency and to transform feelings of helplessness, ambivalence and immobilisation into self-empowered action (Leventhal & Change, 1991). In the case of parent-child relationships, clinical observations report healthier and more secure attachments between care givers and children through the use of DMT (Meekums, 1991).
6. Education/employment	N/A.
7. Lack of pro-social leisure/recreational activities	Lack of evidence to support this area of risk/need. However, this presents as a relevant area for research and practice to explore[18].
8. Substance abuse	DMT/P may be able to help clients begin to transform addictive patterns and behaviours through experiencing altered mind states without the use of drugs or alcohol (Fisher, 2005). The 12 Step recovery program can be translated into movement form (Potocek & Wilder, 1989) used to support self-esteem and has been used to explore alternatives to drug taking through a creative medium (Fisher, 2005).
Non-criminogenic needs (other risk factors)	**Building protective factors through dance movement therapy**

[18] I explore this in greater detail in chapters 7 and 8 where I look at the role of DMT in building protective factors through access to community-based therapies, recreation and leisure.

Practical and material needs (childcare, accommodation, transportation, clothing, finances).	N/A.
Physical, emotional and psychological needs	DMT/P takes a body-mind approach which views physical, emotional and psychological health as interconnected. DMT helps to direct attention toward body awareness and promotes healthy insight into recognising emotions as they manifest somatically (Koch et al., 2015). This lays a solid foundation for further mental health work to be explored.
Mental health (anxiety and depression)	DMT/P has been associated with improved stress management and cooping abilities (Barton, 2011; Martion et al., 2018) as well as reductions in anxiety, depression and/or psychological distress (Brooks & Stark, 1989; Kiepe & Kiel, 2010 & 2012; Koch et al., 2007: Kuttel, 1982; Punkanen et al., 2014). Additionally, DMT may help with improving psychotic symptoms and anger control during episodes of psychosis (Fenner et a., 2017). A Cochrane review states DMT may be beneficial for people with depression, but reports low levels of evidence due to only a small number and low quality of studies (Meekums et al., 2015).

The literature reviewed supports the idea that DMT/P could be used to help address at least 4/8 core risk and needs factors, as well as contributing strongly within the mental health domain, which is considered a non-criminogenic, yet highly salient, risk factor. This is to say that DMT/P alone may be able to target at least half of the identified risk areas articulated by Corrections Victoria at this point in time, as well as contributing toward the strengthening of protective factors. A separate report will be published highlighting the use of DMT/P to stimulate protective factors (see Paper 2) and empirical findings from the literature to are used to support this claim.

Evidence from the literature suggests that DMT/P may be an effective modality within forensic settings by promoting prosocial behaviour, reducing episodes of violent of aggressive behaviour, supporting emotional and mental health, and increasing overall quality of life. In terms of helping to address risk factors, the literature suggests that DMT could help to target 4/8 core risk factors including:

- Anti-social personality patterns;
- Pro-criminal attitudes and thoughts;
- Family/partner relationships; and
- Substance abuse

DMT/P has also been found to reduce symptoms of depression and anxiety which are general psychological concerns for this population. In addition to this, DMT/P provides a prosocial recreational opportunity which therefore addresses the risk factor associated with a 'lack of prosocial leisure/recreation.' In chapters 7 and 9 I present a rationale for the use of DMT/P as a community-based therapy that supports health recreational and social engagement.

Paper 2. A humanistic perspective: DMT/P and the Good Lives Model.

This second literature review is informed by a strengths-based rehabilitation model known as the Good Lives Model (GLM). Again, this paper has been informed by Suse and Alyce's expertise, which has included insight into the centrality of the GLM within case management strategies. This model is considerably more client-centred than the dominant 'what works' framework and aligns more strongly with recent policy shifts which emphasis recovery and rehabilitation through building strengths and protective factors, as opposed to solely addressing deficits and targeting symptoms.

Paper 2 may be of value to DM therapists seeking employment in this sector, specifically within a community context. This paper analyses the same pool of literature as Paper 1, yet also includes an additional pool of literature which did not fit the original inclusion criteria for the systematic review. In positivist reviews, clinical observations and practice reports are generally excluded as they are not considered 'empirical' research in that no clear methodology has been used to explore a specific research question. I have chosen to include clinical observation literature in this second paper however to provide a practice-based understanding upon which further research can be built. Additionally, the clinical observations included in this report often reflect humanistic practitioner values which are congruent with a strengths-based, recovery modes. This paper is also aligned with psychotherapeutic approaches in DMP, which are understood to be the most common theoretical influence within DMT/DMP practice (Zubala and Karkou, 2015, p. 28). As such, this paper presents an alternative lens through which to view the literature: One which is inspired by the values of psychotherapy which permeate clinical work. The perspective offered in this review is distinguishable from my systematic review in that behavioural therapy, as a therapeutic

influence, has been put to the side, and I discuss the potential value of DMT/P in more humanistic terms.

This second paper presents additional literature on the topic of DMT/DMP and criminal justice, drug and alcohol, mental health and family violence. The literature includes practitioner perspectives, or practice observation reports. Section A of this paper presents findings from the literature and links these outcomes to The Good Lives Model (GLM), an international framework which considers importance of emotional health and wellbeing, community connectedness, sense of agency, skills, material wellbeing as well as access to pro-social (Corrections Victoria, 2016b). Section B aggregates findings from the literature to present a further evidence regarding the value of DMT/P within forensic contexts. The rationale for this paper places particular emphasis on humanistic values such as embodiment, creativity, spirituality, community and self-expression.

Humanistic approaches to therapy

Humanism in psychotherapy is different to the term 'humanism' within the social sciences and humanities, which is beyond the scope of this article to address. Humanistic approaches in therapy generally value client-centred processes and also tend to include body work, or at least pay respectful attention to the qualitative, embodied aspects of each client's personal experienced (Rowan, 1992). One well known theorist of person-centred care is Carl Rogers, who, following on from Maslow, rejects the deterministic tendencies of behavioural and psychoanalytic forms of therapy. Humanistic psychotherapy tends to emphasise intrinsic human good and works from the premise that creativity itself is central in living an "abundance-oriented," as opposed to deficit-oriented, life (Rowan, 1992, p. 77). Many dance movement therapists are influenced by this framework as it aligns strongly with a therapeutic emphasis on

embodiment, play, relationality, creativity, and self-expression which are core to many DMT/DMP methods and approaches.

The role of practitioner observations in this review

Many of the articles examined in this process of conducting a systematic literature review included first-person, professional observations or reflections in regard use of DMT/P within a specific context. These more reflective pieces of writing tended to emphasise therapeutic processes, activities and practitioner observations. Practitioner observation provides rich theoretical grounds upon which to conduct further research, such as the systematic literature reviews, meta-analyses or experimental designs, and it also helps illuminate some of the non-quantifiable aspects of therapy, such as nuanced relational dynamics or the vagaries of lived, subjective experiences. Like other of qualitative data, clinical insight may address questions related to context, meaning and process, rather than questions related to mechanisms or outcomes. Clinical observation is therefore important to consider when seeking to understand how different interventions work across different settings, or amongst different populations (Harden et al., 2018, p. 71).

Practitioner observation literature can be regarded as part of a broader "practice-based evidence" (Aigen, 2015) paradigm. Practice-based evidence offers proximate, context-specific, situated knowledge which reflects valuable knowledge in terms of how DMT/P is used in particular healthcare settings. I consider practitioner observations to reflect an 'extended epistemology,' or different ways of knowing, which are articulated in participatory research as such (Heron &Reason, 2008):

1) Experiential knowing (accessible through direct sensory experience);

2) Presentational knowing (communicated through artistic forms);

3) Propositional (theoretical and conceptual knowledge); and

4) Practical knowledge (technical know-how and applied wisdom)

Direct practice observations can teach us more about how knowledge connects to experiential way of knowing and also expresses a practical way of knowing. Practice observations can shed a great deal of light on the specific processes, activities, methods and approaches used in therapy and as such, are important aspects of knowledge production. I did not include practice observations in my systematic literature review in Paper 1, so I now introduce the literature on DMT/P in criminological contexts in order to extend on the more objectivist-based findings articulated in Paper 1.

Practice reflections from DMT/P: criminology

A small handful of practitioner reflections communicate the personal experiences of several DM therapists working in prisons or forensic units (Milliken, 2002 & 2008; Oktay, 2001; & Seibel, 2008). Milliken (2002; 2008) for example, reported working with mixed groups inside a prison setting and theorised that DMP may be a useful tool for helping to reduce recidivism through the use of deliberate movement structures. Over time, states Milliken, the development of new movement patterns through a therapeutic process may help transform anti-social behaviours into new social competency behaviours. The rediscovery of the self, according to Milliken is a humanising experience and therefore can be seen as integral to the process of change within psychotherapeutically oriented dance therapy. This perspective is echoed by Oktay (2010) who emphasises Chacian methods in dance therapy which include the use of symbolism, therapeutic movement relationships, and rhythmic group activities. Through the use of kinaesthetic mirroring, Oktay suggest that DM therapists allows rebellious clients to explore self-expression without judgement. Although Oktay does not offer suggestions as to how DMT/P specifically supports incarcerated men with acute mental health challenges, she does present an argument through which the

centrality of the therapeutic alliance is foregrounded. In addition, Seibel (2008) offers a short practitioner reflection on her experience of working inside a women's prison and highlights psychotherapeutic methods such as Chacian-inspired DMT/P methods such as Authentic Movement[19] (i.e., moving from inner impulses with eyes closed). Here, clients are encouraged to explore inwardly felt sensations and emotions through improvised movement.

Practice reflections from DMT/P and alcohol/drug use

A theoretical article by Kirane (2018) argues that DMT/P can be used within treatment teams to help to creatively screen for risky behaviour within the context of opioid use. Kirane outlines how DMT/P might adopt the technique of Motivational Interviewing which is common practice in criminology and integrate this into movement interventions. According to Kirane, the use of Motivational Interviewing within dance therapy could further support clients to differentiate their thoughts, feelings, sensations and actions in an embodied way. Another practice reflection (Fisher, 1990) argues that DMT/P may be a useful adjunctive treatment for clients recovering from alcohol overuse as it helps improve self-esteem and encourages exploring alternative approaches to dealing with difficult circumstances. Fisher states that DMT/P helps to integrate body and mind which can lead to feeling whole and alive and fosters a sense of self-acceptance and honesty through nonverbal pathways, which may further support a client throughout their recovery. Potocek and Wilder (1989) also comment that art and movement therapy support substance abuse clients to reflect on cognitive and behavioural patterns whilst simultaneously helping to make emotions clear and more visible. According to Potocek & Wilder (1989), the 12 Step Recovery

[19] The term 'authentic' can be problematic as it suggests a binary relationship between 'free' movement and other forms of dance/movement. Furthermore, this reflects a psychoanalytic approach that is central to my critique.

program can be translated into a movement form and used as an adjunct to verbal therapy. Additionally, Fisher, P (2017) explicitly names her approach as humanistic and client-centred, and links dance movement therapy to the recovery model which is community-based and strengths-oriented. Fisher's observations of illustrate how DMP supported the physical, emotional and social wellbeing of clients in a recovery clinic, whilst also having the potential to impact the cognitive, as well as spiritual domain of human flourishing (p. 228-229).

Practice reflections from DMT/P and mental health

Thompson (1997) has contributed a clinical observation of the use of DMT/P with dual diagnosis clients (those experiencing mental health as well as alcohol or drug challenges). This paper articulates an application of DMT/P in this setting and offers observations and as to how and why DMT/P is useful in this context. Possible benefits include the strengthening of adaptive coping through physical release and the processing of emotions. Lee (2014) presents a case study of a client experiencing depression, stating that DMT/P helped to enhance body awareness in clients, stimulate body-mind connection, stimulate consciousness raising and provide a safe space for catharsis/emotional release and self-acceptance.

Practice reflections from DMT/P and intimate partner violence

Each of the articles for this topic refers to attachment theory and the use of DMT/P in creating healthier attachments amongst family members. Devereaux (2008) reflects on her use of DMT/P within a family violence context, citing improved emotional regulation as one observable outcome. Devereaux describes the client's gradual discovery of their own bodies as a 'resource' through which women began to access as a tool for better regulating their emotional states and physiological states. In another case observation, Leventhal & Chang (1991) discuss the ways in which with

DMT/P may help to address physical and behavioural patterns of helplessness, ambivalence and inactivity within a group of women experiencing intimate partner violence. Another application of DMT/P was described as being targeted toward mothers and children 'at risk' of family violence, and clinical observations from this report indicate that DMT/P had played a role in helping to improve mother-child relationships from the perspective of attachment theory (Meekums, 1991).

Understanding the literature in relation to the Good Lives Model (GLM)

Each of these practice reflections offer perspectives on how might DMT/P support clients in forensic settings which foreground humanistic values such as self-expression, creativity, and client-centred care. However, there is also a strong tendency within the literature to appeal to behavioural models, despite the embedded centrality of humanism within the therapeutic approach. Section B now seeks to re-present the data from both clinical observation as well as the findings from the systematic review in light of a more humanistic framework, known within criminology as The Good Lives Model (GLM, 2018).

The GLM is a more holistic and strengths-based framework and in the case of my own research project I have found it to be a helpful ideological platform through which I have pitched my ideas and even secured community involvement by appealing the values embedded in this model. For workers in the field of criminology, the GLM is considered valuable as it both complements as well as reinforces the goals of the RNR framework. It offers a more strengths-based and holistic theory, whereas the RNR model is a heavily medicalised CBT framework.

While I could choose to critique the GLM for the subtle individualistic and behaviouristic assumptions which remain embedded in its structure, I wish to focus instead on its capacity to offer a slightly more humanistic perspective, which I think

could be further developed and leveraged by the work of DM therapists engaged this sector. The value of the GLM is that it highlights the importance of protective factors such as community connectedness, the vital role of creativity, and the intrinsic right to experience:

- Pleasure
- Joy
- Play
- Agency
- Creativity
- Community
- Inner peace and other 'primary human goods' (Corrections Victoria, 2016b, p. 10)

The GLM model provides an alternate theoretical framework through which to communicate the potential benefits of DMT/P to relevant stakeholders in a way that aligns with a more humanistic, community based and person-centred approach. The key principles of the GLM are highlighted in the Table 4 as articulated in professional guidelines (Corrections Victoria, 2016b, p. 10). The GLM principles are then connected to practice observations as articulated in DMT/P literature:

Table 4.

Connecting principles of the Good Lives Model to DMT/P literature

Domain	Description	DMT/P principles
Life	Including healthy living and functioning	DMT/P seeks to promote healthy living and holistic wellbeing through the use of dance and movement to support the physical, emotional, social, cognitive and cultural wellbeing (DTAA, 2018). DMT/P offers a creative medium through which to practice social and independent living skills (Barton, 2011) and is focused on improving overall "vitality" (Koch et al., 2007; 2014) and quality of life through client-centred, movement-based therapy.
Knowledge	How well informed one feels about things that are important to them	DMT/P can be used as part of a multidisciplinary approach to assessment and referral. DM therapists can work with clients to begin to identify key issues through somatic activities and creative movement. DM therapists can collaborate further with both clients and other service workers, acting as a "bridge" for further referral (Kirane, 2018). DMT/P may also help promote healthy self-awareness (Barton, 2011) which is key in building a dialogue with clients about how well-informed they feel about things that are important to them, before working to address client wishes and expectations from the basis of self-knowledge and client-identified issues or challenges.
Excellence in play	Hobbies and recreational pursuits	DM therapists use structured play (Kirane, 2018) to address health and wellbeing issues and can provide recreational opportunities for clients wishing to participate in creative and inclusive dance sessions.
Excellence in work	Including mastery experiences	DMT/P offers an opportunity for clients to experience mastery at the most basic level - the body (Millkien, 2002). This includes understanding bodily "resources" (Meekums, 2015) through trauma-informed psychoeducation which promotes skill-acquisition in the domains of self-regulation and self-mastery within a body-centred framework.
Excellence in agency	Autonomy, power and self-directedness	DMT/P can help support personal autonomy by exploring healthy individuation and building self-esteem (Leventhal & Chang,

		1991). DMT/P may provide an alternative framework through which to address dynamics of helplessness, shame or guilt and may assist in supporting women to reconnect with their personal sense of power and encourage feelings of agency associated with developing a stronger sense of self through dance and movement activities (Leventhal & Chang, 1991).
Inner peace	Freedom from emotional turmoil and stress	DMT/P methods may support and help stabilise the sympathetic nervous system (Koch et al., 2007, p. 341). Participant feedback suggests that clients have experienced feeling "comfortable," "peaceful," and "not self-conscious" (Barton, 2011, p. 168) during DMT sessions. As a creative approach to stress management (Martin et al., 2017), DMT includes specific activities and exercises focused on relaxation (Brooks & Stark, 1989, p. 104; Koiv & Kaudne, 2015, p. 9; Potoceck, 1989, p. 42) and offers a sense of respite and healthy escapism from difficult situations (Fisher, 2005).
Relatedness	Including intimate, romantic, and familial relationships	DMT/P is focused on improving relationships (Barton, 2011; Batcup, 2013) and supporting clients to practice new ways of relating to one another (Devereaux, 2008). DMT stimulates social connectivity through encouraging peer empathy and support and allows for safe expressions of shared intimacy through techniques such as 'mirroring' or gentle finger connection (Fisher, 2017)
Community	Connection to wider social groups	Current gap in the literature under review.
Spirituality	In the broad sense of finding meaning and purpose in life	'Spiritual integration' is an acknowledged principle of DMT/P practice (EADMT, 2013). Through heightened, or peak experiences in dance, clients may discover one aspect of healing which is sometimes described as spiritual (Perlmutter, 1992, p. 47). In a broader sense, DMT/P helps address existential questions and enables clients to make "meaningful connections" between dance and life situations (Leventhal & Chang, 1991, p. 140)
Pleasure	Feeling good in the here and now	DMT/P is associated with elevated mode states and supports the experience of pleasure through a focus on "vitality" including joy and

		lust for life (Koch et al., 2007). Data from a pre/post-test design illustrates positive changes following a DMT/P intervention including increased motivation, coping, strength, energy and enjoyment increased, and decreased depression, lifelessness, anxiety, tension and tiredness decreased (Koch et al., 2007, p. 347).
Creativity	xpressing oneself through alternative forms	Play, aesthetic experience, authenticity, nonverbal communication, symbolizing and creativity are suggested therapeutic mechanisms across all arts therapies (Martin et al., 2018). Arts therapies, including dance, are examples of creative resource-oriented approach which may assist clients to use and gain strength in a nonverbal modes of expression (Koch et al., 2007).

Discussion

Findings from the literature illustrate that DMT/P explicitly addresses 10/11 of the GLM principles for wellbeing. These areas of human health and flourishing are understood by criminologists to have a direct impact on recidivism. Building people's capacity to experience pleasure, relatedness, inner peace, creativity and any of the areas of holistic wellbeing are likely to strengthen the protective factors associated with reduced crime. The one area that the literature did not explicitly address is the domain of community, however, much has been written on the role of DMT/P in fostering community elsewhere (Dunphy, 2014; Pylvanainen, 2008; Steiner, 1992). Therefore, DM therapists can claim with confidence that the therapeutic use of dance and movement, when coupled with a humanistic approach, can strongly support the types of outcomes promoted by the GLM.

It may be helpful for practitioners seeking employment in the community corrections area to become fluent with these more humanistic aspects of recidivist theory. While the criminal justice sector as a whole is heavily influenced by medical

and behaviourist approaches, there remain frameworks such as this which provide alternative ways through which to advocate for the use of DMT/P in this setting. With recent policy reforms focusing on more client-centred values and the language of 'holistic' support beginning to enter the discourse at policy level, DMT/P is well positioned to further educate and innovate within the changing paradigmatic landscape of community corrections which appears to be shifting slowly toward a more rehabilitative model.

The humanistic lens that many DM therapists bring to their roles, coupled with a high level of expertise in body-based therapy and creativity may situate DM therapists at the forefront of recovery model programs, especially those which are strengths-based and apply person-centred frameworks in their programming. This paper presents an alternative way in which to view the findings – through the lens of humanism – and I would suggest that there is more work to be done in educating funding bodies around the value of person-centred, psychotherapeutic approaches which tend to focus on more holistic aspects of human recovery and as such, contribute toward the strengthening of important protective factors.

Paper 3. A critical, embodied, arts-based response to the literature

The literature reviews in this chapter reveal how I have sought to 'learn the language' of the prison system in order to collaborate with key players from the Department of Justice. This third paper is a more reflexive and critical piece of writing. Here, I present some of my embodied responses as a participatory researcher when faced with the task of trying to navigate a complex and dehumanising system.

I have often experienced conflict and tension between my more humanistic principles and individualistic, behavioural change frameworks used within criminology.

Sometimes I felt guilt or shame in trying to present my skills as a DM therapist in a particular way. The objectivist tone I have adopted in this chapter for example, clashes with my more critical and qualitative values as a researcher, yet as a participatory researcher I believe it is important to present knowledge in a way that is useful for my co-researchers and that has practical implications. I hope that Susan and Alyce, and other case managers, may be able to draw on the systematic review material I have drawn together in this chapter and intend to publish a systematic review which I can present to my co-researchers in the near future.

However, this more critical paper examines my own latent sense of becoming complicit in the perpetuation of an oppressive, punitive institution. My experience of trying to arrange this research project in such a way as to accommodate for the uncomfortably narrow demands of the system has frequently felt like a loss of some of my more emancipatory or feminist ideals. I have explored this tension through an embodied response in order to communicate the ethical, ontological and epistemic strain of working with and amongst multiple paradigms, some of which engender a stark clash of values and beliefs my values and beliefs as a critical researcher and humanistic practitioner.

This collaboration has taught me that I may need to soften some of my participatory ideals, beliefs and activist principles in at times, in order to simply get through the door in order to do this work. Authentic collaboration has taught me about the need for flexibility, adaptability, and the humility to accept the expertise that others bring to the project, even when – or especially when – it is in direct conflict with my own researcher-partitioner values.

I have used an artistic medium in Video 2 to convey the visceral quality of this experience. My use of autoethnographic, personal reflections throughout this thesis intended to provide a more personalised vista for the reader to connect with. Within autoethnography, personal experiences are used to help render fieldwork encounters as more "lifelike, believable, and possible" (Ellis and Bochner, 2000, p. 751). The video and poem to follow provides another sense of this dynamic tension: Squeezing, straining, and becoming stuck as I grappled with numerous contradictions, barriers and complex power relations as a participatory researcher.

As a feminist researcher I acknowledge the situated, relational, dialogical and context-specific conditions out of which this chapter – a review of the literature - has been constructed. I offer this piece of critical discussion in the hope that my reflexive commentary may stimulate further discussion and debate in DMT/P around the need for vigilance, especially in regard to the dominant perspectives which inform the very institutions in which we find ourselves working as practitioners. My intention is therefore to build on the specific discourse within DMT/P that has articulated a need for greater critical awareness around dominant narratives and issues to do with power, knowledge, and institutionalised oppression.

Video 2. Squeeze!

An embodied response to navigating the system

A video link inserted here depicts a physical struggle. It shows my body movements as I try to squeeze myself into a narrow and rigid environment.

Image and video: Mischa Baka

It is uncomfortable, this business of bending over backward and

folding myself inside-out in order to, simply,

get into the system.

It's an act of contortion, at times,

Like squeezing my body through rock and stone, at times,

Like getting stuck headfirst in a system,

Searching in the dark for the right way forward.

I filmed this with my friend Mischa during an afternoon at the beach. As I talked with Mischa about my PhD project, we decided to explore the movement qualities of push-and-pull, as well as resistance, in relation to the physical environment of the coast. As this video suggests, my experience of trying to navigate the criminal justice system has been a bit of a *squeeze* at time. My efforts have often been met with resistance, sometimes in the form of institutional barriers and bureaucratic complexity, and sometimes in the form of my own resistance to engaging with a hierarchical, depressing system. I've often felt like I have had to bend over backward just to get a foot through the door in institution, as portrayed in this short video. Sometimes my desire to do research in this setting has felt like an act of force, and I've felt a sense of latent guilt or unease as I tried again and again to embed my project into the existing structures of a hierarchical institution. It has raised existential dilemmas for me and caused me to reflect on my values and beliefs many times. Offering therapy within such a system can feel like an act of oppression. Sometimes, I was told I should do my research within a prison setting – rather than the community – so that I would have a "captive audience" to work with. There are many ethical and moral dilemmas a dance movement therapist might face when seeking to work in this sector. I certainly do not wish to force therapy upon a captive audience. I hope that my thesis highlights some of the unsettling tensions and strains that come with working in a forensic setting, and communicates both the barriers, as well as joys of this, as authentically and honestly as possible.

Exploring a philosophical contradiction in the literature

As well as the strain and contradictions involved in squeezing my way into this narrow system, another – more subtle – contradiction has emerged for me throughout the process of writing the two literature reviews in this chapter.

As I engaged with the literature presented in Papers 1 and 2, I found myself grappling with a philosophical contradiction in response to the research under review. Essentially, this relates to an inconsistency between:

- Some of the DMT/P methods/approaches articulated in the literature,
- The theoretical influences described in the literature, and
- The outcomes which are documented in the literature

In short, many of the DMT/P methods and approaches appear to be conceptualised from a psychotherapeutic and psychoanalytic perspective. There is a general sense that psychodynamic and emergent processes are used. However, many of the same studies report behavioural-based outcomes or findings, which align with the more behavioural and CBT paradigms that are commonplace in criminology practice.

Common theoretical approaches in DMT/P

In a survey which explores the theoretical orientation of DMP practitioners, Zubala and Karkou (2014) report psychotherapeutic theory to be the most commonly employed theoretical influence in DMP practice. With 70% of respondents referring to psychodynamic theory as their main reference point, there appears to be a strong reliance on a psychotherapy within the field, particularly in the UK. This survey suggests that following psychodynamic theory, developmental and attachment theories are also commonly employed in practice. Behavioural therapy and personal construct theory on the other hand, were found to be the least popular influences in DMP practice (Zubala and Karkou, 2015, p. 28). Despite practitioners not identifying at all strongly with behavioural approaches, therapy *outcomes* are commonly documented in behavioural terms in DMT/criminology literature.

While DMT or DMP is often associated with a psychotherapeutic, client-centred and humanistic paradigm, the literature presents findings from a behavioural perspective. There seems to be a contradiction of sorts between some of methods, processes and theoretical influences informing practice (i.e. psychodynamic, emergent, humanistic) and the adoption of a behavioural lens to then measure and present outcomes in the literature.

As practitioner and researcher, this confuses me. If the approach I have been trained in is client-centred and psychodynamic, how do I convince funding bodies – and myself - that the outcomes of therapy will be behavioural outcomes? In order to flesh out this incongruence further, I provide a 'scope of practice' for the literature reviewed in this chapter, which details the various approaches, processes or activities described by authors. I then explore the ways in there appears to be a paradigmatic inconsistency between some of the psychotherapeutic aspects of the research under review, which is often concerned with self-expression and self-actualisation, and the overarching behavioural framework used to rationalise these DMT/P findings through a much more functional and allopathic lens. To be clear, I am not seeking to refute the argument that DMT/P can be used to meet behaviour-change aims, or to argue against the importance of individual behaviour change in general. However, I wish to assert that the literature explored in this chapter reveals, at times, a lack of clear alignment between the theoretical orientations underpinning practice - which is largely psychotherapeutic - and the outcomes described, which are commonly expressed in treatment model, behavioural terms.

Understanding the scope of DMT/P practice as articulated in the literature

In order to examine this further I have explored the scope of practice for DMT/P as articulated in the literature included in this chapter. I present the various therapeutic approaches described in each of the studies, as well as the underlying theories DM therapists have used to conceptualise their approach.

In a series of interviews with DM therapists working in forensic settings, practitioners were found to emphasise behavioural goals such as reduction of aggressive behaviours, supporting healthy emotional regulation and expression of feelings in non-violent ways (Smeijesters, 2006, p. 46). Other examples of DMT or DMP working to support behavioural goals within this sector can be seen in the literature within a number of studies that combined dance therapy with art therapy, drama therapy, and music therapy (Kõiv and Kaudne, 2015; Smeijsters 2006 and 2011). The role of DMT/P within these combined studies centred around improved emotional regulation and self-awareness, which were though to lead to more regulated attitudes, thoughts, and behaviours. Bodily self-expression was encouraged through creative movement in each of these programs, and strong emotions such as anger and aggression were acknowledged and discharged through expressive body motion. These studies appear to have used DMT/P to encourage self-exploration and to support creative self-expression, whilst meeting the overarching goal of increasing prosocial behaviour. By using movement to connect thoughts, feelings, and body states with personal attitudes and actions, DMT/P is positioned in these studies as a creative and embodied approach which is effective in supporting positive cognitive shifts, such as fostering insight and encouraging prosocial thoughts and attitudes.

Another study which presented behavioural outcomes used DMT/P as an intervention, in combination with yoga activities (Barton, 2011). This program integrated yoga exercises into DMT/P sessions in order to help prepare clients for the more creative, and less structured DMT/P activities to follow. Yoga was thought to help build safety and familiarise clients with movement and embodiment work before introducing more improvisational DMT/P methods. Additionally, the yoga was used to help support physical wellbeing by preparing joints to open, encouraging relaxation of the muscles, and building strength and balance through *asana* practice. Over time, less yoga activities were used and more creative, expressive DMT/P exercises were introduced. Typical DMT/P methods such as mirroring, Laban movement scales, as well as sound and movement activities were integrated to further support prosocial behaviour, reduce stress and foster improved coping skills. This program focused predominantly on psychological and physical shifts, and again, used a behavioural framework to communicate goals and findings.

Other theoretical frameworks referred to in the literature in terms of therapeutic approach were attachment theory, developmental therapy, and in one case, a solution-focused and resource- oriented approach. Each of these frameworks were either referred to either explicitly or were implied throughout the study. While some authors clearly mentioned specific theoretical frameworks to support their therapeutic intervention, other authors simply used specific language which points toward a particular framework. For example, Brooks (1989) does not offer a theoretical framework for her DMT/P program but clearly describes the use of movement metaphor, which was used to guide clients through a process of improvisation. This more inward-looking use of dance/movement seeks to bring emotions, behaviour and insight to conscious awareness

through a process of "physicalization" and "externalization" (Leventhal & Chang, 1991, p. 137). As such, I would argue that this use of DMT/P reflects a psychoanalytic orientation through which metaphor and symbolism are leveraged to help find words for non-verbal, or pre-conscious states.

A common technique described in the literature was that of *mirroring*. Reiland (1990) illustrates her use of this method within a developmental theory approach, stating that mirroring is used to symbolize attachment between therapist and client (. 351). This forming of a therapeutic alliance is understood as a rapport building project within DMT/P and is a common approach within psychotherapeutic models. Devereux (2008) too links mirroring with attachment theory, suggesting that more attuned movement between group members may be indicative of increased empathic communication and improved interpersonal relationships between family members experiencing a home violence situation.

Another study used a slightly different approach by integrating a physiological framework with psychiatric theories of change (Koch et al., 2007). The DMT activity offered in this study was inspired by a "traditional upbeat circle dance" (p. 340) and focused on the physicality of simple dance movements. The physiological effects of jump-like movements were measured in order to ascertain their impact on the reduction of negative psychiatric mood states, whilst simultaneously promoting positive affect and increased vitality. This study represents an expansion in the scope of practice toward a more physically informed approach to DMT, where DMT might be used in conjunction with exercise physiology, biomechanics and sports sciences as well as other the psychologically-informed disciplines.

A study by Punaken, Saarikallio and Luck (2014) expands the scope of practice further, this time in the direction of brief intervention and solution-focused psychotherapy. This study emphasises the relevance of peer-based learning in resource-oriented therapy, in which clients are encouraged to learn new skills from other group members. The role of the therapist in this approach is to collaborate with clients to find solutions for present issues in a way that is driven by the client's own personal strengths and already existing resources. This method presents a non-expert model of psychotherapy, and the authors describe the benefits of this approach which include enhanced peer learning and peer support.

Overall, I would characterise the scope of practice for DMT/P in the literature under review as psychotherapeutic. However, there seems to be a strong tendency to adopt behavioural-change frameworks in order to evaluate, assess and communicate therapeutic change. As a creative arts therapy, DMT/P is a 'bottom up' approach, rather than a 'top down' cognitive-behavioural intervention (Smeisters et al., 2011, p. 48). As Smeijsters et al state, creative arts therapies (dance, music, drama, and art) are not neurologically oriented therapies, although cognitive shifts may be part of what the arts offer (p. 48). Smeijsters et al. proposes the need for a theoretical model that takes a bottom up approach (arts based) which reaches a point of connection with cognitive behavioural therapy (p. 48). One example of this may be the "embodied enactive" framework which draws from phenomenology as well as cognitive science to theorise the role of body motion and sensorimotor experience in abstract thinking (Koch and Fischman, 2011). The embodied enactive approach warrants mention as it provides a bottom-up paradigm which allows for more aesthetic, somatic, creative, relational processes in therapy to be analysed in combination with a cognitive-behavioural

framework. In summary, if cognitive behavioural change if a central intention behind the therapy, it may be more congruent for authors to be explicit about the behavioural frameworks that inform therapy in criminological contexts. This does not mean forfeiting the psychodynamic principles, given that embodied enactive theory is grounded in a phenomenological understanding of the body, and its emergent, relational capacities. In the justice system, practitioners can be pressured to adopt CBT models. However, there are likely to be ways of articulating therapeutic processes in DMT/P that include a behavioural change framework yet retain the more humanistic and relational approaches that many DMT/P methods and techniques reflect.

Being congruent: Using language that aligns with the practice setting

This brings me to the point of the importance of being congruent when talking about what therapy offers across diverse and varied settings. For example, McFerran (2010) highlights the importance of using congruent language to reflect the different therapeutic orientations that are shaped by dominant paradigms across a range of health contexts. According to McFerran, the language used by practitioners often reveals the specific goals and beliefs of their chosen practice settings. These goals may be hidden however, as I found when reviewing the literature: For example, psychodynamic and humanistic therapists tend to emphasise agency and empowerment, while those more informed by medical systems tend to focus on treatment protocol and observable and measurable outcomes (Thompson, 2020).

Given that the criminal justice system in an institutionalised, medical system, it is understandable that treatment model approaches emphasising behavioural outcomes are dominant in this sector. However, for those working in community-based settings that may have more of a focus on building protective factors, celebrating strengths and

developing resources, a more medical lexicon does not align with the theoretical frameworks used in community work. The language of 'treatment,' 'patient,' 'symptoms,' 'illness' and 'outcomes' for instance is likely to clash with the more strengths-based paradigm of community practice where collaboration, rather than treatment, is often the language used. For practitioners working inside of a medical setting however, it is important to be able to communicate the efficacy of DMT/P from a more objectivist standpoint, which may include treatment model language.

In my own experience of trying to sell my research idea to key stakeholders in the community, I have admittedly been caught up in the medical model approach of feeling like I need to communicate the benefits of DMT/P using treatment model language which is symptoms-focused and quite often deficit-based. My concern as a critical researcher-practitioner is that the individualistic assumptions underpinning this framework, and associated beliefs around recidivism, perpetuates an understanding of therapy in which individuals are viewed from a *problem* perspective. In regard to working with women in the justice system, I believe this plays an unfortunate role in the continuation of stigmatising and dehumanising narratives.

I have argued this point extensively in Chapter 3 where I performed an embodied, critical, inductive reading of feminist criminology perspectives (Carlton and Segrave, 2013; Baldry 2010). Echoing these Australian scholars, I assert that the model of 'risk and need' denies the interlocking complexity of social, cultural, economic, political, gendered and racialised realities which insidiously and overtly impact on the production of a social stigma and exclusion. As Carlton and Baldry (2013) have highlighted, an over-emphasis on individual behavioural change can function as a responsibilising mechanism through which women are further marginalised and

punished. As such, this is a model does not stand up as a viable framework for genuinely responding to women's realities of incarceration and release (Carlton and Baldry, 2013, p. 61). The structural and systematic power discrepancies which impact criminalised women on a daily basis are important considerations for DM therapists to consider. As Cantrick et al. (2018) state, socially engaged practitioners are well placed to used DMT/P as a medium for addressing the ways in which larger institutions perpetuate oppression (p. 192). This includes, in my perspective, recognising how the dominant behaviour-change model places pressure on practitioners to adopt the language and paradigmatic beliefs of the treatment model. As cause-and-effect framework, the idea of treatment can easily gloss over social inequality and injustices and further disenfranchises women caught up in this highly institutionalised system.

Body politics and the medical paradigm

The medical paradigm (including dominant mental health frameworks) that seeks to 'treat' a person as a pathology, rather than as a person, risks glossing over the politics of oppression which often drives or compounds mental health issues. Therapists informed by critical and feminist perspectives are likely to view personal mental health concerns within a broader context which takes into account the intersecting ways in which marks of identity, such as race and class, interact with social institutions, practices, policies and discourses to produce inequalities based on body politics. The feminist notion of "body politics" has emerged out of second wave feminism and indicates how bodies are both personal and political in nature; this framework has been taken up in DMT/P (Allegranti, 2011; 2013) whose work illuminates the complexity of intersectionality in a therapeutic context and calls for vigilance around the

Gender and ethnicity, race and class, sexuality and dis/ability are categories used to describe and reinforce difference; these categories also act as "markers and gatekeepers" of acceptable 'humanity' (Braidotti & Hlavajova, 2018 p. 2). Given the dehumanising practices and perspectives embedded within the prison system it is vital that therapists working in this sector critically engage with the bodily politics that present in therapeutic settings. As Allegranti (2011; 2013) shows in her study of sex and gender in dance movement psychotherapy, bodies are never neutral and we must seek to interrogate the ontological beliefs which shape our very conceptualisation of bodies, movement and intersubjectivity in DMT/P.

In the following chapter I include my own body in the analysis sections, again, seeking to dance-myself-into the text in a material-discursive (Barad, 2008) gesture. Rather than present myself as the 'neutral' know, I seek to evoke a more proximate and intimate account of the data – which is shaped by my interpretations and constructions of women/participants shared with me in the context of our DMT workshops. The chapter to follow presents a woman-centred analysis that is grounded in my understanding of participant feedback and reveals the micro-moments of embodied exchange as they took place in the therapy context. This stands in contrast to the more objectivist style of literature review presented in this chapter and a return to a more embodied and embedded framework for analysing the data.

Chapter 6. Findings and analysis: *What women want.* Analysis of findings from three drop-in DMT workshops informed by participant feedback and researcher reflexivity.

This chapter is structured in two parts:

Part 1: A series of unremarkable events

This section offers an arts-based reflection on the practice setting through the use of a movement-based video. Primarily, this is intended to help introduce the setting and highlights some of the interactions which took place between the participants and I during the DMT[20] workshops.

Through the use of video, movement and audio recordings, I attempt to use my own body and voice to perform a reflexive, arts-based, impressionistic account of the main research findings. This layered, interpretive, and embodied performance of the practice setting is aligned with a materialist feminist approach (Alaimo & Hekman, 2008; Coole & Frost, 2010) as I attempt to convey how bodies, movement, and relational practices are integral within an embodied and embedded approach to discourse production. As Grosz (1994) states: Bodies are the very stuff that analysis is made of (p. xi). Therefore, I centre both my own bodily responses to the findings, as well as the direct feedback of participants themselves in this analysis chapter.

Part 2: *What women want:* Fun, fitness and relaxation?

In Part 2 I present my interpretations of the findings, which are based on feedback from two participants about what they want from DMT in this particular setting. The participants are referred to as 'Min' and 'Kaz'.

[20] I use the term DMT to describe the workshops I ran as part of this study, given that the Australian terminology uses this acronym rather than DMP.

As well as articulating the research findings, I also provide an overview of the main therapeutic methods, theoretical approaches, activities and processes informing the workshops themselves. The practical information for dance movement therapists includes:

a) An overview of sessions,

b) A description of ways in which each woman chose to participate, and

c) Presentation of key themes expressed by participants in relation to the perceived benefit of DMT in this context.

The key themes are then analysed in terms of what I learned from the women about how DMT may be useful in this particular context. I do not claim to present a generalisable, essentialising Truth about what women want from DMT but rather, I seek to explore the findings from a contextually located and therefore partial perspective. I also describe how this iterative process of learning from each woman has informed my ongoing attempts to better understand the therapeutic potential of DMT from a person-centred and strengths-based perspective, which offers an alternative lens to that of the dominant cognitive behavioural focus within criminology and related sectors as discussed in my previous chapter.

Part 1: A series of unremarkable events

A reflection: "I guess the whole thing has been a series of unremarkable events," *I tell my supervisor. I'm referring not only to the data production process, but the project as a whole. The process of trying to engage with women in the justice system has, from the beginning, been a largely bureaucratic effort involving countless hours of "hanging out (Bolger, 2013)" or rather, hanging around, the corrections office, seeking desperately to uncover some sort of pathway into collaboration, mutuality, recruitment,*

shared learning and exchange. There have been many mundane, unremarkable moments which reflect the largely institutional and slow-moving nature of doing community-engaged research in this field. However – I have come to appreciate the richness that some of these more ordinary, everyday experiences offer. The data that I present in this chapter arose from small, brief, and subtle interactions between myself and participants. There are no grand 'ah ha' moments here – but rather a series of small, seemingly unremarkable exchanges and reflections which have forever shifted the way I view DMT in light of this particular context, and group of women…

Arts based response: Playing with the data

In order to help frame my analysis process, I have inserted a video link here that is inspired by Ellingson's notion of "deep play" (2013) in qualitative research. Drawing from Ellingson, I have experimented with an artistic medium in order to explore some of the ways in which creativity and play might be leveraged as an epistemological resource within the analytic process. I have also used this notion of deep play to support the weaving of embodied reflexivity throughout my research. Furthermore, this video reflects a moment of pause as I allowed the data to speak to me, on a bodily level, which in turn reflects my own subjective involvement in the formation of this knowledge generation process. I am inspired by what Ellingson (2013) writes when she says:

> "We can play seriously with our participants, data, and representations. As we move freely in creative spaces, we pause for reflections, particularly on the ways in which not only our minds and words but also our embodied selves enter in to our play" (p. 246).

Based on this perspective I have made a video that offers a playful arts-based representation of the context in which formal data production took place. Through the use of reflexive movement and audio, I have sought to write myself – or rather dance myself– into the text. This is itself a material-discursive engagement (Barad, 2008) as I seek to perform the coming together of bodily and textual ways of knowing.

In this video I am using improvisation to respond to the data. After recording the audio, which is drawn from my data spreadsheets and emerging qualitative themes, I allowed myself to improvise with the narrative I had constructed. This narrative is based on my interpretations of participant feedback. As such, I do not attempt to 'represent' participant voice but rather I wish to emphasise my own selection of words, phrases, and embodied phenomena which constitute my memories of these material-discursive (Barad, 2008) interactions. I present aspects of this selected narrative throughout this chapter in order to centre my interpretation of each group member's contribution, including their feedback and responses which have shaped the theoretical perspectives developed in Chapters 7 and 8. In the following video I have played with movement, voice and music to explore different layers of meaning and to re-produce some of the dynamics of the research setting, including a sense of dissonance which I will discuss shortly.

Video 3. Playing with the data

Embodied play: Expanding on Geertz's method of thick description

Informed by Ellingson's notion of deep play I have structured my findings and analysis in this chapter in a way that reflects a more creative, visceral, intersubjective, critical and participatory account of the interpretive process. My interpretations of the data have been constructed through the prism of my own bodily, emotional and subjective understandings of the findings and I highlight my positionality as the interpretivist researcher throughout this chapter. In Chapter 2 I offered a background discussion centred around the influence of Geertz's hermeneutic approach to ethnographic inquiry. I also introduced the influence of Herder's writings and presented some of Herder's arguments which support the idea of an integrated, sensory-based, embodied form of intelligence. In this chapter I aim to apply my theoretical understanding of both Geertz and Herder's by referring to my own sensory-based and intersubjective experiences as I attempt to 'make meaning' from the ethnographic data I

collected. My intention is to extends on a Geertzian approach to ethnographic inquiry in a practical way. I present core research findings in this chapter and analyse this data in a way that uses "thick description" to describe what happened during out DMT workshops. I have sought to expand on this methodology however highlighting the partiality of my own perspective. This is expressed through the video as well as through my attempts to reflexively self-locate in this chapter. My intention in this chapter is to reveal some of the relational, intersubjective and "corporeal entanglements" (Allegranti, 2015) that emerged during this process of exploring DMT with group members. I have drawn on the concept of embodied artistic inquiry (Hervey, 2000; 2012) and used my own body to help disrupt any sense of researcher neutrality in my analytic process.

Disruption and the precarity of knowing

Audio loops and concurrent voiceover have been used within this video to create a sense of precarity and disruption within the data. The slight messiness of the audio track is intended to evoke a subtle sense of confusion and uncertainty. Some of the words are faint or difficult to decipher in some parts. This is intentional and alludes to my experience as a researcher of working in a way that celebrates polyvocality, plurality of perspectives, and difference. Exploring unoppressive approaches to practice is not always straightforward, neat, or harmonious. Moments of uncertainty, discord, and rupture have been learning moments for me, and I have tried to allude to a sense of this uncertainty and messiness within the video.

By seeking to evoke the disrupted and uncontained context in which data production took place, I also attempt to highlight the open-endedness and precariousness of doing analysis within participatory and interpretivist projects. This video performs some of the realities of working in a community setting, such as the

constant disruptions and interruptions, as well as the dialogical nature of participatory research where many voices inform the study findings.

Lastly, this video offers a glimpse into some of the themes I will analyse and explore within the remainder of this chapter: The concept of dance being *fun*; a focus on *fitness* as a desirable DMT goal for one participant; and the value of *relaxation* as a central component of what DMT may offer in this context.

Part 2. *What women want:* Fun, fitness and relaxation?

The rest of this chapter describes the research setting in full, introduces participants and communicates some of the feedback and responses offered by group members in regard to their experiences of using DMT. An overview of workshop approaches, activities and theories of practice are also described which are intended as a practical resource for DM therapists. In my analysis of findings, I introduce key themes arising from the DMT workshops and participant feedback: The concepts of fun, fitness and relaxation.

Description of research setting

Between May and June 2018, I facilitated six brief, drop-in workshops a local drug and alcohol rehabilitation centre, Stepping Up, in the regional city of Geelong, Australia. Of the six sessions, three workshops were successful in engaging participants and three were not. The first workshop, as well as the fourth and fifth attracted participants whereas the sessions in between were lacking attendants.

The rehabilitation centre and day program

The Stepping Up Consortium is a community-based organisation in which supports people experiencing drug and alcohol dependency as well as family violence and mental health challenges.

As detailed in Chapter 4, I was invited to recruit participants attending the Day Program at Stepping Up. The Day Program is a six-week therapy intensive was based at the Stepping Up building in Geelong. Day Program (called 'Time for a Change') continues to run and its main aim is to explore issues associated with substance misuse and support recovery through group therapy processes. Often group members are dually engaged with the Community Corrections office in Geelong, as alcohol and drug use are often co-existing challenges within criminological contexts.

The partnership with Stepping Up was instigated through our Working Group at Geelong CCS. After exploring many different ways of engaging women, the Working Group decided to approach Stepping Up with the intention of recruiting participants from within the Day Program. Additionally, the community space at Stepping Up was identified by co-researcher Susan Dandy as being a warm, comfortable and friendly environment – quite unlike the experience of entering the Corrections Building which is bureaucratic and impersonal. According to co-researchers Susan and Alyce, the Day Program sees a steady stream of female (and male) forensic clients who are mandated to attend the alcohol/drug recovery group as part of an existing Community Corrections order.

While attendance is mandatory for Community Corrections clients advised to undertake the Day Program for, the DMT workshops were not. The drop-in workshops I offered were voluntary and were intended to supplement the other therapy services on offer, which included art therapy and mindfulness-based therapy. My intention was to hold a one-hour long workshop each Friday, for six weeks, which aligned with the scheduling of the Day Program. Due to the flexible structure of this project, this could be adjusted each week according to participant's availability and interest. The DMT workshops

were allocated a time outside of other programmed services and took place on Friday afternoons at 12.30pm, after the formal group therapy activities had finished up for the week. This was deemed the best time by the program manager at Stepping Up, and the organisation generously agreed for me to use the space for the remainder of the afternoon to run sessions. This is when I also wrote fieldnotes and recorded my reflexive responses to each workshop.

Potential participants

During the time in which I was recruiting group members for the DMT sessions, the Day Program included four potential participants for the study (i.e. women engaged in a community corrections order). Alyce and Susan had screened each potential participant and suggested each of these women would be a good candidate for recruitment, based on their self-expressed interest in joining a DMT workshop. Of this small pool of potential participants, two women consented to be in the study. A third potential participant visited the first workshop, and despite indicating she would like to come back, was not seen again. A fourth potential participant similarly expressed a keen desire to attend the workshops on several occasions, however, did not participate in any of the sessions. Ultimately, only a small handful of women from the Day Program met the study inclusion criteria.

Participants

I refer to the two participants in this study as using the pseudonyms ‘Kaz’ and ‘Min.’ I was not able to ask either of these women how they would like to be named in the study, given the brief and rushed encounters and limited opportunity to engage with the women in general.

One woman, Min, attended the first two workshops (#1 and #2) and the other woman, Kaz, attended the latter two workshops (#2 and #3). A small number of other Day Program attendees also took part in the workshops, and I refer to these group members as 'other' participants as they did not match the study inclusion criteria. As a participatory research project with an emphasis on collaboration, inclusivity, and responsiveness to context, an attitude of hospitality was exercised whereby non-consenting participants were aware they could join the workshops in additional to more formally selected study participants.

The group size ranged from two to five group members each time. The formal data presented in this chapter includes only the specific contributions made by consenting participants, Min and Kaz. Other comments, reflections, and recommendations made by non-consenting participants were noted in my fieldwork diary but are not included within the formal data.

Participant feedback: Methods for data production and analysis

Informal debriefing took place in a casual manner following each DMT workshop. On occasions where women were able to spend a few extra minutes talking about the experience, we remained seated and shared experiences and reflections. In other cases when the timeframe was more rushed, we talked as we packed up the space following the workshops. A more detailed overview of my approach to writing fieldnotes is presented in my methodology chapter, including my approach to capturing different themes arising from the shared experience and participant's responses.

Method for recording data

After running each workshop and verbally debriefing with participants, I immediately typed up my notes based on what had happened, what I observed, and what

I remembered from each session. As such, I have chosen to use an 'evocative' approach to ethnography, rather than a 'realist' approach, as outlined by Ellis and Bochner (2000). An evocative approach for example aligns with research that embraces the vagaries of memory and seeks to construct knowledge in such as way as to intentionally highlight the limits of what can be known, based on the epistemological belief that knowledge is partial, never fixed, and indeterminate.

According to Ellis and Bochner (2000) a methodological shift has taken place within ethnography over the years – resulting in a proliferation of more performative, evocative accounts of the data. These more open-ended texts have largely emerged in response to more traditional realist, or objectivist frameworks within ethnographic studies. This shift from a realist mode of representation, toward a more communicative and relational approach, is also aligned with partial, situated, critical and feminist approaches which seek to problematise the very notion of what constitutes 'evidence' within ethnographic research.

Applied ethnopoetics: Use of poetic transcription in qualitative research

The art of ethnography as an evocative social science lies in the researcher's ability to show how they are personally involved in the process of creating, negotiating and creating meaning in relationship with others (Ellis and Bochner, 2000, p. 746). To support this approach, I have drawn from a method called "applied ethnopoetics" (Blommaert, 2006) in order to further enrich my literary, arts-based approach to presenting research findings.

Applied ethnopoetics is a performative transcription style used in more literary genres of ethnography. According to Blommaert (2006), applied ethnopoetics is a form of narrative analysis which stems from practices in performance-based ethnography, in

particular, that which deals with folk lore. Ethnopoetics is concerned primarily with recapturing the performance dynamics of original narratives (Blommaert, 2006, p. 184) by using a poetic structure to convey the resonance of voice within fieldwork. Primarily, an ethnopoetic approach attempts to convey multivocal, layered and complex emotive narratives and utilises a poetic structure to convey experiential knowledge.

As such, this method of transcription destabilises the institutionalised convention of the singular factual voice by reconstructing narratives which attend the more implicit elements of a story (Blommaert, 2006, p. 189). Guided by this approach I have sought to highlight sonorous and embodied resonances within verbal responses, such as pitch and intonation, pauses, stress, or other discourse markers (Blommaert, 2006, p. 182). This approach can also be seen in Chadwick's (2017) qualitative health research which has further informed my understanding of the relevance of this method for participatory or intersubjective research approaches. Chadwick, a critical feminist psychologist, experiments with this technique in her research on women's birthing experiences in order to foreground the lived and corporeal realities of women's stories in relation to a particular health setting. Rather than presenting a word-for-word realist and chronological account of her data, Chadwick uses an applied ethnographic approach to reconstruct her transcriptions into succinct, poetic, and evocative accounts of women's birthing experiences.

Each of the ethnopoetic vignettes I include in the following sections of this chapter are approximated versions of what was said by participants. I use no quotation marks or give no indication that I am directly quoting participants here: What I offer are my most honest and mediated attempts at understanding what I think was said to me in the context of these three workshops, and what I wrote down in my fieldnotes.

In order to present some of the main themes arising from participant feedback, I have collapsed some of the interactions and exchanges between myself and participants into a singular event in order to tell a more condensed story of the data. This aligns with evocative ethnographic research which, according to Ellis and Bochner (2000) may strategically collapse events into a creative narrative in order to write a more engaging account of what happened (p. 745). Note that the following sections are written in the present tense in order to invite the reader into a more realistic sense of what happened, and why, in these DMT workshops.

Overview of 3 workshops

Workshop #1 Activities

Themes: shame and visibility.

1 consenting participant (*Min*)
3 other participants

45 minutes

Activities:

Warm up
- Rotating wrists and exploring movement in the whole arm and shoulder
- Mirroring: following participant cues we explored shifting weight from side to side and balancing
- Group stretches: everyone offering a different stretch

Main activities
- Rhythmic movements (side to side)
- *'Pass the movement'* game in circle
- Relaxation: either seated in chairs, on the floor, or lying down. Paying attention to breath; guided relaxation tuning in to different parts of the body.

Close
- verbal discussion and pack up

Workshop #1: Processes, therapeutic approach, theoretical orientation and reflection

Warming up

As I arrive in the therapy space, I find people sitting around at the kitchen table, finishing lunch. I join in with the light banter and introduce myself. I then seek to ascertain who is participating in today's first workshop. Once this is established, I invite everyone to take turns at introducing themselves. The general consensus however is that people are sick of talking and just want to get into the "dancing part" so we get straight into our preparation for a group movement warm up. One group member mentions she

had to leave at 1pm, and others state they cannot stay too long, so I suggested doing a short movement session (45 mins) which is seems agreeable to everyone.

I am quite directive in the warmup, giving clear instructions and demonstrating warm up movements (see text box for specific activities). The general mood is light and somewhat playful: These women seem fairly comfortable in each other's company and there is a pre-existing sense of familiarity and friendliness in the room. It is evident that participants know each other quite well, given their shared experience of being Day Program peers.

My intention is to start slow with a focus on restorative movement. Drawing from trauma-informed perspectives in dance therapy (Gray, 2017; Dietrich-Hartwell) as well as Van der Kolk's (1994; 2014) research, I facilitate activities which I theorise as being useful in terms of supporting nervous system restoration and brain-body regulation. This includes a focus on rhythmic movement, use of music with a steady beat, and a focus on social engagement and play. As Gray (2017) suggests, supporting a physiological state-shift is an important aspect of trauma-informed work. As such, my intention is to focus on regulating breathing patterns and cultivating a feeling of safety within the body.

Informed by Gray and Dietrich-Hartwell's trauma work, I seek to present exercises that may help with both up- and down- regulation which involves using mobilising or activating methods as well as soothing or calming activities. I also recognise the value of social connectivity within a trauma-informed framework and seek to introduce activities that might foster shared eye gaze, synchronous movement phrases, breathing together, and creative play (Gray, 2017). This reflects what Gray refers to as a "sideways shift" toward social connectivity and belonging. I therefor aim

to facilitate a dance experience that might encourage playful and relaxed social interactions, through activities such as Pass the Move which are playful, rhythmic, attuned and participatory.

Main activities

I introduce the game of *Pass the Move* to the group. The steady, rhythmic music has an anchoring effect yet also encourages an upward energy shift which I later combine with breath work to in order to offer opportunities for downward regulation of the nervous system. This reflects an understanding that state shift is multi-directional (Gray, 2017). I seek to provide opportunities to for the women to experience a combination of more energised states, as well as opportunities for winding down and relaxing. This also includes a focus on exploring interoceptive states, where participants are encouraged to start noticing inner sensations and feelings in the body.

I am careful not to invite people to lay on the floor for the breath work at the end, as this can be a vulnerable position to assume. I am happy however for people to embody this option if they instinctively choose to rest on the floor and appear comfortable with this choice. Overall, my approach is somewhat cautious, influenced by my assumptions and understandings as to trauma behaves in the body. I facilitate the session in a slow and gentle manner, conscious that participants may feel a little hesitant about the new activities and the DMT approach which is quite different to the more structured CBT sessions offered through the Day Program.

Cool down

During the cool down, which consists of a whole-body scan and guided breath awareness, I reflect on the fact that Min - the one consenting participant in this workshop - has hung back quite a lot and moved very little in the session. While Min

appears to be interested and open to the idea of dancing, I get a sense of low confidence through Min's body postures, and I am curious about her motivation for being here.

I make a point of talking with Min after the workshop as we go about putting away some dishes and mugs left over in the kitchen from the Day Program attendees. I want to reiterate to Min that there is no right or wrong way to be involved in the workshops. In my experience of participating in shadow-shifts at the Department of Justice, I have learnt that women enmeshed in the justice system often assume they have done something wrong. On numerous occasions, the various female clients I met in the Corrections building would immediately ask me if they were "in trouble" as soon as we met. I was often viewed with suspicion as an outsider. Given my partnership Working Group members, Susan and Alyce, my position may have been perceived as one of power, which I often tried to address by expressing my interest in learning from and with people, which I hoped would reveal my intention to collaborate and share power.

In my interaction with Min, I wished to convey to her my interest in hearing her personal thoughts and perspective on how the dance sessions were for her. I shared that would like to get her feedback so that I could learn how to make the workshops as valuable for her as possible.

The vignette below offers a glimpse of this conversation, which is followed by my analysis of what I learnt from Min in terms of these exchanges:

Two ethnopoetic constructions of participant feedback

1. **Shame and visibility**

As we are about to get started with our movement warm up, Min looks over and says to me:

Did you see it

in the paper?

Did you see me?

It was

all over the media:

"The drug dealing mother"

You didn't see it? ? ?

[Eyes wide, worried]. It was Everywhere.

[Group to Min, reassuring and understanding]:

"Give it 6 months, no one will remember."

2. Expertise

After the workshop, Min and I are putting some mugs away in the kitchen. I explain to Min that I'm interested in how she found the workshop. I must have used the word 'expertise' as it was in my mind prior to the session. I explained to Min that, in my way of thinking, she is the best expert of her personal experiences. I tell her that I am therefore interested to know her personal thoughts and feelings about how she found the dance workshop.

Min turns to me, sceptical:

Expertise? What?

I don't know.

I don't have any expertise.

You do.

I come here to learn dance stuff from

You

I can't really give you any feedback because

I can't speak for…

Everyone

…you know?

I don't know…hmm [thinks a while]

…It was good to see the others get something out of it I guess…?

What I learnt from Min about dance movement therapy

In dialogue with Min, it became more evident to me that one major barrier to participation in DMT, or any other activity for that matter, is perhaps the pervasiveness of shame and the stigma that criminalisation carries. Even before we could commence the warm-up dance activity, Min sought reassurance that myself and other group members would not perceive her in a negative light, based on some shaming media attention she had recently received.

Prior to facilitating these DMT workshops I had been advised by several case managers that criminalised women are likely to experience deeply entrenched feelings shame and marginalisation. Developing a safe, non-judgmental space would be essential in assisting participants to feel welcome, according to co-researchers, Susan and Alyce. Susan and Alyce also reminded me that criminalised women often express feelings of being judged. Many women can feel anxious about being viewed in a negative light by both peers and professionals, according to my co-researchers.

While this information seemed obvious to me at the time I was reminded in this incidence of the pervasiveness of shame and stigma and the barriers these experiences can create in terms of participation in therapy, or other possible activities for that matter. This experience taught me that stigma and stereotyping can leave a strong imprint on how criminalised women are seen – and how they may see themselves.

Before we even consider initiating therapy there may need to be other opportunities for trust or mutuality to develop. The shared act of putting away some dishes in the kitchen enabled Min and I to have this conversation, which in some ways reflects the importance of" hanging out" (Bolger, 2013) in participatory research.

Additionally, I realised that from Min's perspective, I was regarded as the expert in this encounter: Someone whom she expected would teach her some *stuff* about dance in a way that might have connect to her own personal health and wellbeing desires. By sharing my perspective with Min - that I also perceived her to be the expert of her own experience – we were able to find a place in which to begin to collaborate. I also found this feedback clarifying in the sense that I realised I may need to take ownership for my own expertise as a dance movement therapist. As Min expressed, there appeared to be an expectation that I would teach *dance stuff* as part of the DMT experience – yet I was not entirely sure what Min meant by this term. My next two chapters will flesh this idea out some more in regard to the notion of re-centring dance within DMT

In the advertising for this research project, for example, I had tended to highlight the 'movement' aspect of therapy over the 'dance' component. This reflects an assumption I made: That people may find dance too threatening or alienating. Following the advice of case managers, I had used words like *creative movement* or *mindful movement* to convey a sense of what the workshops would entail. Min's apparent interest in learning *dance stuff* however, indicated to me that I could potentially highlight, and celebrate, the word 'dance' much more in my work. I was getting the sense that, rather than being deterred by the word dance – as sometimes happens – Min seemed to be affirming that her motivation to participate could be connected to her desire to want to learn some dance skills or steps as part of the sessions. I considered

ways in which I might emphasise the dance skills component of my workshops more the following week in response to this conversation.

Workshop #2

Workshop #2 Activities

Fun, fitness and relaxation.

2 consenting participants (*Min* and *Kaz*)
3 other participants (including one male 'friend' from rehabilitation group)

45 minutes

Activities:

Warm up
- self-touch (foot massage, seated)
- shoulder rotations (standing)
- stretches (group members take turns leading)
- slow balancing activity; arms up with in-breath and lower down with outbreath, exploring balancing on balls of feet

Main activities
- 'Pass the move' game (with lively music)
- Swapping spots with someone in the circle
- Increase physical intensity through 'free dance time' (group walking quickly around
  in a circle, tapping feet, dancing in their own time, energetic)
- Increase physical intensity through slow, sustained lunges around the circle

Cool down (deep breaths in and out)
- Rubbing palms together to create warm heat, place on parts of body that need to receive warmth
- Verbal debrief

Workshop #2: Processes, therapeutic approach, theoretical orientation and reflection.

Warming up

Upon arrival, the women attending the workshop today ask me if their friend can join the dance class. The friend is a male, yet the workshops are clearly intended for

women, and I have a brief internal crisis over this dilemma. I feel the project has become even more uncontained and worry about the implications of having a male in the group that has been advertised for women.

However, the man is sitting here expectantly with his female peers, ready to jump in and groove. He is already busily motivating everyone else to get up and join dance class. The women attending today's session ask again if its ok for their friend to join, and as a participatory researcher, I reason that this is line with the dynamics of collaboration and welcome the man as one of today's extra participants to the group.

I had imagined repeating a similar workshop as to the week before: A slow and gentle self-care type session, whilst also integrating some basic dance skills into the program. I decided to include some skills-based activities, such as exploring weight transfer and balance, derived from a more classical ballet repertoire. I revised my fieldnotes from last workshops and recalled the discussion I had had with Min in regard to her desire to learn what she referred to as dance stuff. I had interpreted this to mean general dance/movement skills which I could offer through a Laban Movement Analysis framework. For example, I could offer directive forms of improvisation to explore the Effort qualities of weight, space, time flow, as per the LMA framework.

In retrospect I believe it would have been feasible to think that Min was expressing a desire to learn simple dance moves and choreography. At the time however, I did not believe that a DMT session should including teaching dance moves. My own assumptions and beliefs around this presupposition will be explored in-depth in my discussion chapter. I also offer practice suggestions in Chapter 8 where I consider the therapeutic potential of integrating more structured, dance-centred approaches

within DMT. This perspective is largely informed by Mel's desire to learn *dance stuff* as part of her DMT experience.

There seems to be a lot of chatting and restlessness in the room today as I begin to facilitate a self-touch activity as a warmup. I attempt to cue everyone to begin to tune in to their own bodies through use of light self-touch which involves patting and rubbing the feet and lower legs. I begin the workshops by introducing the activities to establish grounding (Dieterich-Hartwell, 2017; de Tordes & Bräuninger, 2015), such as using touch to awaken sensation in the feet and connecting to the ground itself. I hold the assumption that group members are likely to be experiencing hyper-aroused states a lot of time, and that gentle grounding activities would therefore be a good place to start. I begin by lightly kneading, tapping, rubbing my feet and lower legs whilst sitting, encouraging others to do the same. According to theory from trauma-informed DMT, both touch and feet/ground connectivity are described as useful ways of beginning to cue safety in the body and regulate hyperarousal (Dieterich-Hartwell, 2017, p. 42).

In addition, I am working with the concept of interoception (Hindi, 2012; Van der Kolk, 2014; Dieterich-Hartwell, 2017, 2020) which relates to the capacity to feel and notice inner sensations in the body. From a poly-vagal perspective, interoception is believed to play an important role in trauma restoration (Gray, 2017; Dieterich-Hartwell, 2017) and has been articulated as a central aspect of trauma work in DMT. Dieterich-Hartwell's three-stage model as an example includes centres around creating safety, regulating hyperarousal and attending to interoception (Dieterich-Hartwell, 2017).

Main activities

After the self-massage warm up and some stretches, the energy remains quite high and I get the message that people a ready to dance. We explore a short balancing activity as part of my attempt to integrate a dance skills component within the workshops. We explore raising the arms up for an in-breath, balancing on balls of the feet for a few seconds, and exhaling and lowering the arms on the outbreath.

This activity soon gives way into a spontaneous Pass the Move exercise as I begin to play some fun, upbeat music. The group sings some of the lyrics to the funky Latino rendition of Sweet Dreams whilst passing a series of moves around the circle, and Min, who had hung back in the first workshop, jumps straight in and offers the first dance move for today.

Min leads a jazzed-up version of a sideways waltz: To and fro, to and fro. There is a surge of energy as people mirror Min's move, and the words *Friday afternoon dance party* spring to my mind. A movement contagion follows, with Kaz jumping in and offering the next step which everyone copies. I notice how participants are mirroring and attuning to one another. A lot of fun and laughter erupts, and I decide to introduce a new challenge by inviting people to swap places with another person in the circle, and to do some sort of 'creative walk' as they swap places. This increases the hilarity of the activity as everyone attempts to do their own playful movements as they swap places in the circle.

We are all becoming quite warm from all the continuous movement, and Kaz notes with surprise that she is sweating. She seems happy with the realisation that she is doing some form of exercise. Kaz has already shared with me that she wants to lose weight, and several other women I have spoken with at the Corrections Office over

previous months have also commented on wanting to lose weight and feel physically stronger and fitter.

In response to this feedback I add some slow and sustained lunges at the end of free dance time to stimulate the larger muscle groups in the legs and to build strength and endurance. Working with resistance, as well as developing strength is also another aspect of trauma-informed work which is detailed in Dietrich-Hartwell's (2017) article. In retrospect, I am also drawing on my knowledge of the Laban Movement Analysis framework to facilitate an activity based on the Effort quality of *Weight*, which relates to the use of strength through either active or more passive uses of body weight.

Cool down

To complete the workshop activities, I notice Min has begun rubbing her neck, stating that she often feels tension in this area. In response, I invite everyone to rub their palms together quickly in order to create heat, and to place in on their neck, like Min, and to pour warmth into the neck area. Everyone takes turns placing the heat on different body parts, mirroring and responding in turn. We end the workshop with this activity, and I talk about how this exercise could be a quick and simple self-care activity that people could use as a mini 'body check in' exercise throughout the day.

Ethnopoetic construction of participant feedback

3. Fun, fitness and relaxation

After the workshop, I talk with Min and Kaz, along with other group members about the workshop experience. Min and Kaz said:

[Min] Its good to just muck around

and not take things so

seriously

[Min and Kaz] At the end of the week we are tired of talking!

Yeah, it's a lot of talking

[Min to me:] um you did it in a relaxed way and people could just

have fun

and it wasn't too…

serious

[Min] Its good for the…. [touches head]

Good for getting out of your head

...Forget things that are stressful

[Kaz interjecting:] This would help me, wouldn't it?

Lose weight I mean

If I did this every Friday

...and walked a bit… and ate better

I would lose weight

Right!? You saw me, sweating, didn't you!!??

I was sweating!

That'll help me lose weight, won't it?

What I learnt from Min and Kaz about dance movement therapy

The feedback emerging from this workshop helped clarify for me the importance of fun and enjoyment, which can be an understated aspect of therapy within DMT research literature. For these women, therapy often entails a great deal of CBT-informed interventions and emphasises verbal processing.

The opportunity to simply move and dance to music on a Friday afternoon, in a manner that was *not too serious* appeared to be a compelling aspect of the DMT

workshops offered. What I gleaned from Min's response is that this experience could provide a sense of respite from a quite intense week of group therapy. This feedback prompted me to reflect on the fact that within this context, the value of fun and enjoyment may sometimes be overlooked in favour of meeting behavioural change goals.

By identifying fun as an integral part of the experience Min helped me to reconsider the value of dance as a vehicle for simple enjoyment and play, which was not something I had necessarily highlighted in my descriptions of the DMT group. I had instead focused on elements of DMT such as self-care, creativity and social connection, yet Min's feedback offered a helpful reminder that for women experiencing criminalisation, the value of *fun* itself cannot be understated. In an environment which is highly structured and tightly regulated, DMT can offer a chance to "muck about" and engage in a more playful experience.

This is a salient reminder that playfulness and fun are unfortunately anomalies in this context. The feedback offered by participants allowed me to consider the ways in which simply having fun can be considered therapeutic goal in and of itself. For these women, perhaps the best medicine on a Friday afternoon might just be an inclusive and uplifting dance party-type environment, facilitated by a trained DM therapist.

In addition, I begun to understand more about the connections between DMT, physical activity, and fitness in response to Kaz's feedback. Rather than approaching Kaz's comments about wanting to lose weight as a body image issue, I chose to hear Kaz's words as an invitation to reflect more carefully on the role of fitness within DMT. Generally, the benefits of fitness and weight loss are not necessarily aspects of practice that I would have considered to be a part of a DMT scope of practice, given that I

anticipated doing more 'mental health.' I will explore this assumption in chapters 7 and 8. Kaz's comments highlight the possibility of DMT being leveraged as a physical health and fitness resource. This feedback also prompted me to think about the role of incorporating elements of exercise into a DMT program in a way that could support physical fitness, if there were to be a valuable therapy goal self-identified by people in this setting. The capacity of DMT to contribute toward fitness goals is an under explored aspect of therapy. I will discuss this in my following chapters.

Finally, both Kaz and Min reported to having enjoyed the sense of relaxation that DMT afforded on a Friday afternoon. As a whole, the group appeared to have appreciated the slow and gentle stretches, breathing activities and grounding exercises which we did together. This was also reiterated by one of the Day Program counsellors, who had spoken to participants following Workshop #1 and understood that participants had enjoyed the gentle and relaxing pace of the sessions.

Workshop #3

Workshop #3 Activities

1 consenting participant (*Kaz*)
1 other participant

½ hour

What we did:

Warm up
- Passing a ping pong ball around the circle with a movement or gesture
- Rolling the ball underfoot

Main activities
- Giving and receiving activity w. ball (high and low plane)
- Connecting movement with breath activity (slow, sustained LMA *Time* effort)

Cool down: stretches

Workshop #3: Processes, therapeutic approach, theoretical orientation and reflection

Warming up

It appears both participants are feeling quite tired today. I therefore suggest doing something gentle and not too physically demanding. As I am setting up the space, I notice some table tennis balls lying around and spontaneously decided to use these as props. I began improvising by passing the ball around the circle as a way of greeting. As we pass the ball, I introduced the LMA Effort quality of Weight by emphasising the light weight of the ball and asking participants to pass the ball around the circle as if did not weigh a thing. We use slow, sustained movements to do this, which I again drew from the effort quality of Time.

By introducing the purposefully light, delicate, airy movements and emphasising a slow and sustained use of time, I was seeking to use movement to help people orient to the present through the use of props (Dietrich-Hartwell, 2017). I intended this activity to last only a minute or so, however Kaz begins to roll the ball underfoot when it comes again to her turn, prompting a group exploration in self-massage as everyone took turns to roll a ball on the pressure points of each foot.

This activity has reminded Kaz of a relaxation tool she had once been taught, which she then demonstrates to the rest of the group. Kaz describes some sensations that she is noticing in her feet as she does this, commenting that is a relaxing feeling. At this point everyone takes a ball each and we spend a few more minutes exploring self-touch. I guide the two women through a process of attuning to sensation in the feet and Kaz identifies this activity as something she could do each night before bed to help her sleep and support a feeling of relaxation in her body.

Main activities

Once more, I begin to improvise with another activity by introducing the concept of giving and receiving. Using the table tennis balls once more as a prop, we explore passed two balls around the circle. This results in an exercise in which giving and receiving occur in a fluid manner, with little time to prepare in between the giving of one ball and the receiving of another. We explore doing this on different planes (high and low) and I invite each person to pay attention to the moment of exchange as the ball transitions from person to the next.

I ask questions such as, *how do you both decide where and when to exchange the ball?* and *How do you know when is the right moment to let go, and when is the right moment to receive?* I base these cues on a philosophy of practice within DMT that describes movement as metaphor (Ellis, 2001; Koch, 2012; Panhofer & Payne, 2011; Samaritter, 2009) as well as a platform for self-exploration and developing insight.

Kaz comments on the differences between making eye contact as opposed to not making eye contact. In response, we explore passing the ball with or without eye contact and noticing any differences. This activity functioned, retrospectively, as a means of introducing participants to the nuances of bodily communication, which is informed by theories of kinesthetic intersubjectivity (Samaritter & Payne, 2013) or kinesthetic empathy (Fischman, 2009; Rova, 2017).

Cool down

After repeating this exercise for a few minutes, a phone alarm goes off suddenly. This turns out to be Kaz's alarm, which she had set to remind herself that it would soon be school pick up time. Kaz wishes to stay for ten more minutes to do a cool down, so I suggest finishing the session with some gentle movement and breathing activities. The

second participant also indicates she will leave once Kaz goes, and we decide to close the session while we are still together.

I facilitate a closing activity based on a type of tai chi flow exercise: Breathing in to one side (arms extending) and breathing out back to centre, and then swapping sides. Both women express that they can't do this 'properly' and find it difficult to coordinate their breathing with the movements. I simplify the activity further by focusing just on the movements from side to side, and the women found their own rhythm. I then used imagery of *honey dripping from the fingertips* which helped to stimulate slow arm movements, up and down, with a gentle sense of resistance. Finally, we do some stretches to finish, with everyone choosing a stretch to lead as a final cool down.

Reflecting on Workshop #3

There was no opportunity in this workshop to gather feedback from participants as the session ended abruptly. In lieu of participant responses, I videoed[21] my own movement response in order to use embodied reflexivity as a tool to further explore the research question. My movement inquiry reflects the theoretical concept of "corporeal entanglements" in the therapeutic relationships (Allegranti, 2015) which I explore from a psychodynamic perspective with reference to the concept somatic countertransference.

[21] I have not included a second video in this chapter but offer a written reflection about what I noticed in my own reflexive movement response.

Figure 5. Ella holding a prop

Reflecting on what I saw in this video

My movement response revolves around the use of a ping-pong ball as a prop. I perform a 'small dance' using the same ball that we had passed around the circle for our group warm up. The most poignant aspect of this movement exploration, I feel, is a 'giving and receiving' motion in which I appeared to offer the ball, tentatively toward the camera, and then quickly retract my hand and conceal the ball. I reflect on my tense body posture and notice that I fidget constantly with my hands, clenching and unclenching my fists. My shoulders appear raised, in a frozen posture, and my breath seems held and barely perceptible. My gestures, postures, movements and general embodied state conveys to me a sense of tension, agitation, vulnerability, anxiety, uncertainty, constraint - perhaps fear?

I reflect on what dance movement psychotherapist and feminist researcher, Allegranti points out in her work on kinesthetic intelligence: That my personal movement "is and is not mine" (2015, p. 92). Perhaps my own movement response which I see in this video has been formed and forged in relation to Kaz and Min's own

individual expressions of embodiment. During our workshops, we have each picked up, tried on, put down, and passed on each other's movements through a series of attuning and mirroring' exercises. The word contagion *springs to mind, which from a Deleuzian perspective refers to pre-personal corporeal intensities which are transmitted from body to body: This relational ontology argues that the body's greatest capacity is the ability to "affect and be affected" (Massumi, 1987, p. xvi).*

From a DMT perspective this relates to theories of kinesthetic intelligence (Allegranti, 2015), otherwise referred to as "embodied intersubjectivity" and/or "kinesthetic empathy" (Fischman, 2009; Samaritter & Payne, 2013; Rova, 2017). Drawing from this theoretical framework, the body plays a central role in understanding and interpreting the subjective experiences of others through changes in affective states which emerge within relational movement phrases. While this is not the topic of my thesis, and beyond the scope of my argument here, I introduce the concept of kinesthetic intelligence here in order to discuss the phenomena of "somatic countertransference" (Dosamantes-Beaudry, 2007: Vulcan, 2009) and its implications as an analytic tool in for critical, reflexive researchers

Analysis of the self: Politics of representation, power and privilege

Here I investigate some of the ways in which my embodied responses may reveal to me something about the women I am working with, as well illuminating some of my own underlying perceptions, assumptions, beliefs and expectations as researcher-practitioner.

The intention behind this section of my analysis stems from a sense of responsibility that I feel comes with the task of representing the lived experience of others, which I have done in this chapter in terms of presenting participant voice and the

feedback offered by Min and Kaz. By observing my own gestures, postures, and movements in this video I can begin to see more clearly how some of my implicit and embedded beliefs, values, images, perceptions, ideals and assumptions are, perhaps, tacitly held in my moving body and expressed through my non-verbal behaviour. At times, my movements in this video conjure up what I perceive to be a stereotypical caricature of criminalised women:

- Tense
- Bound
- Fragile
- Agitated
- Wary
- Anxious
- Contained

While I am critical of the ways in which dominant narratives (Hadley, 2013) tend to paint a homogenising picture of victimisation by representing criminalised women as excessively vulnerable, helpless, anxious, fragile and passive, I am somewhat curious to learn that my own body can so readily perform these socially constructed stereotypes, which I observed self-reflexively in my own movement response. The salience of this stereotype invites me to consider once more the asymmetry of power and privilege within the researcher-participant relationship.

At the same time, my embodied self-analysis also helps reveal to me the vulnerabilities of my own embedded, embodied presence in this research process. This awareness I suspect, enables me to critically examine the roots of my own inherent assumptions. Also, it allows me to feel a sense of compassion toward the very humanity

I share with research participants, especially when I observe the ways in which I have mirrored this tension-state in my own body.

It also leads me to think about the concept of micro-harming, or microaggressions (Cantrick et al., 2018) in relation to social justice perspectives in DMT. By micro-harming, I refer to the danger of unconsciously perpetuating disempowering stereotypes through discursive, or material (bodily) modes of communication. This reflection is informed by Cantrick et al. who write that one way in which microaggressions are enacted is through unconscious, nonverbal expressions of power and privilege.

I wonder if my movement responses reveal my own implicit biases in a subtle way. Am I 'othering', in the same breath as I believe myself to be engaging in intersubjective attunement (Vermes, 2011)? What micro-harms do I perform through my body and in my everyday interactions with women in the justice system? These are reflexive questions I ask throughout the research. Embodiment and empowerment are ideals to be worked toward. As Cantrick et al state: It is not enough to simply write about embodiment. I therefore seek to understand how my own holding of power is enacted through not only my embodied interactions with participant but my limited *interpretations* of bodily language: Both my own, and that of others.

An ontology of the body

Understanding and attending to ways in which power shows up in the therapy context are key concerns for social justice-informed work. Feminist scholars have called for a relational ontology, or an ontology of the body, in order to better understand the workings of power and privilege as they play out within various relationships, institutions, society and culture. A relational ontology celebrates the proximate and

attuned relationship between bodies and seeks to include bodily insights and understandings within the interpretive process of constructing meaning and new knowledge.

As I argued in Chapter 3, a renewed emphasis on relational, bodily materiality within feminist research (Braidotti, 2010b; Alaimo & Hekman, 2008; Coole & Frost, 2010) can help to reveal the complexity and idiosyncrasy of individual lived experience. While I have sought to use my own body and movement response to better understand the realities of women participating in this study, my identity as a white, middle class 'outsider' also places me in a position where it is all too easy to lean on pre-existing stereotypes in my efforts to understand and analyse the data.

While I believe my movement responses have captured something of the lived experiences of participants, I nonetheless position these findings as tentative and emergent (Finlay, 2006, p. 9). As Finlay suggests, if researchers are to empathise or "imaginatively project themselves into the participants' experience" it remains essential that the researcher continually acknowledge the openness and multiplicity of meaning which can emerge from the intersubjective encounter. Informed by Finlay's writing on reflexivity, I offer the following analysis of somatic countertransference with reference to the interpretive and situated nature of my own knowing.

Somatic countertransference: A resource for critical researchers?

As demonstrated in my video, my movement response conveys a certain tension-state which could be considered representative of how I believe participants may be feeling – nervous, agitated, anxious, bound, vulnerable, cautious and unsure.

While this could be partly true and certainly corresponds to the discourse on embodied trauma within criminalised populations, I also acknowledge the multiplicity

of meanings which movement improvisation may evoke. Rather than suggesting that my embodied response is representative *of* the women I worked with, or representative of my own personal experience *of* doing research in this setting. I am more interested at this stage in exploring the analytic significance of utilising the concept and/or application of somatic countertransference as a critical, reflexive tool within participatory research. This is aligned with feminist and activist-informed research in which considerations of power and representation are central to the inquiry.

Somatic countertransference is described in DMT as the phenomena through which a DM therapist experiences a physical state akin to that of a client. This is theorised as being felt through the body of the therapist via noticeable, somatic changes such as gut feelings or shifts in heartrate, breathing, or muscular tension (Dosamantes-Beaudry, 2007).

In practice, DM therapists often track their own body states and somatic countertransference to try to better understand therapeutic shifts as they take place (Dosamantes-Beaudry, 2007). According to Johnson (2014), somatic countertransference may also hold the potential to be utilised as a research tool by critical scholars in order to further interrogate implicit power dynamics between researchers and participants (p. 84).

By using somatic countertransference to critically examine deeply held beliefs or assumptions, I have sought to employ this DMT-based approach to investigate my own role in the production of discourse surrounding criminalised women. I have applied this concept as a way of examining the potential for internalised assumptions which shape my knowledge claims, and which hold the potential for micro-aggressions to be perpetuated. For example, I have sought to acknowledge the themes of

victimisation, passiveness and helplessness which have emerged out of my self-reflexive inquiry, whilst being mindful that an overemphasis on these aspects of criminological experience could inadvertently reinforce some of the disempowering stereotypes which I, in fact, wish challenge.

In viewing my own movement responses to Workshop #3 for instance, I noticed the strong sense of helplessness, fragility, vulnerability, victimisation and anxiety embodied in my gestures, posture and non-verbal communication. One way of theorising this experience is to suggest that my own nervous system has attuned to the physiological and affective states of participants through shared movement exchanges. Through a trauma lens, I could focus on the ways in which my movement response evokes a sense of a more unregulated state, or a freeze response such as becoming bound, inert, barely moving.

The medicalisation of trauma narratives

While I am generally quite critical of the literature which over-focuses on the term 'dysregulation' within trauma theory, my own movement responses reveal to me in a way how easy it can be to fall back onto commonly held notions such as dysregulation. For me, this conjures up a mechanistic understanding of trauma that focuses on the brain-and-body relationship and downplays the social, cultural, and material realities that compound trauma and oppression. In both the critical literature (Chapter 3), as well as the more classical objectivist research (Chapter 5), women in the justice system are commonly referred to as **vulnerable**, **helpless**, **traumatised** and **oppressed**.

By observing own movement responses, I can see how subtly I can also reproduce these narratives of victimisation, helplessness and passivity. It is easily to

conceptualise of ‘criminalised women’ in an abstract sense, therefore collapsing the individuality of each women’s unique experience into a singular, predictable and homogenising stereotype: The traumatised body. The qualitative details of lived experience – which I argued for in Chapter 3 - can all too easily be glossed over with a metanarrative of trauma where the body becomes, once more, a symbol *of* suffering and oppression. Passive subjects, docile bodies: the construct of women’s passivity is rooted deep in my own cultural psyche and can easily be performed and reproduced through my own implicit biases, which are largely shaped by the power of stereotypes.

I am not arguing that structural oppression and the flow on effects of personal distress, anxiety, and trauma should be downplayed or dismissed in any way within a therapeutic context. I do wish to highlight however, how potent and totalising these narratives of helplessness, victimisation and trauma can be. With recurs to my own experience of using the construct somatic countertransference to explore my own biases and assumptions, I find it imperative to name the dehumanising effects of systemic violence and institutionalisation and to give voice to the visceral constraint and diminution of life which these systems of oppression perpetuate. By engaging with my own somatic countertransference, perhaps I can become more aware of any potential blind spots, or unconscious assumptions that I hold regarding the women I have been researching with. Perhaps I can also therefore become more aware of the strengths, resilience and hope that women hold for themselves and for their lives. Perhaps I can train myself to hold the many ‘truths’ that co-exist: narratives of oppression and pain, as well as possibilities for hope, joy, creativity and change.

Celebrating strengths

While I have spoken at length about the oppressive regime of the criminal

justice system throughout this thesis, I have intended that this chapter as a whole re-emphasises the many strengths of these women, the resilience, the humour, the creativity and the situated expertise of Min and Kaz, whose direct lived experience of criminalisation can be understood in light of the dehumanising institution in which they are enmeshed.

In my following discussion chapter, I elaborate on the learnings from this analysis chapter, particularly the feedback offered by Min and Kaz around the role of **fun**, **fitness** and **relaxation** in DMT. The concept of trauma will be revisited and further explored, from the perspective of a rights-based and critical philosophy as well as in connection to existing biomedical perspectives within DMT.

Chapter Seven. Discussion chapter: *The 'F' words*. What the fitness?! For fun's sake – let's dance!

Introduction

The research findings presented in the previous chapter reflect a participatory research approach in which I have sought to better understand the role of DMT by listening closely to the self-identified needs, wishes, expectations and recommendations of women participating in the DMT component of this study. My approach as a researcher-therapist is aligned with a contextual approach to therapy in that I have emphasised openness and collaboration (Rolvsjord et al., 2005). In doing so, I offer an alternative perspective to that of treatment models of care and other expert-driven approaches.

My analysis chapter highlighted three main themes: Fun, fitness and relaxation. These findings are important because they shed light on some of the main affordances of DMT as experienced by each of the women participating in the drop-in workshops. As I have stressed in my previous chapter, the findings have emerged out of an interpretive, reflexive process. They are also situated within a specific contextual environment and are not general in nature. What the findings offer is a user-led perspective regarding some of the possible ways in which women might choose to engage with DMT in a community rehabilitation context. At times, some of the findings have contrasted and challenged my own belief systems as a practitioner, such as the concept of fitness being a relevant therapeutic goal for DMT.

The core themes articulated by women in this study illuminate the various ways in which DMT might be used or appropriated in health promoting ways by service users. My discussion builds on each of the ideas brought forth by the women

themselves, and offers a discussion around the concepts of fun, fitness and relaxation from the perspective of strengths-based practice.

I draw from interdisciplinary perspectives from the literature in this chapter to discuss the research findings. Namely, I include research from DMT as well as dance studies, mental health promotion, exercise science and neurobiological rehabilitation. I also integrate perspectives from trauma-informed care and rights-based philosophies to help highlight the intersecting ways in which DMT, exercise, feminism and social justice can be used to conceptualise one possible role for dance therapy in this practice context. For example, aspects of exercise theory are introduced in order to emphasise the value of physical fitness within DMT from a resource-oriented approach. Like Ho et al. (2018) I locate DMT as a hybrid body-mind practice which connects physical aspects of exercise to psychosocial therapeutic approaches (p. 2). By foregrounding the role of exercise within this understanding of DMT I seek to offer an alternate discourse to that of the dominant psychotherapeutic paradigm within DMT theory and practice in Australia.

Framing the findings through embodied critical inquiry: From psychoanalysis to the physical condition

I begin this chapter with a brief reflexive narrative and movement video. My ongoing attempts to self-locate throughout this thesis reflect a social justice orientation to research. In both research and practice, this includes a sustained engagement with one's own biases and limitations (Cantrick et al., 2018, p. 191; Caldwell and Johnson, 2012a). I also build on existing notions of embodied critical inquiry within qualitative research (Caldwell and Johnson, 2012b) and articulate ways in which reflexive, somatic

practices such as DMT be used to help shine a light on some of the implicit assumptions and beliefs that shape the construction of knowledge.

As this is critical research project, my own personal values and experiences are included within the knowledge generation process (Caldwell & Johnson, 2012b) in order to support the production of new theory based on embodied insights and experience. This includes the representation of ideas that are communicated through arts-based and performative mediums.

The influence of psychoanalytic thinking in my pre-existing approach: Assumptions, biases, beliefs and expectations

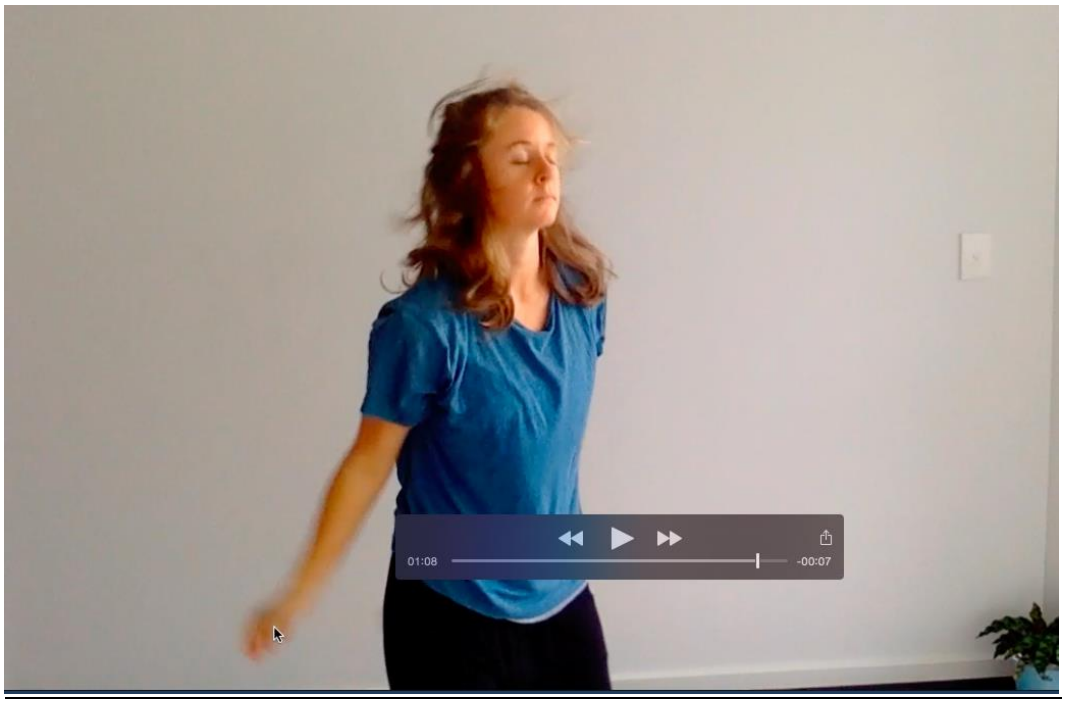
Elements of psychoanalytic theory as well as principles drawn from a creative/expressive paradigm (Johnson, 2009) have informed my approach to this study, particularly within the earlier iterations of this PhD project. As I have critically engaged with these underlying paradigms in response to participant feedback, my theories of practice have been deeply challenged at times.

As a result, I have reflected on what Johnson (2009) calls the "creative/expressive" and psychoanalytic paradigms within creative arts therapy theory in regard to my own frames of reference as a practitioner. This has involved my taking a closer look at tacit notions drawn from psychoanalysis, such as the construct of the inner psyche, or unconscious, which has implicitly shaped my own understanding of DMT. Closely associated with the notion of the unconscious is the expressive, creative, or authentic use of art to draw out and communicate emotionally held material within a trusting therapeutic relationship (Johnson, 2009).

While I value an expressive approach highly, this research project has prompted me to think about some of the constraints of the creative/expressive paradigm including

the associated psychoanalytic notion of the unconscious inner world. This has positioned me much more critically in relation to my own practice and encouraged me to think beyond the familiar frames of reference which have informed my work in the past. The following arts-based response seeks to communicate the centrality of the creative/expressive paradigm within my approach as a PhD scholar, which will then be used as the basis for the main critiques and discussion to follow.

Video 4. Using expressive dance and movement to reflect on bodily and emotional responses



This video link shows how I used dance and movement as a reflexive medium during my research. In the first year of my candidature in particular, I moved, recorded and shared my movement responses to the literature (see Chapter 3) with my external supervisor in the US. We drew on the framework of Laban Movement Analysis (LMA) to analyse these videos together and used these discussions to inform my process of

integrating embodied and emotional responses within my critical inductive literature review chapter.

As this video suggests I have used movement as a sense-making tool and have employed expressive dance and movement to better understand and articulate my inner emotional states, as well as intellectual responses, to the literature. I drew on a symbolic and interpretive approach to expressive non-verbal impulses and analysed this bodily data in order to better understanding my own positioning as an emerging researcher. This approach has aided my analytic efforts many times throughout my study. In many respects, I have leveraged this psychoanalytic approach to help support my own situated and embodied attempts to feel and perform my emotional-based responses to the literature. This has supported my epistemological process of integrating bodily insights into analytic writing and has been used as a key component of my autoethnographic writing at different times throughout this thesis.

A psychoanalytic lens has been a valuable tool for my own sense-making and has enabled me to unearth some of the more unconscious layers my thinking, as per critical theory approaches to knowledge generation. This has supported my attempts to perform critical, feminist research through consistent use of embodied reflexivity. Methodologically, this is intended to transparently connect multiple layers of consciousness between the personal and cultural (Ellis & Bochner, 2000, p. 39).

While the use of expressive movement coupled with the psychoanalytic notion of the unconscious has been central to my autoethnographic approach, I have found these theoretical paradigms have clashed at times with the practice setting in which my research took place. This chapter seeks to reveal some of these tensions before offering an alternative lens through which to understand the research findings.

The creative/expressive paradigm in DMT

According to Johnson (2009) the most basic paradigm underpinning the creative arts therapies can be described as the creative/expressive paradigm (p. 115). In this school of thought, the expression of deeply held thoughts, feelings and emotions are understood to be communicated through the art form, therefore requiring a trusting therapeutic relationship with the arts therapist. In DMT many of the traditional principles underpinning practice reflect a creative/expressive paradigm. Koch & Fischman (2011) describe some of the basic assumptions as following:

- Dance is communication,
- Emotion is expressed through movement,
- Trust is promoted through the therapeutic relationship,
- mirroring, attunement and kinesthetic empathy are used to build trust,
- Movement is full of meaning (p. 61)

In this chapter I examine some ways in which a psychoanalytic paradigm is linked to the ideas presented above, given the close theoretical overlap between the creative/expressive paradigm and a psychoanalytic framework (Johnson, 2009). As well as the emphasis on the communicative power of the arts, the notion of unconscious, as well as the concept of attachment, are key psychoanalytic assumptions embedded in a creative/expressive framework (Johnson, 2009, p. 116). Practitioners who draw on a creative/expressive are likely to use the arts to help people express unconscious feelings, thoughts and emotions. As Koch and Fischman (20011) state, dance is communication, and DM therapists therefore use mirroring, attuning and kinesthetic

empathy[22] to build trust and establish a therapeutic relationship. While Koch and Fischman's articulation of key assumptions reveal a widely accepted theoretical framework for describing a psychotherapeutic approach to DMT, wish to question the uncritical allegiance to the creative/expressive paradigm as well as the psychoanalytic tradition within the majority of DMT literature and discourse.

I have often drawn on these frameworks myself, including within my approach to this research. For example, I have sometimes referred to psychoanalytic concepts such as the notion of transference and countertransference in my previous chapter. In this chapter however, I wish problematise some of the taken-for-granted psychoanalytic assumptions which inform practice and in doing so, offer an alternate perspective to that of the creative/expressive approach.

The notion of the unconscious, as well as the expressive, communicative, or symbolic nature of movement is somewhat problematic if I refer back to my theoretical and philosophical positioning in Chapter 2. In my background chapter I explored my pre-existing philosophical beliefs which stem from the social sciences and humanities. I then drew on a previous research experience in which I critiqued the role of hermeneutic anthropology. Based on the stance I presented in my background chapter, I wish to argue that there are certain critical concerns to do with the politics of reading and analysing movement which echo some of the epistemological constraints of hermeneutic inquiry. As I argued with Geertz's work, the interpretive effort almost always begin, and end, with the voice of the analysist/interpreter/therapist themselves. Like Geertz, the ethnographer, who reads and interprets cultural rituals as a text, the

[22] I would argue that kinesthetic empathy is a conceptual and philosophical assumption, rather than a tool or technique to be used 'on' or with people.

therapist may find themself performing a similar role. The admixture of the creative/expressive and psychoanalytic paradigm in DMT can inadvertently lead to the therapist assuming the role of the expert 'knower' who reads, interprets and decodes the symbolism of movement. In the creative/expressive paradigm, movement is thought to reveal the unconsciously held, psychological aspects of the self. However, the notion of the inner self is a psychoanalytic construct which I also wish to critique in this chapter before offering some alternative perspectives on the scope of DMT practice from an interdisciplinary perspective.

Psychoanalytic uses of movement: Expression, symbolism and representation

A hallmark of psychoanalytic thought is the assumption that the unconscious is locatable spatially 'below' the surface of ordinary consciousness. The notion of the subconscious occupying a more internal positioning in the body, below the surface of ordinary, rational thought is based on a false dichotomy of inner/outer or internal/external. In traditional psychoanalytic thought the corporeal, tacit, experiential and subconscious realm of knowing is regarded as an "inner chamber of consciousness" (Fuchs, 2019). An expressive/creative paradigm operationalises this idea in a sense by using movement to illicit inner states, and metaphorically projecting the unconscious upon the exterior world through symbolising gestures, dance, and movement. This assumes an artificial separation between the inner life of the subject and the outer world however (Fuchs, 2019).

Whether an 'inner' psyche exists or not is a complex philosophical debate which is outside the scope of my thesis to explore. From the perspective of psychopathology, Fuchs (2019) critiques the taken-for-granted assumption of the inner world which pervades western psychiatry. By exploring the historical underpinnings of this belief

system, Fuchs makes the compelling argument that in psychiatry, at least in Germany, the dualistic belief of an *inner* versus *outer* world creates an overly deterministic and individualistic framework through which to understand embodied, lived experience. Like other dualisms of the Enlightenment, the construct of the inner world points toward the *phantasma,* or fantasy, of the self-contained, bound, sovereign individual who is in some way independent from the external environment. Referring to Daniel Stern's work, Fuchs argues emphatically that we are in no way "locked up inside ourselves" (p. 3). Fuchs advocates for a shift from an inner states model toward a more relational approach to therapy and refers to embodied enactive theory to describe a more intersubjective approach to in psychiatry.

While DMT can be considered an embodied and relational approach to therapy (Koch & Fischman, 2011), the strong theoretical influence of psychoanalysis within the field can, unwittingly, serve to perpetuate this problematic inner/outer dualism within DMT theory. As a discipline committed to challenging the bifurcation of mind and body, it is surprising that this inner/outer dichotomy continues to shape so much of the DMT discourse to date. Upon closer examination of the literature it has become clear to me that many of the traditions and assumptions which inform DMT or DMP contain the lingering residue of more traditional psychoanalytic thought. Notions of inner and outer are rarely contested in DMT discourse, nor are other aspects of the psychoanalytic paradigm such as the unconscious, attachment theory, or the notion of therapeutic holding and containing within psychotherapy. While these concepts are important aspects of psychotherapeutic discourse and practice, they represent a particular framework or lineage of thought, which is relevant in some therapeutic contexts yet less relevant in others. As I discovered throughout my research project, there is limited

research literature to support the diversity of ways in which DMT practitioners work, especially when this involves practicing outside parameters of a more traditional, contained, medical or psychotherapy context.

From psychoanalysis to fitness? Unravelling dissonance and disappointment

I have often used the language of psychotherapy to describe my philosophy of practice. My tendency to draw on psychotherapeutic notions reflects the dominant trends within the field, in which psychotherapeutic frameworks are by far the most commonly articulated theories of practice. Using Germany and the UK as examples, there are a number of surveys that have been conducted in order to ascertain the preeminent trends within DMT practice (Eberhard-Kaechele & Aldridge. 2011; Karkou & Zubala, 2015). Different forms of psychotherapy were found to be the main frameworks used by practitioners to describe their work in both Eberhard-Kaechele & Aldridge and Karkou & Zubala's studies. These findings align with the ways in which I myself have theorised my practice, particularly in relation to the earlier stages of this PhD project. For example, the original working title for my dissertation reflected a strong psychodynamic lens, reading:

"Exploring dance movement therapy as an 'emergent space' with women exiting prison."

This concept of the emergent space has been central to my methodological and theoretical approach. In my methodology chapter I have detailed this in length and described the relational, dance-like characteristics of an emergent research design: Flowing, iterative, unfolding dynamic, surprising, changing, improvisational, and co-creative. As well as portraying my ontological and epistemological locality as a

researcher, this concept of emergence reveals my strong pre-existing preference for psychotherapeutic theory and reflects a predominant "depth-orientated" or "gestalt-orientated" paradigm in DMT (Eberhard-Kaechele & Aldridge[23], 2017, p. 242).

At the time of writing my PhD proposal I considered this concept of emergence to be situated "somewhere between psychoanalysis and the arts" (Dumaresq, E. Research proposal, 2016). I used language such as ***self-moving, unbidden, emergent, unconscious, surprising***, and ***intersubjective*** to describe my methodological and theoretical approach. Drawing from verbal approaches to psychoanalytic theory (Bucci, 2013; Wilber, 1999) as well as embodied and affective psychoanalytic theory (Vermes, 2011), my research topic aligned firmly with some of the basic philosophical tenets of psychoanalytic thought in DMT. This being predominantly the belief in an 'inner world' and the expectation that this world – the unconscious – can be brought to life, animated, expressed, interpreted, and integrated through non-verbal as well as verbal means. I anticipated that my approach to using DMT in my research would be depth-oriented, emergent, and psychodynamic. I expected that within our DMT sessions participants might wish to explore their lived experiences of exiting prison and re-entering the community through symbolic, expressive movement. I imagined facilitating creative and improvisational movement activities where people could explore their own authentic, expressive ways of communicating through movement. I also imagined that these "synergies of meaningful movement" (Sheets-Johnson, 2011) could provide an aesthetic and intersubjective approach to exploring and expressing experiences which may have been too difficult to put into words. Overall, I expected to be doing mental health work and offering movement as a way of making sense of challenging life

[23] My translation of the original German.

circumstances. It was my theory that a psychodynamic approach could provide a more empowering alternative to that of the dominant CBT paradigm within criminology.

My expectations around how dance movement therapy by of use however often seemed to clash with the reality of the practice setting in which my study was located. I began to feel uncomfortable in trying to force a psychotherapeutic process in a context that did not suit the ideal of the closed, contained therapy room. I felt disappointed when my plans to facilitate an emergent, expressive or improvisational movement experience could not be actualised, time and time again. The uncontained, drop-in nature of the work and the more porous and unpredictable community context demanded a different approach and suggested to me that a more structured approach may be of benefit.

My ideals and expectations around the very notion of therapy slowly gave way to a new understanding, particularly in response to the data which was presented in my analysis chapter. The psychotherapeutic assumption that therapy should ideally be longer term, consistent, and centred around the therapeutic relationship was quite an unrealistic expectation in this research setting. As I began to see how I was limiting myself and participants by holding onto unrealistic goals and expectations, I started to question the basic assumptions embedded within my pre-existing beliefs as a psychotherapeutically informed practitioner in response to the research findings.

Fun and fitness: The F words?

Prior to undertaking this PhD project, I would not have viewed physical fitness as a central component of DMT practice. Although I recognised that DMT might inadvertently support fitness goals, I understood this to be more of a by-product of DMT rather than a therapeutic focus in-and-of itself.

As a psychotherapeutically informed practitioner myself, I have often highlighted the psychosocial benefits of DMT over physical health or wellbeing goals. On many occasions I have painstakingly argued that dance movement therapy is *not* about fitness. I have highlighted instead the social and emotional benefits of DMT when pressed to explain the value of the modality. The idea that DMT could be theorised as a type of physical therapy, and used to support fitness or functional goals, is not something I had previously considered in depth. This PhD study has given me an opportunity to approach this notion of fitness from a fresh perspective. The physicality of dancing itself is something I will discuss in more detail throughout this chapter, as well as in the next where I offer some practical recommendations for applying the theories discussed in this chapter.

Dancing has been described as an active factor or "key ingredient" in DMT (Koch et al., 2019). In my experience, many people automatically associate DMT with physical activity, or refer to the practice as a fun and relaxing form of therapeutic exercise. Previously, I would have tried to introduce a more psychological lens into this understanding of DMT in order to argue that dance movement therapy is anything *but* exercise. In response to my research findings however, I wish to take a fresh look at this question and offer a perspective that foregrounds the physical domain (Dunphy, Lebre & Mullane, 2020) of DMT practice frameworks.

More than mental health?

In the Australasian context, the professional DMT association describes at least five domains of health/wellbeing which therapists may seek to address (DTAA, 2019). These include the domains of physical, emotional, social, cultural, and cognitive health and wellbeing. These domains of health and wellbeing are currently being used to

conceptualise an outcomes framework and digital assessment app in Australia called *MARA* (Dunphy & Mullane, 2019; Dunphy, Lebre & Mullane, 2020). It is hoped that the *MARA* app will be used by DMT practitioners to evaluate and assess practice goals and therapeutic outcomes within a range of healthcare settings (Dunphy & Hens, 2018; 2020). While the *MARA* framework captures a sense of the breadth of DMT practice in Australasia, there is limited research literature that focuses on the *physical* or *cognitive* domain of health. In Australia, as well as Europe and the USA, a pre-eminent focus on emotional and social health - or psychosocial health – is prominent in the research literature. As such, DMT (or DMP in the UK) is overwhelmingly described as a mental health approach. While there is value in aligning strongly within an existing mental health paradigm, this also runs the risk of suggesting that all DM therapists work within mental health contexts and apply a psychological lens to practice.

DMT research and dance studies: Some key differences

DMT studies, compared to dance studies or dance-for-health studies, typically present findings related to psychological change. Dance studies on the other hand often highlight improvements in physical motor skills (Koch et al., 2019). The emphasis on psychological change highlights the psychotherapeutic orientation of the field and positions DMT as predominantly as mental health modality. As Koch et al. (2019) state: "Changes in motor skills are usually not in the focus of DMT studies. The non-significant results on motor skills confirm DMT as a psychotherapeutic intervention." (p. 18).

In light of this however, there is scope for our field to draw on research in dance studies, as well as other physical therapies research, in order to explore how modified or

adapted[24] forms of choreographed dance in DMT might be used to support physical and cognitive-based therapeutic goals. I consider this especially important as the relationship between physical conditioning, exercise, and psychological wellbeing is a growing area of research that is becoming increasingly recognised within existing healthcare guidelines. In the UK for example, current mental health guidelines at the national level are promoting therapeutic interventions that encourage 'exercise' within the context of the prevention and treatment of depression (Karkou et al., 2019). DMT is a unique modality in that it combines psychosocial uses of artmaking with elements of exercise, movement and physical exertion. Yet – the field is considered almost exclusively a psychotherapeutic modality, meaning that the therapeutic value of exercise in DMT is often under-articulated in existing research and professional discourse.

Not fit for DMT?

At present there is very little research within DMT that focuses specifically on the physical benefits of dance movement therapy. For example, there is little discussion in the field around how DMT might support improved proprioception, muscle tone, flexibility, balance, co-ordination, gait ease, aerobic fitness and overall physical vitality. These areas of health and wellbeing appear to be evidenced in dance-for-health studies, as well as the physiotherapy and occupational therapies literature, but rarely in DMT for the reasons communicated above.

While exercise is an obvious aspect of DMT, the field lacks a strong theoretical framework to communicate this element of professional practice. The language used

[24] The following chapter outlines some recommendations for adapting or modifying stylised dance forms within DMT practice.

within the public domain (i.e. websites, blogs, conferences etc) often omits the word *exercise* and rather focusses on more psychotherapeutically informed language, concepts and philosophical notions.

One exception however is a definition from Hong Kong however, describing DMT as a mind-body intervention that integrates "physical elements of exercise and psychosocial therapeutic components" (Ho et al., 2018, p. 2). Yet, in most literature the concept of exercise in DMT does not strongly feature. While I do not wish to reduce the holistic and creative practice of DMT to that of physical activity or exercise alone, I believe the field could derive benefit from integrating an exercise perspective into some applications of DMT practice.

By developing theory in regard to the health-enhancing benefits of dance, including any therapeutic change within the physical aspects of health, there is the potential for some DMT practitioners to align or collaborate more directly with other physical therapies in an allied health context. This is not to say that DMT should cease to be described as a specialised mental health practice. There is certainly a strong basis within the research literature to support the use of DMT as a treatment model approach to mental health, and a well-established culture of psychotherapeutic practice within the profession. However, I believe it is valuable to continue building research in other areas of DMT, including the physical and cognitive benefits of the practice.

Other international definitions of DMT/DMP

As mentioned, current definitions of dance movement therapy/psychotherapy in the UK, Europe, USA and Australasia do not include the word *exercise* in any public or professional dialogue.

In the US as well as in the UK, DMT/DMP is described as the non-behavioural

use of dance and movement as a specialised form of psychotherapy (American Dance Therapy Association, n.d; Association for Dance Movement Psychotherapy, n.d). In the UK the term dance movement psychotherapy, or movement psychotherapy, is used and the profession is recognised as a registered mental health profession.

In Australia and New Zealand however, DMT is not funded through the mental healthcare system. The professional association of Australasia does not explicitly language the profession as a type of psychotherapy, rather, DMT is described as the relational use of dance/movement to support the physical, emotional, social, cognitive and cultural integration of a person or group (Dance Movement Therapy Association of Australasia, n.d).

The European Association communicates a somewhat vaguer theoretical perspective - probably a result of the diversity of countries represented within this one association. The European association highlights the relational, expressive and communicative use of dance and movement undertaken within the context of a recognised therapeutic contract (European Association Dance Movement Therapy. (n.d). The notion of the therapeutic contract suggests a psychoanalytic and psychotherapeutic paradigm.

Similarly, within DMT/DMP research, definitions of the work often reflect a psychotherapeutic orientation which focus on the emotional, social and interpersonal domains of therapeutic growth. On the one hand, this has proven beneficial in terms of promoting the use of DMT within a variety of mental health contexts. By aligning with the psychotherapeutic model, the field has been successful in building a stronger rationale for the therapeutic use of dance and movement in mental health and has seen a greater degree of professionalisation of the work in this area.

In Australia however, many practitioners do not work in mental health or psychiatric settings. Community settings, as well as educational contexts and aged care facilities are common areas for practitioners to find work. These non-medical, non-treatment model settings demand a different theoretical approach as well as application of the work, as my research findings illustrate. The disadvantage of the prevailing psychotherapy paradigm is it that it represents only *one* theoretical approach to practice. More research is needed in regard to how DMT practitioners in Australia work, where they work, and how they theorise their practice in contexts *other than* mental health or treatment-model settings. While psychotherapy and biomedical perspectives reflect the dominant ways in which DMT is described in the literature, I believe that in reality, there is much more diversity in terms of how DMT practitioners apply their skills. Based on this, more theory is needed to communicate the therapeutic intent behind practice when it occurs outside of the traditional contained, psychotherapeutic context.

Psychotherapy, and more

While psychotherapeutic perspectives are central within many DMT/DMP education and training programs, there are a range of other theoretical influences which may be more relevant in certain practice contexts than a psychotherapy approach.

For example, practitioners working in inclusive education, in aged care, or in physical rehabilitative settings may turn toward a more functional or developmental approach in order to address movement patterns, mobility issues, neurological and neuromuscular function, or other challenges impacting the brain and physical body. Of course, psychotherapeutic principles may influence the work at a theoretical and philosophical level, but there are a range of relevant theories that practitioners may draw on, from behavioural theory, to resource-oriented or ecological approaches.

While the creative arts therapies tend to draw on eclectic mix of theoretical orientations in practice (Johnson, 2009), the psychodynamic tradition within DMT/DMP appears to be the most prevalent paradigm within the literature and professional discourse. Mental health approaches are therefore featured more consistently than any other approach within the research literature. Dance studies, on the other hand, tend to focus on the physical condition, which suggests that there is scope for DMT to embrace not only mental health but physical, functional health. This would require an expansion of the profession's scope of practice within Australasia and a critical examination of the mental health bias within the field. It also requires that recommendations for practice can be made which present an alternative to psychotherapeutic – particularly psychodynamic – theory. In the following chapter I will explore this more closely and offer some recommendations for non-psychotherapeutic applications of DMT in a community-based context.

A case of mind over matter?

Philosophically speaking the overemphasis on mental health approaches in DMT and subsequent underemphasis on physical, functional uses of DMT run some risk of reproducing a mind/body divide and perpetuating the logic of dualism. Eurocentric approaches to therapy have traditionally held a hierarchical view of mind over matter in relation to health and wellbeing. The dominance of CBT approaches within many healthcare contexts reflect this schism.

Many traditional mental health approaches have historically treated the body as a mere addendum to the brain, to be overcome and transcended. Silvia Plath's (1966) literary text, *The Bell Jar,* for example is a salient reminder that not very long ago, the human body was literally punished for displaying any sign of mental ill health: Shocked

with electricity; locked away and forgotten about; the brain structure surgically altered to remove the 'sad' parts - the body has been treated as a bothersome object since dualistic thinking emerged in Eurocentric thought. I explored this briefly in my background chapter in relation to the legacy of the European Enlightenment project and the emergence of the modern, rational, construct of the self.

DMT, on the whole, seeks to challenge this simplistic and dualistic view of mind-over-matter. Yet given that most DMT literature emphasises psychosocial outcomes (Koch et al., 2019) over the physical benefits of therapeutic dance, my concern is that DMT/DMP may unwittingly support the perpetuation of a mind/body divide in the sense that the functional, physical condition is given far less attention than the social, emotional or psychological domain of health.

Of course, as DMT practitioners, we seek to mend this superficial divide between mind and body through our work. I, like many other DM therapists I am sure, am committed to the notion of "making healthcare whole" (Goodill, 2010) through the provision of more integrative and non-dualistic approaches to therapy. It makes clear sense on the one hand, for DMT/DMP to align with other mental health disciplines, particularly since psychology has become increasingly interested in the concept of embodiment and mind-body approaches. Yet, there are many other areas or domains of health and wellbeing which could benefit from what therapeutic dance and movement has to offer. Some of these areas may benefit from psychological theory and practice, and some may find a stronger alignment with other health-related perspectives such as neurorehabilitation, physical therapy, or exercise science.

Dance therapists, being innovative body/mind experts, have the power, knowledge and resources to truly transform mental health into a body friendly

enterprise. This could involve the broadening of our practice definitions to include not only a strong psychological focus, but a more varied rationale to support our work: Frameworks which articulate the plurality of approaches, settings and methodological choices made by therapists in response to the specificity of practice settings. Physical and functional health must not be overlooked but included in expanded definitions of what DMT does, and why.

Articulating the theoretical framework for an *exercisePLUS+* approach in DMT

The remainder of this chapter is focused on integrating notions of fun, fitness and relaxation within an approach to DMT which I am referring to as an *exercisePLUS+* approach. Drawing on existing DMT scholarship, this particular application of dance therapy aims to integrate physical elements of exercise with psychosocial therapeutic approaches (Ho et al., 2018, p. 2). In other words, I seek to provide the theoretical underpinnings which supports the incorporation of a physical fitness framework within a humanistic, resource-oriented approach. Informed by interdisciplinary perspectives, an *exercisePLUS+* approach is informed by current trauma theory in DMT yet extends on this further by emphasising the role of empowerment, social inclusivity and civic participation through the arts, sports and other recreational pursuits.

As such an *exercisePLUS+* approach can be used to address present gaps in services for 'at risk' populations and aligns with current policy and best practice recommendations within the Australian criminal justice system. Furthermore, this approach can be located as a preventative health resource sited within the community, therefore providing an alternative to institutionalised forms of therapy. This notion will be further explored in the following chapter with recurse to the concept of healthcare as

a continuum which spans preventative, acute, rehabilitative and community contexts. By seeking to create pathways for greater social participation through the arts, an *exercisePLUS+* framework can be used to help guide practice within the community sector, where trauma care is recontextualised as a social responsibility and therefore demanding of a community-based, socially engaged response.

From trauma-informed care to "healing centred engagement"

Trauma-informed care refers to a set of principles and guidelines for understanding and responding to adversity in a way that is generally focused on supporting the health of the whole person, rather than simply treat symptoms or deficits. Although my research is not explicitly trauma focused, I have been guided by literature and practice recommendations for trauma-informed practice in DMT throughout my study. I have also engaged critically with feminist literature which highlights the oppressive tendencies of the justice system and raises important questions as to how and why trauma can be considered a human response to institutional, structural and systematic inequity and violence.

In my critical inductive literature review I examined the impacts of institutionalisation and explored the topic of trauma from a critical standpoint, focusing on the ways in which the literature at times objectifies women's experiences as describes trauma in a way that can make women's individual experiences seem somewhat homogenous. Trauma-informed care can be a way of understanding and responding to the complex lived experiences of women exiting prison, yet as practitioners, it remains important to resist re-victimising, homogenising, and stigmatising women based on this identity of trauma.

Literature and discourse from across criminology, be that behavioural focused research or qualitative and critical research, inevitably focuses on trauma as one of the main characteristics a prison population. While it is crucial to understand trauma when working in these contexts, there are simultaneously risks involved in over-focusing on trauma as the meta-narrative of criminalisation.

Despite the overall strengths-based approach and holistic orientation of trauma informed-care, there are some limitations to this approach as articulated by Ginwright (2018). This includes:

a) The possibility of slipping into a deficit-based perspective by over focusing on the individual impacts of trauma through psycho-educational approaches,

b) Little attention given to structural/systemic root causes of adversity such as poor policies, toxic systems and practices, and

c) Over focusing on trauma (pathology) with little emphasis on fostering possibilities (i.e. wellbeing)

Ginwright argues for a shift from trauma-informed practice toward what he calls "healing-centred engagement." This is not simply a semantic argument but a call to include a stronger wellbeing perspective in trauma work which extends the focus from the individual – i.e. how the brain communicates with the body or how physiological dysregulation occurs– toward a more collective and socially responsive paradigm of trauma care. I will return to this argument in a latter part of this discussion, after addressing each of the following points: Fun, fitness and relaxation – in relationship to existing and emerging trauma-informed discourse.

Dance is a "key ingredient" in dance movement therapy

There is great deal of literature to support the idea that exercising alone can

promote a sense of feeling good (Haskell et al. 2007; Penedo & Dahn, 2005; Warburton et al., 2006). This naturally extends to dance too; on the one hand dance can be considered a form of physical exercise, and on the other, an artistic practice. Given the physical effort involved in dancing, both dance interventions and DMT offer creative solutions to addressing health-related issues associated with reduced physical inactivity (Jola & Calmeiro, 2017). In regard to DMT there is literature to suggest that mental health challenges such as depression can be alleviated through specific dance-based interventions which include jumping and bouncing as a basic movement score (Koch et al., 2007).

These connections between dance, DMT, wellbeing and exercise are not necessarily new perspectives. As Karkou et al. (2019) state in their recent article on DMT and depression, people typically view dance as an art form as well as exercise (p. 4). In fact, the national guidelines for mental health within the UK now include exercise and other non-psychotherapeutic approaches (Karkou et al., 2019).

The physicality of dancing as a key component of DMT practice cannot be overlooked. Strong findings from dance and exercise science also support the use of dance in physical health contexts – see the following section about the impacts of dance on physical wellbeing. Koch et al. (2019) identify dance and movement *per se* as being one of the key therapeutic ingredients in DMT. This extends on previous work by Koch et al. (2017) where dancing is described as one of the core active factors or mechanisms of change in DMT in DMT.

While research from dance studies clearly describes the physiological benefits of dance-as-exercise (Jola & Calemeiro, 2017), there is less empirical focus in DMT regarding the value of exercise-informed approaches to dance therapy. The

incorporation of a dance-as-exercise perspective within some applications of DMT could broaden the scope of existing practice frameworks, allowing dance therapists to work not only within mental health but also within physical/functional health contexts.

Some examples from the literature: Using dance-based approaches to support physical health and wellbeing

The following studies were located during my literature search detailed in Chapter 5 (systematic review). Each of the following studies use the term 'dance therapy' or 'dance movement therapy' and many use DMT literature to frame a specific dance intervention. However, these studies are not considered DMT research due to the fact that sessions/interventions are not facilitated by DMT practitioners. However, these studies do point toward the scope of research in dance, exercise, and fitness, and present findings which could be of interest to dance movement therapists who wish to integrate an exercise perspective into existing practice approaches.

One study from a few decades ago explores the use of an aerobic dance program to address physical fitness and self-concept with groups of institutionalised women (Tseo, 1984). Another study explores aerobic dance as part of a diet and weight loss program for women (Petrofsky et al., 2008), while another article studies the impacts of dance on fitness levels, psychological states and overall health status of persons with rheumatoid arthritis (Noreau et al., 1995). The topic of dance and fitness emerges again in a study involving African American Hispanic adolescents (Flores, 1995), and another study includes the use of creative dance for improving the physical fitness and life satisfaction of older women (Cruz- Ferreira et al., 2015).

In a recent study regarding creative arts therapies, older adults and depression, a cluster of dance interventions found to be useful for improving health challenges associated with the physical condition (Dunphy et al., 2019). This includes the use of a modified contemporary dance program to reduce falls in older adults (Britten et al., 2017); improved balance and physical skills in response to age appropriate jazz dance training (Albert et al., 2009); physical as well as cognitive improvement following traditional poco-poco dancing (Adam et al., 2016); folklore dance with a focus on improved physical skills (Eyigor et al., 2009) and a number of other studies reporting on physical and fitness components (Garcia Gouvea et al., 2017; Habousch et al., 2006; Murrock and Graor, 2014). As a co-author of this study, I note that the outcomes we found relating to dance and physical function, combined with my PhD findings, have prompted me to more seriously consider the role of DMT in supporting physical fitness and health outcomes.

Importance of therapeutic training

While some dance-based interventions overlap with aspects of DMT practice, there are still important differences between therapeutic dance and DMT. Unlike fitness instructors, dance movement therapists have a specialisation in dance as well as further training in therapeutic skills and other therapeutic approaches. The skillset of a DM therapist cannot be likened to that of a fitness instructor given the strong artistic and therapeutic perspective embedded within a DMT framework.

The importance of therapeutic training is expressed within the recent meta-analysis by Koch et al. (2019). This study found larger effect sizes in studies facilitated by trained DMT therapists, in comparison to dance teaching interventions. This suggests that the specialised use of dance/movement within a therapeutic context may –

from a more objectivist point of view – support psychological change as well as contribute toward improvements in physical motor skills. As Koch et al. (2019) state: "The effects for general well-being and depression were moderated by *type of therapist* (with specialized dance instructors and DMT therapists yielding larger effects than non-specialized therapists, physiotherapists, exercise instructors, or researchers)" (p. 3).

Dance therapists are not fitness instructors yet there is a wealth of existing data to support an *exercisePLUS+* approach to DMT which combines the physical benefits of exercise with a psychosocial approach. As an enriched version of exercise, the physical affordances of dancing can be leveraged by people in therapy alongside the relational and creative benefits of DMT.

The following chapter will explore some ways in which DM therapists might use modified dance structures to support physical health goals as well as supporting emotional and social wellbeing. Rather than compare DMT to exercise or argue that dance therapy is *not* exercise (i.e. by emphasising the symbolic/communicative/expressive/psychoanalytic use of movement), I suggest that some applications of DMT could be considered an *exercisePLUS+* approach. The following chapter provides some practical ideas and resources to further support this theoretical framework.

The F word: For fun's sake!

Across the creative arts therapies - drama, art, music and dance - practitioners invite people into a play space and use active art making to support health and wellbeing aims. Fun, pleasure and enjoyment are therefore common experiences within creative arts therapies, yet there remain limited theoretical perspectives in regard to the notion of fun in DMT.

The role of play, or simply having fun, has been described as a common element of creative arts therapies practice (Koch, 2017). Closely associated with notions of play are is the role of creativity and aesthetic experience. As Johnson (1985) states, the common source of the creative arts therapies can be found at the level of the human condition, where theories such as play, creativity or aesthetic knowing constitute the most basic ideas of how and why arts therapies affect change (p. 234). Central to therapeutic work is therefore the notion of creating access to a play space, or as drama therapist, Jones (2007) states, "access to playing can form a way of engaging in spontaneity, a route to becoming creative" (p. 165).

While it is widely recognised within the creative arts therapies that play, aesthetics, experimentation, and creative expression are essential to health and wellbeing (Levine et al., 2004; Koch et al., 2017), there are few studies in DMT which speak directly to the notion of fun or pleasure, and rather couch these ideas in terms of mental health jargon, such as the phrase 'improved positive affect.'

Drawing once more from dance and wellbeing studies, research suggests that the physical act of dancing can help promote positive-activated states, such as feeling happy, elated, energetic, and euphoric (Quiroga Murica et al., 2010). The intrinsic joy or elation experienced through dancing is an important component of what DMT can offer and is especially worthy of highlighting in terms of fun and enjoyment. The role of 'just having fun' is intrinsically connected to motivation, which is an important factor within community work where engagement and participation are often the most challenging aspects of doing therapeutic work in the first place.

Okay to have fun here?

In August 2018 I had an opportunity to present my research findings to my University's wider research community. Guest contributors included international music therapist and academic, Dr. Michael Silverman, as well as DMT researcher Dr. Sabine Koch. In response to my research findings and my playful emphasis on the value of fun in DMT, Mike jokingly commented that very notion of *fun* could be considered the *F word* in therapy: A word which is rarely articulated and often feels a little too naïve or simple in terms of articulating what it is we do, as creative arts therapists, and why. I couldn't agree more, and this chapter seeks to centralise the notion of fun in a way that reflects the language, values and perspectives of not only participants in this study but co-researchers, Suse and Alyce, whose expertise is integral to this project.

Throughout my research, in dialogue with Suse, Alyce and other Corrections staff, I have reflected on the fact that I would often refrain from describing my DMT sessions as *fun*. Perhaps, at that time, I didn't perceive fun and enjoyment to be a powerful enough rationale in terms of what I believe DMT had to offer. Rather than emphasise dance therapy as a fun and enjoyable activity, I presented my mental health focus as the main rationale for why people might become involved in the project: *It promotes positive affect*, I would say. *It can help to address feelings of anxiety and depression. It supports self-regulation and promotes self-efficacy*.

While there is nothing at all wrong about these statements – all of which are empirically supported in the literature – this language does not necessarily reflect the perspectives or interests of participants or other service-users. In a community context where participant buy-in and motivation are key, this mental health language can be alienating and expert-driven which may be at odds with more collaborative approaches to therapy where mutuality and sharing power are of high priority.

In an institution such as the criminal justice system, the experience of *just having fun* and *not taking things too seriously*, as Min described seemed quite an anomaly. Hearing from participants that DMT was fun did not come as a surprise to me. As a practitioner, I have heard this countless times before. The notion of fun can be a difficult concept to intellectualise and remains a relatively taken-for-granted or implicit aspect of DMT work.

While it is well documented in the literature that DMT is linked to improved mood, quality of life, decreased negative affect and heightened positive affect, the values of fun and enjoyment are rarely discussed from a participatory, resource-oriented perspective and strengths-based approach. Rather, an overlay of mental health language is often used to describe the therapeutic value of fun and enjoyment.

All smiles: Are you serious?

A text message from my co-researcher, Alyce, provides a valuable perspective in regard to the notion of fun, play, creativity and simply letting go. After observing an introductory workshop which was facilitated during the recruitment process, Alyce texted me the following feedback:

> "The best thing I saw was the huge smiles across the ladies faces and that there was absolutely no judgement in that room SO INCREDIBLE. Have already been selling it to the other case managers re: connectedness, Sense of self/Sense of being, movement…happiness, "something for them." Love love love!" (A. Morton, personal correspondence, April 2018).

Based on this, Alyce went on encourage her colleagues to think about the value of DMT for their female clients at Communtiy Corrections. As is evident in her text,

Alyce was struck by the sense of fun and enjoyment within the session and used this as the backbone of her advocacy.

While I very much appreciated Alyce highlighting things like happiness, connection, smiles, non-judgement etc. - I did find myself wondering if *smiles* and *happiness* would be enough to persuade case managers to refer clients to my DMT workshops. Given the firmly risk-and-needs focus of the system, I had hoped that Alyce might pitch her advocacy more in line with mental health goals, such as reducing anxiety or depression. My assumption was that in order to get through the door of this system I would need to present a strongly medicalised and/or behavioural perspective on what DMT might offer, despite my values and beliefs as a practitioner which are largely humanistic and strengths-based.

Alyce's response however was perfectly congruent with my own experience of how participants had engaged in the workshop. At the same time, I wondered if this feedback might cast DMT in an overly naïve or simplified light. *Shouldn't Alyce also be highlighting the psychological benefits of DMT for other case managers*, I wondered? Surely Corrections workers will be more interested to hear about stress management, reducing anxiety/depression and self-regulation?

At this point in my research I had studied the professional guidelines and public policy in depth and was convinced I would need to strongly appeal to the dominant risk-needs model if Suse, Alyce and I were to have any hope of mobilising the support of case managers during our recruitment process. However, I realised that there is a certain disconnect at times between what public policy stipulates and the ways in which correctional workers seek to engage women in an everyday sense. While policy endorses CBT approaches to therapy only, it is clear that within a community setting

such as this, the true measure of therapeutic success lies not in objectivist outcomes but within the level of client engagement and participation.

While behavioural approaches dominate the forensic sector, my experience is that engagement and participation can speak louder than any other form of evidence. *Are the women interested? Are people attending? Are they having fun?* If therapy is not fun, why should people attend a non-mandatory therapy activity, given the multitude of daily struggles and existing obligations these women are juggling? For a population that is significantly difficult to engage, the value of fun cannot be understated, particularly if this is what is attracting participants to engage in the first place.

It is therefore important to continue to develop ways of theorising the value of fun within dance movement therapy from the perspective of resource-oriented and user-led approaches. The role of fun, which is supported through creativity and play and expressed through the aesthetic medium of dance, is a key aspect of DMT. Like other arts therapies, DMT is distinguishable from other health services in that the arts afford enjoyable experiences that can appeal to people's innate sense of creativity. Most importantly, the notion of *fun* reflects the language of people who actually use DMT services. Professional discourse and research can support this further by integrating more theoretical perspectives around the notion of fun in therapy to highlight the therapeutic significance of pleasure and enjoyment more strongly in the literature.

Connecting relaxation to fun and fitness: A trauma-informed and rights-based perspective

As well as the notion of fun and fitness, the role of relaxation emerged as a third aspect of participant feedback. I now aim to connect this notion of relaxation to the

concepts of fun and fitness in order to generate theory which encompasses each of these areas of participant feedback.

I also incorporate a trauma-informed lens as well a rights-based perspective in order to discuss these findings in relation to existing DMT theory. My intention is to expand on existing trauma discourse in DMT from the perspective of social inclusion and activism. Drawing from existing trauma theory in DMT, I explore the findings in light of Dieterich-Hartwell's (2017) model of 1) developing safety, 2) regulating hyperarousal and 3) attending to interoception. I also link this to Gray's (2017) poly-vagal model in order to consider the ways in which fun, fitness and relaxation can be conceptualised within a wider paradigm of trauma care. While the following discussion incorporates elements of medical trauma theory, such as the role of nervous system regulation, the overarching emphasis remains focused on social inclusivity and equity. This reflects a paradigmatic shift in trauma care toward what Ginwright, (2018) calls "healing-centred engagement", as discussed earlier.

Situating the findings in relation to existing trauma theory in DMT

Safety

Trauma theory indicates that clients who have experienced trauma often do not feel safe in their own bodies (Dieterich-Hartwell, 2017, p. 42). Dieterich-Hartwell's model is informed by Tantia's (2013) approach to building safety in DMT, which relates to firstly establishing safety in the environment; progressing on to establishing body boundaries; and lastly through paying attention to sensations in the body (Dieterich-Harwell, 2017, p. 42).

Safety is therefore a prerequisite for the latter two components of trauma work in DMT, which involve regulating hyperarousal and attending to interoception,

according to Dieterich-Hartwell's theory. In terms of building safety in the environment, Dieterich-Hartwell suggests making the space safe, comfortable and predictable (p. 44). Also, the use of mirroring and attunement to help create a holding environment are recommended, along with the use of neutral music with a steady beat (p. 44).

In cases where therapists have little control over the environment, it can be a challenge to make the space feel comfortable and predictable. My findings reveal that within a community drop-in context, unpredictability and chaos are the main environmental factors which shape practice, as my findings reveal. This can be difficult to navigate for practitioners seeking to apply psychotherapeutic approaches in which a *holding* environment is considered crucial, as per my earlier discussion around the influence of psychoanalytic thought within DMT.

Dance forms themselves can provide a type of holding environment. This idea will be explored in the following chapter where I introduce practical recommendations for integrating dance styles and choreographed phrases within some applications of DMT.

Basic dance forms often contain key movement signatures that can be learned and reproduced. This aligns with some aspects of trauma theory in DMT given that research suggests that repetition of movement, along with mastery and synchrony are considered "healing factors" (Dieterich-Hartwell, 2017, p. 43). In contrast to an improvisational or expressive movement approach, a more structured dance approach may help to facilitate conditions in which a basic sense of safety can be established through the aesthetic form itself. For women experiencing the unpredictability, turbulence and chaos of post-imprisonment, and other clients experiencing similar

trauma and instability, the mastery of structured dance styles could function as an important building block for safety.

A dance-centred methodology that encompasses practicing basic dance skills and choreography may help provide a 'safe enough' environment in which to lay the foundations for what Gray (2017) calls "physiological state-shift" to occur. This refers to the regulating effects of rhythmic and attuned dance and movement and can help to lay the groundwork for further therapeutic trajectories. This could include psychotherapeutic approaches which seek to address more emotional or psychological experiences through creative/expressive, improvisational or associative/metaphorical uses of dance and movement to tell a story, and integrate psychological experience through movement.

Within a drop-in community environment, a more contextually responsive approach and realistic approach may simply put, be to provide a safe space for:

a) Stabilising (i.e. *relaxation*)

b) Energising (i.e. *fun and fitness*).

c) Social connectivity and belonging (i.e. rights-based equity focus).

By using structured dance forms to stabilise and energise the body system, DMT can be used as a form of community-based social engagement in a way that is trauma-informed. By providing fun, enjoyable, soothing, and culturally relevant uses of dance and movement, DMT can offer a therapeutic resource that is oriented toward stabilising/energising the body's physiological condition. This can provide a pathway into more psychologically oriented DMT, if participants choose to engage in psychotherapy as part of their therapeutic process. I will explain this concept the

following chapter and presented this idea as a practice resource for therapists.

Regulating hyperarousal: Up- and down- regulation

In DTM, more active or energised states can be accessed through the physicality of dancing. This finds expression as a fun-and-fitness approach and sheds light on the ways that DMT might incorporate elements of exercise as a therapeutic resource.

As well as providing opportunities for both physical and psychological elevation and energisation, DMT offers more receptive, down- regulating activities which seek to sooth, stabilise, centre and ground a person in the here-and-now. In DMT trauma theory, the role of interoception is presented by Dietrich-Hartwell (2017) as a key component of trauma-informed practice. This refers to noticing and sensing internal body states and sensations, which help to build presence and trust in the moment, as well as building tolerance for more uncomfortable body states which often relate to lived traumatic experience/s.

The combination of up- regulating activities with down- regulating exercises is a core component of trauma-informed DMT (Dieterich-Hartwell, 2017). As such, while the notion of fun and fitness represents a more up- regulated experience, the focus on relaxation can be described as a down- regulating tool. While the fun-and-fitness argument I made earlier focuses on the role of gross motor skills and dancing *per se* as a therapeutic component of DMT, the following discussion explores the importance of balancing up- and down-regulation within an *exercisePLUS+* approach to DMT.

Up-regulation

According to Dieterich-Hartwell, trauma-informed DMT can help activate and enliven the body as well as calm and sooth the central nervous system (2017, p. 44). When clients are immobilised or shut down, movement can help shift the nervous

system into a more enlivened state. As an example, the use of vertical movements such as bouncing or jumping within a folkdance study has been found to correspond with elevations in mood and feelings of joy and aliveness, as well as reduced symptoms of depression (Koch et al., 2007).

As discussed earlier on in this chapter, a fitness or exercise perspective can be advantageous when engaging clients who may to wish to pursue physical or functional movement goals. A DMT repertoire however spans a great deal more than functional movement. This means that practitioners can facilitate fitness-based approaches in ways that afford an enriched experience of exercise – in ways that are trauma-informed, humanistic, person-centred and that are shaped by the particular aesthetic affordances of dance.

Dance forms can be appropriated in order to support therapeutic goals, such as eliciting physiological state-shifts, or changes in the physiological experience, which are crucial to the restorative process (Gray, 2017). These state-shifts are "bio-emotional" states Gray, meaning that physiological state-shifts are necessary in order for further emotional shifts and psychological integration to take place.

Developed in collaboration with trauma researcher, Stephen Porges, Gray's understanding of polyvagal-informed DMT offers a similar perspective to van der Kolk's theory (2016) by highlighting the role of music, dance, movement and rhythm as immediately available resources for trauma restoration. This corresponds to Dieterich-Hartwell's (2017) framework which recommends the use of whole-body movements on the vertical or sagittal plane, along with the use of rhythmic synchronisation to assist in up-regulating the body. Although this type of movement can be challenging for clients

in immobilised states, it can be a helpful resource in terms of re-activating and enlivening the body system at a neurobiological level (Dieterich-Hartwell, 2017, p. 44).

As I have discussed earlier in this chapter, the fun factor in DMT can provide intrinsic motivation to move and exercise. Re-activating the body can be viewed as an essential aspect of some trauma approaches. In trauma theory, an immobilized body or a 'freeze' response is one possible way in which the nervous system may respond to trauma. While other fitness activities can also be helpful in up- regulating the body, such as Zumba class, boxing, or jogging as examples, few fitness activities alone can address the delicate need for homeostasis in the body.

In other words, trauma-informed DMT provides a resource through which balance between sympathetic and parasympathetic nervous responses can be brought into greater equilibrium. This involves carefully balancing the more activating uses of movement (whole body movement /dance choreography) with more down-regulating methods such as breath work, grounding, interoception training, and other calming approaches. Relaxation therefore refers to not releasing or easing muscular tension, but also to the more micro-level realm of developing sensory awareness through interoceptive work which is considered crucial in somatic approaches to trauma-informed care.

Down-regulation

Literature from dance studies describes dancing as a powerful way of stimulating a relaxation response, or "positive-deactivated states" such as feeling released, relaxed and calm (Quiroga Murcia et al., 2010). DMT research reveals that there is more to relaxation than physical muscular release, however. Relaxation includes not only the release of muscular tension but an experience of relative physiological

homeostasis where flight, fight or freeze responses can be neutralised and rebalanced. This involves balancing energisation (fun and fitness) with relaxation (attending to interception), or in other words, activating as well as soothing the body systems through a combination of proprioceptive movement (gross motor) and interoceptive practice (inner sensation).

Dance therapists, unlike gym instructors or other fitness providers, use their therapeutic skills to not only provide opportunities for up- regulation through dance and movement but use down- regulating approaches to restore more balanced nervous system responses. One example is 'grounding' which refers to the process of anchoring in the present. This is a skill that can be achieved physically through paying attention to the ground and the way the body is both held and supported by the enduring presence of the ground (Dieterich-Hartwell, 2017, p. 42). The grounding strategies used by DM therapists provide opportunities for nervous system regulation. Activated and mobile states which are mobilised through dance/movement can be brought back down to a state of calm through sensory awareness and grounding. This attention to nervous system homeostasis requires the sensitivity and skills of a trained therapist and helps to delineate DMT from other functional fitness or other exercise activities.

While I have argued for a practice rationale which incorporates exercise theory and sports science, I do not suggest that DMT could ever be reduced to an 'exercise only' modality. By practicing skills for up- and down-regulating with clients, DM therapists can help to construct take-home resources for individuals to assist in grounding and anchoring in the present, as well as energising through movement. People can choose which skills work best for them and develop their own body-based resources for self-regulation.

Dieterich-Hartwell (2017) recommends that basic trauma care in DMT provides:

a) Education around brain function and processes;

b) Breathing exercises which can be done independently such as using the five senses to ground;

c) Use of therapeutic touch (if appropriate);

d) Initiation of swaying or rocking movements (p. 44)

Generally, a rest-and-settle response (Gray, 2017) can be difficult to access without considerable pre-existing safety and trust. However, grounding exercises can be used even within brief therapy or drop-in sessions to help lay the foundations for relative safety.

Attending to interoception

In Dieterich-Hartwell's (2017) guidelines, attuning to interoception is recommended as a third step during the beginnings of a trauma-informed recovery. Building sequentially on the first two steps, this tuning in to interoceptive states positions DMT as a modality which shares common ground with other somatic approaches such as body psychotherapy or Somatic Experiencing.

Interoception, in DMT as in other somatic approaches, refers to the process of tuning in to the body's signals and noticing internal physiological sensations. As a biological and metabolic phenomenon, interoception can be thought of as the "process of sensory information inside the body being transmitted and communicated to the brain and other body structures" (Hindi, 2012, p. 131). In her article on interoception in DMT, Hindi references body psychotherapist Caldwell (1996) who notes that movement occurs not only on a gross motor level, but at the level of small and almost imperceptible metabolic actions (Hindi, 2012, p. 129).

In my DMT sessions I aimed to introduce interoceptive work in order to firstly establish curiosity and secondly, to begin to track physical sensations (Hindi, 2012). Further work could build on the use of interoception through a more expressive movement approach, which according to Hindi's framework includes steps three to five: (3) translating into communicable language; (4) recognising patterns, and (5) exercising new awareness.

In terms of brief therapy and drop-in sessions, interoceptive work may be best contained to the establishing of curiosity – similar to 'mindfulness' approaches, and the tracking of physical sensations. This alone may be enough to encourage a relaxation response and is achievable in drop-in sessions considering it does not require in-depth exploration of emotional/psychological material.

As I have discussed earlier on in this chapter, an exercise paradigm may be advantageous in terms of engaging clients who wish to pursue physical goals. The therapeutic training of a DM therapist spans a whole lot more than functional movement, meaning that practitioners can facilitate fitness-centred approaches in DMT which are framed around a deeper understanding of trauma behaves in the body. For instance, Dieterich-Hartwell's trauma framework recommends the use of whole-body movements performed on the vertical or sagittal plane, coupled with the use of rhythmic synchronisation to assist in up-regulating the body. Although this type of movement can be challenging for clients in immobilised states, it can be a helpful resource in terms of mobilising the body system in a trauma-informed approach (Dieterich-Hartwell, 2017, p. 44). In terms of working from a strengths-based perspective, it may be important for previously incarcerated women to come in contact once more with their literal physical strength, mobility and fitness – through dance.

The right to embody: Healing-centred engagement in DMT

Within dance movement therapy, literature and research to support the notion that trauma is best supported through a holistic approach which attends not only to the bio-emotional processes of physiological state shift through dance/movement, but can also connect individuals to a stronger sense of community through which to rebuild a more resilient sense of self (Gray, 2017). While medical perspectives in trauma care tend to focus more on the individual neurobiological impacts of suffering, such as what happens inside the body, the psychosocial perspectives from DMT can help to highlight the role of social engagement and community participation and inclusion within what Ginwright (2018) describes as healing-centred engagement.

A hallmark of trauma can be an overwhelming sense of being alone and isolated (Gray, 2017). Feelings of disconnect and alienation are therefore some of the most debilitating aspects of trauma, and community-based programs such as *exercisePLUS+* may help to reduce isolation as well as build protective factors, such as access to community recreation and social engagement. Social engagement is a key aspect of trauma restoration, according to Gray (2017), and is documented in neurobiological research on trauma and the body, such as Porge's (2018) and van der Kolk's (2014) work.

Gray describes trauma care as multidirectional. Not only should the focus be on up- and down- regulation, states Gray, but also on what she calls a sideways-shift. This refers to the role of social engagement, play, interpersonal trust and belonging. The idea of "state shifting in the direction of social engagement" involves an invitation to play, which is essentially a upward mobilisation of the body's energy without the anxious/fearful response (Gray, 2017).

This relates back to my research findings in that dance movement therapy can offer a multidirectional approach to healing-centred care through a combination of the following:

- An experience of play, or having *fun*, which supports positive engagement;
- Accessing the physiological and physical benefits of dance therapy as *fitness*;
- Developing personal resources through *relaxation* activities such as grounding and/or interoceptive awareness training. This can be used in sessions to down-regulate, as well as developed as take home tools to deal with daily stress and anxiety;
- Providing a means for social inclusion and community participation through a public health approach which seeks to build protective factors such as community inclusion and supportive social engagement.

This approach seeks to address the recognised lack of pro-social activities for women in the justice system by situating DMT as a healing-centred community health resource.

Addressing a gap in services and research: Connecting a *exercisePLUS*+ approach to the Corrections Victoria guidelines

In my systematic review chapter, I presented some of the current policy and guidelines from Corrections Victoria in order to link therapeutic objectives from dance movement therapy to outcomes and goals articulated by the Victorian Department of Justice. From a behavioural perspective, I argued that research from dance movement therapy can empirically support eight of ten risk/needs factors detailed in the criminogenic framework used by case managers to support recidivism goals. From this

dominant risk-need-responsivity perspective, it is believed that by targeting core criminogenic needs, reductions in offending can occur.

From a more humanistic perspective, the principles embedded in the Good Lives Model (GLM) present a more holistic framework for supporting clients in the justice system, as detailed in my systematic literature review. As a strengths-based approach is considered best practice in criminology, case managers often combine The GLM with the risk-need-responsivity framework. The GLM offers an alternative to deficit-framing models and highlights goals and principles which align with a humanistic approach to therapy. Areas of therapeutic focus include physical, mental and emotional health, relationships, and community connectedness; in addition, practical and material considerations are also strongly considered in the GLM such as employment, education, and access to leisure and recreation, (Corrections Victoria, 2016a).

While case managers strive to support their clients in each of these areas, there are presently gaps within service delivery and research which make it difficult for workers to know where to refer clients, or how to best direct them toward resources within the community that can help support these goals. One example is the expectation that case managers will help to facilitate access to pro-social leisure and recreational services within the community. As explained to me by case managers at Geelong CCS, opportunities to participate in these kinds of activities are limited, especially activities which meet the objective of pro-social leisure and recreation, detailed in professional guidelines. For example, while participation in a community dance class might be of interest to some women, there are structural and systematic barriers such as poverty which get in the way, as well and socially constructed beliefs in stereotypes which tend to stigmatise and alienate already marginalised, criminalised women from the wider

community. I briefly explored this construct of stigma in my analysis and findings chapter, with reference to Min's concern around being seen and judged based on a recent media portrayal of her character in the local news.

One of the major ways in which dance movement therapy could support criminalised women in the community is through the provision of services which offer pro-social engagement through leisure and recreation-based activities. This would directly address a central risk and need factor, as Corrections Victoria guidelines recognise that low levels of involvement and satisfaction in pro-social leisure pursuits and recreational activities are one core risk factor associated with (re)incarceration (Corrections Victoria, 2016a; 2016b). Community-based DMT programs would help support case managers who are striving without success to address to engage women in meaningful recreational and therapeutic activities in the community.

Figure 6. Co-researchers Alyce (left) and Suse (right) believe a recreational DMT program in the community would be a logical way of engaging criminalised and at-risk women.

There is research in criminology to suggest that alternative approaches to rehabilitation, including the use of arts and physical engagement can help to support pro-social attitudes and improve mental and physical health in criminal justice contexts (Joseph & Crichlow, 2015). For example, in *Alternative offender rehabilitation and social justice: Arts and physical engagement in criminal justice and community settings*, contributors explore the theoretical rationale and implementation considerations for programs such as mindfulness, capoeira, marital arts, yoga, drama, drumming and other creative and physical art forms. The editors of this volume (Joseph & Crichlow, 2015) call for more innovative and social justice models to emerge in the field, in order to engage criminalised populations in more holistic ways. In particular, this publication suggests that more creative, reflexive and physically oriented recreational and therapeutic approaches are likely to be of value in terms of engaging people and contributing toward the overarching recidivist goals of criminal justice system.

A community-based approach to DMT can address this need described in the literature for more physical, artistic and therapeutic recreational possibilities for criminalised populations. This need is also articulated in the professional guidelines, where lack of recreational and social activities is considered a core risk factor. Moreover, a community-based DMT service can provide a form of therapy that is person-centred and far less institutionalised than the pre-dominant approaches in criminology. While DMT is more than a recreational pursuit alone, as discussed in my previous chapter, it does offer benefits similar to those associated with sports and recreation (i.e. fun and fitness). DMT however combines the stablising effects of relaxation, or down-regulation, alongside the more physical, up-ward or energising body movements that are linked with fitness or functional movement. As both a therapeutic resource as well as a fun recreational activity, DMT can be positioned as a community service which not only addresses risk factors articulated by the risk-need-responsivity model but actively builds protective factors, articulated in the GLM as:

- **Life:** Healthy living and optimal physical functioning,
- **Excellence in play:** Accomplishments and enjoyment associated with leisure activities or recreational pursuits,
- **Community:** Connectedness to others in broader social groups or communities
- **Pleasure:** Feeling good in the present time - the emotional state of happiness
- **Creativity:** Self-expression through alternative forms (Corrections Victoria, 2016b, p. 9)

Given that one of the main criminogenic needs is described within Corrections literature centered around the need for *satisfying leisure and recreational activities*, it is feasible to imagine DMT playing a role in addressing this fundamental gap in

community services. This begs the question of how such public programs might be funded. One possible solution is explored below.

Funding opportunities

The YMCA[25] in Australia offers free or heavily subsidised gym access for low income earners. Going forward I propose that DMT is well suited to not only medical/treatment contexts, but also within a broader community, or preventative health, context. This includes community gyms and recreational centres as well as neighbourhood centres. The following chapter will explore this idea more fully in relation to the concept of healthcare as a continuum (O'Grady & McFerran, 2007). I will draw on a mental health promotion framework (Mrzeck & Haggerty, 1994) in order to present recommendations for practice that include DMT programs run through recreational, leisure and fitness centres. These are not typical DMT settings yet should be more seriously considered in terms of the research findings, especially in regard to responding to risk factors and building protective factors such as 'community belonging' through easily accessible and subsidised forms of therapy, such as programs embedded within existing organisations that have a capacity to support low income earners, who are often those at risk of entering the justice system.

Summary of discussion points

- **More than a psychotherapeutic service:** There is strong research to support the use of DMT/DMP as psychotherapeutic approach. There is less research to support other applications of DMT, despite the diversity of practice settings and

[25] http://victoria.ymca.org.au/support/ask-for-support.html

populations DM therapists support.

- **Interdisciplinary approach:** DMT is well positioned to draw on empirical findings from not only psychology and psychotherapy, but also from exercise science, dance, and other related health related disciplines. A plurality of therapeutic approaches can help reflect the diversity of practice settings in which DM therapists are, or could be, employed.
- Based on my research findings, a **renewed focus on 'dance-centred' DMT** may be valuable to consider, particularly within the realm of public health and health promotion. As a discipline which incorporates elements of exercise within a psychosocial approach (Ho et al., 2018), DMT is well positioned to provide a service which targets physical health and wellbeing through an *exercisePLUS+* approach. This aligns with trends in mental health guidelines which have incorporated exercise and other non-psychotherapeutic services as part best practice for the treatment and prevention of mental health conditions such as depression (Karkou et al., 2019).
- A **fun, fitness-oriented and trauma-informed approach** in DMT (*exercisePLUS+*) aligns with public policy/guidelines within criminology as well as findings from DMT and related literature. Community DMT programs could be sited within YMCA settings so as to offer subsidised/free participation rates to low income earners (i.e. criminalised women). This approach aims to provide a public good that can be accessed by those at-risk of entering the justice system, as well as those re-entering their local community following imprisonment. Importantly, by siting this service within the community, those experiencing the stigmatising effects of criminalisation can choose to participate

more fully in society through recreational pursuits that carry therapeutic value. This contrasts to the more institutionalised forms of therapy which run the risk of further entrenching and perpetuating disempowering sets of condition. It also shifts the focus to access rights and need for some applications of DMT to be more easily accessed within an inclusively focused, community context.

- **Trauma-informed care**, or "healing-centred engagement" (Ginsberg, 2018) includes not only addressing individual symptoms of trauma but creating the conditions through which "the right to embody" (Gray, 2017) is can be understood, and applied, in alignment with social responsibility values. This involves considering therapy from a social equity and responsivity perspective that engenders a commitment toward building inclusive pathways for community participation and social (re-)integration.
- **Community-based applications** of DMT can offer a strengths-based approach that is wellbeing centred. This means integrating biomedical knowledge around trauma and the body so that practice methods are empirically supported, yet emphasising the contextual and cultural influences of community in the therapeutic approach and aspiring toward a collaborative and non-expert model of care. Implications for practice are described in my next chapter, and a practice resource will help ground these ideas and theory in an applicable way.

Chapter 8. Implications for practice: *Dance takes centre stage in DMT* – A community-based, preventative health resource

Introduction

My main critique is presented in this final chapter as I provide an alternative practice model to that of dominant psychoanalytical perspectives in DMT/DMP. This contribution to new knowledge builds on the ideas expressed in my discussion chapter where I articulated a theoretical development that includes a focus on dance teaching in DMT, alongside an emphasis on fitness, wellbeing, recreation, and social inclusion. The aim of this final chapter is to present a theoretical framework to assist practitioners who wish to incorporate an *exercisePLUS+* approach in preventative health contexts in Australia, thereby challenging the healthy/unhealthy binary of the biomedical/treatment model.

In earlier chapters I described the influence of new materialist theory and other feminist perspectives in the formation of this research project. In this chapter I offer a sense of how these ethics of collaboration, exchange and entanglement have crystallised in this project as a new form of applied knowledge: a theoretical model that can be used in contexts outside of medical paradigms in pursuit of social justice and equity aims. The central components of this model have been developed in the previous chapter and were drawn from my interpretations of participant feedback. In this chapter these concepts are put to work in a more practical manner, demonstrating the wider implications of the research findings which have been guided by ethics and principles embedded in participatory, feminist and new materialist thought.

In the previous chapter I presented the theoretical underpinnings of an *exercisePLUS+* approach. The concepts framing this approach are informed by research

findings, particularly the direct feedback of study participants. The following principles were discussed, and will be further expanded on in this chapter:

a) The role of community based DMT in supporting community building including participation in recreational, leisure and therapeutic activities;

b) Providing alternatives to dominant psychotherapeutic or medicalised frameworks in DMT;

c) Highlighting the therapeutic value of exercise within an extended DMT practice framework.

By positioning DMT as a modality that combines elements of exercise with a psychosocial approach (Ho et al., 2018) I argued that DMT is well placed to support the varied needs of individuals or groups in a range of settings, including contexts in which physical health challenges are present. This chapter also aims to re-emphasise the role of *dancing* in dance movement therapy and to equip practitioners with ideas and approaches which can be further developed, modified and expanded upon in response to specific practice settings.

In this chapter I offer suggestions for how DMT might be practically applied outside of a treatment setting, within the health context of community preventative care through what I am calling an *exercisePLUS+* approach. The practice implications of this approach are presented in Part 2 of this chapter. This includes a resource describing the practical steps, theory, approaches and principles underpinning an *exercisePLUS+* framework and is intended to assist practitioners who wish to integrate physical components of dance-as-exercise into their overall DMT work.

The practice resource in Part 2 of this chapter is informed by a combination of dance pedagogic approaches as well as existing DMT theory and methods. The role of

dance skills, structures, styles and steps are highlighted and the idea of *learning to dance* is explored in relation to a DMT scope of practice. I will provide examples of how the incorporation of goal-directed dance/movement approaches in DMT (i.e. learning to dance) aligns with some current trends in medical research on dance and wellbeing. In medicalised dance/wellbeing studies for example, DMT theory is often used to explore connections between dance and health, yet non-psychotherapeutic approaches generally form the basis of these interventions (i.e. Lossing, Moore & Zuhl, 2017).

Drawing on this field of research which includes medical dance studies, I offer some recommendations in this chapter which centre around non-psychotherapeutic applications of DMT. Key to this approach is the use of adapted dance forms which can be therapeutically appropriated within DMT. As explored in the previous chapter, there is scope for DMT practice frameworks to extend beyond predominantly mental health contexts, to include more physical and neurocognitive approaches. As discussed in the previous chapter, DMT can be used across a range of health contexts from the physical condition through to mental health and neurocognitive care and rehabilitation. In this chapter, the role of DMT within *preventative* health and wellbeing will be of particular focus. Furthermore, the role of aesthetic experience will be highlighted as I offer suggestions for a re-centring of dance in DMT, and articulate recommendations in regard to the role of dance steps, skills, structures and styles in therapy, based on a combined dance pedagogy and DMT perspective.

Part 1. Dancing across the healthcare spectrum: DMT in preventative, acute and rehabilitative care

While dance movement therapists work in a variety of contexts and draw from

an eclectic mix of theoretical perspectives to support their work (Eberhard-Kaechel & Aldridge, 2011; Karkou & Sanderson, 2001; Karkou & Zubala, 2015), this diversity is not always represented in the professional literature or discourse. As I explored with my systematic review, treatment model approaches and therapeutic outcomes are often emphasised within DMT literature and tend to reflect medical or psychodynamic orientations. Preventative health and wellbeing remain relatively underexplored within DMT literature, as are community models and other non-expert driven approaches.

DMT in acute treatment contexts

Dance movement therapy is often used to treat primary illness, and a clinical approach for doing so is outlined by Goodill (2005). A medical approach to DMT, according to Goodill, draws on theory from health psychology and health sciences and brings into focus a more integrated and holistic perspective within health care (see Goodill, 2010, on "making healthcare whole"). Examples of treatment settings that are supported by strong research findings are oncology (Bicer & Kurter, 2016; Bradt, Shim & Goodil, 2015; Goodill & Ginsberg, 2009; Goodill, 2018; Ho, 2005; Ho, Lo & Luk, 2016); depression (Koch Mala, Karkou & Meekums, 2012; Karkou & Nelson, 2015; Karkou et a., 2019) and other psychological health related challenges (Koch et al., 2014; Koch et al., 2019).

DMT in preventative health contexts

Less emphasis has been placed on the role of DMT within the preventative context of mental and physical health, however a recent systematic review written by Germany scholars (Martin et al., 2018) explores the role of the creative arts therapies, including DMT, within stress management and prevention. Of all the dance

interventions reviewed by Martin et al (2016) only 2/6 of these studies were led by registered DM therapists (Bräuninger, 2012; Wiedenhofer & Koch, 2017). The other four studies appear to be health-oriented dance interventions which use modified tango (three studies) and African dance (one study) to support therapeutic outcomes. Overall, this systematic review found there to be considerable quantitative evidence for the use of dance, music, drama and art as preventative health resources within the area of stress prevention and management.

Another research study which situates DMT as a preventative therapy refers to the use of DMT within a violence prevention program (Koshland & Wittaker, 2004). A further example of DMT used in preventative care is articulated by Bota, Kalman & Muszbek (2009), who explore the combination of dance movement therapy and touch to help prevent burnout within a hospice setting. More recent is Casey's (2018) theoretical paper which discusses the use of DMT as a primary tool in the prevention of childhood sexual abuse. More research focusing on the role of DMT within preventative healthcare is needed, along with practical and theoretical frameworks to support the application of DMT in non-treatment model contexts, such as preventative care and community wellbeing contexts.

Mrazek and Haggerty's healthcare spectrum

The practice resource I present in Part 2 of this chapter is informed by a preventative health model put forth by the World Health Organisation (WHO, 2004). The WHO definition of 'mental health promotion' draws from Mrazek and Haggerty's (1994) framework which focuses on three phases of healthcare:

- Preventative

- Acute, and
- Rehabilitative.

In other words, this includes a focus on *universal* health (general public); *selective* health (at risk); and *indicated* health (high risk but undiagnosed). The diagram below depicts Mrazek and Haggerty's framework which is used as a basis for the practice recommendations described in this chapter. The following figure illustrates the different phases of healthcare as understood by (Mrazek & Haggerty,1994) and offers a clear overview of the following domains: Preventative care, early intervention, treatment, and continuing care.

Figure 7. Mrazek and Haggerty's model of the healthcare spectrum

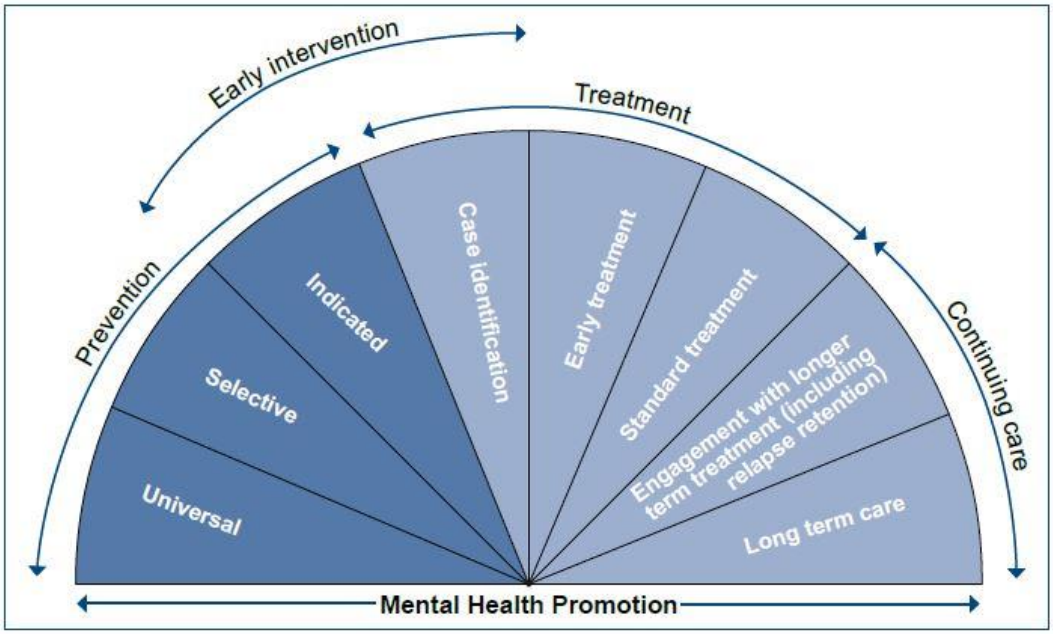


Figure 6: Mrazek and Haggerty's model of the spectrum of interventions for mental health problems and mental disorders

Source: Mrazek P and Haggerty R (1994). Reducing risks for mental disorders: Frontiers for preventative intervention research, Committee on Prevention of Mental Disorders, Division of Biobehaviourial Sciences and Mental Disorders, Institute of Medicine, Washington, National Academy Press

A similar conceptualisation of the healthcare spectrum is also detailed within music therapy literature (O'Grady & McFerran, 2007). Based on findings from O'Grady's master's thesis, these authors explore the relationship and common overlap between Community Music and Community Music Therapy (CoMT). In doing so, they argue that music therapy practice traverses a range of practice contexts, some of which more closely resemble a community music program and others which align more strongly with acute illness or treatment model approaches. The notion of the healthcare continuum is introduced in this article in order to explore how music therapy responds to, and is adapted within, differing health contexts from wellbeing and prevention through to acute illness and rehabilitation.

O'Grady & McFerran describe how music therapists who are trained in medical and psychotherapeutic approaches, as well as community and wellbeing models, are well resourced to work therapeutically with people across a range of healthcare settings.

The authors articulate an expanded notion of health and illness and locate music therapy as a practice taking place along various phases of a healthcare continuum. These phases include

1) Acute illness/crisis;

2) Rehabilitation;

3) Community; and

4) Wellbeing contexts (2007, p. 20).

This notion of health as a continuum challenges the dualistic notion of healthy versus unhealthy and introduces a more fluid understanding of healthcare. This acknowledges the more porous and often overlapping ways in which people can tend to engage with healthcare systems, from prevention-based work through to crisis support, to acute care and within rehabilitation or recovery settings.

Drawing from music therapy, the notion of the healthcare continuum can provide a framework for conceptualising the role of DMT within a broad range of contexts, including treatment settings as well as rehabilitative contexts, community work, and public health promotion. However, the application of DMT in different health settings requires context-driven approaches theory and practice, as community contexts differ remarkably from more medical environments.

Theoretical perspectives in DMT

In order to help frame the recommendations presented in a practice resource (Part 2), the findings of Eberhard- Kaechele and Aldridge (2011) are presented below. This offers a conceptual framework for interpreting the practice resource to follow. Given that Eberhard-Kaechele and Aldridge (2011) have studied and articulated some

of the most common theories of practice in DMT, I have drawn on these ideas to help frame the recommendations relating to an *exercisePLUS+* approach in Part 2.

I have translated the following table found in Eberhard-Kaechele and Aldridge's (2011) study from German into English in order to provide a clearer overview of common theoretical perspectives in DMT:

Table 5

Therapeutic perspectives in DMT

Some therapeutic perspectives from DMT (Eberhard-Kaechele & Aldridge, 2011)	
Resource perspective: Focus on strengths, abilities and existing skills and capacities	**Problem focused perspective:** Focus on conflicts, deficits, symptoms
In-the-now perspective: Focus on the experience, behaviour, issues which are showing up in the 'here and now'	**Biographic perspective:** Focus on memories and past experiences and understanding these experiences as the cause of current issues
Micro process: Limiting therapeutic inquiry to processes of short duration; creating containment by isolating parts of an experience for brief, in-the-moment exploration	**Macro process**: Focus on more ongoing issues which occur over a prolonged amount of time; connecting persisting issues to biographic information and past experiences
Body/functional perspective: Focus on motor and physiological processes; balance, strength, coordination, strength, flexibility etc. (could eventually be connected to emotional states)	**Aesthetic perspective:** Focus on aesthetic processes such as symbolising and meaning making through movement using form and improvisation.
Interpersonal I: Focus on the development of interpersonal relationships to 'self', and to the therapist.	**Interpersonal II:** Focus on how past relationships inform current interpersonal experiences. Includes exploring relational patterns from early childhood.
Tight structure: SPecific rules, structures, forms used in order to focus on a particular goal.	**Free structure**: Process is more emergent and open; client invited to make more decisions about the how the process unfolds
Goal orientated: Agreement on a goal that can be reached within the given number of therapy session	**Process orientated:** Focus on spontaneous, emergent phenomenon; going where the material itself leads.

I have selected the following perspectives from the table above to support my recommendations detailed in the following sections of this chapter:

- Physical/functional perspective
- Resource-oriented perspective
- Tightly structured approach
- Goal-oriented approach

These approaches can be used with the general population in support of physical health and wellbeing goals. As the therapy moves into more targeted 'at risk' domains, such as lived experience groups, there is potential for more psychosocial elements to be included in the therapy approach. The following perspectives can be combined with the existing approaches to help lay the foundations for further psychosocial work, should the therapy that be a relevant direction for therapy to take place:

- aesthetic perspective;
- emotional perspective; and
- micro process perspective

Each of these perspectives will be explained and elaborated on at length within the practice resource itself. Practice methods will be linked to the above approaches, some of which incorporate aspects of dance pedagogy or dance training, in order to provide a practical sense of what a physical, functional and aesthetic approach in DMT might involve. By combining certain aspects of dance pedagogy with other DMT principles and approaches, this resource offers an expanded practice framework by considering the role of *learning to dance* as a valuable therapeutic resource in some therapy contexts. This also reflects a re-centring of dance within dance movement therapy, with particular emphasis on the role of dance styles, dance steps, and dance structures within a DMT framework (see Part 3.)

The table in the section to follow lays out a suggested practice approach that integrates the development of dance skills and styles into a preventative health context, and connects practice methods to underlying theory and DMT principles. In a sense, this framework provides an alternative theoretical framework to that of the creative/expressive and psychoanalytic paradigms within the creative arts therapies (Johnson, 2009). An *exercisePLUS+* approach centres around the overlapping principles of therapeutic resourcing, of learning and cultivating artistic skill, and seeks brings 'dance' to centre stage in a way that resists traditional psychoanalytic applications and presents and alternative approach. The theory behind this conceptual framework rests on the notion that people are *dancers* – not patients or clients – but creative and artistic beings who may choose to explore modified dance forms and choreographic processes as part of a combined dance-art-exercise-therapy approach. Psychosocial approaches can be brought into this framework however, it is not imperative that the therapy adhere to psychological frameworks or assumptions, unless it is clearly the wish of participants to explore dance in a more psychotherapeutic manner.

The approaches outlined in the practice resource below are not limited for use within criminal justice contexts and could be applied within a broader range of preventative health settings. For example, an *exercisePLUS+* approach could be adapted for use within treatment settings and rehabilitation contexts as well as community preventative health. However, the table below focuses solely on the preventative phases of healthcare as articulated by Mrazek & Haggerty (1994).

Part 2. Overview of principles and approaches: An *exercisePLUS*+ framework

The following table provides and overview of the potential role of DMT in preventative health, with principles including -

- Providing community-based programs;
- Fostering community building;
- Strengthening protective factors;
- Activism, advocacy and social justice;
- Engagement with wider public;
- Providing accessible and more targeted services for ‘at risk’ populations and developing inclusive participation pathways in collaboration with key community “players” (Bolger, 2013).

Table 6

Practice resource

Healthcare context	**Located/sited**	**Participation pathways**	**Therapeutic orientation** (informed by Eberhard-Kaechele & Aldridge, 2011).	**DMT practice approaches**	**Health promoting benefits**
Universal "targeted to the general public or a whole population group that has not been identified on the basis of individual risk." (Mrazek & Haggerty, 1994) populations)	Sports and leisure centres (YMCA); other community creational venues; community centres	Subsidised or free access for low income earners (i.e. supporting potentially 'at risk' women) Funding/access through YMCA Open Doors program: http://victoria.ymca.org.au/support/ask-for-support.html	Participatory/humanistic and trauma-informed • *Physical/functional perspective* Developing sense perception; physiological and motor functions; breath; balance; flexibility; co-ordination; strength; reflexes) • *Resource-oriented perspective* Activation of	Tailor DMT experience to help build functional movement capacity and fitness: including building strength, stamina, coordination, balance and overall "vitality" i.e. feelings of joy, pleasure, engagement (Koch et al., 2007) Use of dance pedagogy to activate physical strengths and	Targeting the "physical domain" (Dunphy & Mullane, 2019) of DMT. Goals include fitness and coordination; proprioception; tension release; introduction to range of different movement qualities through dance (Dunphy & Mullane, 2019) Fun and fitness: activation of 'feel good' effects associated with

			personal strengths and resources • *Tightly structured* Highly structured process with clearly defined goal) • *Goal orientated* Structure oriented toward attainment of particular goal)	capacities through teaching dance skills, steps, styles etc. Focus more on proprioceptive skills (gross motor movements; sensing body in space; mobility) Teaching basic dance steps to provide structured safety container. Achieving execution of basic dance steps & movement phrases and developing physical capacities, resources, strengths.	exercise (physiological) AND focus on cultivating joy-like states through dance/movement *per se* (Koch et al., 2019). Control; self-mastery; agency; self-esteem; confidence through learning to move/dance. Social participation, integration and belonging.

Selective "targeted to individuals or a subgroup of the population whose risk of developing mental disorders is significantly higher than average" (Mrazek & Haggerty, 1994) i.e. Women identified as 'at risk' of re/imprisonment	Sports and leisure centers (YMCA) Community-based support groups; Transitional housing accommodation	As above AND Situate programs within community based support groups; transitional housing; drug and alcohol groups; community mental health support	All the above AND Increased emphasis on the role of *interoception* (i.e. noticing, sensing, differentiating feelings in the body and tolerating physiological feeling states)	Same dance/movement structure as above AND Slight shift toward interoceptive techniques, whilst continuing to build proprioceptive capacities.	As above AND Physiological regulation through interoceptive practices (Dieterich-Hartwell, 2017; Hindi, 2012; Gray 2016).
Indicated (early intervention) "high-risk individuals who are identified as having minimal but detectable signs or symptoms foreshadowing mental disorder,	Community health settings and organisations running early intervention programs in family violence prevention; drug and alcohol misuse; early intervention mental health support; sexual	Same as above AND Embed in community 'early intervention' programs	All the above AND introduce psychoeducation focus through • *Aesthetic perspective* Beginning to connect sense perception with meaning-making, creativity,	Same dance/movement structure as above AND Begin to introduce basic improvisational/symbolic movement processes.	As above AND Support capacity to experience "aesthetic action" through dance as pleasure, beauty and aesthetic experience are important health predictors in creative arts therapies (Koch

or biological markers indicating predisposition for mental disorder, but who do not meet DSM-III-R diagnostic levels at the current time.' (Mrazek & Haggerty, 1994) Risk factors may include women struggling with drug and alcohol dependency; intimate partner violence; severe mental health challenges; extreme financial hardship.	assault		symbolisation, improvisation) • *Emotional perspective* Beginning to perceive, differentiate, express, tolerate emotions) • *Micro process perspective* Focus on in-the-moment experience of the client)	Begin exploring emotional content through improvised movement, mirroring, and attunement. Therapeutic holding: containing emotional content by using processes of short duration and limiting emotional explorations to in-the-moment experience of group members. *Less overall focus on symbolic or improvised movement however in the prevention phase, and greater emphasis on dance/movement skills acquisition.	et al., 2016). Emotional regulation (beginning to experience emotions as bodily phenomena and express emotional content through aesthetic dance/movement forms)

Interpreting this resource

This table is organised according to Mrazek and Haggerty's (1994) phases of *early intervention* and is informed by Eberhard-Kaechele and Aldridge's (2011) research on dominant theories of practice in DMT.

This table connects practice methods to theory and provides further rationale for an interdisciplinary approach which synthesises DMT knowledge with dance pedagogy and exercise science perspectives. This same resource is presented in alignment with preventative health considerations, and another similar resource could be developed to support practice in acute/treatment and rehabilitative settings.

Overlapping practices: Community dance and DMT

The *exercisePLUS+* framework highlights the value of combining the 'feel good' affordances of dance-as-exercise with a humanistic and aesthetic approach to therapy. While the combination of exercise, aesthetic experience and principles of humanistic therapy can be located firmly within a DMT practice framework, this approach also shares common ground with other community-based and wellness-oriented dance programs.

There are some shared characteristics that unite other publicly available dance-for-health approaches, such as the popular Dance for Parkinson's[26] program, and the *exercisePLUS+* recommendations presented in this table. The main overlapping principle is centred around the understanding that the physicality and the artistry of dancing offers a type of therapeutic experience *per se*: People engaging in this approach are therefore considered dancers – or artists – rather than clients or patients.

The *exercisePLUS+* framework also shares common ground with other dance-for-wellbeing approaches in that it promotes the physical/physiological/motoric value of dance alongside social, emotional and psychological benefits. Whereas DMT literature

[26] There are several programme's which could be referenced here: to visit the main Australian site visit https://www.danceforparkinsonsaustralia.org/

traditionally highlights mental health outcomes, *exercisePLUS+* integrates non-psychological uses of dance which are more commonly applied within recreational dance studies/interventions. For a recent example of this, see Konduru (2020) on the specific health benefits of the Indian-classical dance form, Kuchipudi.

While some aspects of the *exercisePLUS+* concept resembles other dance-for-wellbeing approaches in the community, the therapeutic knowledge and skillset of DMT practitioners is nonetheless integral to the recommendations presented in this chapter. The incorporation of a trauma-informed framework is a key component of the approach, as discussed in the previous chapter. This suggests that DM therapists hold additional therapeutic skills and training which position DMT professionals as adept in accompanying people across the *full* breadth of the healthcare continuum: From community-based preventative health through to more medicalised contexts and continuing care. Moreover, trained therapists are well resourced to participate within specialised or interdisciplinary healthcare teams, which is another important distinction between approaches such as the *exercisePLUS+* construct and other community-based dance-for-health initiatives.

A flexible framework

Although this practice resource takes the physical/function perspective as the starting place and builds on this to include psychotherapeutic elements, I by no means wish to suggest that the end goal of therapy should be depth-oriented psychodynamic work or other forms of psychoanalytic or behavioural focused therapy. It is critical to emphasise that there is no requirement or expectation that people journey toward a psychoanalytic/dynamic use of DMT in this approach - nor should practitioners feel pressurised to direct the course of therapy along this trajectory.

From the perspective of offering choice and freedom within therapy, some

participants may opt to engage with DMT as a physical exercise/*exercisePLUS+* application only. Others may wish to participate in more psychodynamic applications of DMT, and for others, aspects of a CBT approach could be more useful. By incorporating a fitness perspective into some practice frameworks, the *exercisePLUS+* suggestions offer an alternative approach to that of dominant psychodynamic models and presents some ideas to help build more theoretically diverse discourses within DMT, regarding practice orientations and application.

This resource can be further elaborated upon in order to include include applications of DMT in other health contexts, such as allied health settings, in which physical therapies, exercise science, and neurocognitive models are already commonly applied. In addition to providing a theoretical basis for practicing DMT in more medicalised settings, there is scope for non-psychological uses of DMT to be applied within the preventative health and wellbeing sector where it could be more broadly leveraged as part of an overall health promotion approach.

This can therefore include a renewed focus on social equity and access where groups or individuals considered 'at risk' of experiencing health concerns are targeted within the general public. In these contexts, DMT may also function as an early assessment and referral service within the preventative health sector. For example, DMT has been described as a "bridge" within interdisciplinary healthcare (Barton, 2011) in the sense that it can positioned as a way to help orient people toward further therapeutic supports, should that be desired or needed.

Based on these various possibilities and trajectories, my suggestions regarding an *exercisePLUS+* approach can be applied flexibly, and should be guided by personal judgement. While this practice resource offers some principles and recommendations and lays the ground for an emerging framework, it should not be interpreted or applied

as a one-size-fits-all blueprint for practice. Practitioners are invited to freely amend or adjust any aspects of the resource to suit the contextual demands of their work settings and the desires and health expectations of those they choose to work together with in therapy. This resource is intended to provide some structure and clarity yet should be applied with "rigorous flexibility" (Rolvsjord et al., 2005; Goodill and Bryant, 2019), guided by therapeutic intent and the contextual, cultural and collaborative goals negotiated between therapists and those they work alongside and with.

Part 3. Bringing dance to centre stage in DMT

At the 2019 American Dance Therapy Association conference, keynote speaker Nana Koch asked the audience the following questions:

"How much does 'dance' drive our work?"

And,

"What does it meant to lose dance from our definitions, and what might it mean to replace it again?"

According to Koch, there has been a growing trend in the field to align DMT with other movement psychotherapies. In this sense, the *movement* aspect of DMT has been emphasised - sometimes at the expense of the art form, *dance*, itself. DMT can be considered a modality which sits at the crossroads of body psychotherapy and the creative arts therapies (Gray, 2016), however the 'movement' aspect of DMT appears to be particularly salient within the current paradigm. This is in part, I believe, due to the fact that there is increasing empirical evidence to support the use of psychotherapeutic movement interventions, which is often based on neuroscientific concepts including somatic perspectives on trauma and attachment theory.

The following argument is an attempt to respond to the idea that the role of *dancing* has been somewhat diminished within the field, perhaps due to the increasing

interest in movement, psychotherapies, and the medicalisation of trauma within somatic therapies. An example of this is the focus on the way trauma presents and behaves in the body, which often entails a psychoeducational and somatic approach to therapy. The psychoeducational model has been explored briefly in the previous chapter in terms of Gingswright's (2018) critique of trauma-informed care.

I present some recommendations and principles in the section to follow which seeks to revitalise the notion of dancing in dance movement therapy in order to re-position the art form itself as central to the therapeutic approach. These recommendations involve the integration of a dance pedagogy approach within DMT, where *learning to dance* is positioned within a therapeutic framework. While *teaching dance* is not an accurate description of what DM therapists do overall, there are some applications of DMT in which learning to dance may be leveraged as a useful health promoting goal. My argument does not align with more traditional psychoanalytic perspectives in regard bringing dance to the "front stage" in DMT (Wengrower, forthcoming). Rather, I explore how dance interventions are currently being used within medicine and present a rationale which centres around the possibility of using modified, adapted and choreographed dance forms in some approaches in DMT. This use of dance in DMT sits outside the dominant psychotherapeutic paradigm in the field yet I argue there is value in widening the scope to DMT practice and diversifying practice approach. This can help to align with trends in current research that are increasingly promoting use of modified dance forms to assist with physical and neurological conditions.

Given the growing research interest in the use of adapted dance forms to support health outcomes in physical therapies and medicine (for example, Burzynska et al. 2017; Kullberg-Turtiainen et al., 2019; Lötzke., Ostermann., & Büssing, 2015). Müller

et al., 2017), there is scope for DM therapists to seriously consider the use of modified dance as part of their practice repertoire. By leveraging the therapeutic affordances of *learning to dance* within DMT, practitioners can be equipped with an expanded toolkit that spans expressive movement as well as more structured approaches derived from technical dance styles.

Goal-directed versus non-goal directed movement

As suggested in my previous chapter, expressive, free-associative, movement-as-metaphor approaches are frequently articulated within DMT literature. This reflects a non-goal orientation to movement, which Koch et al (2017) describes as a potential therapeutic factor in DMT. Drawing from a study which investigates the impacts of non-goal directed versus goal-directed movement in relation to stress reduction and wellbeing, Wiedenhofer & Koch (2017) found that the non-goal orientated approach was associated with stronger evidence of reduced stress in participants. This aligns with the predominant expressive/creative and psychoanalytic paradigm within the field that favours creative, freely expressed movement or gesture, which then forms the basis for the communicative and relational use of dance/movement as therapy. The role of non-goal directed movement – or authentic, instinctive movement - features significantly within the field's discourse. For example, symbolic approaches in DMT use movement to express emotion and convey meaning. The expressive, communicative and relational use of dance is widely written about in DMT literature, as articulated by Koch and Fischman (2011, p. 61).

As discussed in my previous chapter, the creative/expressive paradigm promotes an understanding of movement that is communicative, psychodynamic, and grounded in traditional psychoanalytic notions such as the therapeutic relationship, which is commonly referred to in psychotherapeutic literature. The expressive function of dance

is celebrated, and it would seem based on the literature that many practitioners choose to practice DMT in accordance with creative/expressive principle. However, there are other ways in which dance can be adapted for health and wellbeing. As other health-related fields are suggesting, the health and wellbeing benefits of modified choreographic forms of dance are significant, and DMT practitioners may find that both expressive movement as well as structured dance styles, can offer important therapeutic benefit.

Unlike DMT, which describes the dance as psychological, expressive and communicative art form, some medical fields describe the physical and neurocognitive benefits of specific *dance forms* for both primary and secondary health concerns. This reveals an approach in which dance is often applied in a more technical and goal-directed manner. By objectively studying the effects of various adapted/modified dance styles on a range of health conditions including brain function (Burzynska et al., 2017; Kullberg-Turtiainen et al., 2019); neuroplasticity (Müller et al., 2017) and Parkinson's disease (Lötzke, Ostermann, & Büssing, 2015) this area of research presents a strong case for the use of modified dance forms within a range of physical, psychological and neurological health conditions. The data also commonly includes positive mental health outcomes as a secondary outcome which suggests a close relationship between enriched physical functioning and psychological wellbeing.

While these biomedical studies tend to use goal-directed dance interventions as the basis for health research, they nonetheless commonly integrate theory from DMT to help frame the study (for example, see Konduru, 2020). This provides the rationale for the use of dance as a health resource, yet this is where DMT and dance studies often diverge. Most medical dance interventions as well as dance-for-health or recreational dance studies seem to apply modified dance forms in order to study causal links

between goal-directed dance interventions and improvements in physical or cognitive health outcomes (see for example Lossing, Moore & Zuhl, 2017).

Technique versus self-expression?

In this regard, it could be argued that a philosophical schism between technique and self-expression exists within DMT whereby expressive forms of movement are considered freeing or authentic. On the other hand, technique-based forms of dance appear to be under-emphasised within the literature, perhaps due to an assumption that stylised dance forms limit or constrain intrinsic self-expression. The notion of technique, compared to that of self-expression, is perhaps be considered an aspect of dance that might curtail the creative/expressive potential of the unique, idiosyncratic mover, which is often the focus of more psychoanalytically informed paradigms.

The lack of discourse around the role of technique or technical dance forms within DMT holds the potential of constructing a belief system which appears to value non-goal directed movement over goal-directed movement. Technical dance forms could be considered a type of goal-directed activity in that a certain combination of steps, styles, skills and structures are employed in pursuit of a stylised, pre-determined aesthetic. This is quite different to what is described as non-goal directed movement which is more directly associated with improvisational, expressive and communicative uses of dance and contains a strong focus on metaphor, meaning making and symbolism. Whereas non-goal directed movement has traditionally been used to explore unconscious thoughts and feelings through movement, a goal-directed movement approach is less common and could be associated with more behavioural, functional uses of dance that is rarely articulated within DMT research.

A combination of technique and self-expression however, or goal-directed/non-goal directed movement may allow for an expanded understanding of what DMT entails and how this is practiced. By drawing on both technique-based as well as expressive, improvised-movement approaches, practitioners can draw on theory to extend their repertoire of skills, sharing both technical and expressive forms of dance with people in DMT sessions. It is likely that some practitioners do this anyway – however a limited theoretical basis within the field's literature suggests that practitioners work with more expressive movement as per the legacy of psychodynamic and psychoanalytic thinking within the creative arts therapies. While some practitioners may already be integrating dance skills and dance styles into their therapeutic work, the theory behind these choices is far less developed in DMT literature than that of the dominant creative/expressive application of dance for psychological health and wellbeing. By developing theory that supports the combination of technical dance skills with more improvisational uses of movement, the diversification of the DMT framework can continue to grow, fuelled by research-based ideas from varied disciplinary perspectives.

An aesthetic experience

Aesthetic experience is conceptualised as an important health predictor within the creative arts therapies (Koch., 2016) and is a central consideration within this dance-centred approach. DMT literature suggests that aesthetic experience is an important therapeutic factor in the creative arts therapies (Koch et al., 2016; Koch et al, 2017; Samaritter, 2018) and more broadly, Johnson (1985; 2009) has contributed a number of theoretical articles explore different paradigmatic influences of CATs practice, including the notion of an aesthetic paradigm. Other research-practitioners such as Allegranti (2014) and Sajnani (2016) have written and performed work which highlights the centrality of aesthetic experience. Both hold a critical stance in relation to the role of

arts therapies and social change which can in part be understood through the lens of an aesthetic, kinesthetic and feminist paradigm.

The aesthetic moment in DMT has been described as a felt-sense, qualitative experience of beauty. Beauty in this sense does not reflect a normalised or objective standard, but rather speaks to the joy of experiencing authenticity in movement (Koch et al., 2017, p. 88). Dance does not need to be self-expressive, improvised, or personalised to be considered *authentic*: People can experience authenticity and expression within more stylised or structured forms of dance, as well as through self-guided free movement and creative play.

The act of producing bodily actions that *feel* beautiful or easeful has also been linked to enhanced body-self efficacy in mental health research (see Fuchs & Koch, 2014). In the same way that expressive and improvisational methods in DMT support the aesthetic experience of moving in ways that feel qualitatively beautiful and/or productive of an artistic outcome, a goal-directed approach to dance such as the *exercisePLUS+* application is equally committed to nurturing an aesthetic experience. The incorporation of goal-directed, technique-based dance approaches in DMT aligns with existing aesthetic principles in DMT, such as the qualitative experiencing of perceiving one's own movement as beautiful, rich and authentic. This can be experienced through free-associate improvised movement as well as through stylised, technique-based skills and approaches adapted through a combined DMT/dance pedagogy approach.

There may also be a heightened need for performance work to occupy a place within this approach. Artistic performance can be used to highlight social justice concerns as they emerge through the therapeutic process. Drawing from Sajnani (2016),

the critical aesthetic paradigm in the creative arts therapies offers a framework for situating socially just ideas as a relevant goal in therapy. Sajnani states:

> "We can then mobilize our skills as artists, therapists and scholars towards noticing, embodying and transforming the presence and impact of social inequality on our bodies and minds, our relationships and the lives of others." (p. 155)

An example of community-based, socially engaged and aesthetically centred uses of therapeutic dance are the workshop series and accompanying qualitative research of dance movement psychotherapist, Allegranti (2019). Allegranti combines choreographic skills as well as psychotherapeutic principles in her studio practice in order to ensure that participants are held safely during a shared process of making and performing dance works. An aesthetic framework is therefore central to this work and the performative process of creating "participatory dances" (2019) brings into focus the lived experiences of participants and their family members, who are together navigating the experience of living with, and supporting those, with early onset dementia. Through a combined approach which weaves DMP processes into the studio work, Allegranti and collaborating members produce moving artistic works that are then performed and shared with the public.

Allegranti's work reflects an interdisciplinary approach that combines dance studies and performance with therapy. This project and other initiatives led by Allegranti incorporate a strong focus on improvisational methods yet does so in a manner that resists the more traditional psychoanalytic concepts critiqued in chapter 6. The choreographic experience, states Allegranti (2019), defies the "humanist notion of the subject as stable, separate, and individuated" (p. 95) that is commonplace within much of the DMT/DMP discourse, as argued in my discussion chapter. It is important to

note that my arguments in this chapter regarding to creative/expressive/improvisational uses of dance in DMT should not be read as a critique of dance improvisation as a method. I do wish to argue however that improvisation is commonly used in DMT/DMP as a means of exploring the 'inner' realm of feelings located inside of a separate, bound, sovereign individual. Feminist and new materialist perspectives provide a different conceptual lens through which to apply improvisation in practice. Allegranti (2019) summarises the philosophy underlying her use of dance, aesthetic processes, and therapy as such:

> *"Kin*-aesthetic co-composition (whether artistic, clinical, or in everyday life) involves the ethics and politics of entangled intra-relating (Barad 2007) that defy the humanist notion of the subject as separate and individuated, instead offering a *moving kinship*: possibilities to grow new bodies that increase the capacity for progressive relating." (p. 107).

As a socially-engaged combination of DMP and community dance/performance, Allegranti's work reflects some of the ways in which the therapeutic affordances of DMP/DMT can be leveraged in a more public realm. In doing so, the centring of dance as aesthetic experience in DMT can help to connects personal experience to the larger project of community building and activism[27]. It is important to note the workshops facilitated by Allegranti are supported through an arts-in-health initiative which is made possible through the act of social prescribing (Allegranti, n.d). This is a preventative and public health strategy used in the UK which connects people to the arts and other

[27] See Allegranti, B. (forthcoming). Dancing activism: choreographing the material with/in dementia. In Wengrower, H., & Chaiklin, S. (Eds.). (2021). Dance and Creativity within Dance Movement Therapy. New York: Routledge, https://doi.org/10.4324/9780429442308

recreational, therapeutic and health promoting activities in the community. I hold the hope that in the context of Australia, similar community-referral initiatives may emerge in time which would allow health professionals to refer people to community groups such as this. My conceptualisation of an *exercisePLUS+* approach is aligned with the basic rationale behind of social prescribing. People should have equal access to the arts, to therapy, and the meaningful connections with community these experiences can offer. Public and preventative health is an underexplored area in DMT, however the emergence of social prescription is one way in which this area of work could be supported and further developed.

Drawing from Allegranti's work, and my research findings, I believe there to be great benefit in the positioning of DMT in Australia as a preventative and public health service as well as a treatment model approach. The role of artistry in DMT, combined with exercise, positions this service strongly in terms of therapeutic benefit. Moreover, the aesthetic and performative potential of DMT reflects the critical role of the arts in not only addressing personal health challenges but also in awareness raising and promoting social change through socially and politically progressive uses of dance as therapy.

Exercise-plus-aesthetic **experience: Leveraging the aesthetic experience of dance to support physical and functional goals in a holistic manner**

The aesthetic experience of dance in DMT literature is often associated with a psychoanalytic/expressive approach yet as discussed in relationship to Allegranti's work, improvisation is not limited to traditional psychoanalytic perspectives or approaches. This aspect of my chapter will shift the focus toward another non-psychoanalytic question: *How does an aesthetic approach align with the notion of using DMT to address physical and functional health goals?*

While there are relatively few studies in DMT which investigate the role of aesthetics – in relation to more stylised forms of dance - a study by Koch et al. (2016) does however reveal an interesting connection between aesthetic enrichment and modified dance styles from a DMT perspective.

Focusing on the use of the Argentine Tango with people experiencing Parkinson's disease, the authors describe aesthetic experience as a secondary outcome within the study. As such, aesthetic action is considered an important therapeutic factor, compared to 'movement alone' for example (i.e. asking someone to move from sitting to standing or similar functional, physiotherapy type goal). From an "embodied enactive" perspective (Koch & Fischman, 2011; Koch et al., 2017) the authors describe ways in which aesthetic action enriches and supports the physical/functional gains accrued through moving *per se*, creating a more holistic and pleasurable experience than exercise alone:

> "In tango, the patients not only practice functional skills such as walking backward over an extended time, turning, initiating, and stopping, but also experience the pleasure of the music, of the company of their partner, and of the dance as a holistic experience *per se*." (Koch et al., 2016).

This indicates that adapted or modified dance forms such as Argentine Tango – which in this study was facilitated by a registered DM therapist/tango instructor – can be therapeutically facilitated in order to support physical health conditions in ways that cent around the health promoting affordances of dance as an aesthetic practice. The role of aesthetics in DMT is therefore not limited to free associative, improvisational approaches but can be experienced, as shown in this study, through a more goal-directed and purposeful use of modified dance which draws on technique-based styles to support therapeutic outcomes. Further research regarding the aesthetic experience in a technique

or skills-based approach in DMT would be of value in order to further explore how elements of exercise intersect with aesthetic experience in DMT as a dance-centered health resource.

Recommendations for practice: Translating aspects of dance pedagogy into DMT principles and approaches

Some principles drawn from my own dance background are outlined inform what I am calling an *exercisePLUS+* (or exercise-plus-aesthetic) approach in DMT. They are as follows:

- Therapeutic elements of dance training can be translated into a DMT framework
- The act of guiding people through a structured learning process in a success-oriented manner can be leveraged as a health promoting use of dance
- The goal of *learning to dance* can be modified and adapted to support therapeutic needs, wishes, desires, and intentions.
- The skills-based learning process may be one of self-discovery as people explore their physical capacities and emerging artistry in a way that is coterminous with psychological, social and emotional health and wellbeing
- The combined *exercise-plus-aesthetic* approach to dancing in a DMT session can help lay integrated foundations for physical/functional wellbeing alongside psychological/mental health
- The dance form itself can provide a sense of safe, containment and predictability

Through the process of developing skills and capacities as a dancer and exploring one's identity as an artist (rather than patient of client) some people may experience this as an empowering model in that artistic exploration is a central focus of therapy. The practice recommendations underpinning my view of this dance-centred methodology are organised around the philosophical notion that artistic skill, creative

self-mastery and aesthetic experience are vital aspects of DMT work. Therapeutic resourcing can also include a skills-based component – which in some cases may be a necessary building block for further therapeutic work if that is considered desirable or useful. Developing familiarity with the art modality itself may be an important foundational practice in some DMT approaches, and psychodynamic or more in-depth therapy approaches can build on this dance-centred approach, reflecting again the notion of the healthcare spectrum which supports not only preventative health but traverses the full range of health needs, including more acute and rehabilitative care.

Skills, structures, styles and steps: A dance-centred methodology

The remainder of this chapter is dedicated to outlining some practical recommendations that DMT facilitators may wish to consider. The central recommendation is that practitioners who wish to experiment with an *exercisePLUS+* approach pay particular attention to the following components of dance pedagogy which can be leveraged as part of the therapeutic approach:

- Dance skills, styles, structures and steps

Table 7

Dance skills, structures, styles and steps

Therapeutic elements of dance pedagogy	**Principles for DMT practice**
Dance **skills**	*Learning to dance* is a valid therapeutic goal in some applications of DMT.
Dance **structures**	The dance structure provides a 'holding' or 'containing' environment and offers a relative sense of safety, continuity predictability and belonging.
Dance **styles**	Dance styles can be modified by dance movement therapists and adapted to support diverse therapeutic needs, goals, expectations and desires.
Dance **steps**	Teaching dance steps in DMT through success-oriented directives can be empowering and reflects a goal-oriented approach to therapy. Process is still highly valued, as exposure to new movement languages can be a therapeutic learning process. Personal strengths and resources may be mobilised and performed through dance either privately (within group) or publicly (presenting work to a wider audience).

These elements of technical dance training can be appropriated and expanded upon in order to support a range of DMT purposes. This includes medicalised therapy goals, as well as preventative health and wellbeing. It also includes the raising of critical

awareness through the aesthetic use of dance to perform public narratives of health from a social justice and/or activist perspective.

- dance **S**kills
- dance **S**tructures
- dance **S**tyles
- dance **S**teps

A) Dance skills

Learning to dance can be a fun and uplifting experience. In my experience as a practitioner, it is common for people to hold an expectation around wishing to acquire dance skills or competencies as part of DMT. Dance teaching, however, is not a recognised aspect of DMT practice, yet when combined with other therapeutic approaches and principles a pedagogic approach can aid what DMT has to offer. Developing physical dance skills and learning to dance can elicit strong aesthetic experiences which are health promoting. Feelings of joy and accomplishment may also be activated through success-oriented, skills-based approaches to DMT which have been linked to positive mental health outcomes such as improved self-efficacy and reduced depression in a range of medical studies.

Despite research that suggests the physicality of dancing is an "active ingredient" in DMT (Koch et al., 2019), there is little attention given to dance training or technique within the field's literature. As a more expressively oriented therapy, technical dance forms such as ballet are often rejected by DM therapists (Gómez-Guzmán, 2017) which means that specific skills embedded balletic or other dance forms requiring control and precisions are often forsaken in favour of more organic, intuitive, self-directed movement. There is significant value however in translating key dance skills drawn

from a wide variety of dance forms into an expanded definition of DMT practice. This can help to broaden the range of dance-related benefits a person might experience through a healthy and supported engagement with the art form itself.

Furthermore, therapists can integrate skills-based approaches in a participatory, humanistic, person-centred manner which appears to be the preferred therapeutic orientation for those practicing DMT from a psychotherapeutic perspective (Karkou & Zubala, 2015). DMT practitioners can build on, amplify, and expand upon dance pedagogy approaches in their work by weaving dance technique/skills-based approaches throughout their facilitation and considering how dance skills and competencies are valuable aspects of strengths-based therapy.

Success-oriented directives in this approach can provide a clear scaffolding of skills, designed to meet people 'where they are at' in terms the skills-based component of the therapy. Experiences of creative self-mastery, aesthetic enrichment, personal accomplishment and pride afforded through the acquisition of dance competencies are possible health enhancing possibilities, in terms of mental health frameworks.

A more tightly structured, goal-oriented approach is presented in this *exercisePLUS+* concept, however the *process* itself is still paramount. Exposure to a new movement language can be a process of artistic self-discovery through which personal strengths and resources are mobilised and performed. Performing in front of audiences may be an outcome of dance-centred approaches in DMT and therapists can offer clients opportunities to demonstrate or showcase emerging skills as part of an overall therapeutic process. This reflects a similar approach to Community Music Therapy (CoDMT) in that artistic outputs such as performance work might at times be considered part of the therapeutic process (O'Grady & McFerran, 2007).

B) Dance structures

For some people, a strong sense of structure within therapy sessions may provide a basic underlying sense of safety and predictability. Generally, psychotherapeutic literature highlights the role of safety through the metaphor of the dance between therapist and client, which is based on a dyadic set of relations which in many ways, mirror attachment theory principles such as the attuned caregiver / developing infant. From a psychotherapeutic perspective, the rapport between therapist and client is the basis for therapeutic safety, which means that psychoanalytic understandings of 'holding' and 'containing' are interpersonal, embodied and affective processes: Therapist-induced actions are therefore emphasised and the therapist maintains an expert positionality.

However, these psychotherapeutic understandings of therapeutic holding/containing do not always align with non-psychotherapeutic health contexts. In addition, the role of brief therapy presents some challenges to the assumptions of traditional psychotherapy which is generally considered to be most useful when sessions are regular and consistent, and practiced within a closed group or one-on-one setting. Many community-based contexts do conform to these ideals and expectations however, including the principle of building rapport through ongoing therapy or establishing therapeutic safety within the trusting container of the therapist-client dyad or closed group principle. Therapeutic safety and structure may need to be facilitated differently in a community context or in settings where therapy is short term, drop-in or situated in health contexts where psychotherapy is not applied as a dominant framework. My PhD research for example sheds light on the overwhelming behaviourist paradigm within Australian criminological settings. A non-psychotherapeutic use of DMT may be more relevant within this context, however practitioners should be well aware of the challenges and limitations that the CBT model presents and maintain a critical stance

around such norms.

In terms of establishing safety in a non-psychotherapeutic approach to DMT the use of structured dance forms is one way through which to cultivate a 'safe enough' holding or containing environment. This takes the emphasis off therapist-induced actions and turns toward the therapeutic and artistic elements which are inbuilt into the dance form itself. When dance can be learnt and repeated through participatory processes – rather than a strict dance teaching approach – an aesthetic structure emerges which offers a certain degree of predictability, continuity and containment.

The use of highly structured movement is not cited often within DMT literature however a recent master's thesis (Kelly, 2017) explores the crossroads of Irish dance and DMT and suggests that therapeutic gains can be found in using the tight structure of Irish dance. By focusing on structured sequences and familiar music rather than free movement, suggests Kelly, the use of technical dance forms can help clients feel less vulnerable about expressing themselves through movement (p. 8).

Expectations and goals are clearly mapped out when working with a highly structured form of dance (Kelly, 2017, p. 30). This may be reassuring for people who are not used to working with movement or dance or are reluctant to explore more improvised, expressive movement. The use of structured dance forms – which is basically any form of dance that can be learnt and repeated – is underexplored within DMT literature. Therefore, it may be worth re-visiting some of the earlier perspectives of DMT leaders such as Irmgard Bartenieff whose interest in the healing capacities of specific dance forms is integral to the early emergence of DMT philosophy. Bartenieff's work also reveals a close connection between dance therapy and physical therapy, as Bartenieff was herself a trained dancer as well as physical therapist. Within the Australian context the work of Hanny Exiner provides a similar perspective by

foregrounding the dance form itself as a therapeutic structure. Exiner's legacy is strong within Australia, and in light of Nana Koch's question as to *how much does dance drive our work*, Exiner's influence, alongside that of Bartenieff, is as important now as ever before.

C) Dance styles

As a field which has evolved out of modern dance as well as psychology, it is common in DMT to combine the free associative/expressive approach of modern dance with a psychoanalytic orientation that seeks to externalise the unconscious through symbolic movement. Like modern dancers, DMT practitioners tend to favour an organic approach to movement and support clients to explore how emotions are expressed and integrated through movement. As a result, DMT literature rarely examines ways in which more technical and precise dance styles can be included in the repertoire of DMT practice. While movement is considered the primary language[28] of DMT, this generally reflects a communicative, expressive paradigm and highly stylised forms of dance (i.e. for example ballet) are rarely explored in relation to DMT practice. Another master's thesis (Gómez-Guzmán, 2017) examines several therapeutic elements stemming from ballet training and suggests DMT practitioners can integrate aspects of ballet into a dance therapy session. The same, I would think, applies for other dance styles. Many practitioners come to their DMT training with skills and knowledge in a variety of dance styles. While it is generally not a prerequisite for DM therapists to be trained in any particular dance style, there is value in leveraging the pre-existing skillset of therapists trained in dance styles and incorporating aspects of this training in more

[28] The 'movement as language' metaphor is common in the field, reflecting a strong emphasis on a communicative and psychosocial use of dance as therapy.

obvious ways. What's more – practitioners who are not formally trained in a specific dance style but who wish to add this to their repertoire as a therapist might choose to study a dance style either during their DMT education or later, as part of professional development. As well as offering expressive and improvisational approaches it may be useful for practitioners to feel more confident in using and adapting specific dance styles in their work.

There are at least two ways that I can think of that dance styles can be incorporated into DMT:

- ***In cases where the therapist holds expertise and skills in a particular dance form/s and it is culturally relevant to explore this dance style within therapy:***

DMT practitioners who hold previous knowledge and skills relating to a particular style of dance can experiment with different ways of modifying this form for different populations. In effect, the dance therapist can take this dance style into a range of settings and adjust the style to suit the needs and desires of different client groups. A practitioner drawing from a ballet background might for example incorporate ballet elements such as posture, alignment, structure and body awareness (Gómez-Guzmán, 2017). This will vary depending on a practitioners training and skillset. More work can be done in terms of identifying therapeutic elements of individual dance forms and experimenting with how these might be modified or appropriated within dance movement therapy to support specific therapy goals.

- ***In cases where the therapist holds little expertise regarding a specific dance style but wishes to work collaboratively with clients to explore culturally relevant dance styles:***

In contextual therapeutic approaches, it is important to understand the cultural references of a client/population and to adapt DMT approaches to suit the cultural orientation of participants/clients. Through a collaborative approach, therapists and clients might choose to explore the dance style together in order to ground the therapy in a culturally fitting movement experience which celebrates the diversity and plurality of various dance forms, including indigenous cultures whose relationship to dance and healing is unique and longstanding. Of course – one can't assume that simply because a client belongs to a particular cultural group that it is appropriate to integrate tokenistic dance styles into the DMT approach. A Sudanese refugee may wish to use Argentine Tango as the basis for therapy: An open and collaborative approach is therefore essential. Furthermore, increased literacy around antiracist and unoppressive practice is recommended.

Of course, no one can expect an individual DMT practitioner to be fluent in 20 different styles of dance! A further possibility for integrating dance styles into DMT sessions is to provide opportunities within sessions for therapists and dancers/clients/patients/people to explore 'qualities' of a chosen dance style where they can work with this material in a more improvisational manner.

For example, therapists can invite clients to watch a short video of people performing a specific dance form and discuss the movement qualities or other associations that are evoked through the dance style itself. Using creativity and improvisational flair, a DMT practitioner might choose to use a dance style as the basis for movement improvisation, by encouraging people to explore qualities of movement reflective of the particular aesthetic style of the dance form. This may eliminate the need to become intimately familiar with specific dance steps or choreography, yet the study of dance forms can inform the improvisational, expressive process and provide an

artistic stimulus for further therapeutic exploration.

D) Dance steps

Learning basic steps can provide a clear foundation for a skills-based approach in DMT. Given that highly structured dance forms are generally omitted from most DMT practice, there is relatively little opportunity to investigate the relationship between using dance steps as an approach in DMT, and the therapeutic benefits associated with this.

Most dance styles require the mastery of at least a basic sequence of steps. Given the more organic approach in DMT which encourages clients to move from intuitive impulses, a directive approach that involves learning dance steps could be misinterpreted as non-participatory, and/or curtailing natural self-expression. Given the influence of modern dance in DMT which evolves as a counterculture to classical ballet, dance movement therapists have traditionally shied away from ballet and rejected the form due to the perception of "structural precision and exclusion of free expression" (Gómez-Guzmán, 2017, p. 4).

However, simple ballet steps for example can be used as building blocks to help support therapeutic goals.

For example, I have facilitated a ballet-based dance therapy group in residential aged care as part of a falls-prevention strategy. My approach involved modifying balletic dance steps in order to maintain a parallel position of the feet, as encouraging turn out of the hips can be damaging to the joints, particularly the knees. By using a chair-based approach, we discovered useful ways of translating ballet steps into simple, engaging, physical exercises which were then combined with gentle classical music to help support a feeling of ease and relaxation. From a functional perspective, ballet-informed movements were introduced in order to support upper and lower body

integration and coordination, cross lateral coordination, core strength; joint mobilisation, blood circulation, ease of movement and flexibility.

For some residents who said they had always "wanted to learn ballet but never had the chance" - this program allowed older adults to learn new skills and explore their artistic identity through the acquisition of simple ballet steps and phrases. Further research on the role of adapted dance in DMT can assist in building a stronger research-base for this type of work.

Diversifying practice approaches in DMT

My research suggestions that basic dance instruction, including the teaching of dance steps and drawing on a range of different dance styles, could be a valuable addition to an extended DMT practice framework. There are benefits in integrating certain aspects of dance pedagogy within some DMT approaches and using adapted dance forms to meet therapeutic need. This has been documented in medical and physical therapies research. By providing opportunities for people to build skills, competencies, confidence and strengths through learning to dance, dance therapists can provide services which both expressive/improvisational approaches but as well as skills-based methods, where learning to dance is considered part of the repertoire of possible DMT practice approaches. While this may already occur in practice, more theoretical frameworks are needed in order to support the choices practitioners are making in their therapeutic work.

The integration of dance skills, styles, structures and steps within DMT also speaks to the recognition of diversity and plurality in our growing international practice: By foregrounding dance forms/dance styles within some applications of DMT we can create a more welcoming space for practitioners and people of all cultures to draw on dance forms which suit the cultural contexts in which therapy takes place. In practice

settings where psychoanalytic approaches, such as more expressive, interpretive, symbolic, externalising uses of dance may not be the most culturally appropriate, practitioners might find that specific dance forms can offer a starting point for therapy: A place where mutuality and safety can be enacted through the holding container of the art form itself. Whether this be hip hop, African dance, Israeli folkdance, Butoh, or any other technique-based approaches, the potential of the art form to hold and contain the therapeutic process is a tacit aspect of dancing which is worthy of further exploration and research.

The incorporation of goal-oriented, alongside non-goal-oriented approaches (improvisation/expressive) can be integrated in dance movement therapy, aligning our field with current medical research on dance and health. This reflects the breadth of DMT and locates the practice not only as a mental health discipline, but also as a physical and neurocognitive therapy. The scope of practice in DMT can reasonably extend beyond medical settings and venture more boldly into preventative contexts and general health promotion, including contexts where issues of social justice are closely related to therapeutic work, such as my experience of researching with women in the criminal justice system.

Conclusion

This research builds on existing discourse within DMT and the creative arts therapies more broadly, particularly regarding the value of a social-justice paradigm. The critical lens applied throughout my thesis has raised many valuable questions for me, which I have examined through self-interrogation and critical reflexivity throughout the study. Through exercising a self-aware lens and engaging with my own implicit biases, beliefs and assumptions, I have been challenged to explore and in fact question, some of my own taken-for-granted beliefs systems as both a therapist as well as researcher. This has led me to better understand how some of my own frames of reference, including my values and expectations, have implicitly shaped the research process and informed the very questions I have asked, and the knowledge that has been co-constructed.

By taking a collaborative and critical approach to research I have been able to regard some aspects of my own DMT paradigm from a fresh angle. This has involved the use of embodied research methods and arts-based approaches to constructing knowledge. These creative approaches have allowed me to engage with the process in a more embodied and reflexive manner. In doing so, I have considered both the benefits and limitations of my approach and discovered new ways of conceptualising some elements of DMT in a way that is led by participant feedback, and also integrative of the perspectives and expertise offered by Susan and Alyce, my co-researchers in this study.

I have partnered with key stakeholders in the Victorian Department of Justice yet have maintained a critical stance at all times and examined both research and practice through a feminist informed lens. This has meant engaging with the very difficult question of what it means to do therapy within a heavily institutionalised, oppressive and hierarchical system in the first place. The research sheds light not only

on the benefits and limitations of DMT in this context but brings into focus the numerous ways in which structural and systemic inequity drives and sustains processes of criminalisation. Rather than view therapy as a tool to make the individual more functional within a dysfunctional system, this project has described the complex ways in which punitive approaches are overly individualised, and tend to place undue responsibility on women themselves – often in a way that decontextualises criminal activity from the very social, political, economic and racialised realities of Australian settler society. I have sought to be transparent in this study regarding to some of my own personal and existential dilemmas as I navigated this disempowering system. This aligns with social justice applications of DMT and builds on the important contributions made by others in the field, regarding the continued development of unoppressive practice principles and approaches.

While the justice system as a whole warrants much sharp critique, I acknowledge and am extremely thankful for the chance to collaborate with Suse and Alyce. In partnership with these professional women, as well as 'Min' and 'Kaz' who participated in the DMT workshops, I have learned a great deal about what we might expect from dance therapy in this context. I have also learned that in these environments, there are many good people working hard and doing their best in a broken system, spurred on by an enormous sense of integrity, compassion and understanding.

Challenges: Applying an ethnographic and participatory approach

In many ways the intention to collaborate with women in the justice system has been a consistent ideal and a key principle informing my research. As indicated in my introduction, the work of Freire (1968) was central to my liberationist approach which I articulated earlier on in this thesis. The ideals of emancipatory research have

underscored my initial conceptualisations of the research and I have been driven by a sense of social justice, which I have sought to operationalise through a participatory methodology. While I have intended at all times to practice from a non-expert, participatory stance, this has not been entirely possible in this institutional setting.

As I have narrated with reference to my personal, bodily experiences, truly democratic and unoppressive ways of working were not always possible to actualise in this study. In reality, the criminal justice system is founded on deeply entrenched power inequities and whilst attempts to neutralise these power relations are valuable, it is difficult to imagine an authentically non-oppressive approach to therapy within the violent and dehumanising structures of the current prison system. Furthermore, my own body politics as a white, cis, European-Australian mean that my identity is that of the oppressor in this context, particularly in light of the immense over-representation of indigenous women in the Australian prison system. To strive toward justice and a democratisation of mental health requires a deep and continued engagement with one's own intersectionality and an acknowledgement that race, gender, class, ability, religion and other identity markers matter within the therapeutic context. This is an area of growing awareness in DMT, and I see my research as part of my own personal journey toward a greater understanding of how issues of racism, colonialism and eurocentrism shape the very ways in which bodies, movement and somatic therapies are conceived and practiced.

Contribution to knowledge and future research

My contribution to knowledge is a critique of pre-eminent psychoanalytical frameworks in DMT/P and an example of how alternate models might be developed through participatory processes and community engagement. By highlighting how 'exercise' can be conceptualised as an element of dance-centred, fitness-informed

DMT, I wish to demonstrate how interdisciplinary perspectives can enrich the field: findings from physiotherapy, dance studies, and neurophysical rehabilitation (for example) can be used to position DMT/P as a 'more than mental health' service: a health resource that can be adapted to support not only psychological, but physical health conditions, and used across a spectrum of care including preventative, acute/illness, and rehabilitative settings.

As well as highlighting the overlaps between dance, DMT/P, exercise and physical wellbeing and arguing for an expanded definition of dance therapy, I also position my study as a further development of social justice-focused DMT (Cantrick et al., 2018). My PhD is a critique of the dominant treatment model and an example of what DMT might achieve outside of the shadows of the biomedical model. I have highlighted various examples in the DMT/P literature where there seems to be a mismatch between theory and practice, such as the emphasis on humanist values in DMT/P (practice) and the behaviouralist tone used to describe the outcomes of therapy (in the literature). This suggests to me that there are some inconsistencies between what is commonly done in practice, and how this is communicated in the literature (see final paper of Chapter 5, for example). Part of my contribution has therefore been to shed critical light on these inconsistencies and in doing so, to suggest that a further diversification of theory/practice would help to support theory building in regard to non-medicalised, non-institutionalised, community-based approaches to DMT.

In terms of future research, I believe many of the ideas presented in this thesis can be further expanded on, particularly from a critical perspective. This includes:

a) discourse around intersectionality and "body politics" in DMT/P (Allegranti, 2011; 2013);

b) further critique and critical examination Eurocentrism and the legacy of colonialism/white supremacy and imperialism in healthcare, including DMT/P;

c) continued development of critical trauma theories in DMT/P (see Johnson, 2015, for example on the "micro-sociology" of trauma and why learning about the "subtle intersections of privilege and discrimination" is an essential aspect of somatic psychotherapy and other movement therapies);

d) further diversification of practice models, including non-treatment approaches to DMT/P (such as articulated through the *exercisePLUS+*).

Overall, more research and theory is needed in DMT/P in order to better locate trauma work within a broader social, political and material context of injustice. The field of critical somatic research (for example, Johnson, 2015) provides important insight for somatic therapists in regard to the dynamics of racism, heteonormativity, imperialism, sexism and privilege in the therapeutic context. This relates to my first point: that more attention to the politics of power and oppression in mental health work is needed, in order build on existing research on intersectionality and "body politics" in the creative arts therapies (Allegranti, 2011; 2013; Sajnani, 2013). These perspectives are important as they help to provide a language for entrenched injustices and may be used to actively dismantle and transform some of the problematic ontological conceptualisations of the (white/able/heteronormative) 'body' in Eurocentric disciplines, such as DMT/P. These critical perspectives are particularly needed in criminal justice applications of DMT/P, as well as in contexts where therapists are working within heavily institutionalised, gendered and racialised systems.

Final reflections

Our collaboration showed us the many possibilities for embedding DMT within a criminal justice context. However, we discovered a great deal of difficulty in terms of

eliciting and sustaining engagement in the DMT aspect of the research. For example, one of my initial research questions presented in Chapter One read:

- What role might a dance movement therapist play in supporting women to access and participate in a greater variety of ongoing physical movement and wellbeing related activities in the community over time - including after the completion of the formal research project?

The low level of participation in the study is in some ways indicative of a wider socio-political issue. Women exiting prison, as well as women serving time on a community corrections order, have many obligations to fulfil. Often, this falls on top of childcare arrangements, searching for employment, navigating violent home dynamics, dealing with mental health challenges and quite often, the issue of drug and alcohol over-use. On top of these personal daily struggles, the criminal justice institution itself is not aligned with true recovery principles and often further punishes women in a way that critical scholars state reflects a gendered and racialised system (Carlton & Segrave, 2013). It is therefore no surprise that this question of sustainably was not able to be further pursued, given the immense challenges of researching in this context.

This is consistent with something my co-researchers had forewarned me about: that program engagement is often the key challenge in this sector. As a result, a great proportion of this study was centred around trying to better understand *why* women would want to participate in the first place. My co-researchers and I hoped that the findings of this study might help to illuminate what lays behind some people's motivation to attend DMT as well as seeking to better understanding how DMT might applied in this practice context, and why. As such the research findings have brought us closer to understanding what *some* women wanted from their engagement with DMT.

This knowledge has been used to develop a theoretical model for community-based practice which centres around dance teaching, fitness, social participation and equitable access to health supports in the wider community.

The data reveals three main themes, which have been used to describe why and how some women have chosen to use DMT in this particular community setting. These themes are simple, but they are also powerful concepts in the sense that they describe what some women wanted from their DMT experience. Some women wanted therapy to be fun. Some wanted to use dance to help improve their physical fitness. Some expressed a strong desire and a need for relaxation. Overall, the research findings suggest that fun-and-fitness are not F words in therapy – but words to say, celebrate, share, and hold up with pride.

The combination of fun, fitness and relaxation provided a platform through which I reflected on the possible health affordances of DMT from a different angle. Rather than giving in to the temptation to interpret and psychologise women's personal experiences and responses to the DMT sessions, I experimented with taking a step back from interpretation in order to considere *what else* this feedback might reveal. Despite assuming that I would be doing 'mental health work' my experience taught me that there are many ways in which dance might be leveraged as a health resource. Preventative health, and physical, functional health are important components of the work, as well as psychological wellbeing.

The notion of bringing dance to centre stage in DMT practice sounds somewhat ironic, yet Nana Koch articulated this beautifully in her keynote at the 2019 ADTA (Miami) conference: *How much does dance drive our work? Are we movement therapists, or dance therapists, or both? What do we emphasise, and why?* These are not questions to arouse division, but rather, they point to the broad, rich and varied

possibilities for DMT as a unique combination of art, physical effort, therapy and social responsibility.

As DM therapists, we can dance with people across the *full* spectrum of healthcare. I am extremely grateful for the women who have helped me to better understand this. Thank you.

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Appendix

Appendix 1. The University of Melbourne Ethics Approval

15 May 2018

Prof K.S. Mcferran

Melbourne Conservatorium of Music
The University of Melbourne

Dear Prof Mcferran

I am pleased to advise that the Humanities Law & Social Sciences Human Ethics Sub-Committee approved the following Project:

Project title: **Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities.**

Researchers: **Prof K S Mcferran, Dr L E Bolger, Dr S Goodill, E Dumaresq**

Ethics ID: **1851118.1**

The Project has been approved for the period: **15-May-2018 to 31-Dec-2018**

It is your responsibility to ensure that all people associated with the Project are made aware of what has actually been approved.

Research projects are normally approved to 31 December of the year of approval. Projects may be renewed yearly for up to a total of five years upon receipt of a satisfactory annual report. If a project is to continue beyond five years a new application will normally need to be submitted.

Please note that the following conditions apply to your approval. Failure to abide by these conditions may result in suspension or discontinuation of approval and/or disciplinary action.

(a) **Limit of Approval:** Approval is limited strictly to the research as submitted in your Project application.

(b) **Variation to Project:** Any subsequent variations or modifications you might wish to make to the Project must be notified formally to the Human Ethics Sub-Committee for further consideration and approval. If the Sub-Committee considers that the proposed changes are significant, you may be required to submit a new application for approval of the revised Project.

(c) **Incidents or adverse effects:** Researchers must report immediately to the Sub-Committee anything which might affect the ethical acceptance of the protocol including adverse effects on participants or unforeseen events that might affect continued ethical acceptability of the Project. Failure to do so may result in suspension or cancellation of approval.

(d) **Monitoring:** All projects are subject to monitoring at any time by the Human Research Ethics Committee.

(e) **Annual Report:** Please be aware that the Human Research Ethics Committee requires that researchers submit an annual report on each of their projects at the end of the year, or at the conclusion of a project if it continues for less than this time. Failure to submit an annual report will mean that ethics approval will lapse.

(f) **Auditing:** All projects may be subject to audit by members of the Sub-Committee.

If you have any queries on these matters, or require additional information, please contact me using the details below.

Please quote the ethics registration number and the title of the Project in any future correspondence.

On behalf of the Sub-Committee I wish you well in your research.

Yours sincerely

Ms Belinda Kelly - Secretary
Humanities Law & Social Sciences HESC
Phone: (03) 903 59095, Email: belinda.kelly@unimelb.edu.au

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Appendix 2. Consent form (Working Group)

Consent Form: Working Group

Creative Arts Therapies Research Unit, Faculty of Fine Arts and M

THE UNIVERSITY OF MELBOURNE

Project:* *Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities

Primary Researcher: Katrina Skewes McFerran

Additional Researchers: Ella Dumaresq

Name of Participant: _____

1. I consent to participate in this project, the details of which have been explained to me, and I have been provided with a written plain language statement to keep.

2. I understand that the purpose of this research is to explore the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities, such as service providers.

3. I understand that we will begin this project by forming a 'working group' where we will work together to create the most enabling conditions for women to access this project. By contributing my knowledge and expertise as a staff member, I will be playing a vital role in helping to make this study accessible to women who are using the support services of Geelong CCS and other agencies.

4. For this project I will be required to attend 'working group' meetings where we will discuss the best ways for engaging women in this study. I will be part of a team that is helping to construct the best pathways for women to participate in this project. I understand that as a working group member I will help decide on how often we should meet, and for how long.

5. I understand that as a co-researcher I will help to decide on the specific goals and focus of our research, and will be invited to think about the best way to present our research findings, and to whom.

6. I understand that my participation is voluntary and that I am free to withdraw from this project anytime without explanation or prejudice and to withdraw any unprocessed data that I have provided.

7. I understand that the data from this research will be stored at the University of Melbourne and will be destroyed after a minimum of 5 years.

8. I have been informed that the confidentiality of the information I provide will be safeguarded subject to any legal requirements; my data will be password protected and accessible only by the named researchers.

9. I understand that given the small number of participants involved in the study, it may not be possible to guarantee my anonymity.

10. I understand that after I sign and return this consent form, it will be retained by the researcher.

Participant Signature: _____ **Date:** _____

Appendix 3. Consent form (participants)

Consent Form: Dance & Discussion Group

Creative Arts Therapies Research Unit, Faculty of VCA and MCM

THE UNIVERSITY OF MELBOURNE

Project: ***Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities***

Primary Researcher: Katrina Skewes McFerran

Additional Researchers: Ella Dumaresq

Name of Participant: _____

1. I consent to participate in this project, the details of which have been explained to me, and I have been provided with a written plain language statement to keep.

2. I understand that the purpose of this research is to explore the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities, such as service providers.

3. I understand that women accessing assistance through Geelong Community Corrections or other support agencies may choose to become co-researchers in this study, as well as some staff members from Geelong CC or other agencies. This will involve interacting with other women who are service users as well as some staff members. I understand that my participation in this project is for research purposes only and that the interactions in our dance & discussion group are separate to the staff/service user relationship as defined by Geelong CCS or other support agency.

4. I understand that I may bring my child/ren with me to participate in the dance and movement activities if I choose to do so. Children will not become co-researchers in this study, which means that they will not be invited to discuss the possible goals and focus of our project.

5. I understand that if I bring my child/children with me to the dance group, they may appear in videos or other recordings that may be used as data. I understand that I can ask for this data to be removed at any point if I am not comfortable with my child/children appearing in this material.

6. I acknowledge that the possible effects of participating in this research project have been explained to my satisfaction.

7. In this project I will be required to attend a weekly 2-3 hour dance & discussion group where I will be invited to participate in activities and exercises derived from dance movement therapy. I will be required to help decide how long this project will continue. I will be a co-researcher in the study, which means I will help define the focus and goals of this project.

8. I understand that my participation is voluntary and that I am free to withdraw from this project anytime without explanation or prejudice and to withdraw any unprocessed data that I have provided.

9. I understand that the data from this research will be stored at the University of Melbourne and will be destroyed after 5 years.

10. I have been informed that the confidentiality of the information I provide will be safeguarded subject to any legal requirements; my data will be password protected and accessible only by the named researchers.

11. I understand that given the small number of participants involved in the study, it may not be possible to guarantee my anonymity.

12. I understand that after I sign and return this consent form, it will be retained by the researcher.

Participant Signature: _____ **Date:** _____

Appendix 4. Plain language statement (Working Group

Plain Language Statement: Working Group

Creative Arts Therapies Research Unit, Faculty of Fine Arts and Music

Project: ***Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities***

Dr Katrina Skewes McFerran (Responsible Researcher)
Tel: 0407 350251 Email: k.mcferran@unimelb.edu.au
Ms. Ella Dumaresq (Student Researcher)
Tel: 0411 500678 Email: ella.dumaresq@gmail.com

Introduction

Thank you for your interest in participating in this research project. The following few pages will provide you with further information about the project, so that you can decide if you would like to take part in this research.

Please take the time to read this information carefully. You may ask questions about anything you don't understand or want to know more about.

Your participation is voluntary. If you don't wish to take part, you don't have to. If you begin participating, you can also stop at any time.

What is this research about?

My name is Ella, I am a student at the University of Melbourne. I am working on a project that seeks to explore the possibilities of dance movement therapy (DMT) in collaboration with women in the criminal justice system and their supporting communities. This project is about exploring how women in the justice system experience dance movement therapy, and how we can work together to use dance and movement in a way that best supports the health and wellbeing needs, wishes, expectations and desires of its users. The specific goals of this project will be decided on together, and will be based on what group members feel is important to them.

As a staff member of Geelong CCS and/or an associated support agency that assists women in the criminal justice system, you are part of this supporting community and as such, are invited to participate in this study.

My supervisor for this project is Katrina Skewes McFerran. Katrina is my teacher, and will be helping me with my work on this project. This study will become a part of my dance movement therapy degree, in the form of a PhD.

What will I be asked to do?

If you wish to take part in this project, you will become a 'co-researcher' which means you will help make decisions about the specific research goals and trajectories. You will be invited to participate in a 'working group' which explores the question of how a dance therapist might work in partnership with service

providers and other networks to create enabling conditions for women to access DMT within the community. You will be invited to contribute your expertise as co-researchers by helping to generate the organizational and structural capacity to facilitate this research group with women accessing the services of Geelong Community Correctional Services or other local support agencies within your network of providers.

As co-researchers, you are invited to help decide on how long this project should continue. As a group, we will decide how often we should hold 'working group' meetings. We will assess the need for meeting times and duration as we continue working together through ongoing cycles of planning, action, reflection and observation undertaken in our meetings. As co-researchers we may decide to invite others to join our working group over time, as new research directions emerge.

Some co-researchers in the 'working group' may also be invited to participate as co-researchers in the 'dance and discussion' group. If you choose to join the dance group as a co-researcher, this activity will be separate to your existing relationship with women using the support services of Geelong CCS or associated agencies, and will take place in the community. You will be given a separate PLS and consent form if you choose to participate in this aspect of the study.

What are the possible benefits?

You get to contribute your knowledge and expertise as members of the supporting community toward a project that may be of potential benefit to the women accessing your services. You will help decide on the specific goals and intentions of this project based on your understanding of the possibilities of using DMT as a health resource for women in the criminal justice system.

What are the possible risks?

You will be contributing toward the formation of a community-based DMT group which will be accessed by women whom you assist through your services. In these DMT sessions, women may choose to share things that are important to them. There is a small chance that group members might choose to explore something that makes them feel uncomfortable or unhappy. If this happens, and we will arrange for individuals to speak with someone outside the group, such as a counsellor.

Do I have to take part?

No. Participation is completely voluntary. You are able to withdraw (quit) at any time.

Will I hear about the results of this project?

I will use the information we collect in our 'dance and discussion' group such as group notes, photographs of any art work, or videos of our dances to write a report about the project, as well as some articles and presentations. Aside from this, we will work together in our 'working group' meetings to decide if and how we should present our work to others, such as the broader professional community with whom you are connected.

What will happen to information about me?

You will get to choose if you would like me to use your real name in my reports and presentations, or if you would like a different name so no one will be able to identify you. If you do not wish to appear in photographs or videorecording we can pixelate your image so you are not recognisable. All your personal details are kept private between the people involved in the project. The only case in which I would share personal information would be for legal reasons, such as the court asking me to do so. This is highly unlikely.

After our project is finished, all our information we collect will be stored confidentially at the University of Melbourne for a minimum of 5 years and then destroyed. Any videos or photographs will be stored on my own password protected computer and will remain confidential.

Is there any potential conflict of interest?

I am a researcher as well as a dance movement therapist, which means that I am performing two different roles. I will be seeking supervision from Katrina to ensure that I manage my roles responsibly, and I will have additional supervision from other dance movement therapists to make sure I am complying with professional guidelines.

Where can I get further information?

If you would like more information about the project, please contact the researchers; Katrina Skewes McFerran [M: 0407 350251], or Ella Dumaresq [M: 0411 500 678)

Who can I contact if I have any concerns about the project?

This research project has been approved by the Human Research Ethics Committee of The University of Melbourne. If you have any concerns or complaints about the conduct of this research project, which you do not wish to discuss with the research team, you should contact the Manager, Human Research Ethics, Office for Research Ethics and Integrity, University of Melbourne, VIC 3010. Tel: +61 3 8344 2073 or Email: HumanEthics-complaints@unimelb.edu.au. All complaints will be treated confidentially. In any correspondence please provide the name of the research team or the name or ethics ID number of the research project.

Appendix 5. Plain language statement (Participants)

Plain Language Statement

Creative Arts Therapies Research Unit, Faculty of Fine Arts and Music

THE UNIVERSITY OF MELBOURNE

Project: ***Exploring the possibilities of dance movement therapy with women in the criminal justice system and their supporting communities***

Dr Katrina Skewes McFerran (Responsible Researcher)
Tel: 0407 350251 Email: k.mcferran@unimelb.edu.au
Ms. Ella Dumaresq (Student Researcher)
Tel: 0411 500678 Email: ella.dumaresq@gmail.com

Introduction

Thank you for your interest in participating in this research project. The following few pages will provide you with further information about the project, so that you can decide if you would like to take part in this research.

Please take the time to read this information carefully. You may ask questions about anything you don't understand or want to know more about.

Your participation is voluntary. If you don't wish to take part, you don't have to. If you begin participating, you can also stop at any time.

What is this research about?

My name is Ella, I am a student at the University of Melbourne. I am working on a project that seeks to explore the possibilities of dance movement therapy in collaboration with women in the criminal justice system and their supporting communities. The specific goals of this project will be decided on together, and will be based on what group members feel is important to them. This project is about exploring how women in the justice system experience dance movement therapy, and how we can work together to use dance and movement in a way that best supports the health and wellbeing needs, wishes, expectations and desires of its users.

My supervisor for this project is Katrina Skewes McFerran. Katrina is my teacher, and will be helping me with my work on this project. This study will become a part of my dance movement therapy degree, in the form of a PhD.

What will I be asked to do?

If you wish to take part in this project you will become a 'co-researcher' which means you help to decide on what we do in our group, and why. You will be invited to participate in discussions about the things we do in our dance group and what this is like for you. As co- researchers, you will also help decide on how long this project should continue. You will be asked to attend a weekly 'dance and discussion' group of 1-3 hours. As co-researchers you will help decide what the best amount of time is. Some of this time will be just for dance, and other time will be used to talk about our project, or to just hang out and have a cuppa. There will be up to 20 other women in the group. Children are welcome to join the dance

group, and there will be a staff member from SalvosConnect to help take care of children while we discuss our dance experience. Other group members may include staff members from Geelong Community Corrections (CCS) or support workers from different agencies who may wish to join our project as co-researchers. Everyone in the group will be invited to help make decisions about our project. It is likely that you will be interacting with other women who access support services within Geelong CCS or other support agencies. This project is separate to the existing relationship between staff members and service users however and will take place in the community in a location we decide is most accessible for all group members.

We might record some of the things we do together by making group notes, drawing pictures or taking photos of any artwork we make. We may make video recordings of dances that we create together. These materials can be used to help us remember what we have done, and might help us to plan new goals and activities for our project.

Once we decide it is time for our formal dance and discussion group to come to an end, you will be invited to continue working with the academic researcher, who is a qualified dance movement therapist, to explore ways in which you might be able to integrate some of what we have learned together in your daily life. We can continue to work together until completion of this PhD project (August 2019) to explore how you might choose to transfer some of the knowledge and skills gained through participating in dance movement therapy into your day to day lifestyle, for example, joining a yoga class, getting involved in a walking group, exploring more social dance opportunities or anything you identify as being potentially beneficial to your own health and wellbeing.

What are the possible benefits?

You get free dance movement therapy sessions and the opportunity to explore a new activity and meet new people. You help decide on the specific benefits you wish for our group to achieve. You will have the opportunity to continue working with the academic researcher, who is a qualified dance movement therapist, to explore how you might integrate some of the potential benefits of dance and movement into your everyday life if you wish to do so.

What are the possible risks?

In our dance and discussion sessions group members may choose to share things that are important to them. There is a small chance that yourself or others might choose to explore something that makes you feel uncomfortable or unhappy. If this happens, and you wish to speak with someone outside the group, we can arrange for you to see a counsellor.

Do I have to take part?

No. Participation is completely voluntary. You are able to withdraw (quit) at any time.

Will I hear about the results of this project?

I will use the information we collect such as group notes, photographs of any art work, or videos of our dances to write a report about the project, as well as some

articles and presentations. Aside from this, we will work together in our meetings to decide if and how we should present our work to others, such as family and friends, and what this should look like. Some examples may be a performance, or making a dance video for you to access outside of our project.

What will happen to information about me?

You will get to choose if you would like me to use your real name in my reports and presentations, or if you would like a different name so no one will be able to identify you. If you do not wish to appear in photographs or videorecording we can pixelate your image so you are not recognisable. All your personal details are kept private between the people involved in the project. The only case in which I would share personal information would be for legal reasons, such as the court asking me to do so. This is highly unlikely.

After our project is finished, all our information we collect will be stored confidentially at the University of Melbourne for a minimum of 5 years and then destroyed. Any videos or photographs will be stored on my own password protected computer and will remain confidential.

Is there any potential conflict of interest?

I am a researcher as well as a dance movement therapist, which means that I am performing two different roles. I will be seeking supervision from Katrina to ensure that I manage my roles responsibly, and I will have additional supervision from other dance movement therapists to make sure I am complying with professional guidelines.

Where can I get further information?

If you would like more information about the project, please contact the researchers; Katrina Skewes McFerran [M: 0407 350251], or Ella Dumaresq [M: 0411 500 678)

Who can I contact if I have any concerns about the project?

This research project has been approved by the Human Research Ethics Committee of The University of Melbourne. If you have any concerns or complaints about the conduct of this research project, which you do not wish to discuss with the research team, you should contact the Manager, Human Research Ethics, Office for Research Ethics and Integrity, University of Melbourne, VIC 3010. Tel: +61 3 8344 2073 or Email: HumanEthics-complaints@unimelb.edu.au. All complaints will be treated confidentially. In any correspondence please provide the name of the research team or the name or ethics ID number of the research project.

Appendix 6. Letter of Support (Susan Dandy)

29 January, 2018

State Govt Building
Geelong Community Corrections
30 Lt Malop St

Dear Ella Dumaresq
RE: research collaboration

As discussed, my name is Susan Dandy and I am the Manager of Court Practice in the Geelong area. I have approximately 20 staff who work as operational case managers and team of 7 Supervisions who guide and support the case managers in their day to day activities. We have approximately 850 offenders currently engaged with our office and have a reporting office in the Colac area which caters for our offenders living between Lorne to Apollo bay and Lizmore. I also manage our teams Prosecutors and Assessment team who carry out court related operations at both the Geelong and Colac Magistrates Court. These staff are required to undertake court assessments and prosecute matters on a day to day basis, which requires significant stake holder engagement with other court user services. We also work alongside our Parole and Specialist stream and our Community work and Partnerships team. Ms Dumaresq will have access to a number of our Community Correctional streams as well as our Department of Justice Business Units which covers a number of activities including Sheriffs, Consumer Affair, Mediation and now Youth Justice.

Within the Geelong Office, we have often piloted and/ or adopted activities and partnerships which are designed to strengthen our engagement with our female offenders and look at their individual risks and needs. We have looked and encourage our staff to consider different therapies which are more targeted to their needs/responsivity issues. Such as art therapy, music therapy etc. What sets this project apart is that, we have been invited to participate and share our knowledge with Ms Dumaresq, in its developmental stage. As such we have invited her into our space so she can understand what the key issues are and learn firsthand what the women feel they need to lead successful, valued and happy lives. Often these offenders are unable to describe and or understand some of their feelings and emotions. I hope that this project could give them the tools they may need to name these emotions and start to deal with these in a pros social and healing manner.

As noted above I have agreed to work with our partners (salvos connect) and am very committed working with Ms Dumaresq on this project. We have a dedicated working group who share my enthusiasm and have begun to work towards making this work.

The interest is doing a participating type research and co researcher is particularly appealing, as history tells me that projects – which are too strict and do not have a good understanding of our environment do not succeed long term. I think this approach allows for fluidity and growth and is clearly client centred. The success of the pilot will be as individualised as the female offenders who participate. We have canvased a lot of

interest from my location and our other partners ie ReConnect workers who work with offenders in prison, our Parole team who work with females leaving custody.

As a briefly mentioned above, we are often asked to participate and or refer our offenders to programs, however my experience over the last 15 years has been that these are often short lived. I hope that this project which will be co researched by the female offenders themselves will speak to them differently as they will develop and guide the project through their eyes. I think collaboration is key when working with female offenders, who appear to engage in a more meaningful manner when we work this way.

I have attached some commentary from our guiding principles which speaks to our work and how this will promote the work we are doing. We understand the need to develop effective partnerships with other service providers to better support our dual clients and support staff to engage in a manner which targets their individual circumstances.

'Responsivity is about individualising the case management service we provide to maximise offenders'

Should you require any further information, please do not hesitate to contact me on (03) 5226 4444.

Yours sincerely

Susan Dandy
Geelong Community Corrections
Manager Court Practice
30 Lt Malop St

Appendix 7. Fieldnotes (template for Geelong CCS cycle)

DATE	NOTES
WHAT I LEARNED FROM THIS EXPERIENCE	
RELATIONSHIP TO POLICY AND PROFESSIONAL GUIDELINES	
REFLEXIVITY/EMBODIMENT	
DISCUSSION	
FRAMING DMT WITHIN PROFESSIONAL GUIDELINES	
EMERGING THEMES	

Appendix 8. Fieldnotes (template for DMT group data production)

DATE	NOTES
LOCATION	
PERSONS INVOLVED / ATTENDING	
MY MOVEMENT OBSERVATIONS	
WHAT WE DID IN THE WORKSHOP	
WHY WE DID IT	

WHAT I LEARNED FROM THE WOMEN ABOUT THE EXPERIENCE	
RELATIONSHIP TO THE LITERATURE	
REFLEXIVITY/EMBODIMENT	
DISCUSSION	
EMERGING THEMES	

Appendix 9. Decision log

Date	Decision	Influenced by	Potential impacts	Discussion with	Key discussion points	Conclusions	Actions	Additional notes
13/04 /2017	Pursue collaboratio n with VACRO instead of Jesuit Social Services	Although we had a great meeting (Gary Roach), JSS got back to me to say they could not support the project as their work is individually based.	Now persisting with VACRO.	I replied to Gary's email and said it was unfortunate they couldn't become involved. I then talked with Lucy about this in the following supervision.	I really liked the participatory attitude of JSS and was disappointed this did not work out.	Time to start writing a decision log to catch all these decisions	Recorded decisions like this in my notes/diary.	I got a sense of how exciting it could be to collaborate with an organization that "speaks the same language" in terms of AR. It made me reflect on how much harder it is with VACRO.
26/05 /2017	To include women on current orders in the intro workshops	I attended the May meeting at VACRO where we talked about the differences btw parole and community orders. Shannon asked if all women on their program	The project expands for focusing solely on 'women exiting prison' to women who have not been imprisoned but are serving time in the community.	Lucy. I explained to Lucy the situation, and we agreed that it was in line with a collaborative design to accommodate for the way in which the mentor program already runs. No issue with ethics.	My uncertainty around 'is it ok?' or not. I keep referring to my ethics application, and sometimes get caught in a predetermined idea of how it should look.	All women currently involved in the VACRO program are eligible. Shannon has indicated that she will be "screening" people before asking them to join the group, as she has a good idea of who can/cannot	I followed up with Shannon to confirm that all women on the program are eligible. This widens our potential participant base.	I wasn't aware of the differences btw parole and correctional orders prior to meeting a senior parole officer at the meeting, who explained all this.

		were eligible to be involved.				participate in a positive group activity.		Attending this meeting was quite important.
24/05 /2017	To set up for 1st intro workshop despite anticipating that no one was coming.	There may have been a slim chance that someone would still show up.	None, other than feeling a mixture of relief and disappointment!	Shannon. She queried whether I would still run the session.	Needing to further identify barriers to participation, and look at alternate paths to establishing a "hanging out" phase.	Suggest the following to Shannon: *facebook group *meet up with mentors and participants	Emailed Shannon these options	Some barriers mentioned where regional living and poor health.
7/07/ 2017	To keep persisting with VACRO	Shannon emailed me back to say that she definitely thinks there is traction with the project, but currently she cannot identify anyone who might join the project.	If I focus too narrowly in VACRO and it doesn't work out, I'm left without a focus group?	Sherry. Sherry suggested holding workshops just for mentors at this stage. They could invite their participants down the track to "come with me" (rather than I'll come with you). Used LMA to explain this.	Sherry: the workshops too daunting at this stage? The women have no reason to trust me. Shannon: in her email, stated that the workshops as a concept might be too daunting for women "looking to put experiences behind them" and move into the community.	Suggest to Shannon that we invite mentors only at this stage to an intro workshops	Wrote an invitation and send to Shannon to distribute to mentors.	#1 Other barriers identified were: -age (Shannon assumes that the older women won't be interested) 8 women phone mentored Regional living 2 women still in prison

								A lot of requirements & difficult to come into the city financially
7/07/ 2017	Shannon suggests giving a research proposal to participants to see if they would like to receive a call from a researcher	I would need DoJ ethics clearance to move on to this step.	This could be a good substitute for intro workshops. I can't issue a research proposal at this stage though.	Called Lucy. If the research proposal is something that VACRO is saying is now the best way to proceed, then I need to apply for DoJ. In the meantime, concentrate on mentor group.	If I don't get clearance, then perhaps the project will evolve into a mentor focus group where we explore the supporting community around women exiting prison. I have UoM clearance to go ahead and recruit for this.	Determine with Shannon if it is time to apply for DoJ. Explain how I am limited in engaging potential participants until then.	Emailed Shannon.	Shannon was indicating that we needed to begin to build a relationship with the women. Her thoughts go straight to a research proposal, but what about the "hang out" period and just saying hello over the phone?
Date	Decision	Influenced by	Potential impacts	Discussion with	Key discussion points	Conclusions	Actions	Additional notes
19/07 /2017	Shannon responding that we don't need DoJ ethics	I told Shannon I thought we might need to apply for DoJ now. Her	Reframing this step as the hangout period means that we are substituting	Need to discuss with Lucy, who is currently OS.	Will still need DoJ to proceed further than phone chat. Whether or not I am granted clearance will	Realised that Shannon's prior suggestion to create research proposal was the	I emailed Shannon back. Said if she didn't think we needed DoJ for phone call	I'm just waiting for Shannon's reply now. I hadn't

	clearance to make phone contact	response was that if mentors just asked participants if they would like to receive a phone call then we could proceed with this step.	the workshops for an over the phone intro chat.		determine next level of outcomes.	logical next step for her, however, her recommendation to have a hang out chat is more in line with the phase of community building that we are currently in. I felt I needed to state that we will need DoJ, and to confer with her on this, but happy to go ahead if that's what she is indicating is best.	invite, and was recommending this as the best next step then she might like to invite mentors to ask their participants if they would like to receive a phone call about a potential dance program at VACRO.	applied for DoJ yet as Shannon checked with the researcher officer at VACRO who said we didn't need it to do intro workshops. I hadn't reassessed this after the initial attempt however. I need to consult Lucy further and this and get some support, as I feel like I've hit a bit of a wall.
14/08 /2017	To distribute PLS and research proposal at next mentor meeting (21st sept).	The way in which mentors currently receive information: Presentation Mailing list Proposal	This step won't 'come out of' the first workshop, but will frame the first workshop as a possible	Shannon, in person, at VACRO	Ways in which ppl like to receive information (S herself would prefer to get a more concreate idea of the project, and go home and think about it).	I will bring a little information package with me: Presentation Mailing list Proposal	Take this to supervision on Thursday. Prepare presentation (powerpoint?)	I think this decision marks a bit of an evolution in my own ability to listen and

	To invite mentors to an initial workshop (I should set a date and time).		beginning to co research group			Once I have consent to contact mentors I can begin liasing directly rather than going through Shannon		respond – I had to adapt in the moment and realise that this way of approaching recruitment is probably a better fit with the current procedures & context
14/08 /17	To focus on creating a co research mentor group	The work we have already done in terms of getting to know mentors, and the enthusiasm displayed by mentors	This could take the project on a different trajectory – exploring DMT with the supporting community	Sherry, Lucy, research community (CATRU intensive), Felicity & Kirsten M	I've got approval to go ahead with this step The data is pointing us here at the moment Much easier for the time being – seems like a natural progression Saturation – not able to attend any more meetings/to full the room/ end of hang out period (at mentor meeting)	We are focusing now of gathering a mailing list of mentors, and I will come along in September to the meeting (no meeting in August unfortunately)	Explore some literature on supporting communities Pursue mailing list – Shannon to contact mentors and ask consent to pass on emails to me	S really liked the idea of exploring DMT as a mentor resource. The idea of self care was of interest. S reiterated that mentors, especially new mentors, are interested in dance and like the sounds of the project

14/08 /17	Not forming a Facebook group	The research office at VACRO – they said they would not support it	Loss of a potential platform through which to communicate with mentors/participants	Shannon (was Lucy's suggestion a while ago). S. was ok with the idea, but consulted the research office who said no	Privacy was an issue I told Shannon it was probably time that I communicated directly with mentors (in response to her saying she has so many things to mention in the meetings) – I framed it as a way of sharing the responsibility	Will not create FB page. But will be insisting that we create a mailing list. Shannon has told me she will send another email out today, and hopefully have the beginnings of a list by the end of the day	I'll follow up with Shannon tomorrow. Thinking that I might make a video link as well, as the Sept meeting is a while away	I also wonder if I can get in touch with the research office at VACRO directly. There seems to be someone there who S. runs things by – would make sense that I speak with them too perhaps?
Date	Decision	Influenced by	Potential impacts	Discussed with	Key discussion points	Conclusions	Actions	Additional notes
16/08 /2017	Invite mentors to join mailing list	Needing to contact mentors directly to deepen hang out process		Shannon and Lucy	Having direct contact with mentors will help to build a r/ship, as the next meeting is over a month away, and I want to alert ppl to upcoming workshop	Shannon emailed me the names and contact details of 7 mentors who consented to being on mailing list	I emailed all these mentors, and have heard back from 2 of them who are interested	I've told mentors I will introduce the project in more depth at the meeting, and offered to catch up for coffee in the meantime

17/08 /17	To decline an invitation extended by a mentor during this initial email exchange to run a once off 'lesbian group'	Was totally random and did not relate to the research question	Blurring of boundaries, working outside of research framework not my intention with these women	Made the decision myself		Politely wrote back and said this was not appropriate for me at the time	I am to text J C when I am next in the city on a Thursday and see if she is around for a cuppa (she didn't want to commit to a day or time)	J C seemed really scatty through email, rushed, but curious about dance and willing to meet for coffee
17/08 /17	To do an ethics amendment to work with mentors	Interest displayed by VACRTO mentors in participating in workshops and potentially research (second mentor emailed me to say she would like to support project)	Will be focusing on the supporting community, but still framing the research around women's experience and perceptions of exiting prison	Lucy – via phone call	Me having to think about whether I wanted to change the research project to a mentor-focused study, or keep it as is and build the mentor group into the overarching focus (how can mentors contribute as supporters of WeP	I will write and additional PLS for mentors, and state that as they are part of this community they are invited to participate (their participants may or may not join at a later stage)	To this and submit before 28th August. If I don't get it back in time for VACRO meeting in Sept I will issue old PLS statements and workshop flyers for mentors	Didn't realize I was thinking about 2 diff research topics. Mentors can be incorporated as 'bridge'
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
28/08 /17	To rationalize to the ethics committee my decision to submit an amendment rather than	Discussion with Lucy around this decision being congruent with AR.	May take longer to get approved/ is not what ethics committee is recommending	Belinda (research office), Grace Thompson, Kat, Lucy, Mel Murphy (via email)	The positivist framework used by ethics committee not aligned to a participatory research project.	I will stick to the initial plan of writing an amendment as this is supported by my methodology	Write amendment, look up references Mel has mentioned, think of risks and inconveniences to mentors	See journal note #1

	whole new ethics application	Decision following suggestion that I need to submit a whole new application (ethics committee feedback)						
26/08 /17	Think about my timeframe for data collection – I should aim to be finished by June 2018	Lucy, supervision	Less time that I thought to engage mentees	Lucy	Need to be clearer with ppl about what is expected, how long it might go for Need to allow time for analysis and writing up	I will aim to already run some study groups before the end of the year	Think about "chunking" – Lucy – doing 4 weeks for example and then evaluating	See journal note #2
21/09 /17	To have a coffee with Josephine C after the VACRO meeting	Email exchange and J's interest in meeting up				JC said she would like to come to the workshop. Seemed to like my approach. We had an informal chat, and also ended up on the same train for one or two stops.	Will follow up with reminder email	#3 Boundaries I felt uncomfortable when JC sent a follow up email and offered to catch up again socially – this compounded with her previous inquiry for

								me to run a 'lesiban dance group'
31/09 /2017	The meet with Bec (artist) for a cuppa	An email Bec sent saying she would love to be a co researcher and would like to meet up			Counselling studies, balancing life and work, self care, arts practice, what the project would involve	Bec couldn't make the first workshop so we decided the same time/day the following week	Email Bec and all mentors about second workshop	
2.10.2 017	Respond to HEAG feedback concerning an amendment to include mentors	The ethics committee were informing me that the idea of involving mentors meant that this was an entirely different project. I wanted to rationalize that this was part of the AR cycle, and an ecological approach	I decided not to take Grace's advise, which was to either submit a new application, or lay out my rationale in terms of Phase 1/ Phase 2 of the project. I had called Grace when I got the feedback and on the phone it became apparent that she thought this was a major change to my research question and needed a new application for a changed project	Lucy, Grace, Kat, and Mel (Mel via email provided me with some articles which helped me form my argument)	I argued that this was a decision informed by the findings to date, and that we were still pursuing the same research question, however our dialogue with community players and attempts at recruiting have shown us that we need to engage mentors as the 'link' to working with women exiting prison	It took me some time to sort out for myself that this was not a new research topic. I was thinking of exploring self care with mentors initially which could have been a different project for sure. With Lucy we talked about whether I was still going to pursue collaboration with mentees and I decided yes, that this was still the point.	Await approval and then begin co research group with mentors (continue to hold intro workshops until then)	I made a very shitty amendment before I went to Ecarte. I did not give this sufficient time and did a crap job which is why this came back to me. In my mind it was a tiny amendment and I was gassed at the time and didn't properly engage with it. I was also emotionally strung out

								(preparing to go to Europe). Next time I will know what it takes to do an amendment. I was super blasé about it, and even said that there is no 'risk' to participants without justifying this and stuff like that.
Date: 5/10/ 2017	**Decision:** Run first intro workshop for mentors. I chose the day and time randomly w/out knowing ppl's availability	**Influenced by:** 13 mentors signed up for mailing list and want to come to intro workshop	**Potential impacts:** I didn't know the best time for ppl so I just made a decision to do it on this day. Might get ppl interested in joining study group after today	**Discussed with:** Lucy (Sherry, earlier on, as it was her idea initially to involve mentors)	**Key discussion points:** From workshop: Ppl new to dance Feeling relaxed Potentially good for ppl to feel like they 'own' their bodies again Discussed w. mentors at meeting that this would be a good way to answer the collective question "what is DMT?"	**Conclusions:** A few ppl couldn't make it so I have offered to run another one next week. Ppl said this day and time was good. I can offer more until ethics approved This is part of the hanging out period	**Actions:** Plan next workshop and email everyone, inc Shannon to tell her briefly that we had mentors show up Need to ask mentors to ask participation to ask if they would like to receive a phone call	**Additional Notes:** Who came: Katheryn, Bec H Carmel

6/10/17	Ask Shannon via email to ask mentors if their participation would like to receive phn call	S recommended this would be a good way to invite participation and get to know women	S might forget, so I will have to ask the mentors I have contact with as well	Mentioned this as part of my presentation to Cochavit in our seminar (5th Oct)	This is a way that ppl could get to know me as a person, and become aware that I am going to work with mentors on a dance project, wondering if this is something they would be interested in considering doing?	Need to keep pursing this as in order to have direct contact – also need to gain ethics approval before 'mentees' could join the project	Mention this to mentors tomorrow and next workshop	S explained that if women feel like they have more input into the project, they are more likely to join, and over the phn is less overwhelming
16/10/17	Invite all mentors to another Thursday eve workshop	Kathryn was planning on coming last week but couldn't make it in the end. I want to keep offering this at the same time/place to give ppl opportunities to come	No one might come again, in which case I will use the time for exploring DMT processes, reflection, planning for future workshops	I told Katheryn not to worry as I would run another one the following week		I will keep running these weekly throughout October	I need to tell mentors that I will do this each week	
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
16/10/17	To invite all mentors to an alternative casual	Ally told me tues/wed better for her and she is keen to come, and Bec H	Ppl might feel uncomfortable moving outdoors, but I think Ally or Bec (which are the	In my cuppa meeting with Bec we talked about doing something casual like this, and BEc likes this	Wanting to try to find a creative alternative for ppl who cant make Thursday but who have expressed interest.	This option allows us to be more flexible, as I don't have to book a room. There would	Await response from mentors	I said in my email that if ppl were finding it difficult to come to the

	workshop in the park	said the same when I met her for a cuppa	main mentors I am thinking of) would be fine, or would tell me, considering we have been emailing.	emergent approach and does her own art practice outdoors		likely not be enough time to book a room today (mon) as VCA takes so long to get back to me.		workshop dates, then to pls be in in contact as I'm happy to meet up individually if that works better (Bec made me realise this is a possibility, to just hang out and explore some movement)
16/10 /17	To wait until I hear back from UoM ethics before applying for JHREC ethics	Got a response from Nicole at JHREC saying they would be assess it if it were in the process of being approved by uni. I tried to call but no response	I won't be able to apply until 2018 as the closing date for this year is end of October (!)	Will update L in supervision, but this decision has been made in response to JHREC protocol	I could have (should have?) submitted to JHREC first, as they have a streamlining agreement with UoM. But, at the time of applying for ethics approval, I did not have a firm enough understanding that VACRO would be a potential partner. At that point in the project there was less of a sense of commitment.	I had to obtain UoM ethics firstly, in order to gain access and have this "hanging out" period. VACRO were not in a position to commit until well into the hanging out period.		
16/10 /17	Emailed S to see ask if	Emailing feels fragmented	I have asked in the past, but this	Initially discussed this with L in	Needing to keep ppl engaged	I think this could be a much better	I will go ahead and do this today.	This issue of not being

	VACRO is happy for me to set up a FB group to promote workshops. S checked, and said yes, as long as we didn't reference VACRO	and I want to start more of an online community, rather than email individuals	refered to mentees as well and S said we could not – potentially I am being cheeky by asking again but situation is now different	supervision but have not revived this idea since taking an ecological approach (work w mentors)	Need to keep the ball rolling How to continue building on what we've done so far Make a professional FB profile (not personal)	way of communicating with ppl and giving ppl an optional platform (other than email reminders) to check out, and also I can link videos and other things		able to reference VACRO – how is this collaborative then? I understand the privacy thing but VACRO seems to not want to be implicated
24/10 /17	Meet Bec H for coffee today	Bec came to workshop, and said she was around in southbank if I wanted to have a cuppa (she teaches crim at VU)	Get to know Bec more and keep engagement up with mentors as we come toward recruiting		Bec's work Criminology in general Bec's reflections about 'owning your body' & DMT Bed dropped the bomb on me that the mentor program might probably be defunded	Bring this to supervision tomorrow. I don't want to mention it at seminar as don't know details. Might have to look again for other organization, but hopefully can still do some sessions with mentors and collect data before end of year	Wait til I speak with Lucy, and also get in touch with Shannon (probs email)	See #6 in decision log detailed
25/10 /17	Email Gary at Jesuit Services and explain where I am at. Ask	The response Gary gave me back in April was that Brosnon only does	If they are interested I would need to think more in depth about how individual co	Lucy	Lucy suggested that if I were researching unicorns, and everyone I spoke with and interviewed said they didn't exist, what would	The same applies for other organisations – I can try to gage whether they would be	Look up other organization	

	whether the Brosnan centre would be interested in partnering in one-on-one DMT, considering this is how they work?	individual. We had a good connection so worth following up again	research would work		that mean for my research question? That maybe I need to change it to be more responsive to actual context?	interested in groups or individual sessions		
Date	**Decision**	**Influenced by**	**Potential impacts**	**Discussion with**	**Key discussion points**	**Conclusions**	**Actions**	**Additional notes**
30/10/2017	To look around for other organisations to partner with	Shannon confirming that the VACRO program would be defunded at end of year	I would start a new research relationship with another organization	Lucy	IF the program with VACRO is ceasing to be, I still have a good half a year (until oct 2018) to collaborate with another organization, or draw the line and maybe pursue auto ethnographic account if cant find other research partners	I need to take a systematic approach and do a bit of an appraisal of the programs that are current available. I had a basic overview to begin with but didn't look in depth in terms of what is out there once I started working with VACRO	Go on CV website and make list of all the programs they mention and take notes and contact ones that look like they could be a possibility	Also look around in the Geelong region
3.11.2017	To call Tamer from NJC and speak with him about potential collaboration	I heard back from Tamer with an invitation to give him		I discussed this with Lucy after speaking with Tamer. We talked about how this might mean submitting another project	Discussed how this project might best embed, and Tamar suggested an easier target group: If it were opened up to clients at the rest of the centre	I agreed to send Tamar a PLS and he would forward it on to the person in charge of the student centre.	Have not heard back after sending the email with PLS, have sent follow up email, no response, call Tamer Friday 24th	Tamer was very supporting and encouraging, saying it was a great idea, but they had

				application with a different research design. Got some thinking to do around this.		Tamer offered to talk to me further to help me get my head around this system and I told him it would be good to come and speak with him.	and try to follow this up	a large number of applications and he could not guarantee anything.
10.11.2017	Emailed mentors to keep in contact	The recent VACRO news. I want to keep mentors engaged and let them know Shannon and I have talked, and we still hope to hold some co research workshops before the end of the year		Lucy. We talked about needing to keep mentors engaged whilst waiting for ethics to be approved				

17.11.2017	Submission of researcher feedback to the HEAG committee	The ethics committee had given me some feedback, and it was largely based on a misunderstanding that there were already 'existing co researchers' I decided that to keep options open with VACRO and to go ahead with this submission as it was not as onerous as I had thought	If this is cleared then we will be able to engage mentors as co researchers. I made a point to be respectful in my feedback, and spoke to all the points the committee had raised.	Lucy and I discussed this in supervision and again on the phone after receiving the feedback. I was relieved as the main concern was informed by this simple misunderstanding.	Highlight that it was indeed a recruiting challenge Address the complex power imbalance btw mentor/mentee Privacy: would mentors be reporting back to VACRO?	Although we had thought that the feedback was going to be almost too difficult to appeal, we realized that it was much more straightforward and I think I did a good job of rationalizing this decision. This followed a CAT/NAMTRU meeting where Grace and Mel Murphy both came in to speak with us about ethics.	Await response	I realized at this point, from something Grace mentioned, that the ethics committee is a 'stakeholder' in action research and part of my journey with this project is about becoming very well versed in applied ethics at the university level. Bit of a paradigm shift for me (philosophical feminist ethics of care / applied ethics in a practical sense)

21.11.17	Email Geelong Community Correctional Services	Shannon recommended being in touch with CCS. It is likely that ppl attending the program there (at least some) have been incarcerated at some point	If I end up collaborating with CCS this is a widening of my project (though not as much as it would be with NJC). I would get to work locally. Some women would be serving community orders, some exiting prison.	Shannon (ran this by Lucy on the phone)	The way parole operates has changed in recent times. Now CCS is playing more of a role, and less ppl are going on parole and instead serving a stated time in prison and the remainder in CCS (rather than going on parole). S said this would be a good place to look ('captive audience') and less geographically fragmented as Melbourne services	I've got a meeting lined up for Friday. They have sent these project details to other agencies that might be interested.	Meet with community members	The woman who responded to me is in charge of the Koori reintegration services
24.11.27	Ethics amendment cleared	I responded by explaining that the inclusion of mentors was a recruitment pathway, and I addressed issues of complex power relations and privacy that the EC was concerned about					Now contact mentors and arrange for at least one workshop (longer) by end of year, or a couple of shorter ones.	
28.11.17	Email Sarah from VACRO	Shannon was meeing Sarah on Friday and	I would be staying within the same	Shannon (mentioned it to	S gave me some tips about talking with ReConnect staff.	It was helpful information from Shannon and I	Await response and think about using the	When I was reading about the

	ReConnect in Geelong	said she would mention this project. S emailed me to say Sarah already has someone in mind in Geelong for me to talk with, and that I should email Sarah and have a phn meeting	organization if this worked out with the ReConnect program It would therefore be the most natural pathway (?)	Lucy also on the phone)	7 critical points Good Life Model These are the frameworks that ReConnect uses, and S suggested I could appeal to these points (which include social connectedness)	have started looking at these frameworks. Have emailed Sarah	language of these frameworks to communicate the broad research aims	Good Lives Model I was highly critical of the way in which the problem is located in the individual… kind of like an attachment theory model, and it does not look at the broader inequities; based on lack and deficit framed (yet claims to be a 'holistic' approach)
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**

28.11. 2017	**To partner with Geelong CCS**	Based on Shannon's recommendation / I am now living in Geelong region	New wave of research; begin process anew with this organization	Shannon, Lucy Meeting with GCC women	Ownership (shared project) Holding the sessions on location (security reasons) Timeframe Focus: keeping the focus narrow (on women exiting prison, there are enough candidates to warrant this) Susan flagged that the women's indigenous group in Geelong would most likely be very interested Shadow work – skype calls with women in prison	We will form a co research alliance. Susan has marshaled a core team of 5 staff members to collaborate on this project. We anticipate we will be able to run sessions beginning in January Susan to check if we need DoJ clearance	To come to the meeting on 14th Dec and present for 10 minutes Email project description, PLS and consent forms, risk management strategies Fill out department paperwork so I can start doing shadow work	GCC is very well linked in with all the other agencies that run programs for women. They are doing the reaching out work, including connecting in with the local aboriginal women's group which they think will be interested in participating
14.12. 2017	Timeframe: new aim to start co-research group in March							
14.12. 2017	Submit a new ethics application in the new year	Discussion with Lucy around my options: make an amendment	I will be writing this in the way advised by Grace: spend time getting the	Lucy. To discuss with Kat in new year.	Can't just use old ethics application: does not honour the process to date and reflect changes and new findings	I will finalise my action research cycles so that I have a clear rationale when it	Points to consider are: *Including women on CCO	

		or write a new application	know the context and then submit application naming co-researchers and writing in a way that represents participatory research. Which means doing all the hanging out work and then bringing collaboratively planned idea of project to ethics committee in a way that recognizes co-researchers as such	I mentioned this in the Geelong CCS meeting today, and spoke to Susan about the potential for her and core group to become co-researchers	On one hand I am more confident doing ammendments, on the other it would be a good opportunity to really rock the ethics world upside down and contest the very premises it is built on by taking a different approach	comes time to writing a new ethics application.	*Including kids *firming up who is going to be a co-researcher (in conversation with Susan)	
08.01.2018	Health and wellbeing lens for new project application	My decision to include children in the intial stages in response to Working Group's discussion around inclusion of children and recommendation that this would be a possible	May need to employ a humanistic lens (person-centered) and 'medical' (focusing on the physiological benefits of dance and movement). Easier sell / do not need to work with small contained groups like in					

		enabler and motivator. Need to reassess practice lens – not relevant to do a reflective research piece on ‘women’s experience of exiting prison’ when working with potentially large groups that resemble more a community dance group at this stage.	psychodynamic model.					

18.12.2017	To involve Melinda Flood as a co-researcher	Met Melinda for a cuppa after she called me and displayed interested in contributing to the project. She has worked with another researcher in the part (art + children +justice system)	We would be involving someone from DHHS, so the co-research group is expanding beyond the Justice Department. Could be potential conflict of interest/agendas	Will discuss this with Kat, and with Susan from Geelong CCS	Involving the supporting community (to satisfy risk-adverse framework + to ensure women are supported/level relationships between women and case workers Melinda to contribute her knowledge about community development & connecting with women in the justice system Form a working group to meet up over January and solidify project from an organizational/structal perspective	It seems that Melinda is really aware of the barriers I have been facing, and of all the work that needs to go into creating the conditions for working with vulnerable populations. It could be really handy to have her expertise especially as I am quite ignorant of how this system works	Email Susan and suggest a working group meeting in January	If I am working directly with the Department of Justice it might clash with my values as a critical researcher?
05.02.2018	Shadowshifting week at the DoJ	Previous Working group meeting where it was suggested that I could come in and get a better understanding of Case Management	Could begin meeting potential co-researchers, build a r/ship with Case Managers and better understand the context and processes and 'best practice'	Working Group team (Susan in particular)	Will help us figure out where the best place to engage women is (whether in parole or CCO or through videolinkup pre-release)			

Date:	Decision:	Influenced by:	Potential impacts:	Discussed with:	Key discussion points:	Conclusions:	Actions:	Additional Notes:
10.02.18	Come one day per week into DoJ to participate in more hang out opportunities	Discussed with Susan	Continued background learning and meeting with potential co-researchers					
10.02.18	Inclusion of kids in intro workshops (+Emailing workshop flyers to CCS staff to share with clients and supporting agencies)	Response to Ilsa Slack's recommendation that women would be more likely to participate if kids could also join. SalvoConnect to provide in-session childcare Agreement with Working Group that rather than just hold information sessions it would be good to trial some	Will have large group, need different approach, will be quite uncontained Will be reaching quite wide with our networks – from CCS to SalvoConnect, VACRO, Barwon Health and other connections that	Discussed workshop idea with working group; running of the same approach trialed with VACRO in 2017				

		workshops and introduce ppl to some concepts and activities from DMT	ppl might have (say with CASA)					
16.02.18	Go into women's psycho-ed program on Friday to introduce myself	Speaking with mental health facilitators of the program, and Jo (from Programs) about connecting with women and introducing workshops	Opportunity to get to know women better and introduce them to dance and movement activities	Susan, Jo (programs),				
23.02.18	Invite all women on residence at the Salvos to join dance group, regardless of whether they are serving a current order or not	No show at Workshop 1: spoke with Salvos team + Alyce about creating more momentum around the workshops	We would have to tighten the inclusion/exclusion criteria down the track, once we are recruiting for the research group. However, the women on residence change quite frequently so it is possible that in a month's time they will have more women in	Naomi (Manager), Annie (drug and alcohol), Alyce and Working Group	Decision to run four more workshops at Salvos and reassess. Fact that even though some of the women might not be on orders, they are potentially at risk of being given an order (Annie).	We'll go with this decision, as we want to create energy around these workshops and make it more appealing for client's to drop into (CM can tell their clients there was a group there last week so you won't be the only one" etc)	Email flyer with workshop dates for March to CCS and supporting communities	

			contact with the justice system. However we might need to create a separate group for the data collection, and reassess the workshops for the residents (if Salvos want to continue we might work to find funding)					
26.02.18	Involve VACRO workers in the dance group	Meeting with VACRO team and their recommendation that it will be easier to support women to attend if they can go with their clients	Will have more complex power relationships within the group – group growing to include different roles	VACRO team and working group as CCS	Transport – this will help individual women get to the location Support and motivation	Will invite VACRO workers to meetings and keep them informed, can drop in to their office when I'm in the city on Mondays and update them etc	Email Sarah and pursue this r/ship with VACRO further	
27.02.18	Explore DMT with staff during lunchtimes	Working Group meeting – reflected that staff don't really know how to sell the project and would benefit from trying	Staff will have a better idea and can feel more confident in encouraging their clients to get involved if they are interested	Alyce, who suggested this, Charlotte (supervising manager) and working group	Need to refine the language we are using to sell the idea: - Health, wellbeing, connectedness, social experience,	Decide on selling points (emphasis movement and mindfulness), make clear links between Case Manager priorities and dance project (meeting the social and recreational	Send flyer for staff workshop on 22nd March. Think about the 'sell' and send working group video link of DMT, and a catchy blurb they	

		out some activities			emotional fluidity - Good Lives Model - Movement and Mindfulness - Freedom & fun - Healthy body healthy mind	component of criminogenic framework)	can use with clients + health benefits of increased movement	
27.02.18	Outreach – connect with other agencies (CASA, Barwon Health, Bethany, VACRO, Wathurong?)	Working Group recommendation to reach out to partnering organization	Project becoming and interagency project.	Working Group	Will help increase likelihood of engaging women. Will offer various different pathways for recruiting potential co-researchers (such as engaging during pre-release through VACRO).	I will make contact with these agencies, and WG will continue to follow up with Barwon Health	Me – go connect with organisaitons	This reflects the interagency approach that shifting in public policy
2.03.18	Workshop: Adult disability group attended after receiving confirmatio	They had received a flyer (I had asked working group to send to relevant contacts)	Open community group – when we form a research group we'll have to maybe run a second group for women in the crim justice	Discuss with Kat and working group	Containment? Getting momentum – keeping it quite open to other groups in the community at this stage could be good. Apparently there are a			

	n from Salvos that they could come		system. Happy to keep running a group at salvos if they are donating the space and we can find funding down the track however		couple of women in the psych-ed group who want to come on a Friday and now that they've heard reports of it being a 'thing' they are more likely to come			
7.03.18	Contacting Bethany, BCASA & sending flyer for March workshops – open to clients in general (not just on corrections orders)	The unexpected group from Better Together coming along to workshop, and the positive experience this created in terms of building traction and creating more interest	Could have a large group coming along on Fridays if agencies are inviting their broader clientele along. More chaotic and unpredictable – don't know who might show up.	I discussed the integration of the adult disability group into Friday's workshops with Kat. She gave me something on 'hospitality' to read. (based on Derrida?)	Working w. diverse groups (making sure I document what I did, and why, and theoretical influences on my practice)	At this point, while my role is to establish a presence in the community and generate interest, it would be beneficial to extend this invitation to those organisations which work closely with CCS	Follow up with a phone call to both Bethany and BCASA	
7.03.18	Emailed working group and explained by rationale re inviting BCASA and Bethany to extend invitation beyond	Influenced by Better Together turning up, making think about needing to potentially relax the 'inclusion' criteria for these free	Members may disagree with this decision – I have invited feedback. I could not get into the office this week as my car broke down! So wanted to email and keep in the loop, as the parameters	Apart from supervision with Kat I have not discussed with working group – Susan away on leave – so had to make a decision more independently	Women on CCO or parole may be more likely to join group if there is already high energy around this activity. Less likely to come if they think they might be the only ones. Alyce said following our first workshop that at least she can tell ppl about it, and say there	Still stipulate that the focus is on trying to engage women in the justice system but not exclude anyone wishing to participate at this stage (must be women using the services of CCS		

	former parameters	community workshops	have already shifted slighted (unintentionally) and I have made an intentional decision in response to be more inclusive in this phase.		are already ppl going and its rad.	or supporting agency)		
7.03.18	Emailed Sarah (VACRO) to say I won't be coming into prisons pre-release to do any shadow work	What I said I would do in my ethics application – and I specified that hang out activities would take place in the community	Might lose that particular avenue of gaining participation but no telling if it would really bring me that much closer to recruiting – and not worth entering into a grey area with ethics	VACRO; working group; Kat	VACRO: powerful way of building alliance and key to their success with engaging women CCS: concur with this. They wondered earlier about the best place to 'catch' ppl Kat: VACRO specifically works in the pre-release so has this strong bias. Could be really good, but there are other avenues I am exploring.	Document these occurances where I feel I strong 'push' or 'pull.' I am riding out the tension in being in the centre of many diff service providers. Explore using movement analysis/embodied inquiry	Resume movement reponse sessions with Sherry and use this as primary form of reflecting on these somatic responses…	
9.03.18	Decided to come to SalvoConnect on a Wednesday next week	No one showed up to 2nd intro workshop today (Bek did go and find one mum and three kids who participated in	Have to come in 2x week for another two weeks as Friday workshops already locked in.	Beck and Poppy from SalvoConnect	Last week we had some success involving ppl as the workshop started straight after the meeting so ppl just hung about and join in. Need to see my face, build rapour, talk about the dance and any fears	I'll try coming in a Wednesday at "about 12ish" and see if we can naturally invite some participation after the meeting. Some of the women "out the	Email Naomi and Bek about this to confirm. Also send them the 'selling points' doc I sent to other CMs	

		the end). Weds are the resident action meeting, so more ppl around			or anxieties around this. Tag it onto the back of something else so its not an extra effort to turn up to another thing (motivation low; illness; low mood…)	back" are on orders so it might be a chance to meet them		
09.03.18	Emailed specific case managers directly, providing information about upcoming intro workshops Toni, Bridgitte, Simon, Mel C, Kelly, Zoe (from parole)	Following up from my visit to the women's psych-ed program, I was given a list of names of women in the group and their case managers. I went directly to each CM and asked if they could communicate info about upcoming workshops if they felt it relevant for their client	Building more relationships with different case mangers – reaching out and connecting and being clear about what information they could share with their clients. Need to follow up with case managers individually to try and move past gatekeeping (when addressed individually each	Alyce – provided me in CM details and advised me who to approach	Checking in to see if any of the women they are working with are in a position (stable) to engage in some workshops Simon mentioned that transport may be an issue for his client and would speak about this with her.	Will email and follow up again with people		
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
26.03.18	To attend the Monday night dinner at	Staff suggested this would be a good way for	Boundary relaxation: a 'clinical' DMT might not do	Staff at SalvoConnect	Building rapour; helping people get to know me; ppl might feel more comfortable	Important part of r/ship building at SalvoConnect. Actually I realise	Went along to dinner and ate nice three course meal!	See excel sheet for reflexive responses re

	SalvoConnect	me to connect with women and hopefully meet some women on corrections orders	this, different approach similar to CoMT		attending if they meet me in person	I need to understand more about this location and context. I've been focused on 'hanging out' at DoJ but also need to understand how the community space works		power neutralization and researcher anxiety
29.03.2018	Running a lunch time session for staff at CCS	Conversations with Wellness officer (Charlotte) about staff self-care	Staff can experience some of the potential benefits of DMT and then be able to communicate these to clients from a more informed place (and do something for their own self care in the process)	Charlotte, Alyce, Suz	'Mindful movement' was a terms suggested by Charlotte to help make the concept more appealing.	Focus more on the restorative, soothing processes DMT can offer: connection to self, self-awareness, body awareness, recuperation, tools for self-care and checking in with yourself	Make flyers, Charlotte to distribute; workshop run on 29th March	Yoga and meditation are on the agenda for staff: Bill has approved funding to get lunch time classes happening. DMT equally as effective, how to demonstrate this?
29.03.18	Decided in dialogue with CM's to run another lunchtime workshop	Alyce, Tess, and others who attended the workshop today. Alyce asked if we could do this again and schedule in a	I'm spending time running another service that I'm not essentially getting paid for…while they have the funding to use yoga or	We finished the workshop with Alyce suggesting this, then I spoke with Suz and Charlotte	Ppl reflecting that things like this were needed and that ppl just had to try it once and then would see the value. Alyce said there's still many 'skeptics' in the office, and she's really trying	Book another time with Charlotte. We are going to tack on a social lunch or morning tea so ppl get restorative movement plus food.	New flyers and think about more ways of selling it to case managers… recognizing emotions in the body and being able to identify	

		couple – her suggestion that everyone bring a friend?	meditation. BUT it's a good way to get more CM's on board, as its been hard going trying to sell DMT to some of them. I want them to be able to tell their clients about some of the things we did and how they felt – particularly after the good responses today.		to drum up some enthusiasm	➢ Always good to tag it onto another related activity if possible	how you are feeling seems like something Case Managers are interested in as this relates to Offence Mapping	
10.04.18	Decision to offer clients a free 20 min 'mind/body boost' ***similar to the way in which Rhiannon comes in and is availe for consults while clients are meeting with case managers	I ran a one-on-one session with Chrissie at Salvos the other day, and this got me thinking about taking an individual approach and trying to tag this on to how case management works ** will help decrease travel and capitlalise on client's visits,	I will be meeting with clients alone for the first time, and will need to be trained in calling support if needed and the consequences of this. Also, ethically speaking, I will need to use my judgement about disclosure: if something comes up in these meetings that CM's should	Susan, Alyce, Charlotte	*Expanding on strengths based approach by exploring women's strengths/resources/goals/needs/desires from a health wellbeing perspective *embedding this in assessment/induction process (part of reforms & responsivity) *building on protective factors (pro social engagement; sports & leisure activities) through collaborative,	This reflects principles for intervention and 'best practice' for case management and expands on what CMs already do. Supports the intention of understanding the 'context' of offending through the lens of health/wellbeing, and demonstrates advances in practice to meet the recent shifts in	Make flyers for mind/body boost including benefits (similar to the ones for staff.)	This decision indicates a new wave of action research, as we develop a second stream of engaging potential co-researchers (getting through the gate)

		reducing the need for them to come in other times	know I will need to report to them.		client-centered working alliance *supporting healthy body/mind approach to holistic care and gender-responsive practice	policy recommendation.		
10.04.2018	Will come in for the 9am daily to keep spruiking project and introduce the mind/body boost sessions and next staff workshop	Alyce is doing a great job of convincing CMs to get on board with the project, but I realized that I could also come in earlier and keep engaging with the collective group of CMs this way (ease the pressure a bit on Alyce, and share the responsibility of motivating staff members)	I'll have more of a presence in the office and will be better able to keep energy up around this project. Suz said ppl are not very responsive, as they are taking in heaps of information about the day, and I feel I need to come in and really energise this project within the context of a daily staff meeting	Susan, Alyce and Charlotte	I can introduce the new approach and point out how it will help case managers work toward some of their goals with clients	Will come in at 9am next week and will be available for mind/body boost sessions all day		
10.04.18	Suz to contact Bethany and Stepping Up	CCS works closely with these organisations, and shares clients. Likely to have some			Speak to whichever teams might find this project relevant (come in to staff meetings and introduce myself and the project)		Follow up from Susan's email	

		women referred to these services, more chance of connecting with them if go through service providers connected with CCS						
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
24.04.18	Meet Sharon from stepping up and ask if we can connect with them and use community space	Susan's recommendation to collaborate with Stepping Up; need a space close by for group to run	Might be able to offer some workshops as part of Day Program and being to engage dual clients	Susan	The need to keep making face-to-face contact Running the group on location at CCS was never going to be a real option… SalvoConnect too far away for ppl… Stepping Up just ten min walk down the rd, so we can support women to get there and its more accessible, and CCS works closely with Stepping Up anyway	I will set up meeting with Sharon and start building r/ship with them	Call Sharon and meet in person	
24.04.2018	Send team at Stepping Up project description and offer to run workshops	Sharon asked for information to give to case manager (project description)	As above – and case managers can begin to let their clients know about the project	Sharon	There are a handful of forensic clients using the drug/alcohol services already who might be interested	The space at Stepping Up is really great and Sharon has agreed for us to use it – warm and homely and perfect for a	Also send this info to other support services so that case managers can refer to this when	The Day program would be a great chance to offer a weekly workshop –

	in Day Program				There is already a culture of alternative therapies here (art therapy and Mindfulness) which would support DMT	group. Pursue this r/ship further	communicating with their clients	by that time we should have ethics clearance and can recruit from this group and also invite other women to participate in workshops
24.04.18	Introduce myself to Tuesday women's psych group & offer half hour workshops	Approached by Wendy (psychologist) who was interested in the project and thought it could contribute toward what they are trying to achieve in program	Might be able to recruit from this group Women might feel coerced into participating… important that Wendy introduces the idea and only invites me in once she's gaged level of interest and explained that this is not part of corrections expectations/obligations	Wendy & then Kat in supervision	Women have seemed to have bonded in this group and W thinks that these women will be interested in continuing to meet as a group and explore dance/movement Might want to have extra staff member drop into sessions	I might be able to invite participants in this group to join my research project. I will come in and offer intro workshops and once ethics is cleared can distribute PLS	Come next week and introduce myself to group	Seems like the most straightforward way to develop recruitment pathway
31.04.18	Introduced myself to	Wendy's invitation	May be able to run a group next	Wendy, Alyce, Susan and Kat	I explained DMT in terms of 'mindful	Some women displayed interest	Do some thinking around what	I felt really constrained

	the Psych group		week if ppl are interested		movement' – sort of like what you do in mindfulness, but a bit of an extension on this because we use creative movement, have a social experience, and explore expressive movement. See excel sheet for key 'selling points'	and happy for me to come next week – whoever wants to can stick around after the morning session	might be good to do in that space in terms of DMT activities	and uninspired by the room… claustrophobic
31/04.18	1st Body-Mind consult with Cassandra	Approached by Ash (case manager). C keen to explore body-based self care with me	May be able to use these sessions are bridge to group participation. Will get to know women individually – similar to other therapy programs where therapist meets clients before joining a group. Could also be more like a social worker role through	Ash Q, Kat	C really open and in a good place to explore movement and embodiment practices. She is apparently quiet committed to doing whatever she can to stay on track at present. Ash said she would be a good person to collaborate with, eager to explore and open to new ideas	Approach this as an initial conversation; use worksheet to help frame discussion but very participatory (seeing where C naturally focuses, and responding to this)	Made a worksheet we can use for this session – based on Ash's reflection that women often respond well to worksheets. Can use this to open up conversation on body-based self-care	My role: 'body-mind worker' or dm therapist? These sessions could be more like a case management meeting initially (sports and recreation; holistic wellbeing; protective factors; and lead into individual or group therapy?
07.05.2018	Visit psych group and	The positive feedback from		Wendy, Alyce, Susan and Kat	Only one women stayed (and her friend who	I'll come next week, in response	Find out who Sam's case	Bit by bit I am making

	offer DMT activities	some group members last week and agreement that I would come today to offer some activities			didn't want to be there but was supporting her buddy) – psychologists told me they had a really bad session and everyone was fighting and wanted to just get out of there in the end. Asked me to come next week (just showing up and being consistent is important)	to Wendy's recommendation to be consistent	manager is…why was she motivated to stay? How can I respond to her interests and expectations?	contact with individuals such as Sam. But contact is fleeting, no opportunity to ask her why she was there. Work with Alyce to figure out how to connect with women who show interest (so that they don't miss out when the 'group' doesn't show up)
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
07.05.2018	Offer 2nd Body-Mind consult to C	C's willingness to meet again after our first session	May begin to build a collaborative alliance w C; can follow up on her interest in yoga and offer her some suggestions for exploring movement	Ash and Kat	From last week: Last week C talked a lot about her knowledge and skills in mindfulness and meditation; she practices some body based self touch (feet pressure points) before bed at times and would	Based on C's willingness to explore some more body-based self care I offered her a short mindful movement activity next time she comes in – told her if she	Speak with Sherry (supervision) about one-on-one sessions and get her perspective Understand more about brief intervention therapy	Spoke with Kat about feeling like I was not being very participatory in these consults… felt like I had to offer structure, be

			together if she wants to do something on the days she's in at CCS		like to know more about DMT Wants to improve fitness and do a stronger yoga class Feels that if her anxiety were better she would feel more comfortable engaging in recreation activities with others	ever wants to do that just let Ash know. C said she would wear more comfy clothes next time		quite directive, be solutions-focused… picking up on the way that case management works and letting that impact my approach too much. See excel sheet for reflexivity
15.05.2018	Visit psych ed group and see if anyone wanted to do mini workshop	Last week Wendy forgot to mention it to group and asked me to come back this week and try again		Wendy and Danielle (group psychologists)	They forgot last time so asked that I come a bit earlier and knock on the door before 12pm	If I don't have any interest this week I'll stop showing up and instead alert ppl to workshops in the community	Visited group but Wendy/Danielle forgot to mention it again. Asked if I could try again on Thursday	I will try on Thursday but after that I won't pursue this any more, does not seem like a good fit
17.05.20	Visited psych ed group	Was asked to try again today	Might seem like I am too insistent, but I want to make sure if anyone is interested they have a chance to know about upcoming workshops – last two weeks I have	Wendy and Danielle	No stayers, everyone filed out of room. No chance for discussion with group leaders; they did not show much interest in the workshops I am planning to run at Stepping Up. Won't pursue this any further, it does not feel	Some women apologized for not staying – saying they would like to but had stuff on. In this case I will pass on flyers etc for workshops to group leaders so at least they get the		

			not had a chance to make contact due to group leaders forgetting		participatory to keep showing up now that I am sure there is no interest.			
24/05 /20	Stop visiting psych ed group but ask facilitators to hand out workshop flyers	No one stayed around to hear about the workshops, though some women said they were interested but had to be elsewhere	I won't be visiting anymore so won't have face to face contact but I want to make sure ppl who are interested get the info	Danielle and Wendy (psychs)	Its hit and miss with the group, sometimes they have 'good' sessions and sometimes everyone just cant wait to get out of there	I conclude that the space and the time is not right for engaging these women… uninviting therapy space, no windows or natural ventilation, too many other associations with the space itself	Will pass on flyers via email for Wendy to distribute in her sessions instead of visiting group	I'm disappointed that the women who have shown interest are still not accessible. There's no time or opportunity to just touch base with individuals, which is why I started the BMB sessions
25/05 /18	Run first intro workshop at Stepping Up	The Day Program started last week and Sharon has agreed to embed the dance into the program (well, on a Friday once the other	We may get some women stay on who are on corrections and attending the rehab program as part of their order, and we may also have other ppl participate who are not on orders.	Sharon	It would be a good activity to have after a busy week of intensive therapy. If we are hospitable and include all women we are more likely to get a group happening, but I will still only invite women on corrections to become co-researchers	If we limit these workshops to only women on corrections we are not likely to get a consistent group. The women I am trying to engage with are spread between diff agencies and programs, which often have the	Keep communicating with other stakeholders about the workshops and make sure everyone has the right information and material to pass on to forensic clients (I put together a	

		sessions finish)				means of engaging them (such as here at Stepping Up) but there are limited opportunities to form a group soley consisting of this population (as we've seen in trying to run this at CCS, in a more targeted way)	project overview for this purpose)	
29/05/18	Decided not to go in to the office today	The last few times I've just been sitting around trying to work on my research, getting distracted, not really making any gains, no further interest in BMB (and C not coming in on Tuesdays til the 12th)	Might miss spontaneous opportunities to connect with clients through BMB sessions, but the chances of this happening are rather slim and I feel like I'm wasting time – also my	Made this decision independently. Will need to speak with Alyce and Suz about whether they think I need to keep coming in on Tuesdays – if we don't have interest in individ consults there is not much point in me being there anymore (saturation)	Also preparing for workshops and have other meetings, lots of in and out of Geelong, and I can't continue spending a day in the office if its not being productive anymore	Work from home	Text Alyce and see if there has been any interest this morning. I can still come in if there is interest	
1.05.18	Planned on handing out PLS and consent forms at the workshop			Discussed with Misty my decision to come in next week and try again – she didn't realise the				

	today based on great first workshops last week, but no one showed up today			workshop was on today and hadn't told anyone. Also, Mel and Lydia were not in the group today, and Michelle was 'seeing double' and could not participate, so was not a good day for it				
25.05.2018	Run workshop #1 at Stepping Up See notes in 'Learning from the Field'							
1.06.2018	Run workshop #2 at Stepping Up							
5/06/2018	Not going into the office today	For same reasons described last week. Will go in on Thursday before Stepping Up meeting and spruik the workshops at					Have emailed Suz and Alyce and organized to touch base next week and reflect on where we are at together	

		the daily meeting at 9am						
8.06.2018	Run workshop #3 at Stepping Up							
Date:	**Decision:**	**Influenced by:**	**Potential impacts:**	**Discussed with:**	**Key discussion points:**	**Conclusions:**	**Actions:**	**Additional Notes:**
	Focus on 'brief intervention' therapy	Liz & Kat's project which is about engaging clients in a once off manner. This matches the trend in engagement I am encountering.	People could feel pressured to sign the consent form then and there, so I will invite ppl to take away with them and have a think about it before getting back to me. Though I may 'lose' data this way I don't want to put expectation on ppl to have to consent to being in the study	Liz, Kat	This is a really relevant and contemporary way of framing therapy. If ppl are choosing not to engage in ongoing therapy then we need to adjust our expectations as practitioners/researchers. This also aligns with the Body-mind boosters concept of individual, once of (possibly more) appointments	Letting go of the expectation that this will be an ongoing group. Can accumulate data over time, based on individual's feedback (compilation of diff accounts/vigenettes) Maybe case studies?	Give out consent forms to ppl who fit the research inclusion criteria. Group will be open to anyone at Stepping Up program, however I won't use data from other participants not consenting to being in the study	I was a bit wary about opening the group up to guys as well; so we are not advertising this for men and women, but if there is a dude in the SU group who wants to join we are going to welcome him. As SU is the host for this project we need to be

								participatory and adapt to the context, which is a mixed group
15.06. 2018	Distribute consent forms to 2 participants today (workshop #4 at Stepping Up)	In supervision with Kat & Sherry I had discussed with her the fact that I never know if I'm going to see someone again. Will have no data if I don't get consent in first encounter. We spoke about giving ppl consent form & PLS the first time I'm meeting them	I'll be using 'data' from only two ppl in the group in terms of feedback. This feels unfair to other participants in the dance group yet this is the line I need to draw. I'm pleased however that participation won't be affected – anyone can join the group and this feels more inclusive	Kat	Can use this data to begin to compile case studies, or to write a program description. I don't really feel inclined toward a case study but I do think I can use fragements to help illustrate key analytical points, which I can then apply different theoretical frames to and produce analysis	This is now an open group to anyone in the Stepping Up program. Today the ladies asked if their mate (a male) could join us, as he was eager to try out the dance activity. Program facilitator asked me if he could join in, and it felt responsive and inclusive to do so, based on the fact that everyone actively asked me to 'let' him stay.		
15.06. 2018								
22.06. 2018	Run workshop #5 at Stepping Up							

13.07.2018	Run ‘gap’ workshop #6 at Stepping Up Text ppl the night before or in the morning to remind them	Day Program is not running at the moment but the ladies said they wanted to contine coming so I’m here.						
Data collections and analysis								