

## **Second Biennial Summit on Dance Movement Therapy for Change (2018)**

### **Building an Ecosystem for Integrated Art Based Interventions in India**



Organised by

Kolkata Sanved and Centre for Lifelong Learning, Tata Institute of Social Sciences,  
Mumbai

in collaboration with

Paul Hamlyn Foundation, Vital Voices Global Leadership Network and Kamonohashi  
Project, Japan

**Dates:** 7<sup>th</sup> and 8<sup>th</sup> December, 2018

**Venue:** Tata Institute of Social Sciences, Mumbai

**Summary Report**

## **Day 1: 7<sup>th</sup> December, 2018**

### **Welcome Dance Movement:**

The Summit began with an interactive welcome dance led by Kolkata Sanved's Dance Movement Therapy (DMT) Practitioners, celebrating the energy and enjoyment felt by every individual when moving the body. This was met with enthusiastic participation from the audience members.

Following this, the Chief Guest of the Summit, Ananya Chakraborty, Chairperson of the West Bengal Commission for Protection of Child Rights (WBPCR), declared the Summit open.

### **Inaugural Speeches:**

<b>Speakers</b>		
<u>Title of Speech</u>	<u>Name of Speaker</u>	<u>Profile</u>
Welcome Address	Professor Nasreen Rustomfram	Chairperson, Centre for Lifelong Learning (CLL), Tata Institute of Social Sciences (TISS)
Inaugural Address	Professor Shalini Bharat	Director, TISS Mumbai
Special Address	Professor Surinder Jaswal	Deputy Director (Research and Development) TISS; Dean, School of Research Methodology, Centre for Health and Mental Health, School of Social Work

The inaugural speakers dwelt on the benefits of DMT and expressive arts therapies (EAT) as well as the significance of the partnership between Kolkata Sanved and CLL, TISS. The success of the Diploma course on DMT (DDMT), which has become one of the most popular courses offered by CLL-TISS, shows acceptance of a non-traditional, alternative approach to therapy. DMT and this course in particular open up new ways of learning to unconventional students. As Professor Jaswal remarked while talking about her first visit to Kolkata Sanved: *“What I saw represented a lack of barriers- be it barriers of class, caste, age or learning experience.”*

DMT and EAT are often met with scepticism in academic circles. Through exposure to DMT sessions, the TISS leadership began to understand its effectiveness, culminating in the establishment of the DDMT course. According to the speakers, research and documentation is essential for enhancing acceptance of DMT and EAT within academia. They encouraged existing DMT practitioners to build on existing research by carrying out studies in the Indian context.

## Inaugural Panel:

### Role of DMT and other expressive arts in India and its success and achievements

Panel Moderator and Participants	
Name	Profile
Dr. Lata Narayan (Moderator)	Retired Professor, CLL-TISS; Former Convenor of DDMT course in TISS, Mumbai
Sohini Chakraborty	Founder Director, Kolkata Sanved
Dr. Sabiha Vasi	Assistant Professor (Senior Grade), CLL-TISS; Convenor of DDMT course in TISS Mumbai
Sachin Sachdeva	Country Director (India), Paul Hamlyn Foundation (PHF)

This panel was a convergence of three different kinds of actors in the field of DMT for Change: DMT practitioners, academics and sponsors. It served as an opportunity for the audience to understand how different actors can interact and collaborate. The benefit of using DMT in low-resource settings was discussed: it increases the possibility of reaching the last person in the chain as the only resource required is one's body.

Three major challenges to the creation of a DMT for change ecosystem were identified. The first challenge is that of credibility. Dr. Vasi pointed out the importance of academia in overcoming this challenge. Research on the effectiveness of DMT, using both traditional and innovative methods, needs to be published. The second challenge is lack of human resources. The major strategy to overcome this would be to incorporate DMT and EAT into curricula in social work courses. The problem with this is that certification norms could reduce the inclusive spirit that is a hallmark of Kolkata Sanved's DMT for Change model. The third challenge to the spread of DMT is lack of funding. It would be good to have funders who are open to challenging boundaries and are willing to invest for a long period. All panellists agreed that collaboration amongst different actors is crucial to the creation of a DMT for Change ecosystem.





## Keynote Address

**Ananya Chakraborti, Chairperson, West Bengal Commission for Protection of Child Rights (WBPCR)**



“When we ignore the mental health of a child, we ignore the mental health of a nation.”

Ms. Chakraborti, who is a former Board Member of Kolkata Sanved, began by commending Kolkata Sanved’s DMT practitioners as real-life heroes.

She spoke about the importance of inclusion in education. We need to acknowledge that each child has different needs and to

address the mental health of children. She said: “When we ignore the mental health of a child, we ignore the mental health of a nation.” Noting that DMT is a powerful way of addressing children’s mental health issues, she suggested that this method could be added to the methodologies used by the WBPCR.

Ms. Chakraborti also spoke about the issue of trafficking of transgendered people in West Bengal and suggested that Kolkata Sanved integrate some members of the transgender community into its team. She also gave details on WBPCR’s work in modifying POCSO in order to recognise the rights and agency of women and girls.

She concluded her speech by reflecting on the successful partnerships of WBPCR with different departments of West Bengal and with NGOs like Kolkata Sanved and hoped that it would be possible to work with DMT in the WBPCR.



## Experiential Workshops

DMT and other expressive arts therapies cannot be completely understood without actually experiencing them. For this reason, the major part of the first day was spent at experiential workshops. Each participant went through two such workshops.



### **Dance Movement Therapy (DMT) Workshop**

**Conducted by Professor  
Bonnie Bernstein, LMFT,  
BC-DMT, REAT**

**Co-facilitated by Kolkata  
Sanved's four Senior  
DMT Practitioners:  
Jhulan Mondal, Sabita  
Debnath, Sreeja Debnath  
and Tilottama  
Chowdhury**

Bonnie Bernstein is a USA-based Dance Movement Therapist. She has been a key faculty member of Kolkata Sanved's Survivor Leadership Academy for the past 10 years and has been very influential in shaping the *Sampoornata* model. The workshop was designed to give participants personal experience of the DMT process, and was interspersed with explanations of how specific activities are used with trauma survivors. It was attended by all Summit participants.

Before beginning the activities, Professor Bernstein emphasised the principle that lies at the core of DMT: it is not about being taught movements but is about moving one's body in one's own, unique way and finding the individuality of one's creative expression. As a way of overcoming hesitation and starting with movement, the workshop started the activity of claiming one's space by moving according to different scenarios such as walking in a crowded market. Next, there was an activity on "working movements": participants moved in ways that they do during everyday tasks. The next activity was about moving according to different images- such as thunder and lightning- and Prof Bernstein explain how this enhancing trauma survivors' capacity to imagine. Activities involving the use of voice- such as asserting 'yes' or 'no'- helped participants understand how trauma survivors can access their agency within the safe space of the DMT session. The workshop concluded with an improvisational dance through which participants asserting individuality while feeling a sense of community with everyone in the room.

### Three Parallel Experiential Workshops

These workshops followed the DMT session. The participants divided into 3 groups, each doing one workshop.

<u>Workshop</u>	<u>Facilitator(s)</u>	<u>Facilitator Profile</u>
Healing Power of Theatre with a Focus on Persons with Special Needs	Parasuraman Ramamurthy	Founder, Velvi Trust
	Anupriya Banerjee (assistant facilitator)	Founder, Doctor Drama
Authentic Movement	Brinda Jacob-Janvrin	Founder, Studio for Movement Arts and Therapies Trust (SMART)
Creative Awareness with Visual Arts and Music	GopikaDahanukar	Founder, Swahansa Expressive Arts





## Day 2: 8<sup>th</sup> December, 2018

### Panel Discussions



**Panel 1: Need and Scope of DMT and expressive arts in health settings**

<b>Panel Moderator and Participants</b>	
<u>Name</u>	<u>Profile</u>
Dr. Vikram Gupta (Moderator)	Public Health Consultant
Prof. Arabinda Narayan Chowdhury	Consultant Psychiatrist, NHS, U.K., Specialist in Cultural Psychiatry
Dr. Aarti Jagan	Associate Professor, Psychiatric Social Work, NIMHANS
Dr. Aditi Bandopadhyay	Founder, Samya Trust; Physician, AMRI Kolkata
Dr. Tasneem Raja	Head, Mental Health, Health Portfolio, Tata Trust

The panellists spoke about their experiences of implementing DMT and EAT in the health sector. It was agreed that the definition of health cannot be restricted to physical health: it must be holistic in nature covering the physical, cognitive, social and emotional. DMT and EAT are able to address all these aspects of health and do this in a way that overcomes the limits of traditional talk-therapy that is designed mainly for high-functioning individuals. The problem of improper practice of EAT was raised and it was noted that health practitioners must have knowledge of both the kind of therapy being practiced and the needs of the population they are addressing. Two major strategies for spreading DMT and EAT in the health sector were dwelt upon. The first was research and evidence-building to enhance credibility. The second was collaboration with mental hospitals like NIMHANS, first using DMT and EAT as recreation and slowly transitioning to using it as therapy.

## **Panel 2: Need and Scope of DMT and expressive arts in the social development sector**

<b>Panel Moderator and Participants</b>	
<u>Name</u>	<u>Profile</u>
Dr. Lata Narayan (Moderator)	Retired Professor, CLL-TISS; Former Convenor of DDMT course in TISS, Mumbai
Roshni Nuggehalli	Executive Director, Yuva
Bhargavi Davar	Founder, Bapu Trust
Sohini Chakraborty	Founder, Kolkata Sanved
Mr. Rahul S More	Departmental Deputy Commissioner, Women and Child Development, Konkan Department Maharashtra

All the panellists have been involved in the implementation of DMT or EAT in the social development sector. They agreed on the importance of these therapies for catering to the psychological well-being of vulnerable and marginalised populations. Since they involve the body and individual creativity, DMT and EAT break the hierarchy of different types of learning so that an individual's lived experience is valued. Applying these forms of therapy in community settings is very powerful as it has a ripple effect from individual, to the family to the community as a whole. The challenges identified were the creation of indicators to measure change and the problem of sustainability and scaling. Collaboration was identified as the major strategy to address the problem of sustainability and scaling. Mr. More suggested that decision-makers from potential collaborating organisations should themselves experience DMT and EAT so that they are convinced of its effectiveness. Bhargavi Davar suggested that tools from DMT and EAT should be deeply integrated into every participant's life, so that they can practice it on their own and with their communities, thereby leading to sustainable scaling that is not dependent on the organisation.

## **Panel 3: Need and Scope of DMT and expressive arts in education**

<b>Panel Moderator and Participants</b>	
<u>Name</u>	<u>Profile</u>
Dr. Arna Seal (Moderator)	Social Development Professional
Padma M Sarangapani	Professor of Education, TISS
Mrs. Jyoti Kumar	Director and Principal, Arya Vidya Mandir Group of Institutions
Jaya Iyer	Theatre activist and Theatre-in-Education Specialist

The panellists agreed upon the importance of inclusive education and highlighted the importance of the arts in fostering such inclusion. Our education system is based only on cognitive and intellectual forms of learning. The arts and body-based methods like DMT would make it more inclusive as DMT and EAT recognise other ways of learning that are embodied and multisensorial. For students, the arts should be made part of the mainstream curriculum. DMT and EAT should also be a part of teacher training as these foster openness



and connection, which are essential qualities of effective teachers. The panellists also spoke about the effectiveness of DMT in ensuring the mental health of students, especially in the current education system which is marked by stress and anxiety and high standards of performance in examinations.

#### **Panel 4: Need and Scope of DMT and expressive arts in policy**

<b>Panel Moderator and Participants</b>	
<u>Name</u>	<u>Profile</u>
Prof. Surinder Jaswal (Moderator)	Deputy Director (Research and Development), TISS
Dr. Lakshmi Sankaran	Faculty, BALM
Dr. RizwanaNulwala	Psychotherapist and academician

The panellists spoke about their experiences implementing the arts and Arts-based Therapies. Including DMT and EAT in policy is essential to bringing these forms of therapy into mainstream practice. Evidence-based research is required for policy inclusion, and this can be done through both traditional and non-traditional methodologies. However, it is not just important to have data. We must give data visibility. It was suggested that DMT and EAT practitioners come together to form of network or think-tank that conducts and publishes research as well as white papers and policy recommendations, in order to give the research visibility.

#### **Working Group Discussions**

Following the panel discussions, four working group discussions were held- one on each of the panel discussion topics. Each Summit participant chose which discussion group to join. The topics and moderators for the discussions were as follows:

<b>Topic</b>	<b>Moderator</b>
Health	Dr. Vikram Gupta
Social Development	Dr. Lata Narayan
Education	Dr. Arna Seal
Policy	Anuradha Rajan

The groups discussed:

- Need and Scope for DMT and EAT in their work settings
- The resources we have to initiate such activity
- Further support that is required

After the discussions, each group presented the conclusions that it had reached.

## Summing up and Conclusion

“DMT enable participants to reclaim spontaneity and innocence”-

*Sarbani Das Roy, Founder, Iswar Sankalpa*

“While doing formal research is essential, it is also important for all of us to remember that the evidence already exists in each one of us. **Each of us is the evidence. Each of us has to be the evidence.**”

*Dr. Vikram Gupta, Public Health Consultant*

The concluding remarks for the summit were provided by Dr. Vikram Gupta, a Public Health Consultant and Sarbani Das Roy, the Founder of IswarSankalpa. They touched upon the major issues discussed during the two days.

Both of them commented on one of the major issues raised during the summit: the need to professionalise Dance Movement Therapy and Expressive Art Therapy, as well as the apparently opposing need to de-medicalise the discourse and make it inclusive. They said that this issue will be have to dealt with by practitioners in the future.

This was followed by the Vote of Thanks.

## Recommendations

***DMT and EAT are needed for social change because:***

1. They are holistic in nature
2. They incorporate the spirit of inclusion and social justice
  - ❖ Since minimal infrastructure is required, they are ideal for use in low-resource settings
  - ❖ They are more approachable than traditional talk therapy, which is often viable only for privileged individuals
  - ❖ They take into account non-traditional, embodied, multisensorial forms of learning
  - ❖ There is potential for ripple effect from individual to community

***Challenges faced and Strategies to address them:***

- I. Challenge of Lack of Awareness and Credibility

Strategies to address this:

1. Evidence-based documentation and research: This should be done both through traditional and non-traditional methodologies and by both practitioners and academics
2. Collaboration with academia: beginning with conducting DMT and EAT workshops for staff and students, and, over time, doing research and setting up DMT and EAT courses affiliated to these universities
3. Doing DMT and EAT workshops with decision-makers from potential partner organisations
4. Establishing a foundation or think tank to disseminate research

## II. Challenge of securing funding

### Strategies to address:

1. Collaborating with partner organisations and including DMT and EAT as a part of their grant proposals
2. Framing proposals focusing on well-being as a goal rather than on DMT/EAT as methodologies
3. Taking members of potential funding organisations through the DMT process

## III. Challenge of upscaling and sustainability

### Strategies to address this:

1. Increasing number of DMT/EAT practitioners by expanding existing courses and creating new ones
2. Integration of DMT/EAT into existing programmes (for example, training ASHAs and ANMs in these methodologies)
3. Using the collaborations with partner organisations to scale up

### ***Sector-wise recommendations:***

#### I. Health:

1. Incorporating DMT/EAT into existing practice
2. Integrating knowledge of DMT and EAT with education in the field of public health
3. Generating evidence to support the effectiveness of these processes
4. Creating strategic structured modules of DMT based on the need of the participants
5. Collaboration with mental hospitals like NIMHANS, with gradual increments in the use of DMT: Recreation → Service → Therapy → Research on impact

#### II. Social Development

1. Giving experiential workshops on DMT and other expressive arts therapies to decision-makers in the social development sector
2. Integrate DMT and other EATs into existing courses and schemes in the social development sector
3. Creating a network/database of DMT and other EAT practitioners across India: This should not be a closed organisation. In the long term, certification will be required to

prevent misuse but right now is not a good time to create barriers since we are still exploring what DMT/EAT are and what they can do, especially in the Indian context.

4. Get funding from corporates
5. In viable circumstances, reduce voluntary DMT and EAT work and ask for a salary equivalent to that given to counsellors and other mental health professionals

### III. Education

1. Creating awareness amongst stakeholders like the school management, parents and policy makers
2. Engaging with stakeholders in ways that they will respond to best. For example, if parents speak to us cognitively, then we must explain DMT to them cognitively before moving into experiential activities.
3. Build a resource base for educators and train them in DMT and EAT
4. DMT/EAT practitioners collaborate with schools and other educational institutions

### IV. Policy

1. Documentation at all levels: of individual cases, community models and group processes
2. Emulate successful models of evidence-based practice like Results First Initiative in USA and What Works Initiative in UK to be
3. Using positive feedback of communities to create pressure on policy makers
4. Establishing a foundation or think-tank to do research on the impact of this work and to create papers with policy recommendations

The Summit ended with the announcement of the Third Biennial Summit, which will take place in 2020.

