

AN ATTEMPT TO DESCRIBE AND UNDERSTAND MOMENTS OF
EXPERIENTIAL MEANING WITHIN THE DANCE THERAPY PROCESS FOR
A PATIENT WITH DEMENTIA

Submitted by

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THESIS

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SUMMARY OF THE THESIS

This minor thesis reports an attempt to describe and understand moments of experiential meaning within the dance therapy process for a patient with dementia. It also documents an attempt to develop a methodology which could adequately grasp the complexities of such an experience.

A phenomenological approach with its emphasis on allowing the phenomenon to reveal itself through multiple perspectives seemed the most appropriate for this study. However, while phenomenology influenced the format of the dance therapy sessions as well as the constitution and analysis of the data, ultimately a hermeneutic analysis was employed for further explication of the material.

The study consisted of four individual dance therapy sessions with an 85 year old patient with moderate dementia. The researcher/therapist worked improvisationally and a music therapist provided improvised music. After the sessions, all of which were videotaped, the patient was videotaped viewing the dance session video, in order to obtain her verbal or non-verbal responses to the material.

It was decided to focus on the "significant moments", selected intuitively as moments which seemed high points of the session. A naive description was made, on which an adaptation of Giorgi's four-phase method of analysis was applied. Certain foci, such as energy

flow, were identified and individually described. In time, it became clear that the written descriptions alone were insufficient and that reflection would need to cover all the material from multiple sources and perspectives. This was done, and the data were later further explicated by reference to writings on dance therapy, dance aesthetics and the philosophical concept of the embodied self, and Sacks's neurological writings on the awakened self.

The conclusions of the research were that the patient was not only transformed within the dance session and able to recreate aspects of her old self, but also underwent, through the experience as a whole (the dance and the reflection upon it, facilitated by the video viewing), a change in awareness, through which she reintegrated the past with the present and, in her words, came "out of the cupboard...into the brightness".

STATEMENT OF AUTHORSHIP

Except where reference is made in the text of the thesis, this thesis contains no material published elsewhere or extracted in whole or in part from a thesis by which I have qualified for or been awarded another degree or diploma.

No other person's work has been used without due acknowledgment in the main text of the thesis.

This thesis has not been submitted for the award of any degree or diploma in any other tertiary institution.

HEATHER HILL
January 10, 1993

CHAPTER 1

INTRODUCTION

Junge and Linesch (1993) describe the discomfort art therapists feel in relation to research, when research is defined in positivist, empirical terms. In a desire to prove the value of their therapy within the mainstream, they have tried to fit within the tradition of a "value-free science", a "one `truth' approach" (p. 62) but this has tended to bring them into conflict with "their identity as artists who help others through the wonderfully rich and evocative subjectivity of the creative process" (p. 62).

This researcher/therapist similarly felt a desire to prove the worth of dance therapy and given the medical environment she works in, felt this could only be done through a traditional research approach. In 1991, she carried out a research study of the benefits of dance therapy for a group of patients with dementia. The research model was positivist, relying principally on measurable variables, although some qualitative data were also included. In the study, the researcher/therapist was able to show that some improvement had occurred in physical movement range. However, due to the limited number of patients studied, these results were not statistically significant.

While the study did give some useful information about dance therapy with this population, it was clear that an approach reliant on quantitative measurement was inadequate for the task of understanding a complex multi-dimensional and essentially qualitative experience. It could offer answers only peripheral,

rather than central, to the subject. Out of this study, though, did emerge the question the researcher therapist felt was of interest to her as a practising dance therapist and of relevance to her field. This was to seek an understanding of the meaningfulness of a dance therapy experience for the dementia patient him- or herself.

Having decided on the question, the researcher/therapist wished to develop a research methodology which would be systematic and rigorous, but which would also be consistent with the values and language of dance therapy, which would indeed honour "realms of knowledge and experience that can be grasped only through forms that correspond to their passion, complexity, and illusiveness" (McNiff, 1987, p. 291).

Junge and Linesch (1993) write:

As we develop research more integral to and synchronous with our proclivities, we may contribute important research about the human condition in our own voices and from our own ways of being and knowing. (p. 66)

In undertaking this study, the researcher/therapist hoped not only to be able to make a contribution to an understanding of dance therapy in the field of dementia, but that her methodology would suggest approaches more in harmony with the essentially humanistic world view of practitioners of the arts in therapy.

CHAPTER 2

METHODOLOGICAL CONSIDERATIONS

The researcher/therapist, having decided to study the meaningfulness of an individual's experience of dance therapy, sought a method appropriate to her research question. She was very committed to finding an approach which was not at odds with the nature of the arts experience and which indeed allowed her to understand that experience in its own terms, rather than through concepts borrowed from other disciplines.

Phenomenology with its interest in the meaningfulness of human experience and its aims of allowing the experience to reveal itself without the imposition of preconceived structures and concepts, seemed to offer a way to approach and understand the patient's experience which remained true to the experience. However, the phenomenological method, as outlined by Giorgi (1985), was based on the verbal descriptions of several research participants. The present study involved only one person and could not be based solely on verbal material. Giorgi's approach served as a good starting point, but the researcher/therapist had to create her own methodology, adapting it to fit phenomena which comprised both verbal and non-verbal elements.

Prior to discussion of the methodology of the present study, a brief outline of the main elements of a phenomenological methodology will be given.

2.1 PHENOMENOLOGY

Phenomenology "seeks to explicate the essence, structure, or form of both human experience and human behaviour as revealed through essentially descriptive techniques including disciplined reflection" (Valle and Halling, 1989, p. 6). Key concepts in phenomenological research include:

1. Description. Phenomenological research involves making naive descriptions which are faithful to the phenomena as they present themselves rather than reflecting a particular construct or mind set. Giorgi (1985, p. 43) does not preclude the use of analysis or explanation, but insists these must not enter the original naive description.

2. Phenomenology rejects the concept of an independent, objective observer; rather its intention is "to develop rigorous methods of research which include the presence of the researcher" (Giorgi, 1970, p. 80). This relates also to (c).

3. Bracketing. The researcher must acknowledge and set aside preconceptions, in order to meet the phenomena directly.

4. Reduction. This relates to a progressive stripping away through a process of reflection which ultimately enables ones to come to the essence of an experience. Van Manen (1990, p. 185) describes several levels in the reduction process, which involves setting aside personal feelings, biases and theoretical and conceptual assumptions (that is, bracketing), and seeing past the particular to the universal.

5. Intentionality. Consciousness is always "directed or oriented toward something that is not consciousness itself" (Giorgi, 1985, p. 43). Phenomenology is interested in the lived world of human beings. "Data on consciousness are a function of intentionality and can be only by reciprocal implication with the context of inquiry that includes the researcher in dialogue with the subject" (Hoshmand, 1989, p. 22).

6. Phenomenology is interested in the meanings the person applies to his or her experience rather than overt action and behaviour. The researcher reflects on verbal descriptions given by the person having the experience.

7. "Search for essences" (Giorgi, 1985, p. 43). Phenomenological research involves the search for those aspects which make the phenomenon what it is, that is, the essential structure of the phenomenon which remains the same in all its diverse manifestations.

2.2 METHODOLOGY OF THE STUDY

The first task was to consider how to set up the research, what aspects of the experience to study and how to make sense of those aspects. In Giorgi's terms (1983, p. 148), these relate to: (a) the constitution of the research situation; (b) the constitution of the data; (c) the constitution of the research method. The setting up of the present study is discussed below under these headings.

2.2.1 The constitution of the research situation

"Research situations or settings are not discovered 'ready-made' in the world. They have to be constituted or constructed by humans" (Giorgi, 1983, p. 148). The constitution of the research situation was based on the researcher/therapist's prior experience of dance therapy in the field of dementia.

WHAT TO STUDY

The intention was to describe and understand moments within the dance therapy session which appeared to be meaningful for a patient with dementia.

WHOM TO STUDY

As social skills are lost in dementia, the experience of individual patients was likely to be curtailed in a group setting because of disruptions from other members of the group. It therefore made sense to conduct an individual dance therapy session, to provide optimal conditions for the unfolding of the patient's experience. Purposive sampling was employed in order to select "the best possible participant" for the study (Quail & Peavy, 1994, p. 47).

PROCEDURE

Previous experience as a dance therapist with dementia patients suggested a requirement of considerable flexibility and an ability to work with whatever material came from the patient at that moment. Of necessity, most of the work was improvisational, and this seemed to be the mode of working which offered the best possibility of engaging the patient in what was

meaningful for her. Sheets-Johnstone (1981) describes improvisational dance thus:

It is to dance this evening's dance, whatever it might turn out to be; no more than anyone else does the dancer know what this evening's dance will be until it has in fact been created...it exists only in the here and now of its creation. (p. 399)

Taped music would have been inadequate for a totally improvised approach, as it did not have the flexibility to adapt to ongoing changes in mood and movement quality. However, the notion of dancing without music seemed inappropriate in this context, since the patient might find the lack of music too threatening. Also, music could provide, particularly in the early stages, the impulse to move, often lacking in patients. It was therefore decided to adopt an improvisational approach based on music and dance, a mode developed with the music therapist over a number of years. This involved improvisation by the dancers and the musician. Both the dance therapist and the music therapist were aware of the power of music to dominate, and, in the last 500 years or so, this has characterized the music-dance relationship. However in earlier times, it was a more equal relationship, with the leadership role moving between musicians and dancers. This was the hope for the present way of working.

The underlying aim was for the process to be patient-led, with the dance therapist fulfilling the primary therapist role in facilitating and responding to the patient's movement material. The music therapist's mandate was to take his cue from the movement process. The nature of improvisation, however, made it impossible to adhere rigidly to set roles which would

have interfered with authentic interaction among the participants.

While a three-way (patient, music therapist, dance therapist) improvisational approach may seem rather complex, its focus on the feelings and responses of the moment made it ideal in the context of patients who function very much in the here and now. Furthermore, the open-ended, emergent nature of the process seemed very compatible with a phenomenological approach. The researcher/therapist and music therapist had discussed whether they should decide on a particular theme prior to each session, but the researcher/therapist felt strongly that she wished to enter the experience fully and allow it to unfold in the moment. She, therefore, came to the session with an open mind, setting aside any preconceptions or expectations and ready to encounter whatever material emerged, in order that the patient herself would dictate the nature of the experience. In her post-session 1 impressions, the researcher/therapist noted she had consciously avoided trying to force "significant moments", but had instead tried merely to respond to what was coming from the patient. The role of the researcher/therapist and the music therapist was to follow, to respond to and to pick up embryo themes in the movement and facilitate further exploration. Reason's (1988) description of this stage of the research, though he is not referring specifically to phenomenology, seems to describe well the researcher/therapist's encounter with the patient:

The co- researchers...become fully immersed in their practice. They encounter each other and their world directly, as far as possible without preconception, bracketing off any prejudicial influence of the ideas they

started with in Stage 1 [ideas, theories, and so on], and so opening themselves to novel experience and discerning so far as possible what is actually happening. (p. 5)

The researcher/therapist in working in this way allowed herself to be surprised and genuinely to gain new knowledge.

NUMBER OF SESSIONS

It was decided to have four sessions of three-quarter hours each. There was no need for a longer-term project as cumulative effects over time were likely to be irrelevant for this study. However, more than one session seemed necessary in order to (a) allow for a settling in period; (b) ensure the researcher/therapist had sufficient material for the study (because of the extreme fluctuations of mood in people with dementia, she could not depend on all sessions providing data); (c) provide for the possibility that there would be some consistency of thematic material over the course of the sessions.

2.2.2 Constitution of the data

Giorgi (1983) states that research data "are not simple, ready-made givens, but they are constituted to be such by the researcher....more happens in a research situation than the data express" (p. 151). In other words, some selection has to take place and it is generally in terms of the researcher's aims and interests. The researcher/therapist selected session 1 for detailed study. Within this session, she had to decide whether to describe the complete process, or whether to be selective. From her prior clinical practice, the researcher/therapist had already

identified moments which caught the attention, moments when patients behaved differently, in a more functional way, moments identified as "significant".

The moments were significant for the therapist because they seemed to fulfil many of the aims of dance therapy: to create experiencing characterized by involvement, authenticity, focus, expressiveness, and improvement and change in usual function. In such moments, patients appeared to exhibit more of their individual personalities and, albeit momentarily, become themselves once more. The patients, also, displayed an aliveness which suggested that the experience had touched and was meaningful for them. This is not to denigrate the value of other moments in the session. Indeed, without appropriate warm-up and so forth, the significant moments might well not occur. However, these did seem to be the high points of the session, moments when something "moved" for the patient.

Thus "significant moments" were chosen as the basis for the research data. It was decided not to define in advance what constituted such moments. Rather, these moments were to be selected at a purely "gut" level, their character being allowed to emerge in the process of description and reflection. Indeed, one was open to the possibility that such significant moments might not occur and that some other basis of research data might emerge in the process.

While the researcher/therapist had some prior ideas, as noted above, on the nature of the significant moments, she decided to bracket these and allow a true process of discovery. It was hoped that in the process of description and reflection the nature of the significant moments, as well as their meaningfulness to the patient, would be revealed.

2.2.3 Constitution of the method

The intention was to understand the nature of moments of personal meaning within the dance therapy experience for a patient with dementia. Unlike the research of phenomenologists like Giorgi, there was no intention to try to understand the essence of the dance therapy experience itself, since the experience of only one person was to be studied. However, there seemed much in the phenomenological approach which could usefully apply to this study.

The method employed in the study was, necessarily, emergent, with each stage of the research posing new questions as to how the researcher/therapist could make sense of the material. While phenomenology offered some structure for the process of making sense, and this will be discussed below, the method had to be adapted in order to come to grips with the phenomena.

It has already been noted that the researcher/therapist attempted to bracket her preconceptions and assumptions both in the procedure (by having an improvisational format) and in her selection of data (by not pre-defining "significant"). Furthermore, her theoretical reading on dance therapy and psychological processes was left until after the series of sessions and some time into the reflective phase of the process. In other words, she attempted to return "to the things themselves" (Husserl, cited in Barrell, Aanstos, Richards and Arons, 1987, p. 446), to meet the phenomena of experiencing as naively as possible and allow the meaning of the phenomena to emerge.

As noted above each stage of the study raised questions about how to deal with the phenomena, that is how to describe, focus and make sense of them. This involved

processes of re-reading and re-writing as well as re-viewing video material, and these processes occurred from the very first session.

2.2.3.1 Process during the sessions

Reason (1988) speaks of a "self-critical movement between experience and reflection which goes through several cycles as ideas, practice and experience are systematically honed and refined" (p. 6). Hence, in the first place, there needs to be a constant moving between experience and reflection.

Further Heron, in Reason (1988, p. 49), lists three major forms of thought for the reflection phase:

1. descriptive: creating a clear description.
2. evaluative: evaluating the soundness of that description.
3. practical: deciding on the content to be explored at the next phase of research.

At this stage, all that was attempted was to create a clear description of those moments selected as significant. No attempt was made to direct the following sessions by carrying over thoughts from the earlier phases because of the improvisational approach adopted. After each session, immediate impressions (from memory) were noted and, later, impressions from a first viewing of the video. This was followed by further video viewing and a preliminary selection of significant moments was made, as well as description and summary. However, the final selection and description were not done until the end of the research sessions, as more time was needed to get a feel for what was happening than the week between each session. From this point on, attention was focussed on session 1 only. The decision was also made not to use a devil's

advocate at this time, but to wait until near the end of writing up the study when sufficient immersion in the material would allow a reasonable degree of understanding of the nature of the experience. Furthermore, both the researcher/therapist and the music therapist, who was to play devil's advocate, felt more comfortable working for a longer period in a collaborative mode.

This phase of reflection was useful. It marked the beginning of familiarity with the material, trying to grasp what was there (from memory, initially and then from viewing the video numerous times) and finding ways to describe and reach a preliminary understanding of the of the experience.

2.2.3.2 Process of reflection on completion of the sessions

After final selection was made of the significant moments, the task was to create a clear and accurate description, which involved Heron's reflective modes 1 and 2, description and evaluation. The evaluation process was most intense in this early phase, but throughout the process there was ongoing re-evaluation (returning to check with the video and written materials).

DESCRIPTION

In Giorgi's phenomenological studies, the naive description is given by the person having the experience. In this study, due to the cognitive difficulties in dementia, it was not possible to depend on having the patient's own descriptions of her experience. However, in order not to rule out the possibility of patient input, a video-recording was made of the patient watching the session video, so that

any responses non-verbal or verbal could be noted and could contribute to an understanding of the patient's experience. Nevertheless, the basis of the study had to be observation of the dance interaction by the researcher/therapist, and it was important to make the description as accurate and as neutral as possible. Again, every endeavour was made to bracket the dance therapy perspective and give a description in everyday non-technical language. It may still be argued that the focus, the choice of what to see, was determined by the researcher/therapist's training. However, consciously at least, the researcher/therapist simply noted everything she saw without attempting to fit it into any theoretical perspective. It was necessary to check and re-check, as this description was to be the basis for further reflection.

FOCUSSING

Giorgi (1985) suggested four steps in approaching the naive description. An adaptation of these was used in dealing with the dance description.

Giorgi's four steps are:

1. "sense of the whole" (p. 10), reading the entire description.
2. "discrimination of meaning units within a psychological perspective..." (p.11).
3. "transformation of subject's everyday expressions into psychological language..." (p.17).
4. "synthesis of transformed meaning units..." (p.19).

In reading the whole description (step 1), the researcher/therapist was faced with an extremely detailed description, which seemed too huge and formless to grasp. This naturally led to the next question of how to give form to the mass of dance interaction material.

Giorgi's concept of "meaning units" (stage 2) was useful in beginning this process. Giorgi (1985) suggested these meaning units be "spontaneously perceived discriminations" (p. 11) when viewed with a psychological mind set. In this study, a dance therapy perspective was taken and the meaning units were discriminated on the basis of changes in quality of movement or energy. The actual nature of the change was not decided in advance and the meaning units were selected intuitively. However, these units still seemed too large and unfocussed.

In re-reading the descriptions, the researcher/therapist turned to dance therapy theory and considered various aspects - movement qualities and so forth - which she might highlight within the meaning units. It was clear that she could not describe everything, and as she continued to study the video, certain foci emerged from the material itself. These were the movement qualities related to the patient's use of weight, space and time factors; the flow of energy; affect; and interaction. Music because of its integral role in this dance therapy experience was selected as a fifth focus. These foci seemed to arise organically out of the description and also to reflect the dance therapy process. The researcher/therapist consciously avoided trying to force the data into particular theoretical constructs, such as those of movement analysis, but rather adopted those terms which seemed to be most helpful in making sense of the material. The researcher/therapist then viewed the

video from the perspective of each of the foci in turn (except music, which was analysed in collaboration with the music therapist), and without conscious reference to the other foci. There was no attempt to compare the foci at this stage. However, later in the reflection process, discrepancies between foci, led to a re-viewing of the video and sometimes subsequent amendment.

The researcher/therapist then re-wrote the meaning units, incorporating the more qualitative aspects of the dance interaction made evident in the foci. The meaning units of each significant moment were then further distilled to create cameos.

INDWELLING

The process of viewing and re-viewing the videos, writing and re-writing the descriptions, was useful in developing familiarity with the material, as well as developing language to encapsulate the experience. Van Manen (1984) talks of phenomenology as a "poetizing activity" (p. 39). Also, the foci enabled different perspectives on the material. This writing/descriptive phase, therefore, seemed to represent the initial stages of the process of indwelling, but was not sufficient in itself. After some time of working almost entirely with the written descriptions, the researcher/therapist began to feel that the "flesh and blood" of the experience had disappeared.

Unlike Giorgi's studies, this was not a textual analysis of a subject's description. The researcher had to deal with more than a written text and the linear approach suggested by Giorgi's four stages could not seem to encompass the varying types of material (video footage, kinaesthetic responses, written descriptions) as well as perspective. There were

different perspectives from the researcher/therapist, music therapist and patient, for instance, the therapist as participant (describing from memory) had a different perspective from the therapist as researcher viewing the video. It was necessary to move between all of these: the various perspectives, the written description (and foci) and the video, which was the closest representation of the live experience.

Borton, cited in Reason and Rowan (1981), suggests that this "making sense" part of the research requires contemplation as well as analysis:

a more relaxed approach which avoids picking at one's self and allows alternatives to suggest themselves through free association and metaphor...Contemplation allows a more relaxed approach to the problem, where values and meaning are allowed to suggest themselves rather than be driven into a corner. (p. 127)

While this type of approach, counter to traditional logical thinking, supplied no clear landmarks for the process of reflection, it did in fact seem the most appropriate for the multi-dimensional material to be dealt with. The process of reflection was experienced as a spiral, rather than a linear, process whereby the researcher/therapist returned again and again to different parts of the material, but with awareness heightened by encounter with other parts. This resulted in an ever-deepening understanding and insight. The process of indwelling of the material in this study, therefore, involved immersion in each of the sources of data. In progressing to other sources, the researcher/therapist often brought questions generated from previous sources. Thus there was an awareness of the relationships of the different material and a sense in which each part of the material

clarified and added depth to the understanding of the experience as a whole.

The material reflected on in this spiral process was as follows:

Written

* Naive description produced by the researcher/therapist, with subsequent re-writing and summarising, based on Giorgi's four-phase approach.

* Foci, developed from the description. From the written material on the foci, relationships between various foci were noted. Also, by viewing the individual aspects of movement quality, flow of energy, interaction and affect, it was possible to give focus and a different perspective to the viewing.

* Transcripts of the video viewing. These were later analysed using an adaptation of Giorgi's four-phase approach.

* Other researcher writings, including first impressions following the session and first responses to early viewings of the video.

Video

* Video footage of the dance therapy session.

* Video footage of the patient viewing the dance therapy sessions. Verbal and affective responses were noted by the researcher from video.

Music

* Analysis of the music principally carried out by the music therapist, but involving discussion with the researcher/therapist. This was done in the first instance purely from audiotape without reference to visual data.

Verbal/collaborative

* This involved discussions with the music therapist in viewing the dance session video and analysing the music. The music therapist's comments on the music, as well as his impressions of the dance experience as he observed it, served to illuminate the researcher/therapist's understanding of the experience.

* Other perspectives - daughter, nursing staff.

While the focus of the study was on session 1, it was felt that this session did represent a microcosm of the sessions overall. Further, the transcripts of the patient's own words over the four video viewing sessions seemed to indicate that session 1 was the beginning of a larger process taking place over the course of the study. The researcher/therapist felt that the experience in session 1 could be further illuminated by placing it in context and therefore in the later phases of the study, she drew back to view the experience as a whole over four sessions.

MAKING SENSE OF THE MATERIAL

While the researcher/therapist used a phenomenological approach in the descriptive phase of the study, she needed to employ hermeneutics in order to understand, make sense of, the descriptions. She therefore began to look at the literature in dance, philosophy and

psychology in order to find parallels to the experience she was discovering and ways to further make sense of it. This exploration of the literature will be discussed in detail in Chapter 5.

Thus were adopted elements of phenomenology and hermeneutics in the methodology. The approach to the constitution of the research situation and to the constitution of and encounter with the data was phenomenological, through bracketing off assumptions based on prior experience of dance therapy and dementia and meeting the material as naively as possible. The researcher/therapist consulted the literature only after the research sessions were completed and she had begun to analyse the dance material. The literature was used to focus an approach to the data (by using Effort-Shape terms for some of the foci) and to illuminate further the understanding already gained from direct encounter with the material. While there was some deviation from Giorgi's four-phase approach, this was in the spirit of phenomenology which attempts to encounter the phenomena as they present themselves, rather than confine them to preconceived categories, or ways of looking.

2.2.4 Issues of validity

2.2.4.1 Validity in post-positivist research

In traditional research methodology, much importance has been attached to issues of validity, and these have been couched in the following terms:

Internal validity: "how one's findings match reality" (Merriam, 1988, p. 166); "truth value" (Lincoln and Guba, 1985, p. 290).

External validity: generalization; "applicability" (Lincoln and Guba, 1985, p. 290).

Reliability: "the extent to which one's findings can be replicated" (Merriam, 1988, p.170).

Objectivity: "neutrality" (Lincoln and Guba, 1985, p. 290).

Post-positivist research cannot afford to ignore issues of validity, but needs first to recognise that positivist criteria for validity arise from a world view rejected by post-positivist researchers. Reason (1981) states that "it is important to note that most of these ideas about validity are based on the kind of traditional logic which we have shown to be inadequate for human inquiry" (p. 240).

The concept of internal validity, for instance, presupposes that there is some objective reality. Heron, in Reason (1988), points out that "the `real world' is already construed by us. We can never get at it outside our constructs to find out whether our statement corresponds to it" (p. 41).

Related to the concept of reality are the notions of truth and objectivity. Positivist research aims for results which are objective and uncontaminated by subjectivity (from either researcher or research subjects.) Reason suggests a move away from the objective-subjective dichotomy and proposes Schwartz and Ogilvy's concept of "perspective" as "a personal view from some distance...neither the universality of objectivity nor the personal bias of subjectivity" (Schwartz and Ogilvy, cited in Reason and Rowan, 1981, p. 241).

Reason (1981) goes on to quote Bateson: "Somewhere between these two [subjectivity and objectivity] is a region where you are partly blown by the winds of reality and partly an artist creating a composite out of inner and outer events" (p. 241).

Lincoln and Guba (1985) in fact suggest the substitution of new terms which relate to an understanding of validity more appropriate to post-positivist research: "credibility" (for internal validity); "transferability" (for external validity); "dependability" (for reliability): "confirmability" (for objectivity) (p.300).

"Credibility in a research study does not have anything to do with matching one reality, since one is not observing reality, but rather people's constructions of reality" (Merriam, 1988, p. 167). Thus to ensure credibility is to ensure that one has adequately represented those constructions of reality. Merriam suggests six strategies to achieve this: member checks, participatory modes of research, triangulation, peer examination/debriefing, long-term observation and specifying researcher biases. Some of these may also apply to dependability. The researcher/therapist employed some of these strategies and these will be discussed below.

Lincoln and Guba (1985) suggest a shift in perspective when considering transferability and confirmability. In relation to the former, they suggest that the transferability of a piece of research needs to be determined by the person wanting to apply it to another context, not the original researcher. There is no sense in which the present study could be generalized to all experiences of dance therapy by dementia patients. In relation to confirmability, Lincoln and Guba suggest that the focus should be on the data - whether they can be confirmed - and not on the researcher and his or her objectivity.

2.2.4.2 Tools of validity in this study

The principal tools for ensuring the validity of the present study were as follows:

1. Thick description, to which later reflection could be related.
2. Multiple modes of data collection: audiotape of music, video of session, video of patient watching the session video, participant observation, diaries.
3. Multiple sources of data: thick description from observation of movement on video; foci, which included music; impressions from memory; impressions post video viewing.
4. Multiple perspectives: the patient (verbal and non-verbal responses to viewing the session video); the researcher/therapist as participant (describing from memory her immediate impressions) and as observer of the dance interaction on video); the music therapist, as participant in the session, and observer of the video, describing his impressions of the dance interaction, as well as carrying out analysis of the music; the music therapist, in his collaborative role and in the devil's advocate role; the daughter's comments in response to viewing the video, and also feedback from her on her mother's response in between sessions.
5. Prolonged engagement with, and moving among, all the data.

CHAPTER 3

METHOD

3.1 RESEARCH QUESTION

To describe and understand moments of experiential meaning within the dance therapy process for a patient with dementia.

3.2 METHOD

3.2.1 Participant

An 85 year old patient with moderate dementia was selected on the basis that she had shown good response during music/dance therapy sessions led by the researcher/ therapist and music therapist on the ward.

3.2.2 Process

One three-quarter hour individual dance therapy session was conducted each week with the patient over a four-week period.

The researcher/therapist worked improvisationally and did not attempt to introduce any particular theme, but rather picked up on themes arising from the patient's movement on that day. The music therapist provided improvised music which furthered the researcher/therapist's aims of tapping into the patient's material.

The sessions, therefore, were not planned but did have an overall structure as follows:

Warm Up. In this phase, the researcher/therapist mainly took the lead, by initiating movement with the patient. The movements however were selected in order to meet the patient at her own level and thereby make a connection. This initial phase represented a warming up both physically and psychologically and encouraged release of inhibitions and a centering in the body.

Theme. Out of the mass of movement, there was the beginning of form and shape as a theme began to emerge. This was characterized by increasing involvement, persistence, development and continuity on the part of the patient. As the two participants became involved in the theme, the researcher/therapist's initiating role diminished and the relationship became more equal.

Cool Down. Following involvement in the theme, came some form of resolution (not necessarily final). Sometimes, especially at the end of the session, the researcher/therapist again took the more active role in rounding off the experience.

Due to the necessary limitations in stamina of an older person, the above process occurred several times during the session, mirroring rises and falls in the patient's energy level. In order that the loss of energy would not lead to complete cessation of the movement flow, the researcher/therapist, with the support of the music therapist, continued to move with the patient in a lower energy rhythm - a holding pattern out of which more intense energy moments were crystallised.

3.2.3 Data collection

The sessions were audio- and videotaped. On the afternoon of the same day, the researcher/therapist viewed the video of the session with the patient, and this process was itself videotaped. The aim of the

viewing session was to allow for the possibility of patient input.

The researcher/therapist asked questions from time to time, such as asking for clarification of what was happening, or what the patient was feeling. However, generally she waited for some spontaneous response. This was for two reasons:

1. The desire not to influence the patient.
2. It might not be clear, given the nature of dementia, that a "yes" or "no" answer was a genuine reflection of the patient's response to the question (the patient might be covering up her lack of comprehension). Furthermore, whereas a spontaneous verbal response on the part of the patient might be coherent, the patient's response to a direct question might be quite confused.

Some months later the video was viewed again with the patient and her daughter. This, then, provided an opportunity to see if the patient retained any memory of the session and also to gain another perspective on the material (that is, the daughter's). Further notes were taken at that time. The unit manager (nursing) of the ward was also shown the video and her comments noted, again as another perspective on the patient's response in the sessions.

Through all the above process, there could be no certainty of patient response, since she might not even recognise herself or make any connection with the events on video.

3.2.4 Data analysis

It was realised that such complex material could not be grasped all at once and that each stage of the reflection process offered deepening understanding, as different aspects of the material were encountered and from different perspectives. The early phases (in between sessions) offered the early impressions and feelings of the researcher as participant, as well as first attempts at capturing the experience on paper, first from memory and then from the viewing of the video. The later stages allowed for different perspectives, different sources (written description, foci, video, audiotape) and the interaction of each of these on an understanding of the other. Reflection on the material, therefore, was ongoing throughout the study.

3.2.4.1 During the programme (all sessions)

Straight after each dance therapy session, the researcher/therapist wrote down a brief summary of everything she could remember about the session, in terms of the movement content, the patient's response and the researcher/therapist's own feelings and responses. The video was then viewed and further notes made. In the meantime, the music therapist used the audiotape for music analysis.

Later in the day, the music therapist and researcher/therapist met to view the session video and discuss the music and the dance therapy session generally. The researcher/therapist made notes.

The next day, the researcher/therapist viewed the patient's video viewing and transcribed the conversation and non-verbal responses. She re-viewed the dance therapy session video in order to: (a) write

an overview; (b) make a preliminary selection of significant moments; (c) describe the moments in detail using everyday, rather than technical, language; (d) identify the "story"/themes of the session as a whole.

3.2.4.2 Post-programme (session 1 only)

The task of the researcher/therapist was (a) to identify the material to be studied ("data"); (b) to describe the material; (c) to focus the material, (d) to be with the diverse (written and visual) material, moving between parts and whole ("indwelling"); (e) to find ways to make sense of the experience which emerged from the process of indwelling.

TO IDENTIFY THE DATA ("SIGNIFICANT MOMENTS")

1. The researcher/therapist viewed the videos several times to reassess her selection of the significant moments.

2. The researcher/therapist met with the music therapist to view the video. Final selection was made. The selection was made at a "gut level", that is, there was no prior definition of what constituted a significant moment. The researcher/therapist and music therapist selected moments from the video which stood out for them in their capacity as artists and therapists. It was in the course of their discussions and during the reflection phase that the nature of "significant moments" emerged.

DESCRIPTION

Achieving an accurate description of these significant moments was an important first task. The researcher/therapist made no attempt to focus her

observation on particular aspects and tried simply to describe everything she could see in the dance interaction in neutral and non-technical language. She tried to avoid making any interpretation at this stage.

BECOMING FOCUSSED

The description was segmented into "meaning units" (akin to Giorgi's), which were numbered paragraphs. A new meaning unit was identified when some new quality was introduced. This was a first step in giving some form to the material (see Appendix 1).

Over time, several elements in the experience seemed to emerge as key foci in the experience. The researcher/therapist finally selected the four foci listed below. The researcher/therapist viewed the video several times from each focus: (a) quality of movement (how the patient deals with the factors of weight, space, time; (b) flow of energy; (c) interaction; (d) affect.

Music was to provide an additional focus and the music analysis of session 1 was carried out by the music therapist in the presence of the researcher/therapist thus:

1. The music therapist listened to the music in the significant moments and made notes (without looking at the video). These were later amplified from video and in discussion with the researcher/therapist.

The music analysis consisted of basic musical elements, affective qualities and the music/therapist's feelings and responses. These latter were amplified on viewing the video shortly after the session and some months later.

It was decided not to have the music therapist structure the music analysis to parallel the meaning units in the dance description but rather allow the music analysis to emerge with its own form and structure. The researcher/therapist and music therapist did, however, agree it would be useful to look at the same basic music elements across all the significant moments. This would allow comparison between the moments. Furthermore, in previous work together, they had found that these elements could readily be compared to some basic elements in the dance. In this way, the music analysis could serve as a basis for validation of the dance observations.

2. Some months later, the process of first listening to the music, then watching the video and discussing, was repeated, in order to develop a summary of the music focus.

INDWELLING

This phase involved working with all the material in order to become fully immersed in it - reflecting upon, writing and re-writing as follows:

1. Summary of the written description, retaining meaning units; summary of the foci; then further re-writing of the dance description incorporating the foci to give the essence of the experience in the form of a cameo.

2. Analysis of the transcripts of the video viewing based on an adaptation of Giorgi's four-phase approach.

3. Reflection on and moving between video and written material.

4. Discussions with the music therapist.

MAKING SENSE

The analysis of the data encompassed two main phases:

1. Description of and immersion in the material (as noted in (1) - (4) above), clearly and fully describing what was observed in the dance interaction: knowing the material.
2. Reference to relevant literature in order to come to an understanding of the material.

While stage 2 was begun prior to completion of stage 1 (with the adoption of the Effort-Shape concepts of weight, space, time and flow as foci), the major work of description and immersion in the material was completed before reference to the literature took place.

CHALLENGES

It was decided to use a devil's advocate procedure, in order to challenge the researcher/therapist to look again at the material and her representation of it, as well as her own prejudices and preconceptions. This took the form of a single session towards the end of the study, when the music therapist assumed the role of devil's advocate. The general format of the procedure was based on Heron, in Reason (1988), and is discussed in more detail in section 4.9.

CHAPTER 4

DISCUSSION OF THE MATERIAL WHICH HAS EMERGED FROM THE STUDY

The material to be presented focusses on two areas:

(a) an in-depth study of session 1, based on observational material; and (b) various perspectives on the experience as a whole over the four dance and four video viewing sessions.

These are presented as follows:

SESSION 1 OBSERVATIONS

Naive description (Appendix 1)

In this first description of the dance interaction, as full a description as possible was made, couched in neutral terms which did not invoke any specific theoretical framework. The numbered paragraphs indicate meaning units.

Foci (Appendix 2)

These are descriptions from the perspective of each of the foci chosen. All except the music focus follow the framework of the meaning units in the naive description. The music focus is given for each significant moment as a whole.

Summary of meaning units of the naive description (4.1)

Each of the meaning units was rewritten to incorporate the qualitative perspectives offered by the foci.

Description of the foci (4.2)

The summary of the foci in the three significant moments provides a description of the material from each of the perspectives of quality of movement, flow of energy, affect, interaction and music.

Cameos of the dance interaction (4.3)

The cameos further distil the description of the dance interaction in 4.1 above, to tell the story of each significant moment. The essence of session 1, as it is represented by the significant moments, is also given.

It should be noted that at every stage of the study, the researcher/therapist has returned to the video to ensure that what is written is grounded in the live dance interaction.

The music therapist's impressions of session 1 (4.4)

The music therapist noted his personal impressions of the dance interaction in each of the significant moments.

PERSPECTIVES ON THE EXPERIENCE AS A WHOLE

Summary of sessions 2, 3, and 4, based on researcher/therapist observations (4.5)

This is a summary description of the dance interaction in the other sessions in the study.

An understanding of the patient's experience based on her own words

This is presented as follows:

1. Verbal transcripts of the video viewing material over the four sessions (**Appendix 3**).
2. Rewriting of the transcripts into meaning units, the identification of themes and summing up in the form of cameos (**4.6**).

The experience of the researcher/therapist as participant (4.7)

The researcher/therapist's perspective as a participant in the experience is given. This is based on her first impressions noted straight after each of the sessions.

Viewing of the video with the daughter and patient (4.8)

Comments are noted from both the patient and daughter during a video viewing which took place three months after the conclusion of the study.

4.1 SUMMARY OF MEANING UNITS OF THE NAIVE DESCRIPTION

Significant Moment 1

1. As E sighs, H. responds to her tiredness by mirroring and thereby acknowledging E's tiredness. E, at first a little uncertainly, allows herself to begin to let go, mirroring back the tired qualities H is encouraging. She looks at H periodically, taking her cue from H's movement. H shakes E's shoulders and strokes down her arms. As her fingertips meet E's, both pairs of hands come up simultaneously to meet palm to palm.

2. E leans towards H, gradually exerting some strength and staring directly at H, with a challenging but not unfriendly expression. She allows herself to be pushed back, then leans forward again slightly making only light contact, with a brief attempt at a stare.

3. H and E maintain contact by leaning in to each other and move in synchrony, leaning over to one side then the other. While there is a certain giving in to weight, the emphasis seems more on the contact, moving in harmony together.

4. H. uses humour (finger play and sudden movement) to elicit a response, but E's response is low key. She returns to palm to palm contact and exerts some pressure.

5. E pushes slightly and when H pushes back, E makes a funny face. Very low key energy, but the contact between H and E is maintained.

The moment ends with E sitting back in her chair and sighing. She's tired.

Significant Moment 2

1. H uses humour and physical contact (finger play) to elicit a response and an increasingly vigorous battle ensues. Clearly tired by this, E refuses to be beaten, but shows greatly diminished energy and merely moves in response to H's movement (by warding her off), rather than actively attacking.

2. E appears apologetic that she has no more energy. She seems to sigh out the last bit. H, as in moment 1, mirrors and reinforces the tired, sinking feeling. There is much mutual responsiveness and synchrony in this segment. Eye and body contact. At the end, as she rests on H, E bursts out laughing. She is very relaxed and clearly indicates she wants to stop.

Significant Moment 3

1. This is the first of the "battles", characterized this time by E simply pulling and H having to give in. There is no aggression in this, more a sense of a good-humoured pitting one's strength against another. Note the smile and cheeky sticking out of the tongue.

2. E is very much in control of the battle, but in this part there is more give and take.

3. This time there is equal force as each uses maximum strength. One pull is initiated by H and one by E. H however initiates each release.

4. E pulls H off the chair and behind her. H continues the movement to the other side. As E turns and focusses on her, there is a smile of recognition. She does not respond to H's attempt to resume the battle as H makes her way back to the chair.

5. Unexpectedly, E initiates a diagonal pulling, which develops into held counterweight, that is, both leaning back equally balanced. This fades as E seems to lose energy.

6. A new game develops where E retains a closed posture and challenges H to get her to move. She watches somewhat amused as H makes hopeless attempts to do so.

7. H now challenges E by offering her closed folded arms, and she responds by grabbing H. In the ensuing struggle, H again gives in (since she observes E is beginning to tire). Again, good humour is shown in her tucking in H's t-shirt tag and her smiles.

8. E's tiredness is now very evident and H responds by stroking. H moves her chair beside E.

9. E initiates an elbow battle, almost pushing H off the chair. E is close to laughing.

10. In this section, the movement consists almost entirely of various gestures of friendship, taking hands, patting, eyes meeting. Much of this is initiated by H with E responding warmly. However, it is interesting to note that it is E who initially makes the gesture of friendship and conciliation after the battle, by linking arms with H. There is a flow of response and counter-response, as well as a sense of harmony, contentment and relaxation.

11. There are some intertwining movements together, beginning in further reach space but coming closer and closer to their bodies till they end simultaneously linked in stillness.

12. They let go hands. Then follow further gestures reinforcing friendship. At the end, H draws back slightly and E's focus widens to include the music therapist whom she spontaneously applauds.

4.2 DESCRIPTION OF THE FOCI

4.2.1 Quality of movement (factors of weight, space, time)

In looking at the material from the perspective of quality of movement, the researcher/therapist did not attempt to analyse every single movement but rather noted the predominant movement qualities within each meaning unit.

Significant Moment 1

The moment begins with E's letting go, giving in to weight and this appears throughout, except for slight activation of weight in pressing against H (m.u. 1/2). This movement is accompanied by directness in space and clarity of spatial focus. There is also light pressure in m.u. 1/5. Suddenness in movement appears only in gestures (raising eyebrows, bulging eyes).

Significant Moment 2

The moment begins with light, indirect movements from E, followed by a sudden direct lunge. Her movements after this become less and less forceful, until she gives in completely to the force of gravity, that is, gives in to weight.

Significant Moment 3

The first part of this moment is characterized by an active use of weight in all its diverse forms and nuances: pushing, pulling, balancing, resisting, attacking. Much of the strong movement has a direct quality, though indirectness can be seen in the writhing and twisting movements. There is a brief recuperation between each of the contests of strength, but it is not until just before the final battle that E gives in to weight fully. There is sudden movement in gesture (sticking out of the tongue), but also now in more whole body movement (when E lunges forward to grab H).

In the second section, it is the flow of interaction between the participants, the rhythms of self opening out to another and returning to self, which seem to dominate. The movement qualities of weight, space and time in this section do not seem to have the emphasis which was there earlier in this moment.

OVERVIEW OF THE MOVEMENT QUALITIES

Significant moment 1 is dominated by giving in to weight, not using weight actively. In significant moment 2, E's strong movements at the beginning quickly exhaust her and she returns to indulging in, giving in to, weight. This time she lets herself be supported by the therapist. There is limited variety in movement quality, apart from the few attempts on E's part to use her strength or introduce humour.

However, by moment 3, not only does she use all the qualities of weight, space, and time, though with a decided emphasis on weight (strength), but she invokes their many nuances. There is not merely gestural movement. Strength is expressed through the whole

body, and she is able to marshall her strength and use it efficiently. She is also able to sustain this activity for a long period.

4.2.2 Energy flow

Significant Moment 1

E's energy flow is mainly neutral with a small gradual increase in intensity when her weight is momentarily activated. There is little variation in the flow of energy. At the end, E's energy has gone. There is a sense that her involvement, "aliveness", has been withdrawn.

Significant Moment 2

There is a gradual build up of intensity culminating in an abrupt burst of energy as E lunges forward. After that, the energy rapidly dissipates and returns to a neutral state. While her energy is no longer invested in external movement, there seems a more awake, alive quality in her stillness.

Significant Moment 3

Almost from the beginning E reaches much higher levels of energy than in the previous moments and maintains, without specific encouragement from H, this energy and impulse to keep moving for a major part of the significant moment. There is much more differentiation in energy quality: high intensity (m.u. 3/1); medium intensity (3/2); abrupt rises followed by abrupt, though only momentary, descent (m.u. 3/3); gradual diminishing of energy (m.u.3/5); even flow of energy (m.u. 3/1); fluctuating energy (3/2). The energy flow mainly seems bound in quality, rather than free. There is a tension, a controlling factor, rather than a free

outpouring, and this would seem appropriate in this "fighting" context.

In the friendship segment, the intensity has gone, but there is a sense of ongoing flow, the rhythm of being. E is relaxed and self-contained, but there is a rhythm of interaction with H, not of the intensity of the early part of the moment, but simply an opening out to H, a touching base before returning to herself.

OVERVIEW OF ENERGY FLOW

There is minimal variation in energy flow in the first two significant moments, though by the end of the second moment, while the energy does not feed into external action, there is a sense of an inner flow of energy being maintained.

During the final significant moment, there is much variation in energy. What is striking is the high energy levels E is able to maintain over a long period. While the energy flow in the final section has been described as neutral, this is only to indicate the lack of great fluctuation, of highs and lows. In fact, E retains an aliveness about her - inner processes appear to be at work - and she retains a responsiveness to the presence of H. The emphasis is on a rhythm of being, opening and closing, being responsive to H's contact and returning to herself. There is, in contrast to the "Sturm und Drang" (storm and stress) of the earlier section where her energy was marshalled to defend and attack, a letting go of all that intensity and, instead, a feeling of ease and relaxation.

4.2.3 Affect

Significant Moment 1

E has a slight smile, benign in quality, which develops into a larger smile and then a chuckle in response to H's humour or to her own initiatives (pushing, making a funny face).

Significant Moment 2

E enjoys the first battle and her smile widens throughout. When she leans forward to attack, she has a mock "combative" look. However, soon tiredness reappears and E looks apologetic that this is so. The contact with H (stroking and leaning) makes her smile and eventually burst out laughing. She looks happy and relaxed at the end.

Significant Moment 3

There is much smiling in this moment, but smiles of different shades of meaning - feeling confident, in control, mischievous, challenging, self-satisfied, lying in wait, powerful. She looks slightly lost when H moves behind her and seems reassured when H reappears. When attempting to push H off her chair, she momentarily has quite a "cold-blooded" look on her face, but as she looks at H, this softens into a smile, verging on laughter. Tiredness appears from time to time, but when she finally gives in to it, she appears relaxed and happy. The smiles in the friendship section often seem to express warmth and friendship towards H, but becomes less defined when E appears to go off into her own thoughts. At such times, a more thoughtful and serious expression often replaces the smile.

OVERVIEW OF AFFECT

Tiredness plays a greater role in the first two moments, but does reappear later in moment 3. E's smiles in these early moments seem to express enjoyment in humour and the early playful challenges. However, later her smiles seem to express a variety of states and feelings, which arise as she engages in the interaction. Striking in the latter part of the session is the slightly absent, otherworldly look, which seems to indicate that E is off somewhere else, in her own thoughts and possibly memories.

4.2.4 Interaction

Significant Moment 1

H is the principal initiator in this significant moment, with E still looking to her for guidance. E does initiate in developing the leaning into a pressing against H and in making a funny face. There are also moments of synchrony (raising hands simultaneously to meet palm to palm). However, it is mainly H who takes the lead and while E does respond, she does not develop or lead this into a new initiation.

Significant Moment 2

H is able to engage E through humour, but then E is able to take over the leadership and carry through this first battle. However, soon she lets go the initiative and merely wards off H's attacks, withdrawing more and more.

This time she expresses openly her tiredness and responds without hesitation or further prompting from H to H's stroking down movements. Without looking at H, E seems to anticipate the next stroking movement, so

much does she seem in tune with the interaction. There are also several moments of synchrony, where no clear leadership can be seen.

Significant Moment 3

H initiates the first battle, but E immediately takes it over and controls it. She proceeds to take the lead and to control much of what happens, but is also able to allow the initiative to move back and forth between her and H. In contrast to the somewhat "dead end" type of response in 1, E responds appropriately to H, then takes over and develops what she has been given, or changes it and takes it in another direction. It is very much in the nature of a conversation and that means it is not a monologue (the statements of one person), it is not a series of questions with yes or no answers, but rather an interaction where (in this case) two people give and take, make statements, ask questions, give answers which lead to more statements and questions. It also involves a certain rhythm of interaction, "phrasing", without which participants in any conversation feel crowded, or bored, or out of step with each other in some way. This is the nature of the interaction in this section.

In the latter part of this last significant moment, the dynamic nature of the interaction is no longer there. Instead, there is a gentle flow inwards and outwards. H, through mirroring the flow in the music in her body and engaging E from time to time with gestures of friendship, keeps the flow of interaction alive. E responds readily and sometimes initiates herself, but by and large, she is happy being within herself and being brought back from time to time to be with H. It is however significant that it is E who in fact makes

the first move of friendship following the battles, by taking hold of H's arm in hers. This more thoughtful phase does not, then, mean withdrawal from H.

OVERVIEW OF INTERACTION

There is a development in the nature of the interaction over the three significant moments. At first E is very much the follower, responding but not adding much of her own, except for a couple of "sparks" which come from her. By significant moment 2, she not only responds to H's humour but initiates a first "battle" which she carries through for a while. Thus she already seems to have somewhat more confidence, and this also is evident in her expressing openly her tiredness. She demonstrates too that she is becoming more in tune with the process, not needing to look to H for guidance. The roles are much more equal in the last significant moment, with E in fact controlling much of the interaction during the battles. However, she also demonstrates her self-confidence in being able to share power with H. The nature of the interaction is very much testing out, pitting one's strength against. This changes in the latter part of the moment, when the stormy interaction settles into a more gentle flow, where the intensity of involvement has gone, and replaced by a different type of interaction, an interaction which allows togetherness and solitude, contact and space - an interaction possible only between people who feel at ease with themselves and each other.

4.2.5 Music

The summary of the music elements given below was created in dialogue with the music therapist, with reference both to the video and the music therapist's analysis of the music elements (Appendices 2). The

researcher/therapist encouraged the music therapist to talk through the music process in each significant moment, relating the basic music elements to their affective concomitants. The music therapist also drew images on paper of the music process while the researcher/therapist assisted him at times in clarifying his thoughts. At this stage, though, the researcher/therapist consciously avoided relating the music process to the dance process in this discussion, in order not to contaminate the music therapist's process of reflection.

It was in the course of these discussions that the music therapist came to realise that he had in his music making focussed principally on affect and the interaction of the dancers. This had not been part of his instructions nor had he consciously adopted this focus.

A description was given for each of the significant moments as follows:

Significant Moment 1

The melody uses a rolling motion which creates the sense of turning back upon itself. The pitch gradually rises but to a moderate level. The melody then gradually descends. At certain points in this descent, the chords are sustained, thereby enhancing the feeling of a gradual resolution, until there is a final resolution melodically and harmonically. There is constancy of rhythm, which is flowing, gentle, rolling. The harmonic rate is slow and the number of chord changes is limited. It remains in the one tonality.

The complex inter-relationship of the musical elements combines to create a feeling of familiarity, security, warmth, coming home, groundedness, bonding and mutual liking.

Significant Moment 2

The first part of this moment is driven by the intensity of the rhythm which is created through the sustained use of definitive dotted rhythms and triplets together with a very energetic and agitated tempo. The tension, frustration and annoyance are further amplified by a certain amount of melodic repetition.

There is an immediate and total change in all the musical elements after E sighs. While there is a slight descent melodically, the mood engendered by these changes remains constant until the end of the moment. There are now sustained chords, slow harmonic rate, moderately limited pitch and sustained rhythm. Tension is dissipated.

Significant Moment 3

The music suggests an Eastern European flavour which is characterized primarily by the minor tonality, laboured rhythm, chordal repetition, relatively restricted melodic range and sustained repetitive melodic contour. The combination of these elements tends to create a feeling of heaviness, tension, struggle and strength. The mood remains constant.

In the second part of the moment, the melody becomes lyrical and flowing and is frequently repeated at a constant moderate tempo with a limited number of chord changes. There is a sedative quality in the music and as a result tension decreases, energy decreases and there is a feeling of reflection and repose.

OVERVIEW OF THE MUSIC AND ITS RELATIONSHIP TO THE OTHER
FOCI

The music does indeed seem to relate to affective and interactive processes in the session, as suggested by the music therapist, and plays the role of reflecting, as well as reinforcing, the dance interaction.

In moment 1 the constancy of the music elements creates a security, a warmth, which reflects the affect in that moment and further enhances it. The rolling back upon itself very much reflects the process of E's being brought back to herself, coming back to home base.

The researcher/therapist noted in the section above on the energy focus that although the energy declines in both moment 1 and moment 2, there is some difference in quality. In moment 1 E seems to sink back into tiredness, total collapse, whereas in moment 2 there is more a feeling of relaxation, a state which has a more alive quality. In terms of the music, there is in moment 1 a total descent as the music resolves, yet in moment 2, there is only slight descent, which reflects the researcher/therapist's observations that the energy level is somewhat higher at the end of moment 2.

In moment 2 and, to an even larger extent, moment 3, the contrast between high energy, tension, strength, and decrease in energy and tension are clearly present in the music. In moment 3, the pulling, the tension, the fighting, are reflected in the heaviness of the music, created by the minor tonality, restricted melodic range and so forth.

In the friendship segment, the music by being so "in tune" with the dance interaction reflects, extends and

enhances its character. It supports the ongoing flow and holds the moment.

The music appears to reflect the overall progression in session 1, from the centering and grounding and the establishment of a sense of trust, security, through struggles, tension, pitting one's strength against, till a final resolution in a lyrical harmonious relationship. The end of the session brings resolution both musically and in the interactive process.

4.3 CAMEOS OF THE DANCE INTERACTION (SESSION 1)

The cameos arise from a further stage of reflection on the dance interaction (summarised in 4.1) and the video material, and go beyond the observable events to encompass the writer's intersubjective response to these events. Thus is made explicit her understanding of the dance interaction as an expressive and communicative experience.

Cameo - Significant Moment 1

H at last acknowledges E's state and through her nurturing movements encourages E to feel her tiredness, to give in to it, to let go, and in so doing accept how she is feeling at that moment. H also demonstrates her acceptance of E and validates E as she is.

It is this validation of E which seems to open the way to a trusting, more equal relationship with H, and H and E are able to experience some moments of harmony together.

Tiredness continues to dominate this moment. Yet E's very acceptance of her tiredness seems in fact to release energy. E begins to take some initiative in making contact. She begins to make her presence felt.

At this stage, though, these are only momentary sparks which are quickly extinguished as E gives in to tiredness again.

Cameo - Significant Moment 2

E quickly responds to H's humour and initiates the first battle of the session. Energy is still not very high and quickly runs out. E's final "parry" has a humorous, somewhat affectionate quality.

E appears apologetic at her inability to continue but is reassured by H. Once again her tiredness is acknowledged and "moved" by E and H. E seems surer of herself this time and there is much more synchrony evident between herself and H. E's trust in H has also increased, such that she is able to allow herself to rest on H. At the end, she is laughing and relaxed.

Cameo - Significant Moment 3

The first part of this moment is characterised by high energy on E's part and consists of a series of battles between H and E, with E very much in control of the action. Each of the battles has a different form - all "take" on E's part, sharing power, give and take, resisting - but all are playful and challenging without any malice or attempt to hurt. There is very much a sense of pitting one's strength against another in order to test oneself and the relationship with the other person.

E clearly enjoys being in control and using her strength, and also demonstrates a rather mischievous sense of fun. There is little evidence of the tiredness until near the end, and even then she engages in one more battle before she finishes.

It is E who initiates the "let's be friends" movement. From then on, no longer is there the high intensity energy and testing of strength. All is peaceful and calm. E is very relaxed and at ease with herself. She and H appear very comfortable together. The impression is of two old friends sitting together, at ease in each other's company, no longer needing to test out or prove anything. They are simply being together, sometimes off in their own thoughts, then at times returning to renew contact. This latter is mainly initiated by H but is warmly responded to by E.

OVERVIEW OF THE SIGNIFICANT MOMENTS IN SESSION 1

The first two significant moments introduced elements - relationship, tiredness, bursts of energy, testing strength, humour - which were explored more fully in the last significant moment. In the early stages, tiredness interfered with E's natural impulse to respond to humour, contact and strength. It was indeed the very acceptance of this tiredness by both H and E, which seemed to liberate E in some way from its power and which established the relationship on a more equal basis. Without this self-acceptance and trust in the relationship with H, it is doubtful E could have undertaken the more risky testing out which occurred in the final significant moment.

In significant moment 3, she fully tested herself and H and was very much in control of the action. E revealed herself to be a person of high energy, strength and humour, who enjoyed being in control but also felt confident enough to share power. The final resolution of the session comes in the scene of being friends, the emphasis resting on the word "being". No longer, is

there a need to do, to act, to test out, to prove. There is simply acceptance and self-acceptance.

E has made a significant journey in this session. No longer is she the tired, uncertain, unsure E of the early part of the session. Tiredness itself is no longer the enemy. It has been accepted and transformed into relaxation, ease of being. E is no longer a patient, a follower, but an equal partner in a friendship.

4.4 THE MUSIC THERAPIST'S IMPRESSIONS

The material presented below represents the music therapist's subjective reaction to the "atmosphere", mood, or feeling created by the interaction of the music and the dance. The list of "feeling" words was originally made shortly after the conclusion of the study, but was refined on later viewing of the video.

The music therapist has noted a change in perspective between the first and second working on the list, in that the former came closer to his perspective as an actual participant in the process, whereas later, he became slightly more distanced in viewing the video. However, he in fact made few changes to his original impressions.

Significant Moment 1

Creating an overall resolution.

Slowing of tension.

Peacefulness, reduction of anxiety.

End of segment denotes a union of earlier disparate elements, a "coming home".

Significant Moment 2

Section 1

Irritability, frenetic, frenzy, conflictual.

Section 2

"It's over", relief after a great effort, reposeful.

Significant Moment 3

Section 1

Moving towards, away and against. A feeling of constant interjection, disruption, opposition, argument. Finding a balance between taking and receiving. Nordic cold, images of glaciers.

Section 2

Mutual affirmation of affection, warmth, acceptance, congenial. Resolution, calm, reflectiveness, pondering, solace. Seeing oneself in another light. Contentedness with where you are.

4.5 SUMMARY OF THE OTHER DANCE SESSIONS IN THIS STUDY (2, 3, 4), based on the researcher/therapist's observations.

Session 2

E had come very reluctantly to this session. She had been quite agitated on the ward and full of paranoid thoughts, saying she didn't trust people (though she did say that she trusted H).

She was therefore rather preoccupied with dark thoughts, looked miserable and avoided eye contact. Her body was very closed and static. For the first few minutes of music, there was no movement at all.

Finally, H was able to get some response by touching E's hands.

The first segment was almost totally at H's initiation with E allowing herself to be moved but not involving herself. Everything about E said "no" and the researcher/therapist therefore used this to initiate a "no" dance, which took two main forms:

1. H acted out various ways of moving and saying "no".
2. H parodied her own efforts to move E and invited E's no, but in the spirit of a game.

Although her involvement was still very uneven, E slowly became more involved. No. 2 particularly tapped into her sense of humour.

The living out of a multitude of possibilities of saying "no", that is having her present state validated and accepted by H, seemed to prepare the way for the occasional "yes" and E was certainly brighter by the end of the segment and was able to demonstrate some of her sense of humour.

In segment 2, the breathing section, E still was in a "no" mood and could not or would not put her hands on her chest to feel her (H's) breath. H therefore invited E to feel her breath and the physical contact seemed to encourage E's involvement as well as her sense of fun (she tickled H).

The breathing led into segment 3, where E took a more active role, though not with the bursts of energy of the previous week. She took control of moving H but at first in a rather cool, distant way. It was H who attempted to express affection (bringing E's hand to her cheek), and gradually brought out the warmth and relatedness which seems part of E's personality.

Throughout this segment, there was a sense of H as suppliant and a sense of struggle, which expressed itself in a push/pull movement motif, with E feeling herself drawn to say "yes" but still with elements of "no" present. E at one point blew a kiss spontaneously to H but, when H responded in kind, she tossed it away somewhat disdainfully.

The mutual liking and warmth E and H felt for each other did gradually emerge, and near the end of the session E was supporting and steadying H's head and arms. They ended with hands joined and a feeling of contact renewed. E said "We're still pals ?"

Session 3

This session was in complete contrast to Session 2.

E arrived very buoyant and within the first few minutes launched into high energy and humorous battling movement. She controlled this segment. Her posture - straight backed, with wide-legged stance - expressed a joyous sense of power, power however without malignancy, power tempered by good humour. The warm relationship between E and H was evident throughout and the "battle" was again more a testing of oneself than an attempt to beat the other person. At the end, E said to H, "We're about level".

E's enormous output of energy plus the heat in the room that day gradually told on her and later parts of the session were less energetic. At times, she seemed close to stopping altogether. There were moments of higher energy and strength, and even where the energy faded, there was still contact (for instance, exploring different hand contacts), as well as E's ever-present humour.

In the final segment, H intended merely to listen to a restful piece of music. The music therapist chose to play "And let the rest of the world go by". As it started playing, E initiated swaying palm to palm with H and appeared to be singing the words of the song. The music, the movement, the involvement and connection between H and E created a sense of intimacy, harmony and serenity, in many ways reminiscent of segment 3 in session 1.

Session 4

Following the video viewing of session 3 the week before, H had introduced the subject of the ending of the research study. E expressed concern that she would be forgotten. H explained that while they would no longer meet for individual sessions, they would still have an opportunity to dance together in the group session.

On picking E up for session 4, H decided not to raise the issue of termination prior to the session. However, it was evident that E had some memory of the previous week's conversation, and she therefore came to the session somewhat preoccupied. She started by saying she was feeling a bit sad, but refused to elaborate. She wanted to keep it to herself, she said.

E was not alone in her preoccupation. H was having to deal with own feelings of sadness at the termination. The music therapist, just prior to the session, had received bad news about a patient and was also preoccupied. Thus no one was totally present in the dance.

During the session, E appeared to hold back and became easily distracted, adjusting her clothes, looking for her handkerchief, and so on. She initiated little

herself, would often try hard to respond but was never able to maintain for long. Throughout, there seemed to be the beginnings of something, which then just faded away and was not developed.

H, in her anxiety that this as the last session should be a good experience, tried too hard. She was unable to tune into E's present state, and appeared to overreact to any small responses on E's part with inappropriate and excessive energy. The music therapist too shared this lack of connection.

There was evidence still of much warmth and friendship between E and H, which seemed based on the relationship built up over the sessions. The good will was there on E's part but she just was unable to give at that time. The smiles and laughter which did occur seemed more to reflect the warmth of relationship already established rather than be connected to the action and interaction of the moment.

This session therefore showed the fragile nature of the interactive process and what happens when things do not work. Where the significant moments in earlier sessions contained unity of being, continuity, attunement and involvement, this session showed preoccupation, fragmentation, mistiming and lack of synchrony and attunement on the part of all three participants.

4.6 ANALYSIS OF THE TRANSCRIPTS FROM THE VIDEO VIEWING SESSIONS (using Giorgi's four-phase method)

The researcher/therapist has attempted to present her understanding of what the experience may have meant for the patient through analysis of the transcripts of the video viewing sessions. This procedure used Giorgi's approach to selecting meaning units in the text, namely

that a new meaning unit is created each time a new thought element is introduced. Because patients with dementia may not understand a question and may answer "yes" mechanically or to hide their lack of understanding, the researcher/therapist did not include in the meaning units simple "yes" or "no" answers to her questions, except on a few occasions where the patient's body language and affect seemed clearly to indicate her understanding and the meaningfulness of her reply.

These units have in turn been rewritten, to summarize each of the thoughts being expressed. This phase is somewhat equivalent to Giorgi's phase 3, but has had to be adapted to suit the present context. The peculiarities of language in patients with dementia, which involve lack of logical sequencing of ideas and the use of symbolic language, has meant that the writer, on occasion, has had to "read between the lines" to grasp the essential thought embedded in certain statements. She has indicated this process by using expressions such as "E seems to be saying". Furthermore, E's comments were sometimes incomplete or ambiguous, and the writer has tried to indicate where alternative interpretations are possible.

Major themes are identified, which include key statements of the patient, as suggested in Quail and Peavy (1994). Based on the summary of the meaning units and the themes identified, a cameo was written which gives an understanding of the essence of what the patient is saying about her experience. The material is presented below for each video viewing session as follows:

1. Summary of meaning units.
2. Themes.
3. Cameo.

Session 1 Video viewing

SUMMARY OF MEANING UNITS

(re-writing of each of the meaning units to express the thought contained therein)

1. E admires what she sees on the video.
2. E cannot believe it's her.
3. She's not as good looking.
4. It would be fun to be on film like that and show her daughters. (E uses "your" rather than "my" when referring to daughters.)
5. When H comments on E's fierce look, E notes the wrinkles but in a humorous way.
6. E thinks that what "they" do today is clever.
7. When H points out that E is doing it, she again expresses disbelief.
8. E will give H a whacking for saying it's her doing all these things, when it's not true.
9. E again expresses admiration. She seems to respond to H's comment that her admiration is to do with seeing oneself on video, but it may be that she really is referring to what she is seeing happening on the video.
10. H comments on E's tiredness. E uses the first person in responding, but in her next comment talks in the third person, again referring to tiredness.
11. E thinks that the person on video needs a sleep. She then warns H that she might go to sleep. (Here she uses the first person.)
12. E agrees with H's suggestion that she needs to stop, has had enough. She's tired. Shortly after, E again says that it is enough and is time to stop.
13. E expresses admiration, enjoyment ("fantastic").
14. Agrees when H says they've exhausted themselves. Shortly after, E comments that she (E on video) is tired.

15. She enjoys seeing H unable to place E's hands where she wants them. This may relate either to her previous comment about tiredness, or to the sense of competitiveness with H.
16. That is enough, it is time to stop.
17. E notes her extreme tiredness (still talking in the third person), but has been laughing as she watches the video. There seems almost a sense of pride that she's kept going despite being so tired.
18. E comments on her strength (third person).
19. Sense of competition here, when E notes she's getting the better of H.
20. Another comment about E's strength.
21. E expresses pleasure when she beats H by pulling her off her chair, congratulating the E she sees on video (third person).
22. E notes her tiredness (using the third person).
23. E enjoys seeing herself push H with her elbow, and comments that H will feel "disgusted" at being beaten.
24. "He" (that is, H) will get a shock soon.
25. When H asks E how she looks and mentions tiredness, E replies that she looks good.
26. She was expecting her (that is, E on video) to "put him right out". She further encourages herself on video to finish H off, by making H sit down.
27. E responds to H's comment about E's being very tired and agrees.
28. E anticipates she's going to push H down on the chair. (She uses "she" for herself and "him" for H.)
29. E enjoyed it.
30. The person on video (that is, E) must have been very tired.
31. E still does not believe that it is her on screen, despite numerous assurances.
32. She feels she would not have the stamina to keep going the way the person on video did.
33. E repeats it was not her.
34. She would have liked to have done those things.

35. It was not her on screen.
36. She does not think she would have the strength or stamina. She responds to the qualities H lists of humour and strength, but again cannot relate them to herself.
37. She recognises the qualities H notes in E as she presents on video, that is humour and strength, but cannot relate them to herself.
38. E wishes her daughters could see her like that and is pleased when H says a video viewing will be arranged.
39. E expresses admiration again for "what they do today".
40. E expresses pleasure in having found a friend like H.

THEMES

(identified in the summary of the meaning units)

TIREDNESS: various descriptions of tiredness, but also expressions of pride in keeping going, despite the tiredness.

NEEDING TO STOP.

RELATIONSHIP TO THERAPIST: playful, friend, mother/daughter.

ENJOYMENT OF COMPETITIVENESS: congratulating winner, enjoying getting the better of the loser, anticipating a "shock" for the loser.

QUALITIES SHE SEES ON SCREEN: strength, tiredness.

QUALITIES SHE CANNOT IDENTIFY WITH: good looks, stamina, strength, sense of humour.

CANNOT BELIEVE IT IS HER ON SCREEN: cannot identify with the above qualities.

WOULD LIKE TO HAVE DONE THOSE THINGS.

WOULD LIKE HER DAUGHTERS TO SEE HER LIKE THAT.

RESPONSE TO WHAT SHE SEES: many "magic" words like fantastic, wonderful, magic, marvellous, "clever things they do today".

CAMEO

(the writer's understanding of the essence of what the patient is saying, based on the summary of the meaning units and themes)

E's first response to the video of session 1 seems to be of admiration. It is very much admiration of someone else's actions, though she thinks it would be fun to be on film and show one's daughters. She uses the third person almost exclusively when talking of herself on screen, talks of "your" not "my" daughters. In this early part of the video viewing E expresses admiration and disbelief in the face of H's statements that E is the person on video.

She soon becomes very involved in the action on screen. The first thing she notices is tiredness and a need to stop and she comments on this throughout the session. At the same time, there seems to be a certain pride that the person on screen has managed to keep going. It is only in talking of tiredness that E seems able to make some connection to herself and uses the first person.

She further notices qualities of strength, stamina and the playful "fighting" between her and H. She becomes very involved in the action, anticipating what will happen, cheering herself on, congratulating herself for winning. So involved is she in the "fighting" aspect, she initiates many of the comments on it, and often persists in that train of thought even when H introduces a new subject.

At the end of the dance session video, E says she enjoyed it. She is able to agree with H about the qualities of stamina, strength, humour she has just seen, but is simply unable to believe it is herself.

Again, she says she would like to have done those things and she wishes her daughters could see her like that. (This time, she does use "my", making the statement more personal.)

E has also been unable to connect H with her partner on screen. She describes H as a boy and talks of "he" and "him". Although she appears to view the people on video as other than herself and H, in fact, a relationship appears to have been formed with H. There already seems a familiarity and a playfulness in the relationship as seen on the video of this viewing session. There is also an element of a mother/daughter relationship, with E jokingly threatening to whack H for telling fibs about her being on video. E says at the end she is glad she found a friend like H.

The experience of watching the video appears to have been pleasurable for E, indeed almost magical, for she uses many words such as fantastic, magic and so on to describe what she is seeing. The person on screen seems to have many qualities which E admires. While E's role in this viewing session is that of an observer of other people's actions, she is very active in her observing and lives the experience alongside the person on screen. However, despite assurances from H, at this stage, she cannot believe it is herself who has these qualities and can do these things - "I'd like to have done that work, but it's just not me on there" (VV1/34 and 35).

Session 2

SUMMARY OF MEANING UNITS

(re-writing of each of the meaning units to express the thought contained therein)

1. E asks H if the person on video is H.
2. In response to H's question as to how she was feeling at that moment in the dance session, E says she was not feeling nice.
3. E asks who the other person on video is. (It is herself.)
4. E comments negatively. The person looks very old and she cannot believe it is herself. (She uses the 3rd person.)
5. When H comments on there being a smile on E's face, E says she was watching H. (E's comment may or may not be related to H's.)
6. E makes negative comments about herself. She looks dumb and she is not dancing. (She uses the first person.)
7. E seems to be confirming H's comment that she (E) did not feel like doing anything.
8. E cannot believe it's her. This still seems to relate to the negative comments above, rather than to disbelief, as expressed in session 1, that she was doing all those wonderful things.
9. E expresses enjoyment and amazement in response to what she sees on the screen at that moment.
10. E talks of having felt sad, "like tears".
11. E talks of her daughters as little girls, having seen them last at primary school, and of men coming and marrying them, which wasn't right. She saw them at the hospital but could not get to them. The underlying feeling here seems to be one of loss and separation.
12. E's attention returns to the video. She wonders why she doesn't grab H's hands (first person).
13. E expects herself to jump forward at any minute. She talks in the third person, but when asked whom she means she says "me".
14. E likens herself and H to schoolkids as they swing hands together.
15. E thinks that H is very strong.
16. E asks what H calls it (meaning unclear).

17. Both laugh at the strong movements and E uses the word "strength".
18. When H points out that she (E) is smiling, E says that is good.
19. E agrees she was feeling better than at the beginning of the session.
20. This is a rather confusing section. E talks of a cousin who is strong and who tries to force her to do what she doesn't want to, namely go to football. All the time she talks, she continues to watch the screen. Her comments could relate to H's attempts to get her to move during this session.
21. Using the third person, E comments on how tired she'll be after the session.
22. E asks for the identity of the boy (who is H).
23. When H says it is her (that is, H), E says she forgot for a moment.
24. E calls herself a silly ass.
25. She again mentions her forgetting it was H.
26. E laughs and comments on how she seems to be putting her thumb to her nose.
27. E comments on the tickling.
28. She asks what H's mother thinks of the video.
29. When asked what she thought of the video, E says it was well done.
30. E wonders why H chose her.
31. She agrees with H's comment that she was not feeling very good at the beginning of the dance session.
32. E thinks it is a "funny thing" to have on screen.
33. E appears to agree with H's assessment that she was looking better towards the end of the session.

THEMES

(identified in the summary of the meaning units)

UNSURE OF H'S IDENTITY.

DOESN'T RECOGNISE HERSELF: In contrast to session 1 where she could not identify with the positive qualities she saw in the person on video, in this session, her lack of recognition relates to the negative image portrayed on the screen. Apart from her first comment, she uses the first person, which seems to indicate she does in fact know it is her, but does not want to make the connection with that person who looks more like her grandmother than herself, who looks dumb and who does not dance.

NEGATIVE IMAGE OF HERSELF IN THE EARLY PART OF THE SESSION: dumb, does not dance, looks like her grandmother.

RECOGNITION OF HOW SHE WAS FEELING IN THE EARLY AND THEN LATER PARTS OF THE SESSION: first "like tears" (VV2/10), then later looking better..."that's good" (VV2/18).

RELATIONSHIP TO H: playful like schoolkids, watching H makes her smile, sees H as strong. (Given E's positive attitude to strength, this seems a positive view of H.)

RECOGNITION OF WHAT IS HAPPENING: E seems to be seeing that H is trying to motivate her, get her to move. She agrees she was not feeling very good to start with.

FEELINGS OF LOSS, SEPARATION: seeking her daughters, who have in fact grown up.

SENSE OF PLAY, COMPETITIVENESS.

RECOGNITION OF TIREDNESS.

TALKS OF FORGETFULNESS AND ASSOCIATES WITH BEING SILLY.

ENJOYMENT OF WHAT SHE SEES.

WONDERS WHY H CHOSE HER.

CAMEO

(the writer's understanding of the essence of what the patient is saying, based on the summary of the meaning units and themes)

E's relationship to the person on screen appears still somewhat tentative, though she clearly answers H's initial query whether it is her with "yes". She still uses the third person at times, but there appears to be much more of an awareness that the person is indeed her. For instance, when asked who "her" is, she replies "me" (VV2/13). In the early part of the viewing, when there is little movement in the dance session video, there is a mixture of E's rejecting the person on video ("she looks like my grandmother" [VV24]) and owning of the negative characteristics she sees in herself on screen: "I look a dumb thing. I don't dance" (VV2/6]).

She is clearly aware of her state in this early part of the dance session. She was not feeling good, she felt "like tears" (VV2/10). This seems to turn her in on her own sad thoughts which revolve around loss and separation, trying to find her daughters, but being unable to get to them.

As the dance session begins to gain momentum, E gets diverted by the positive images she sees on screen and is engaged by the "battles" and the humour. She recognises the tiredness but also the strength. She sees her state has improved over the session, which she thinks is good. There seems also some awareness of the role H has had to play during the dance session in attempting to engage a very resistant E. H has been able to make her smile. As E watches them swinging arms together, she is reminded of schoolchildren. She says directly to H that H is strong. Despite the fact that a large part of the session involved H's trying to

overcome E's resistance, H and E's relationship has emerged from that session as a very positive one. There seems still some confusion about the identity of E's partner, but again E seems more aware that it is indeed H. She ascribes the mistake to forgetfulness and calls herself silly.

Towards the end of the video, E says the session was well done, but expresses her wonder as to why she was chosen for the study.

In this session, appear the beginnings of E's making the connection between herself and the person on screen, although the connection tends to be with the negative aspects she sees on screen and tap into negative thoughts. However, just as the dance session itself gradually engages E in a more positive experience, so also does the viewing session.

Session 3

SUMMARY OF MEANING UNITS

(re-writing of each of the meaning units to express the thought contained therein)

1. E has been wondering during the day if she has been dreaming all these things she has been doing. She seems also to refer to a feeling of unreality when viewing the videos of what she is doing. Even at this moment, she wonders if she's awake.
2. E jokes about giving everyone a shock (as H prepares to put on the video).
3. E asks if that is her. She refers to being shown a picture and when she asked who it was, being told it was her. (This probably refers to the session 1 video viewing, when H made the point several times that it was E on screen.)

4. E (using first person) says she looks funny.
5. E thinks H is good at what she is doing on screen.
6. E expresses the wish that her daughter (whom she calls her "brother") sees the video.
7. E wants help in finding her brother. She talks of looking for her children. She thinks perhaps her brother has them.
8. E, laughing, says what H is doing is unexpected.
9. E says that when she got back to...(possibly the ward), she won twice (at golf) and was feeling fit. (This is a positive statement about herself and gives a sense of well being.)
10. When H comments on E's energy, E says she's glad she has energy and is glad that she is strong.
11. She doesn't think her children would recognise her.
12. E thinks that H's hair looks nice.
13. E could not believe she was going on television when H first told her.
14. E corrects H when she uses the word "wicked" for E's sense of humour. She substitutes "fun".
15. Unclear. It could be something to the effect that that will teach H to be nasty to her.
16. E thinks it is funny what they put on television.
17. E uses the word "sly", as she watches and laughs at what is happening on screen.
18. E again expresses amazement that she is on television.
19. Her mother, father and brother were strong.
20. She never thought she would be doing this.
21. All her family were strong: her brothers who had gone to war, her father and all his relatives.
22. She thinks her father is still alive, but her mother is dead.
23. She is still upset about her mother.
24. She has been away so long.
25. E also talks of always thinking that she is going down to see...(her father, her family ?)

26. Her brother (that is, daughter) had said her mother was dying.
27. E talks of always playing in the open, of being wild children.
28. E talks of swimming in the river, which was forbidden.
29. E felt like laughing when she thought of the things she and her siblings used to do as children.
30. Her father found her swimming in the river after he had told her not to go there.
31. Her siblings were not punished, but she was chased by her parents who came after her with a stick.
32. She was always doing things she shouldn't, like climbing trees and swimming with no clothes on.
33. Her father would forbid her to go to the river, but as soon as he was out of sight, she went there anyway.
34. "Little devils". E seems to relish this quality.
35. When H talks of there still being some of that mischievous child left in E, E responds that she hopes there is. She then appears to agree with H that it is a good part to keep.
36. E seems to be expressing surprise again that she is on film. She seems to be referring to one of the nurses' comments as she was leaving the ward, that she was off to the movies.
37. E thought only yesterday that she must have grown up with strength.
38. This was something she had not really thought of before.
39. Unclear.
40. E is glad she does not get this strap every morning (meaning unclear).
41. E says "they" won't attack her.
42. E again expresses her surprise when told she would be seen on television. (This probably refers to the nurse's comment referred to in 25 above.)
43. E says to warn people not to get too close to her.
44. E asks what time it is on (meaning unclear).

45. E only tickles people when they tickle her.
46. E says, "oh good", in relation to something on the screen. She doesn't think she could beat H.
47. E thinks that when she leaves the room, she'll wonder if she has been dreaming all of this.
48. E notes that her hands are creeping up. This is said just before she takes hands in the dance session.
49. E thinks that H looks innocent.
50. E talks of "funny face." (She does not say to whom she is referring.)
51. E thinks she is dreaming.
52. E talks of its being the end and that she'd never thought it would end like that.
53. In response to H's comment on E's strength, E says, "yes, thank God."
54. E feels she was always tough.
55. She always did things she wasn't supposed to do. She would go behind the person's back.
56. She refers to herself as "wretch" but with evident enjoyment.
57. E hopes she doesn't let H down.
58. E hopes H will not totally wipe her when the sessions finish.
59. E says H will need to tell her what to do, as she is dumb and forgetful.
60. It would be nice to show the video to her daughter.
61. E again refers to her forgetfulness.
62. E responds positively to H's question as to whether she has enjoyed the sessions.
63. E asks to be told what to do as she is dull and forgetful.
64. When asked if she enjoyed dancing with H, E replies that she loved it.
65. She expresses amazement she was chosen for the study. She wonders what H saw in her, why she was chosen.
66. She never thought she would be in the movies.

67. E thought it was all "dead and gone" to be going to the movies, it was all over. It was a shock when she got word to go and see H.

THEMES

(identified in the summary of the meaning units)

SENSE OF UNREALITY IN WHAT HAS BEEN HAPPENING (DREAM).

QUESTION OF IDENTITY: E again asks the identity of the person on screen and remembers being told previously that it was her. Note, this is the only query regarding her identity.

COMMENTS ON HERSELF: funny, fun sense of humour, sly. She also talks of returning to the ward, winning at golf and feeling fit.

RELATIONSHIP TO H: E makes positive comments about H (good, nice, innocent).

WISHES DAUGHTERS COULD SEE HER ON SCREEN.

ACKNOWLEDGES CHANGE IN HOW SHE PRESENTS ON SCREEN: Her daughters would not recognize her.

SENSE OF LOSS, SEPARATION: "I've been away so long", wanting to find children, upset at her mother's death.

QUALITIES E RECOGNISES AS BEING PART OF HER: always doing what she shouldn't, going behind people's backs; strength, toughness, energy; calls herself and siblings names such as wretch, or little devils, but said with relish.

I'M GLAD I'M STRONG: E hopes there remains some of the "mischievous child" in her.

STORIES OF THE PAST (A PAST WHICH WAS ENJOYABLE): the river story; she and her siblings were wild children always playing in the open; strength came from her family.

COMPETITIVE/PLAYFUL: she seems aware of the "battles", testing out, which appears on screen.

SHE ANTICIPATES THE ACTION: E notes hands about to creep up.

CAN'T BELIEVE SHE'S ON TV.

WONDERS WHY SHE WAS CHOSEN FOR THE STUDY.

HOPES SHE WON'T LET H DOWN.

(The following themes emerge after H's communication that the next session will be the last):

E ENJOYED THE SESSIONS: "loved it."

INSECURITY AROUSED BY TERMINATION: hopes she won't be forgotten; three references to being forgetful, dumb, dull, needing to be told what to do.

CAMEO

(the writer's understanding of the essence of what the patient is saying, based on the summary of the meaning units and themes)

E can hardly believe this is happening to her. She says she wonders, when she is back on the ward, if she has been dreaming. Even when she is watching the video, she expresses a feeling of unreality. She only once checks on her identity but in a very direct way ("Is that me" [VV33]), such that she seems in fact to have little doubt that it is. She recalls being shown a video before and being told it was her. E still feels disbelief and wonder at being chosen for the study.

She appears very positive about herself, both as she presents on video and in relation to how she has been feeling after the session. She once again expresses a wish that her daughter sees the video and she seems to be aware that she is different on the video. Her daughters will not recognise her.

E continues to watch attentively, and particularly relates to the fighting and competitive aspects. However, most of her comments on herself now seem to relate to E as she has been in her life rather than the distant person she is observing on screen. E has

always been strong, tough, and energetic, and these are qualities she values ("I'm glad I'm strong" [VV3/10]). They are also qualities very much associated with her family. It had only occurred to her recently (since the sessions started ?) that strength was part of her upbringing, and this was something she had not really thought of before. She uses the words "fun" and "funny", another quality she associates with herself. The role of the mischievous child, the child who tests out the parent, seems to be one that E relishes. She has admired it in the dance interaction on video in this and previous sessions, but now she also talks of it in her own life, giving examples of how she always did what she was not supposed to do. These reminiscences give her great pleasure. She is obviously proud of her strength, independence, wildness and mischievousness.

There are some threads of negativity within what is a predominantly positive session, which again relate to a search for her daughters, but this time also to the death of her mother and a sense of having been away (from home ?) for so long. Talk of termination of the study also seems to precipitate some negative thinking. E talks of feeling sorry if H "wiped [E] off the map" (VV3/57). This is followed by an expression of willingness to take part in any sessions H runs, and reference to her forgetfulness, being "dumb" (VV3/58) and needing to be told what to do.

E expresses her enjoyment of the sessions. Her relationship to H has continued to be positive. She makes nice comments about H and seems keen to help her, to not let her down in this study.

While E continues to demonstrate awareness of what is happening on video and her role in taking part in the study, it is E's personality and character, as

exemplified in her reminiscences, which predominate in this video viewing session. E is no longer an observer, an admirer, of an "actor" on video, but is now taking centre-stage. The video action is merely the stimulus. This video session is all about E, the E untouched by dementia. The stories she tells seem to be key stories from her past, the kind of stories which epitomize her personal qualities and which in some way define who she is. The River Story is a prime example:

We'd go swimming in the river and that's what we shouldn't. (E laughs and becomes very animated as she tells the story.) When I think of the things we did, I laugh. And Dad came round and I shouldn't have been there. He told us we wasn't to go down you see. (She chuckles here.) The others got off and I was running round with Mum and Dad after me with a stick....

I was always doing something I shouldn't. (Laughs.) Climbing trees, always climbing trees, swimming without any clothes on. (H and E laugh together at this.) Dad would tell me, don't you go down to the river today, I'll tell you (E uses an emphatic hand gesture), not to go to the river today or you'll get it. No Dad. (E's body straightens up at this, like a cheeky child.) As soon as he's out of sight, rrrrooo (hand gesture of running) down to the river. (Laughs.) Little devils." (VV3/28-34)

Session 4

SUMMARY OF MEANING UNITS

(re-writing of each of the meaning units to express the thought contained therein)

1. E checks if it is indeed H on the screen.
2. She notes the other person on video is wearing her clothes. When asked whom she thinks it is, she says that's not me. She thought it was someone else.
3. The picture (?) is very clear.
4. E worries that her brother (that is, her daughter) might come while she is away.
5. She doesn't understand why he hasn't been.
6. He always comes rushing in.
7. E thinks H looks good.
8. When asked if she likes a certain part of the video, she says "yes". After a pause, she adds that the picture could be used for a Christmas card.
9. When asked what she is doing, she at first says she does not know, then says she was trying to catch H's head, and make her let go. (E, though, uses "his" and "him".)
10. E corrects herself. It's "she", not "he".
11. E thinks it is a good picture of H.
12. E again becomes worried that her brother might come while she is out of the ward.
13. She talks of how her brother (that is, her daughter) has been such a comfort and help to her in the last year.
14. E says she gets nervous "like this" and confused.
15. When H talks of E tickling her, E says it's a good spot to loosen up.
16. It looks very alive on screen.
17. E and her family were always full of fun. (She may be referring to her children or to her siblings.)
18. E comments that "it" (probably what she is seeing on screen) is so like her.

19. E agrees there were some good bits in the session.
20. When asked if she enjoyed the music therapist's music, E comments that she loves music.
21. E remarks on the grin on her face.
22. E again expresses disbelief that she is really on film.
23. E says she will be jumping off the stool.
24. E asks who the boy is, and when reminded, she says she forgot.
25. She calls this memory lapse silly.
26. E refers again to her forgetting.
27. E remarks on H's hair being lovely.
28. E thanks H for bringing her out of her shell.
29. E compares the past, when she did lots of things, with the present. In the present she doesn't do anything.
30. The sessions have brought her out of her cupboard.
31. E uses the word "marvellous" in referring to the dance sessions.
32. E responds to the qualities of humour and strength which H says have appeared in her dance.
33. Things from long ago have been brought back to her.
34. When E and her siblings were children they used to do all sorts of things at home.
35. When H makes the suggestion that the things she thought she had lost were in fact still there, E appears to agree.
36. When H says she's glad E has found those things, E says that she is glad.
37. Years ago when E was young, she was always doing things like having concerts, singing and dancing.
38. E seems to be talking of her younger daughter and the man she married. E liked the man, but the marriage seemed to have come as something of a shock.
39. E says she wouldn't know herself.
40. E, when asked what she thought of the sessions, says they were good.

41. She thinks it wonderful that she was picked to do the sessions.
42. The sessions brightened her up, took the dullness away.
43. She had felt very "off" for a while.
44. She again refers to her younger daughter's marriage and sense of disbelief about it, though she likes her son-in-law. Her daughter is the "baby" of the family, yet now she's married.
45. H describes E's state of feeling rather low at the beginning of the study, and E agrees. She feels she has got together again now.
46. She is now able to talk to herself about old times, relive old memories.
47. It has brought her out, has awoken her.
48. She asks H to help her get her brother's phone number.
49. She refers to herself as dumb, she forgets a lot of things.
50. She talks of advancing age.
51. E is glad she met H.
52. It has been a pleasure to know H.
53. E talks of other people saying look at E on screen.
54. Other people cannot believe how old she is and this makes her think she must look good.
55. E is glad she's alive.
56. There is no point in being miserable.
57. E agrees when H says she is glad they got together for the sessions.
58. E refers to someone asking her a question but she can no longer remember.
59. E was not feeling very good that morning ("dull as ditch"), feeling tired.
60. Her brain is not working.
61. E talks of how she gets anxious, does not understand why she has been picked and feels she should not take part, but then afterwards she feels good.

62. E had felt anxious that morning and had not felt like coming to the session.

63. E again refers to dancing and concerts in the past. It sounds like this time she may be referring to her daughters.

64. She did not believe that she was capable of doing these sessions.

65. Her last comment is to express disbelief that she is on the stage.

THEMES

(identified in the summary of the meaning units)

QUERY AT THE BEGINNING AS TO IDENTITY, AFTERWARDS SHE IDENTIFIES THE PERSON AS HERSELF: "It's so like me", "grin on my face", "wouldn't know myself". All are positive comments.

QUERY REGARDING H'S IDENTITY: E corrects herself.

LOSS/SEPARATION: E worries that her brother (that is, her daughter) will miss her. She mentions this on three separate occasions.

RELATIONSHIP TO H: positive comments on H, is "glad" she met H, "been a pleasure to know H".

COMMENTS ON WHAT SHE SEES ON VIDEO: could make a picture, looks "alive".

RELATIONSHIP TO DAUGHTERS: this is partly linked to the loss and separation theme above, but E also expresses appreciation for the support of her older daughter who lives nearby.

MIXTURE OF POSITIVE AND NEGATIVE COMMENTS ABOUT HERSELF: nervy, forgetful, silly, brain is not working; she must look good as people say she looks young; she recognises her qualities of strength and humour; she's "glad" she's alive.

E'S LIFE IN THE PAST: Her family were full of fun, concerts, singing, doing lots of things.

E'S PRESENT: doesn't do anything.

DISBELIEF SHE'S ON FILM.

WONDERFUL THAT SHE WAS PICKED.

WHAT SHE THOUGHT OF THE SESSIONS: good, marvellous.

HOW E FELT TODAY: "dull as a ditch", didn't want to come.

WHAT E THINKS THE SESSIONS ACHIEVED: She would feel anxious beforehand then enjoy herself. They brought her out of the cupboard, woke her up, into the brightness, took the dullness away, brought back things from long ago, able to talk to herself about old times.

CAMEO

(the writer's understanding of the essence of what the patient is saying, based on the summary of the meaning units and themes)

E questions the identity of both H and herself, using negative expressions: "that's not you there, is it" (VV4/1) and "that's not me" (VV4/2). However, it seems that she is in fact quite aware that it is her, for she uses the first person when talking about what is happening on screen. Later in the session, she again refers to H as a boy, but corrects herself.

She makes one or two positive comments about the video, talking of how alive it looks and noting the grin on her face, but generally there seems little interaction with the video itself.

E is quite anxious that she will miss her (older) daughter, if she is not on the ward. She talks of the support her daughter has given her, support she has very much needed because she is forgetful, and feels nervous. She again expresses disbelief that the younger daughter - the baby of the family - is now married.

There is a mixture of positive and negative comments throughout, the positive relating to E's past and to the effects of the dance sessions and the negative relating to her present life as a person with dementia.

In the past, life was full of fun. As children (and probably with her children too), they had concerts with singing and dancing. They used to do lots of things. But now, she does not. There is a sense of the emptiness of life in the present. She is also aware of her forgetfulness, and comments that she is dumb and silly, that her brain has "gone to putty" (VV4/37). There is evident frustration with this.

E's assessment of the sessions is completely positive. She is glad H picked her to take part. The sessions were "marvellous" (VV4/31). While she felt anxious at times before the sessions, once she was there, she enjoyed them.

Without prompting of any kind, E thanks H for bringing her out of her shell (VV4/28). She emphasizes the word "me". E had been feeling rather badly for a while, but the sessions had brightened her up. She uses metaphors such as "dullness", "cupboard", "shell" to describe her state before the sessions. The dance sessions have brought her out into the "brightness" (VV4/39), have awoken her. The dance experience has also brought back memories which seemed lost. "I talk about old times with myself now" (VV4/45). She talks of having "got together again" (VV4/44), she feels whole again.

She has also enjoyed the relationship with H. In the midst of some negative comments about herself (she's dumb, she's getting old), she says she is glad she met H.

She seems to have some positive sense of self even in the present and talks with some pride of people seeing her on screen and being unable to believe her age. She must look good. E is glad she is alive.

She did not believe she could measure up and be able to do these dance sessions and still finds it incredible that she is on film ("on the stage" [VV4/60]).

In this video session, there is a dichotomy and a tension between the positive feelings engendered by memories and by the experiences in the dance sessions on the one hand and, on the other hand, the intrusion of negative feelings situated in the reality of E's life in the present and now aggravated by the approaching end of the study. E, however, clearly expresses the pleasure she has gained from taking part in the sessions and the impact the sessions have had on her sense of self and sense of well-being.

Overview of the video viewing sessions

The material below is based on the writer's reflections on the video viewing sessions and their relationship to each other, and represent her attempt to understand the essence of E's experience over the whole period of the study as expressed in E's own words.

From the very beginning, E admires what she sees happening in the dance therapy session, and it soon becomes clear that the qualities she appreciates are those of strength, playfulness, humour, mischievousness and energy. In session 1, there is complete denial that the person on video is her, and while in session 2 she seems to realize that it is her on screen, in both sessions, she can only identify with the negative qualities: tiredness (Session 1); sadness, and looking dumb and old (Session 2).

Video session 3 represents a major change in her relationship to what she is seeing on video. No longer is she observing as an outsider. She now is centre-stage. While she is still very much aware of the video action, the focus now seems to be on E, her personal qualities, her values, where she has come from. Her reminiscences seem to revolve around stories, such as the river story, which exemplify her personal qualities, and are told in a very present and alive way, not as a distant memory. This is the E which has not been submerged by dementia. Video session 4 is clouded by the issue of termination. E is clearly pulled between the good feelings which have been aroused through enjoyment of the dance itself and the personal affirmations she has gained from reliving old memories as well as from her relationship to H, and sadness at the end of what has been a special experience for her. The end of the study has brought her face to face with the realities of her present life and she again focusses on her forgetfulness and confusion. This insecurity was even evident at the first mention of termination at the end of video session 3 when, in contrast to E's dominating role in dance session 3, she adopted a self-denigrating tone in saying she needed to be told what to do because she was a "dumb cluck" (VV3/58). Despite these negative feelings, there is a great deal of power in the good feelings for E. She has enjoyed the sessions, despite some prior anxiety, and she thinks they have brought some brightness into her life: "so that's brought me out of my cupboard" (VV4/30). She was feeling rather low for a while but now she has got herself together again. While video session 4 is in a much more negative context than the previous session, the focus remains on E and E is able to own that it is she who has had these experiences. The picture of E's state

very much represents her reality of the moment and the mix of feelings which must be aroused at the end of such an experience.

The viewing of the videos appears to have offered E the opportunity to process the dance experience, to take it beyond the experience of the moment. Such processing might otherwise have been impossible in a totally verbal context (that is, without video stimulation), since questioning by the therapist would probably create confusion, rather than facilitate reflection.

During the viewing, E clearly evidences her pleasure in the dance experience itself, but, more than that, she exhibits a changing awareness, consciousness, of herself. At the beginning of the video sessions, E distanced herself from the person on screen who had qualities she very much admired. Her journey in these video sessions seems to revolve around her allowing herself to own and reincorporate these qualities as part of her self-image. As this happened the focus moved from the video to E herself and her personal recollections, the personal folklore which defines who she is. E's words seem to indicate "movement" at all levels, physical, cognitive, emotional.

4.7 EXPERIENCE OF RESEARCHER/THERAPIST AS PARTICIPANT

The researcher/therapist has tried as much as possible to re-enter her own experience of the dance as a participant and has written of it from that perspective rather than in the light of later study as researcher. It is a subjective, impressionistic description and as such is written in the first person.

Every dance with E has been different - tiredness, depression, exuberance, sadness at parting - but each has been true to that moment in time.

At first, I am only struck by E's lethargy, frailty, indeed flimsiness. How can I push this person to give me great moments of dance for my research, when she seems to be in need of nurture and gentle care ? My first task is to set aside my ambitions, in order to simply be with E. I need to acknowledge E's tiredness and frailty as well as my own nurturing impulses towards her.

I need to feel my way into E's world, set aside my ego, in order to help E feel her own power. This means restraining my energy, allowing myself to be moved and pushed around, wooing, being the suppliant, ready to be first to give up and to make friends. She must be the winner.

The disease still gets in the way at times, but despite this, the floodgates are opened and E comes bursting forth. In session 3, her exuberance nearly overwhelms me and my music therapy colleague, whose cold early morning fingers can barely keep up with the pace.

Friendship, warmth, affection develop. There is much we share. We both like to feel strong and to express ourselves physically, we both have a sense of humour, we both invest an intensity of energy in what we do, we are both social creatures. We like each other. I delight in discovering this gutsy woman with a wry sense of humour and I delight in her delight, her sheer pleasure in her own power of being.

The relationship is a strong one and quickly assumes the feeling of a relationship of many years' duration. Even when the disease or the knowledge of termination

intervenes, I can still feel the relationship and the essential goodwill E feels towards me. In this relationship lies ever the possibility that E can be called out to be herself once more.

The sessions have been exciting for me as an experience of improvisational dance. It has been risky, unexpected, challenging, surprising, stimulating, satisfying. That my partner happens to have dementia has seemed almost irrelevant. Essentially it has been a dance experience. I have been left feeling exhilarated and with a sense of closeness with E, the kind of closeness one feels with a partner who has shared an uncharted and unique journey.

Letting go is hard for both of us. E has opened herself to me, but I too have had to be open and vulnerable. At one moment in the final session, I feel myself trying to wrench away physically from E. Tears come to my eyes with the intensity of it. Am I pulling against E or against myself, the part which hates to say this is the end? I cannot help but be conscious that the ending of the sessions represents even more of a loss to E, given her present life in an institution. My promises to see her in the ward groups satisfy neither of us.

In later visits to E, I still feel a connection. Viewing the video and even merely listening to the music tape seem to spark some memory in E. By now E probably does not remember the dance sessions, but she seems to regard me as an old friend, with whom she has shared many experiences. There is familiarity and closeness. The details of where, when or what are irrelevant. We are allies, maybe I am one of those mischievous children who joined E at the river.

In the mix of feelings brought on by the ending of this study and the reality of E's present life, it means a lot to me that E declares during the last video session: "Anyway, I'm glad I'm alive".

4.8 VIEWING OF THE VIDEO WITH PATIENT AND DAUGHTER

About three months after the termination of the research sessions, the researcher/therapist came together with E and her daughter to view the video. All of session 1 and part of session 3 were viewed. It was an enjoyable experience for all, and gave an opportunity for E and her daughter to reminisce together.

E returned again to not quite believing the person on the television was her, and needed to be reminded that "the boy" was the researcher/therapist.. However, she often did realize it was herself and commented on how old she looked. She also returned to the story of swimming in the river. Indeed, she told the story several times, with the addition of how she and her brothers hid under the bed. Even when E's daughter tried to introduce more recent reminiscence about her (the daughter's) childhood, E refused to leave her memory. When E's daughter talked of the time she hid from E as a child, E said, "no, I don't remember you being there", and continued with the story.

E again enjoyed the struggles and at one point, when she "got" the researcher/therapist, she said, "good". When E heard the song (in session 3), "And let the rest of the world go by", E said "I always cry when I hear this song". (However, her daughter commented that she says this of other songs as well.)

Some of the daughter's comments were:

1. Concerning E's background. She was one of twelve children, and her family moved from the country when she was 11. Her daughter took her back there to see the river she swam in. She missed seeing the house by a matter of months (it was demolished). E's daughter commented that E's father in fact did not hit her, but rather that it was E who was the very strict parent and hit her children with a strap. She wouldn't let her children do the sorts of things she had done, like swimming in the river. On one occasion, her husband had said, "you aren't going to hit them", but she did.

2. E's character: she liked to have fun. When E slapped the researcher/therapist, E's daughter said "typically my mother".

3. E's daughter noted that E really seemed to enjoy the sessions. She had talked about them for weeks after they ended and talked about how H had not come for a while. E had been looking out for her. E had spoken of "fights in the water" and it was only later that the daughter connected these "fights in the water" with the dance session.

4. When E talked of her "brother", this in fact meant her daughter. Sometimes E did not recognise her daughter.

5. E's daughter said that E at times spoke of how all she had left were her memories.

6. General comments on the session: E's daughter could see that the movement was very much coming from E herself. She was aware of E's leading and taking control. Words the daughter applied to the sessions:

dramatic, creative, empowerment, coming from within, enjoyment.

4.9 DEVIL'S ADVOCATE PROCEDURE

Towards the end of the writing up of this study, the researcher/therapist had the music therapist play the role of devil's advocate. She adopted the general format suggested by Heron in Reason (1988), where the devil's advocate took a reductionist standpoint. Heron suggested three possible responses to the challenges of the devil's advocate, namely:

- a) to assent to the force and plausibility of the devil's advocacy where it seemed honest and rational to do so;
- (b) to present a well-argued rebuttal of the advocate's case, and to uphold the ASC view with good reason;
- (c) to insist on the intuitive claims of the ASC view, while admitting that they could find no supporting argument to rebut the devil's advocacy. (p. 193)

While this format was not adhered to rigidly, it provided a helpful starting point in undertaking what was for the researcher/therapist and the music therapist a new and unfamiliar procedure. The material submitted to the devil's advocate was a "conclusions" section from Chapter 4, which was intended as a summary of the material arising from the study.

The procedure was audiotaped. The researcher/therapist listened to the tape a few days later and made notes on the main arguments of the devil's advocate and her own responses. After some reflection on these notes, she wrote a reply to the devil's advocate's arguments, expanding on points she had made during the procedure and adding some new thoughts. A summary of the

arguments of the devil's advocate and responses from the researcher/therapist is given below.

1. RATIONALE FOR THE ART FORM

The devil's advocate first raised the issue of E's being tired and suggested that the researcher/therapist was pushing her too much. However, his argument then developed into questioning the use of dance with someone who appeared frail and out of sorts. He suggested that a chat might have been as effective.

Researcher/therapist: The researcher/therapist admitted some conflict at the time concerning the patient's physical state, although the patient was willing to come and was feeling better than earlier in the morning. Also, the ward staff had felt she was able to go.

As for the wider issue of dance with older, frail patients, the researcher/therapist had learned in her work not to be put off by appearances, since for many of her patients there was rarely a right moment to dance. She could not let herself be put off by tiredness, apathy, depression and so forth, although she needed to recognise them. The patient's present state was generally the starting point for the session.

Further, in her experience with E and with others, she found that when she helped the patients to feel their tiredness or their depression, to really live it, they were often able to move on to a different state. This is seen in E's increased energy which seemed to come as she allowed herself to feel tired. The researcher/therapist has found support for this viewpoint also in the literature on depression, where people who were allowed and encouraged to adopt depressive postures (on hearing bad news) did in fact

rate as less depressed than those encouraged to sit in non-depressed postures.

2. EVIDENCE OF COGNITION

The devil's advocate suggested that the researcher/therapist had made an unwarranted leap from talking of rising energy and an inner aliveness in stillness to talking of the activation of inner cognitive processes, in particular reminiscence.

Researcher/therapist: She agreed that this did seem too much of a leap in thought, particularly when writing about the first session only. She did make the following additional points:

1. In session 1, significant moment 3, the researcher/therapist could not prove that cognitive processes were happening, neither on the basis of observational material nor the patient's own words. However, the researcher/therapist still wished to stand by her intuitive sensing, based on her work with many patients with dementia. To her, there did seem to be moments when E was looking inwards, relating the present events to thoughts, possibly of the past.

2. The researcher/therapist did feel there was strong argument for understanding on the part of the patient. She cited the resistance episode (significant moment 3), where H's physical actions might have suggested invasion, attacking, whereas E clearly saw the nature of the game and responded totally appropriately.

3. In the transcripts of the patient's words concerning the sessions as a whole and the time in between sessions, there seemed much evidence of cognitive processes of thinking, judging, perceiving, understanding and remembering.

3. IS COGNITION THE MOST IMPORTANT GOAL?

The devil's advocate noted an emphasis on cognition, rather than feeling. Was the therapy effective because of the cognitive element ?

Researcher/therapist: Cognition is only one of several elements of being a person. The researcher/therapist rejects the concept of dualism and looks to a more wholistic view, where mind, emotions and body working together, suggest a "together" person and, in this context, an experience of dance. Furthermore, the activation of certain of these cognitive processes as well as the lack of fragmentation suggests, in the case of a patient with dementia, that some transformation has occurred.

4. THE TRUTH OF THE STUDY RELIES ON DEBUNKING DUALISM

Researcher/therapist: Clearly, the researcher/therapist's philosophy, thought and practice are permeated by her views regarding the non-separation of mind, feeling and body and she has been aware of this throughout the study. Also, it cannot be denied that the meaningfulness of the dance experience must rest with this non-separation, and, without that, the experience could appear to be merely a physical event. She did suggest, that even those who did not connect mind and body might still need to admit that some transformation had taken place, though its full impact would probably be lost on them. However, bearing in mind the prevalence of dualism, the researcher/therapist did attempt to stay close to, and ground her conclusions in, the material itself.

5. CAUSALITY

The devil's advocate raised the issue of whether dance therapy caused E's experience and whether other modalities could have produced the same effect.

Researcher/therapist: The aim of this study was not to show that dance therapy "produced" the experience, but rather to describe and understand the nature of one patient's experience of dance therapy. The study has shown that, within this dance therapy process, the patient was able to re-experience herself in a more whole and integrated way.

While the writer rejects a natural sciences understanding of causality, whereby a cause necessarily is followed by a certain effect, issues of causality in a broader sense are certainly relevant but would require a different methodology.

6. PERSONALITY

The devil's advocate challenged the researcher/therapist on her use of the word "personality". It seemed too large a word when she only mentioned some aspects (strength and so forth). He also challenged the use of "restored to herself" which the researcher/therapist had seemed to conclude from the patient's words "out of the cupboard...to the brightness".

Researcher/therapist: "Personality" did seem rather problematic. It seemed to suggest a list of qualities. The researcher/therapist felt that "self" might be more appropriate. She was not trying to suggest a collection of individual qualities, but rather a wholeness, and togetherness, which makes up the self. She also agreed that on the basis of these few

qualities alone, "restored to herself" could seem rather inflated. The researcher/therapist did feel that on the basis of the material as a whole, some such process could be justified, but felt that, on reflection, that particular expression was probably not the most accurate to describe her view of E's experience.

7. BIASED SAMPLE

Was the researcher/therapist taking the easy route in selecting a patient who was known to respond to movement and music.

Researcher/therapist: Because she was interested in understanding the experience of dance therapy for a patient with dementia, rather than proving its effectiveness or that it could "produce" certain results, the researcher/therapist chose a patient who was able to participate in a dance therapy process.

8. PERSONAL POWER/INEQUALITY

The devil's advocate asked for clarification of the suggestion that E was an unequal partner.

Researcher/therapist: The researcher/therapist had the power of the therapist. E looked uncertain at the beginning of session 1. In the early part of the session, she was consistently the follower. However, later, this changed and patient and researcher/therapist became equal in knowing and unknowing in the dance process. This was not a goal, at a conscious level, but in retrospect empowerment is obviously an important goal in therapy. Also, a sense of personal power seems an essential aspect of an arts experience.

9. REMINISCENCE - EVERYBODY DOES IT

The devil's advocate noted the ubiquitous nature of reminiscence in writings on therapy. What was so unique in having reminiscence in this process ?

Researcher/therapist: The researcher/therapist referred to a paper she herself had written concerning the lack of clarity about the term "reminiscence" and the fact that not all reminiscence is therapy, though much might be "therapeutic" in the popular sense. This question did, however, cause her to clarify the type of reminiscence she observed in this study. Aspects were:

1. Lived reminiscence. On video, E was seen living her reminiscence (the river story) with her whole being. This reminiscing involved not merely mental processes of remembering, but was lived out in body and feeling (affect)..

2. Life review. While E did not engage in a full life review, her ponderings during the video viewing and between sessions suggest reflection on the past, its meaning, where it fits in, how she came to be who she is, all of which are characteristic of a life review process.

3. Linking past and present. E seemed to live out her past self within the dance in the present. This seemed to be symbolically expressed by E when she referred to the sessions as "fights in the water" (4.8).

4. The reminiscence seemed to relate to a personal mythology, to self-definition.

Effects of the devil's advocate procedure

1. Over the course of the devil's advocate procedure, the researcher/therapist noticed a change in the nature of her response to the challenges of the devil's advocate. Initially, she took a defensive stance and was anxious to counter the devil's advocate's arguments. However, later, the devil's advocate's questions became merely starting points for a dialogue within herself. At that moment, there appeared to be more freedom to be truly critical of her own work and thought processes.

2. It alerted the researcher/therapist to her tendency to flights of poetry, which readers might indeed see as quantum leaps between very different concepts. It therefore made her reconsider the bases for some of her conclusions and statements.

3. It made her clarify for herself the concepts belonging to her dance therapy practice as well as more philosophical thought from her hermeneutic analysis. She came to see E's experience more and more as an experience of dance therapy, although the issue of the specific relationship of dance therapy to her experience cannot be addressed by this study.

4. It clarified for the researcher/therapist that her chapter 4 conclusions section was unnecessary in that it re-stated old material and prematurely introduced new material.

CHAPTER 5

HERMENEUTIC ANALYSIS

The material, both movement and verbal, of this study suggested to the researcher/therapist that the patient had experienced a significant transformation and had indeed, in the patient's own words, "got together again" (VV4/44). In order to further illuminate the nature of such a transformative experience, the researcher/therapist looked at literature in a number of different areas such as dance aesthetics, dance therapy, neuroanatomy, allied health, psychology and philosophy. Aspects of these which contributed to her understanding of the meaning of the experience for E are as follows:

Dementia. E's experience needs to be situated in the context of her life as a patient with dementia. The notion of dementia as a disease which attacks the very core of the human self will therefore be discussed in the first instance.

Dance Therapy. The researcher/therapist has chosen to be selective in her discussion of dance therapy theory and practice, and makes only brief reference to the general aims of the therapy, reserving the body of her discussion for those aspects which highlight the quality of the dance experience and the meaningfulness of movement as human expression and communication, namely, (a) Effort-Shape analysis; (b) the experience of dance; and (c) the concept of embodiment, the self embodied.

The Self. Central to the notion of embodiment is a non-mechanistic, non-dualistic concept of self, a self which has continuity despite impairment and retains its

potential to be awakened. Writings from the area of dementia care and the neurological writings of Sacks on the awakened self will be discussed.

5.1 THE NATURE OF DEMENTIA

Alzheimer's Disease, which is the most common of the dementias, involves a progressive shrinking of the cortex of the brain, the part which controls memory, thinking and judgement. It is a degenerative and irreversible disease which results in a progressive decline in thinking ability and changes in behaviour and personality. The higher, more complex functions are the first affected, with ongoing regression till even the earliest skills are lost. This, rather than normal ageing, can truly be described as the return to second childhood, except that this childhood contains none of the aliveness and outward orientation of the young child.

There are roughly three stages in its progress, though there is of course much individual variation. The stages detailed below are based on Gwyther (1985).

1. This is characterized by forgetfulness, some confusion and inability to cope with daily tasks or work which were formally no problem. There is some loss of "spark or zest for life" (Gwyther, 1985, p. 25). The person is aware something strange is happening and in attempting to cover this over becomes more anxious and withdrawn.

2. There is increased confusion. The person has difficulty both in understanding and expression. He or she will sometimes repeat words or sentences. There are perceptual motor problems, rigid movement, restlessness, loss of impulse control. The person may become suspicious, tearful, have hallucinations and may

have trouble identifying family members. (Moderate dementia, which was the diagnosis given for E.)

3. Terminal stage. This is the stage of physical breakdown: loss of weight, infections, incontinence. The person can no longer communicate.

It is a painful disease for the patient and for the family, who must witness the progressive stripping away of everything that made that person. There is not even the consolation that the patient is happy in his or her own world. The world of the dementia sufferer is not a comfortable world to live in. It is, rather, an insecure world where things and people disappear and reappear. Patients often seem haunted by a sense of loss. They must catch the bus to see their mother, they have lost their wallet and so forth. Other patients abuse hospital staff because they think these are strangers invading their home. At times they may have some awareness that they are not functioning properly and become distressed by that.

It is a disease unlike others in that it attacks the very core of our human-ness, our personhood. The ability to think, to reason, is what we believe sets us apart from animals. Kitwood and Bredin (1992) point out how closely our society links intellect, cognitive abilities with selfhood. Dr. R.L. Symonds, cited in Gidley and Shears (1987), describes dementia as a "deterioration of intellect so that the power of creative and intelligent thought is progressively diminished...not merely a diminution of intellect but a dissolution of the self" (p. 18).

A disease such as terminal cancer may ravage the body in quite horrific ways, but in some sense the person, the spirit, is seen to be intact and to rise above the devastation of the body. Dementia, until its final

stages, may leave a rather healthy body, but is seen to dismantle the person. "The patient's light switch is still on, but there's no illumination" (Gidley and Shears, 1987, p. 48)

For the dementia sufferer him- or herself, especially while there remains some level of awareness, there is the loss of dignity and self-esteem as skills and abilities - everything that contributes to self-image - are progressively lost. Control over one's environment and one's self-control are gradually eroded.

For family and friends, it is hard to come to terms with the fact that this familiar looking person has become someone else. Geldard (1962) writes that the dementia sufferer has a

personality that has not only largely lost touch with reality, but one whose behavioral scope is so restricted as to suggest that only a shadow of the former self remains. Insufficiency both of trait content and organization has supplanted normal personality structure. (p. 344)

Dementia is a disease which progressively attacks every aspect of one's personhood. Skills, ability to think, to choose, memories, self-control, ability to adapt to and control one's world, personal character traits, expressiveness, are all lost. Dementia is a damning diagnosis for the sufferer and challenges the concepts we as human beings hold about the self.

5.2 DEFINITIONS OF DANCE THERAPY

"Dance therapy is based on the Art and Science of Human Movement. It offers movement experiences which, extending beyond the purely functional, engage both

body and mind. Drawing on the therapeutic elements inherent in dance, therapists aim at restoring balance and integration in the areas of physical function, feelings and cognition." (Australian Association for Dance Education, Victoria, 1988)

"Dance-movement therapy - is a process entailing the use of developmentally based body movement for awareness, expression, identification, exploration and integration toward the experience of wholeness." (Bernstein, 1981, p. 4)

"Dance therapy is the psychotherapeutic use of movement as a process which furthers the emotional and physical integration of the individual." (American Dance Therapy Association definition cited in Feder and Feder, 1981, p. 159)

While there are great variations in style and emphasis of working in dance therapy, therapeutic aims of increased awareness, expression, growth and physical and emotional integration seem common to all.

The researcher/therapist does not propose to give a broad review of the dance therapy literature, but has rather selected three areas which are central to dance therapy and which appear to have relevance to E's experience. These are: (a) Effort-Shape analysis, which provides a framework for observing the qualitative aspects of movement; (b) the experience of dance as an aesthetic activity; (c) embodiment, the lived body.

5.3 EFFORT-SHAPE ANALYSIS

Effort-Shape is a "method of describing changes in movement quality in terms of the kinds of exertions [effort] and the kinds of body adaptations in space

[shape]" (Dell, 1977, p. 7). It provides a conceptual framework for observing and a language for describing movement at a qualitative level. It also offers a developmental perspective and links movement to mind and feeling. Many therapists have therefore found it useful as a theoretical framework as well as at the practical level of programming for clients.

Rudolf Laban (1947) developed the concept of Effort, to which Warren Lamb (1965) added the concept of Shape. Other theorists, such as Judith Kestenberg, whose work will be discussed later in more detail, subsequently refined and added their own particular emphasis to the system.

The concepts of Effort and Shape can be described as follows:

Effort: "How the body concentrates its exertion" (Dell, 1977, p. 11); "inner impulses to move" (Bartenieff and Lewis, 1980, p. 51).

Laban identified four basic motion factors (efforts): weight, space, time and flow. Movement can be strong or light, direct or indirect, sudden/accelerated or sustained, free or bound. While these factors are always present in a quantitative sense, efforts relate to one's inner attitude to these elements, to the emphasis and the manner of concentrating one's exertions.

Shape: "How the body forms itself in space" (Dell, 1977, p. 43).

While this system breaks down the complexity of human movement into its basic elements, it is far from reductionist and in fact stresses relationship, in terms of:

1. The combination and inter-relationship of the various motion factors, which contribute to the infinite variety of human movement.
2. Affinities between the motion factors and how the body shapes itself in space. For instance, weight has affinity with the vertical dimension, lightness with rising and strength with sinking. Where there are disaffinities, may be seen disfunctional or inefficient movement.
3. Connections between the efforts and psychological attitudes. Bartenieff and Lewis (1980) describe them as follows:

Space (In what manner do I approach the space): Attention (Thinking. Orienting, specifically or generally).

Weight (What is my impact): Intention (Asserting. Creating strong or light impact. Sensing my weight, myself).

Time (When do I need to complete the act): Decision (Urgency or non-urgency).

Flow (How do I keep going): Progression (Feeling alive. How to get started and keep going. Freely or carefully). (p. 53)

The Effort-Shape system offers a psychological perspective on movement events, though one which is much more complex than the rather brief list of psychological correlates above might suggest. Related to this, is a developmental perspective which holds that human movement, like cognition, develops and matures as a baby grows into a child and then into adulthood. How the individual moves is indicative of his or her coping mechanism, of how that person has adapted. It is the expression of that individual.

Every movement in any part of the body is at once adaptive and expressive; it functions as

a coping mechanism while at the same time, it reflects something about the individual. (Bartenieff and Davis, cited in Levy, 1988, p. 140)

Effort-Shape therefore is a complex system which describes movement in terms of individual movement quality and combinations thereof, the body's shaping itself in space, as well as aspects such as the parts of the body used, points of initiation and so on. It offers a view of movement as part of the human developmental and adaptive process, the person acting on and being acted upon by the environment. This development is seen to be integrally linked with cognitive and emotional development. In other words, the Effort-Shape system offers a way to look at and describe movement in the context of the whole person's functioning. As such, it offered the researcher/therapist a framework in which to make sense of the dance material as a physical-mental-emotional event.

5.3.1 Key concepts of Effort-Shape which relate to E's experience

As certain foci began to emerge from the naive description, it was found that the terms used in Effort-Shape analysis of weight, space, time and flow could usefully be applied to describe the basic elements in the movement. In addition, the theory underlying these terms was helpful in contributing to an understanding of E's experience, in terms of the quality of her movement and her movement preference or style. It also offered a perspective on the relationship of all the elements. Key aspects of Effort-Shape which have bearing upon E's experience are discussed below.

5.3.1.1 Weight

The literature on Effort-Shape makes two major points concerning weight which are of relevance to this study: (a) its relationship to participation and engagement; and (b) its connection to the sense of self and self-assertion.

Bartenieff and Lewis (1980) contrast "passive" weight, giving in to weight, to the force of gravity, with "active" weight or weight effort. They see even a small activation of weight as an "indication of participation rather than passivity" (p. 56). It is E's first tentative attempts in pushing which indicate the beginnings of more active participation. It suggests that she is now putting something of herself into the interaction and this use of weight is of course much more fully developed in later parts of the session. In terms of Effort-Shape, this suggests a progression from passivity to active involvement. Furthermore, involvement suggests that the self is engaged. Bartenieff and Lewis (1980) make this link between weight effort and the self, when they write: "Sensing my weight, myself" (p. 53).

This connection of weight with the self was an important assumption underlying the work of Sherborne (1990), a movement therapist who encouraged partner work using weight in all its forms, in order to help her clients gain control of their strength and develop a sense of self. She also noted that this kind of work developed focus and involvement.

When regarded in this light, the battles between E and the researcher/therapist may be seen as a process whereby E explored her own strength and increasingly was able to assert herself in relationship to the researcher/therapist.

5.3.1.2 Space

Sherborne (1990) links the experience of "against" relationships (using weight against a partner) to focus and attention, qualities which relate to space effort. "If children learn to use their strength in a focussed way, especially along direct, linear pathways, they will develop skills in attending, in directing their energy and concentrating on a job" (p. 31). Bartenieff and Lewis (1980), in linking space effort to attention, make the point that space effort is different from the other motion factors "in the degree to which consciousness is involved in its activation" (p. 55).

Clarity in spatial effort (particularly directness) seems to accompany the weight effort in E's movement. Focus on the task at hand - the movement and the interaction - is clearly evident. There is a quality of awareness not usual in dementia patients, and it is interesting to consider this in the light of Bartenieff and Lewis's statement above regarding consciousness.

5.3.1.3 Flow (of energy)

The researcher/therapist was particularly struck by the fluctuations and differentiation in the patient's flow of energy and found, in the writings of Dr. Judith Kestenberg (1965), further refinements to Laban's original concept of flow (re-named "tension flow" by Kestenberg) which seemed to offer an expanded understanding of the complexity of what the researcher/therapist observed in E.

LABAN'S CONCEPT OF FLOW

Dell (1977) points out that "the rhythmic changes in breathing, the constant responding of the body to both inner and outer stimuli, provide a constant stream of

urges to move" (p. 13). Flow has to do with the aliveness of the human being, with beginning, continuing and stopping movement. Flow can be bound (when one binds or restricts the flow) or free (when one goes with the flow), the former being more typical of older adults.

KESTENBERG'S WRITINGS ON FLOW

Kestenberg (1965) coined the term "tension flow" (p. 521), to describe more accurately the nature of flow. This term refers to the relationship (complementary or opposing) between contractions of agonistic and antagonistic muscles. While the tendency might be to equate boundness with tension, in fact both free and bound flow require muscular tension. It is not the presence or lack of tension which makes a movement bound or free, but rather the quality of that tension. It is the relationship between the muscle groups which "determines whether a particular part of the body is immobile, rigid, or relaxed; whether movement begins, continues, becomes intermittent, or ceases" (p. 521).

Kestenberg's substitution of "tension flow" for flow (or effort flow), and her concept of rhythms of tension flow appealed because of its suggestion of the dynamic relationship of muscles and the ongoing, fluctuating energy which fuels human movement and to a great extent defines personal style. It seemed correct to place emphasis on the energy aspect, by using the term flow of energy, or energy flow. There was, however, much in Kestenberg's theories regarding tension flow which seemed to have relevance to E's experience. Four aspects will be discussed below.

1. Kestenberg (1965) has suggested that flow be viewed as a different order from the other efforts, in that it forms a substratum out of which the other efforts are

crystallized. Indeed, she reserves the term "effort" for weight, space and time. The relationship of flow to the efforts is expanded on in (2) and (3) below.

2. Kestenberg (1965, pps. 547-548) identified different attributes of flow - intensity, amount of change in flow (even or fluctuating), duration of change (gradual or abrupt) - and linked these attributes to certain efforts, or motion factors, namely, intensity to weight effort, amount of change to space and duration to time.

3. Kestenberg (1965) suggests a further relationship, that of flow regulation to affect:

Highly differentiated selectivity in flow changes [which comes with maturity] and subtlety in affective expressiveness are interdependent achievements. Flow of tension in graduated intensities evokes a succession of shades of feelings, and finely differentiated affects express themselves in shadings of flow intensity. (p. 543)

4. From a developmental perspective, flow precedes effort. The early movements of babies and young children are accomplished by learning to control their flow of energy (that is, it is an inner directed process). In her longitudinal studies of infants, Kestenberg (1965) was able to identify preferences for certain rhythms of tension flow (to use Kestenberg's terminology). In later development, mastery of movement is accomplished through efforts, though it is only fully achieved by adulthood. Even then, Kestenberg found that mature movement preferences were influenced by the early tension flow rhythms evident in the young baby. Kestenberg (1965) writes:

When maturation of apparatus for dynamic dealing with the forces of space, gravity, and time enables the older child to change his environment through work and affective communication he still favors `efforts' that have the greatest affinity to his originally preferred flow patterns. (p.545)

Kestenberg's view of the continuity through life of certain underlying flow patterns seems to have some links with Sacks's concept of personal style (discussed in 5.6 below), a continuity of being which remains through life. She further points out that while mature control of movement occurs through efforts, flow always underlies it. "Flow of tension initiates movement, maintains its continuity, and stops it. Without it, no `effort' is possible. Although `effort' elements subdue and govern the flow of tension, they are genetically and currently dependent on it" (Kestenberg, 1965, p. 545). Without the underpinning of flow, there is only mechanical movement.

Where `efforts' act as physical equipment rather than as psychomotor manifestations of affective attitudes, they are almost isolated apparatus of primary autonomy that create the automated ego of a robot, without style or ideational content. (Kestenberg, 1965, p. 550)

This seems to explain to some extent the difference in "feel" between the movements outside of and within the significant moments. In the former, while there was certainly movement, the "spark", the energy supporting the movement, was not there.

Kestenberg thus makes four points of particular relevance to this study:

1. Flow precedes effort developmentally and is a basis of identity and personal style.
2. Flow in some way underwrites and supports efforts.
3. Different attributes of flow parallel efforts (for example, intensity of flow and weight effort).
4. Sophistication of flow relates to complexity and subtlety of affect.

Kestenberg's expansion of the concept of flow seems to fit with the experience in this study. The view of flow as a substratum out of which crystallize the efforts makes sense in the context of this experience. The researcher/therapist was very aware that in the early stages of the session she had to initiate as well as keep the flow going. As the session progressed, E was able to hold that state of aliveness herself. There was a sense that the movement arose from E herself, at her impulse and initiation.

By focussing on different aspects of flow (intensity and so forth), the researcher/therapist was able to appreciate the qualitative richness of flow which grew as the sessions progressed. While age certainly affected the flow of energy, E demonstrated a preference for high intensity energy which seemed to suggest something of her personal style.

The concept of a relationship between flow and the movement qualities (efforts) is an important one. The data of the study indicate such parallels, particular emphasis in this case being on high intensity energy and weight, and abrupt changes in flow of energy and sudden movement. Parallels too are found between energy flow and affect. There is a sense, in looking at the data, that there is a congruence among energy flow, movement quality and affect. The increasing complexity of flow differentiation through the session

is mirrored both in qualitative variety in movement and in subtlety and variety of affective expression.

Kestenbergs writings highlight the variety in E's flow of energy, and the nature of its relationships with other aspects of her interaction in the dance - quality of movement and affect. This gives a basis to the reported impressions of wholeness, unity and integration, of consonance rather than dissonance.

5.4 THE EXPERIENCE OF DANCE

The specific role or contribution of dance in dance therapy is a source of discussion among dance therapists, but the researcher/therapist tends to favour those who insist on the central role of dance in dance therapy. This view is supported by the Australian definition quoted above. Levanthal, an American dance therapist, favours the expression "dance movement" therapy (rather than dance/movement therapy which is used by the American Dance Therapy Association). For her, it is *dance* movement which is healing. Levanthal (1987) notes that "dance movement in its most ancient and maybe even genetically-encoded, survival reflex level, was integral to all healing and community rituals" (p. 9). Bond (1991) offers her definition of dance in human beings as "a mode of intentional and transformative behaviour that expresses, through observable dynamic patterns of special movements in space, a heightened, felt sense of embodied self and environment" (p. 365).

The modern dance therapist draws on these inherent elements of the dance in pursuing therapeutic aims. Dance is at the core of the dance therapy experience. What, then, is the nature of dance? Fraleigh (1987) has identified several attributes of dance, some of which are given below.

1. "Dance is an aesthetic expression of the body" (Fraleigh, 1987, p. 43). It is done for its own sake and not to achieve some further end, as would be the case for instance with exercises. Fraleigh (1987) suggests that the aesthetic is founded in subjectivity and the "felt life...the sentient life" (p.44), the affective. Furthermore, she sees sentience as part of the wider subjective field "which contains other aspects of the self, such as intellect, judgment, and intuition...the subjective field implies a totality of consciousness, which is lived by each individual as *the self*" (Fraleigh, 1987, p. 44).

2. "Dance is by necessity grounded in vital movement sensibility" (Fraleigh, 1987, p. 46). Dance involves moving with awareness, with a feeling for the quality and expressiveness of the movement. Exiner, Kelynack, Aitchison and Czulak (1994) share this view of dance as movement "carried out with sensitivity, mindfulness and imagination" (p.15).

3. "Dance is at root an affirmation of the vital body" (Fraleigh, 1987, p. 55). Dance is a life-enhancing experience.

Because dance is an aesthetic (affectively vital) expression of the lived body, it is life engendering. The expressive body lives toward the world and others....Expressiveness is required for physical and emotional growth in lived terms. Vitality depends on some effort of attention toward the world beyond the self, on some measure of expressiveness. (Fraleigh, 1987, p. 56)

Fraleigh concludes : "Then the vital life of the body appears as the valued substance of dance" (p.56).

4. In dance is experienced unity and wholeness. The dancer is not separate from the dance. "The first requisite of dancing is the unification of the self with the intended movement" (Fraleigh, 1987, p.41). There is no separation of mind and body. She or he does not think, plan, try, force; she or he dances. Dancers realize very quickly that the more they think, plan or force, the more awkward the movement becomes. Paradoxically, when they let these go, then the body accomplishes with ease what they tried so hard to do. Letting go of will, body and mind can be united in body movement. "Grace, freedom, and mastery appear as wilfulness disappears and as effortless ease is achieved" (Fraleigh, 1987, p. 20).

5. Dance is present-centred. It requires total absorption in the moment.

6. Dance is freedom, dance is power. "I realize my freedom when I move as I intend. Then I experience my movement powers as personal powers" (Fraleigh, 1987, p. 21).

7. Dance is a transformative experience. Fraleigh (1987) describes the dancer's hopes for the dance: "I hope that as it unfolds in the movement I set into play, I will be taken by the whole of it, be free in it, and that it will lead me beyond my ordinary boundaries, as it takes on an exhilarant life of its own" (p. 163).

8. Dance is "becoming". Fraleigh (1987) describes the philosophy underlying the teachings of the German dancer, Mary Wigman's thus: "Dance was a means toward self-knowledge - not a disclosure of personality but a construction of it, not self-expression as self-indulgence but a creation of self in expressive action

that moves one beyond the confines of self" (p. xxii). As in (7) above, there is the notion of a transformational process.

In summary, dance is an aesthetic experience characterized by heightened sensibility, aliveness and unity of action, thought, and feeling. It can be a process of transformation and growth.

These characteristics of dance appear to find resonance within the material of this study. E displays variety and complexity of movement quality and affect, as well as an aliveness, an energy, which drives and supports her actions and responses. As suggested above in the discussion of the relationship of energy flow, effort (movement qualities) and affect, there is congruence and unity in functioning.

That there is more than a mere physical moving of the body is evident in this total response. There is evidence of understanding, appropriate response and a real conversation between patient and therapist which does not happen apart from the movement but is integral to it. Further, such functioning represents a transformation in what is a "normal" state for a person with dementia. All of the above would seem to suggest that E's experience was an experience of dance.

Most exciting and empowering when dance is part of a therapeutic process is Mary Wigman's notion, cited in (8) above, that the dancer can create him- or herself. From this perspective, E's experience can be seen as a re-creation of herself, the self she was in the past restored to the present.

At the core of Fraleigh's views on dance with its intimate connections with the self, is the concept of the meaningfulness of human bodies and human movement.

She finds support for her views in existential phenomenological concepts of embodiment and the lived body. The writer will discuss below some of the phenomenological and dance therapy writings on this subject.

5.5 EMBODIMENT, THE LIVED BODY

Central to dance therapy theory is the concept that in working with the body, the dance therapist is working with the whole person, physically, cognitively and emotionally.

Feder and Feder (1981) talk of the mind/body relationship as being not merely "psychosomatic" but also "somatopsychic" (p. 157), that is not only are mind and feelings expressed through the body, but the state of the body affects the mind and feelings. The language of Feder and Feder still seems to suggest some separation of mind and body. Penny Bernstein (1981), on the other hand, is quite clear in her dismissal of dualism: "Duality is an illusion" (p. 1), and notes that this view is supported by recent discoveries about the connections between mind and body. Beyond the philosophical realm, she notes that in more practical realms (such as medicine) there is acknowledgment that sharp distinctions cannot be made between the physical and the mental/emotional.

Harre (1991) points out that bodies are much more than biological entities and while they share certain things in common with other objects, they are "not typical things. Much that is unique to human bodies depends on the fact that they are the embodiments of persons" (p. 13). The body is "not accidentally conjoined with personhood, but essentially" (Harre, 1991, p. 15).

The body is not an instrument apart from and used by the mind or self as a form of intermediary between the self and the world. It is "myself in my lived concreteness. It is *who I am* and indicates the *manner in which I am*. The lived body refers to my personal manner of existing, and the meanings attached to this manner of existing, in a world in which I experience presence" (Schrag, cited in Fraleigh, 1987, p. 32). My body is my way of being in the world. My sense of identity lies in this very physical presence. "Our sense of ourselves as particular individuals is based in part on our sense of the continuous spatio-temporal trajectories of our bodies through which we are located in the material world" (Harre, 1991, p. 14).

Merleau-Ponty (1962) writes: "The body can symbolize existence because it brings it into being and actualises it" (p. 164). He makes an interesting contrast in terms of the "meaningless body" where the "soul" is unable to actualize itself in the body, where "our thoughts...do not always find in it [the body] the plenitude of their vital expression....The body which loses its meaning soon ceases to be a living body and falls back into the state of a physico-chemical mass; it arrives at non-meaning only by dying" (Merleau-Ponty, cited in Fraleigh, 1987, p. 12).

The concept of the lived body suggests the self in the world. My way of being in the world is through my body. My body is meaningful as the self embodied. Indeed, according to Merleau-Ponty above, it is vital to existence itself to find expression through one's body.

The self therefore is not an invisible entity, but is a spatio-temporal entity actualised in the body, and as such is accessible. Fraleigh (1987) notes:

Lived-body concepts hold that the body is *lived* as a body-of-action. Human movement is the actualization, the realization, of embodiment. Movement cannot be considered as medium apart from an understanding that movement *is* body, not just something that the body accomplishes instrumentally as it is moved by some distinct, inner, and separable agency. Embodiment is not passive; it is articulate. In other words, I live my body as a body-of-motion, just as I also live my self in motion. (p. 13)

This concept of the accessibility of the self as a spatio-temporal entity and the notion that the body and its movement indicate who one is, are important in this study. Aspects of E's movement such as strength and intensity of energy, when viewed in the light of the literature on embodiment (and also that of Effort-Shape), are not merely descriptions of physical attributes but of the person as a whole. E's words and those of her daughter seem to confirm that E's movement is an integral part of who she is.

The nature of the body's interaction in movement with the world is expanded on by Sheets-Johnstone (1981), who writes of "thinking in movement" (p. 400). She suggests a broader concept of thinking which goes beyond the view that,

thinking is *wholly* dependent upon, and to that extent limited to, a symbolic system; that thinking is transactable only in terms of a hard currency like language, and furthermore, that it proceeds in a linear, i.e., rational, fashion, its progression being marked by a systematic reasonableness which develops on the basis of particular

connections between thoughts and/or on the basis of specific rules demanded by the symbolic counters or currency utilized. (pps. 400-401)

This, she says, ignores other dimensions of human thinking.

Sheets-Johnstone's wider definition of thinking allows for an understanding of what was clearly not "unthinking" movement. While in the verbal domain, E experienced the difficulties in comprehension and expression common to dementia sufferers, in dance she displayed great subtlety in understanding and response. Moving, feeling and thinking seemed unified in the dance interaction, and E was able to embark on a true conversation unhampered by the limitations of dementia.

The researcher/therapist will not go further into Sheets-Johnstone's arguments, many of which relate to the views discussed above of Merleau-Ponty, in rejecting the separation of thinking and moving, and sensing and moving. However, as this concept of "thinking in movement" is an important one in appreciating the meaningfulness of E's experience in dance, the researcher/therapist has included below a description by Sheets-Johnstone (1981) of a dance process much akin to what she perceived happening in the dance interaction with E.

A density or fluidity of other dancers about me, for example, or a sharpness and angularity of movement, is not first registered as a perception (still less as a sense-datum, and certainly not as a stimulus) a perception to which I then respond in some manner by doing something. Qualities or presences are enfolded into my ongoing moving

quality and presence. They are absorbed by my movement. The world which I am perceiving is inseparable from the world in which I am moving, in the same way that the world I am exploring is inseparable from the world I am creating. Sensing and moving do not come together from the nether ends of two separate spectra of experience, fortuitously joining together by virtue of happening to, or in, the same body. Perceptions are plaited into my here-now flow of movement. Sensing is always at the interface of movings of a mindful body. (p. 403)

At the heart of all the views expressed above is a rejection, therefore, of the separation of self - a self narrowly defined in terms of an equally narrow concept of thinking - from body and body movement. The following section looks at two further areas of literature, one relating to the preservation of self in dementia care, the other to the experience of "awakening" of Sacks's post-encephalitic patients.

5.6 THE SELF

Kitwood and Bredin (1992) have noted that society links selfhood with cognition. In those terms, a disease such as dementia must inevitably be seen as a disease which attacks and ultimately destroys the self.

Kitwood and Bredin (1992) argue, however, for the separation of personhood from cognitive ability. The hopelessness felt when faced with dementia is unavoidable if one focusses on "highly developed cognitive powers to the exclusion of other human faculties" (p. 278). They propose, rather, a view of personhood as essentially social. They quote one study which compared two groups of dementia sufferers, one

group receiving traditional care, the other receiving a much more active and interactive programme. There was less deterioration over a one year period in the latter group. Kitwood and Bredin conclude:

If some degree of 're-menting' can be brought about purely through human interaction; if some sufferers do stabilize when provided with a care environment that fosters activity and cooperation; if even the ageing and damaged brain is capable of some structural regeneration, then there is ground for looking on dementia care in a very positive way. (p. 280)

These writers make, therefore, two important points: (a) that personhood does not lie solely in the cognitive faculties, and (b) that even the physical degeneration of the cognitive faculties can be reduced or even reversed by environmental and intersubjective factors.

Related to the notion of personhood, Kitwood and Bredin (1992, p.283) suggest the concept of relative well-being in dementia and identify four global sentient states underlying it: (a) "sense of personal worth"; (b) "sense of agency; the ability to control personal life in a meaningful way"; (c) "feeling of being at ease with others, of being able to move towards them, of having something to offer to them"; (d) "hope...a sense that the future will be, in some way, good". They note that hope does not need to be linked to cognition or any specific future scenario, but in this context relates rather to the concept of "basic trust" in psychoanalysis.

E, both in her dance and in her words, gives evidence of all of these. She feels good about herself, clearly

admires her personal qualities as revealed in the dance and displays an ease of being and openness in her relationship to the researcher/therapist. Her growing sense of personal power is shown in the sheer force and energy of her movement and in taking control of the action. It is also expressed in her reminiscences concerning her love of being the rebel, in doing what she wants to do. One of her last comments, about being glad she is alive, shows an optimism and underlying trust that life is ultimately good.

This concept of well-being within dementia would therefore appear to suggest that, while E continued of course to suffer the effects of the disease, her re-experiencing of herself did create a sense of relative well-being.

While Kitwood and Bredin make a useful contribution to a broader understanding of the self, their focus is very much on the practical implications of such an understanding for dementia carers and therapists.

It is in the work of Sacks that the researcher/therapist found an understanding of the self akin to the dance and phenomenological conception of the embodied self, as well as descriptions of the "awakening" of the self. These descriptions had much in common with E's experience within the significant moments when she seemed to function in a more whole and integrated way, which belied the presence of dementia.

Sacks (1991) identifies "lucid intervals" when the patient "*is himself*" (footnote 116, p. 238) and notes that he has seen such moments in patients with dementia.

Where there is abundant evidence of all types regarding the massive loss of brain structure

and function, one may also - very suddenly and movingly - see vivid, momentary recalls of the original, lost person. (There may be brief, sudden normalisations of an otherwise profoundly abnormal EEG in these tantalisingly lucid moments) (footnote 116, p. 238).

Not only can the person have moments of being him or herself again, despite massive impairment which would normally seem to preclude this, but there can also be measurable physical change. Sacks's description absolutely captures the "magic" of the significant moments, when the curtain of dementia was pulled aside to allow E to appear in all the fullness of her being.

Yet Sacks (1991), at home as he is with poetry and symbolism, is able to show that such experiences are not "unintelligible" as they would have been according to notions of neuroanatomy 25 years ago, "notions which saw the `motor', the `perceptual', the `affective', and the `cognitive' as residing in separate and non-communicating compartments of the brain" (footnote 114, p. 237). Modern anatomy has shown,

that all these supposedly-separate compartments of brain function are richly interconnected and in continual communication; only with this new neuroanatomy does one understand how the motor, the sensory, the affective, the cognitive, can and - indeed must - go together. (footnote 114, p.237)

For Sacks, therefore, the self does not reside in one part of the human being.

One's persona is in no way `localisable' in the classical sense...it cannot be equated

with any given `centre', `system', `nexus,' etc., but only with the intricate totality of the whole organism, in its ever-changing, continuously modulated, afferent-efferent relation with the world. (footnote 116, p. 239)

This is one's personal style, which Sacks (1991) sees as the deepest aspect of being. One's being, in its totality is "a coherent and continuing entity, with a historical, stylistic, and imaginative continuity, with the unity of a life-long symphony or poem" (Sacks, 1991, footnote 116, p. 239). E in her dance shows evidence of a certain style of being and, through her reminiscences, it can be seen that her use of energy, movement qualities and so forth were not haphazard or merely of that moment but were indeed part of a "life-long symphony".

Sack's view as a neuroanatomist appears therefore to have much in common with notions of the lived body, the self embodied, the self as a totality in interaction with the world. His belief in the continuity of personal style, the self, despite the ravages of disease, is clear.

Sacks (1991), in seeking a description for the awakened self, quotes from D.H. Lawrence, "a man in his wholeness wholly attending" (p. 241). This awakening has a two-fold impact. It affects the person's relationship to him- or herself and to the world.

Where, previously, he felt ill at ease, uncomfortable, unnatural, and strained, he now feels at ease, and at-one with the world. All aspects of his being - his movements, his perceptions, his thoughts, and his feelings - testify simultaneously to the fact of

awakening. The stream of being, no longer clogged or congealed, flows with an effortless, unforced ease. (p. 241)

The awakened state Sacks describes then has much in common with the dance experience, with an experience of wholeness, harmony of being in the world, transformation. No longer is there the need to force, rather there is a feeling of ease, of flow. This ease of being seems most apparent in significant moment 3, where there is an easy flow between the inner and the outer. The confused, anxious patient has been transformed.

What is the patients' perspective of their experience. Sacks (1991) quotes one patient: "Before I was *galvanised*, but now I am *vivified*" (p. 240). Patients use metaphors of rising and falling, of light and darkness to describe the transformation. It is interesting to note the metaphors used by E, contrasting the cupboard and the shell with brightness.

Sacks himself is very convinced of the power of the arts in such transformations, awakenings. In talking of Parkinsonianism, he sees medicine's function to rectify the mechanism (the "it"), but the function of art to call upon the "I". The purpose is to "inspire with art to combat the inert (which means, quite literally, 'in-art'), to inspire with the personal and living, and, in the directest sense possible to awaken and quicken" (Sacks, 1991, p. 285). It is a call to the sentient life, the life of feeling, to that "totality of consciousness, which is lived by each individual as *the self*" (Fraleigh, 1987, p. 44).

CHAPTER 6

CONCLUDING STATEMENT ON E'S EXPERIENCE BASED ON THE MATERIAL OF THE STUDY AND HERMENEUTIC ANALYSIS

The researcher/therapist set out to describe and come to an understanding of moments of experiential meaning for a patient with dementia. The nature of these "significant moments" has been described in detail in this study. From an observer's perspective, the patient displayed in such moments an aliveness and integration in behaviour uncharacteristic of dementia, but very characteristic of dance, which, as has already been suggested, has to do with the sentient life; the vital body; unity of mind, feeling and body; empowerment and transformation. The movement qualities which emerged in the significant moments (in particular, strength) suggest - and the patient's own words appear to bear this out - that these moments represented an authentic expression of the patient's self, a transformed self, the self pre-dementia. Further, the transformation was not limited to those moments. The session as a whole represented a transformation in the patient. By the end of the session, E was in a much different state. It was a pleasurable experience which left her feeling better than before and which moved her from feelings of tiredness and anxiety to those of relaxation and ease.

On the basis of this session, it was thought that there was no doubt that the patient had experienced something which was meaningful for her. However, in looking beyond this at the impact of the four dance sessions and four video viewing sessions, the researcher/therapist became aware of a whole other dimension. For not only was there the experience in the dance itself, but the opportunity to reflect upon

it by way of the video. The interaction of these - action (though this of course does not exclude thinking) and reflection - brought about a major transformation in E, namely, a transformation in her perception of herself.

In session 1, E certainly acted differently, but could not relate this to herself when viewing the video. As the study progressed, she came to recognize the person on screen and to own the qualities as hers, not merely as qualities she used to have in the distant past, but qualities very much part of her now. Her reminiscing seemed to promote this reintegration of qualities she initially could not recognise as her own, as she came to reflect on where those qualities came from, and how she came to be as she was. The E of the past became E in the present, reinforced both in action and reflection.

While of course there were fluctuations due to dementia and ultimately no change could ever be permanent, there was a sense of a shift in E's perception of herself outside of those moments in the dance sessions. The dance however remained the point of contact for this recovered self, the place where she could re-create and re-experience herself as she was pre-dementia. E's experience of dance therapy therefore revealed itself to offer not only a rich and authentic experience of a transformed self, but also a changed awareness of self which reached beyond the moment of dance.

In describing the sense of self projected by E, the writer finds herself returning to Sacks's word "ease", a word which is also used in writings on the experience of dance. Where dementia represents dis-ease - fragmentation, powerlessness, confusion, isolation - ease suggests not only feeling good in oneself but also having a strong sense of self which allows the person

to "move towards" others without fear, (Kitwood and Bredin, 1992, p. 283), to come, in the patient's own words, "out of my cupboard" (VV4/30)... "to the brightness" (VV4/41).

The experience of dance began a process of, and remained the touchstone for, an "awakening" of E, an E at ease with herself and trustful of the world, an E who displayed:

a presence
as of the master sitting at
the board
in his own and greater being in
the house of life.

(D.H. Lawrence, cited in Sacks, 1991, p. 243)

CHAPTER SEVEN

SUMMARY OF THE THESIS AND CONCLUSIONS

This minor thesis documents the researcher/therapist's attempts to understand the dance therapy experience of a patient with dementia. At the same time, it describes her efforts to develop a methodology appropriate to the complexity of this task. With few models for research in the dance therapy field, it was necessary to borrow aspects of methodologies which had been applied in other somewhat related fields.

Phenomenology seemed an appropriate approach because of its openness to the phenomena and emphasis on returning "to the things themselves" (Husserl, cited in Barrell et al, 1987, p. 446) with as unblinkered a view as possible. This was consistent with the researcher/therapist's own belief that the movement material should be studied in its own terms, as well as with her desire to move beyond her own beliefs about dance therapy and be open to new discoveries.

The early stages of the study, therefore, were phenomenologically inspired, in terms of the improvisational content of the research sessions themselves and the constitution and analysis of the data, though some adaptation was necessary due to the nature of the research material. However, as the researcher/therapist sought meanings in the material, her methodology, of necessity, evolved and she embarked on a hermeneutic analysis in the later stages of the study. Her final conclusions regarding the meaning of the dance therapy experience for the patient have therefore arisen from an approach which combined phenomenology and hermeneutics. Their respective roles and inter-relationship is discussed below.

7.1 ROLE OF PHENOMENOLOGY

The emphasis of phenomenology on meeting the phenomenon directly and in its own terms meant that considerable time was spent on the naive description and on the descriptions of each of the foci, as these were to be the basis of all later reflection. Giorgi's (1985) four-phase method was adopted in analysing the naive description. The creation of meaning units, as suggested by Giorgi, was helpful in breaking down the mass of material into a more manageable form, but an approach which dealt solely with written descriptions was necessarily inadequate when applied to the multi-layered experience of dance therapy. The researcher/therapist, therefore, had to widen her focus and move among the different types of material (written, video and so forth). This seemed however consistent with phenomenology, which aims to study a phenomenon as it presents itself and in a multi-modal format.

Of course, Giorgi's four-phase method was intended for quite another context, namely the analysis of a verbal text, and it was found to be useful when applied to the transcripts of the video viewing sessions. Giorgi's systematic approach was able to reveal subtleties of thought within the patient's words which had not been apparent in the early informal attempts at summarizing the major thoughts and themes. The analysis served to give life to the patient's viewpoint and led to the researcher/therapist's shifting her focus to the sessions as a whole and her realisation of a major change in E's awareness.

Phenomenological research also places emphasis on immersion in the phenomenon, a constant returning to the material and a refusal to close too early on it.

This very much encouraged the researcher/therapist to return again and again to the material, attempting to "see" it in different ways. This seeing was of course helped by the multiple perspectives also encouraged in a phenomenological approach. These differing perspectives served to highlight aspects of each other, as well as provide a form of validation.

In summary, therefore, the phenomenological methodology served to open up possibilities for the richness of the material to reveal itself by prolonged involvement in its many dimensions. This was also consistent with the researcher/therapist's belief that research in dance therapy needs to be grounded in the dance event itself and the language of dance and movement.

7.2 ROLE OF HERMENEUTICS

At this point, it must be asked whether the descriptions alone could have answered the research question or whether another source of interpretation and reference to theory was necessary.

Giorgi (1992) affirms that a descriptive analysis (as opposed to an interpretive analysis) is possible such that the findings can be "solidly based in the sense that no assumptive, hypothetical or theoretically dependent factors are included" (p. 10). The researcher/therapist, however, found that it was necessary in this study to go beyond the data in order to seek meanings. While the data were rich in source and perspective, some interpretation, some reference to theory, was needed in order to draw out the meaningfulness of the experience as a mind-feeling-body event. Indeed even at the early stage of the creation of the foci, it might be argued that while these do seem genuinely to reflect emphases in the description itself, they are not totally value-free and do reflect

something of a dance therapy perspective. Without the foci, the description itself was formless and, as such, difficult to grasp or make sense of.

Reference to theory in the hermeneutic analysis did not imply a shift away from the material itself, nor was the material moulded to fit pre-existing theory. Rather, the material served as a starting point, and theory was sought which mirrored and further explicated the experience as revealed in the data. Thus the approach reflected the first canon of hermeneutics articulated by Reason and Rowan (1981), namely "the autonomy of the object" (p. 134), which means according to Kockelmans, cited in Reason and Rowan (1981), "the source and criterion of the articulated meaning is and remains the phenomenon itself" (p. 134).

The hermeneutic analysis highlighted, enriched and placed in context different aspects of the experience.

1. Quality of movement. The writings on Effort-Shape enriched the understanding of the qualitative aspects of the movement in the study, highlighting for instance the increasing complexity of the movement in session 1 and the integration of movement quality, energy and affect. Importantly, the writings also point to the psychological correlates of such movement events, for example, linking weight to a sense of self and self-assertion.

2. Dance. Within the methodology of this study, the significant moments were not defined in advance but were selected intuitively as moments which were high points or in some way caught the attention. However, the dance writings would seem to suggest that these high points were in fact moments of dance, being characterized by heightened sensibility, expressiveness, aliveness, integration of body,

intellect and feeling, a state of transformation from the everyday and the functional.

3. The self, embodiment and meaningfulness of movement. It has already been noted that the writings on Effort-Shape suggest that dance is not only a physical event and the literature from disciplines other than dance therapy would seem to support the view of the embodied self. Sacks's case studies of awakened patients seemed to offer support for the researcher/therapist's impressions that the patient had in some sense recovered her self.

4. The writings on dementia with their emphasis on the loss of self placed this research in context in showing the "normal" state of a dementia sufferer and the transformation represented by the patient's experience. It also placed the issue of personhood - recovering and maintaining the sense of self - as central to any therapy within dementia care.

For the researcher/therapist the combination of phenomenology and hermeneutics seemed to work well, in that the study remained firmly grounded in the material, but was elucidated by being set in the wider context of the literature.

7.3 LIMITATIONS OF THE STUDY AND IMPLICATIONS FOR FUTURE RESEARCH.

Movement Observation. The writer is aware that there were many other aspects of movement which may also have been relevant, but there had to be some process of selection, taking into account the scope of the study.

Dance as a mind/body event. It seemed that in order to make sense of the dance experience as a physical/psychological event, it was necessary for explication to refer to the theories of Effort-Shape, which, although accepted knowledge to dance therapists, might still be considered by other disciplines to be insufficiently researched. The nature of relationships, such as weight to assertiveness and tension (energy) flow to movement quality, require further study. While the attempt has been to ground any psychological statements in the movement experience (an experience viewed from different perspectives), the nature of the leap from a physical to a mental/emotional experience would be a focus for further study.

Role of Music. Music fulfilled many roles within the dance therapy session - supporting, reinforcing and expanding on the experience - and indeed was an integral part of the whole dance therapy process. Because this was not intended as a joint music therapy/dance therapy study, the music component has received only brief study and discussion. However, a more in-depth study of the music itself, as well as its varying roles in interaction with the dance, would provide a better understanding of the nature of this particular music and dance improvisational approach.

Dance Therapy. The aim of this research was to describe and understand one person's experience of dance therapy, and there was no intention to attribute causality in any positivist sense. However, it is evident that dance therapy did facilitate and give form to a more holistic functioning and a transformation in the patient. Other therapies may indeed have achieved the same, and an important question within dementia research would be to explore which therapies can

contribute to this "rementing" process (Kitwood and Bredin, 1992, p. 280).

For the writer, however, the specific role and contribution of dance therapy remains of prime interest. There has been no attempt to deal with this issue in the study, indeed the role of dance has not even been separated from that of music. A later study might want to pinpoint that role, though this may present some methodological difficulties where music forms an integral part of a dance therapist's approach.

In terms of the present study, the writer believes that it would have been enriched, had the experience of at least one more patient been studied as a comparison.

Significant Moments. There was no attempt to define such moments in advance. Instead, they were allowed to reveal themselves in the course of the study. These moments have been described in detail and, as filled out by the hermeneutic analysis, appear to be moments of dance, an aesthetic experience characterized by involvement, feeling, quality of movement, wholeness, empowerment, transformation. Descriptions of the significant moments were not placed in the context of the session as a whole, which would have allowed for comparison. Furthermore, it is thought that placing these moments in context might reveal them not as extraordinary moments out of keeping with the rest, but rather as encapsulations of the essential experience of the session, inseparable from what preceded and what followed. The relationship of the significant moments to the rest of the session forms part of the wider study of the dance therapy process itself.

Reminiscence. Reminiscence has been referred to briefly as part of E's experience. However, it was not possible to study its relationship to the dance experience or concepts related to body memory.

The Self. This research has opened up whole vistas of study possibilities in terms of the self. A broader understanding of the self (a self embodied, a self beyond mere cognitive function) would have practical relevance for the field of dementia in showing the accessibility of the self and the possibilities of its survival despite dementia. Hence, such studies would contribute to the fulfilment of the key task in dementia care, identified by Kitwood and Bredin (1992), namely, the maintenance of the self.

7.4 IMPLICATIONS FOR DANCE THERAPY WITH DEMENTIA PATIENTS

Possibly the greatest revelation has been the impact of the viewing of the dance sessions by the patient. Through this, the patient appeared to have the possibility of processing her experience in a way which would have likely been impossible had she been interviewed. The use of video might well be valuable for other professionals, though it begs the question whether viewing another non-dance experience would have the same effect or whether it is some kind of present kinaesthetic response to the viewing of a past dance experience which enables coherent reflection. This in itself raises other questions for research.

For families, the videotaping of dance therapy sessions with their relatives may have benefits. Not only does it provide a positive image of the person with dementia - possibly the only time they see the person as he or she used to be - but, as happened with E, it may provide a focus for communication and interaction.

In terms of dance therapy, a further and very important implication has been the way in which the video viewing sessions came to form an integral part of the dance therapy process. As a dance therapist working with dementia patients over a number of years, the writer has possibly been guilty of discounting the more verbal/cognitive processes. The understanding of the patient's dance therapy experience as encompassing both dance and reflection has opened up for the writer a greatly expanded vision of what dance therapy can be within dementia care and is likely to have profound impact on her work.

7.5 IMPLICATIONS FOR DANCE THERAPY AND MUSIC THERAPY PRACTICE

This study has revealed the power of an improvisational approach and, in particular, a freeing up of the traditional roles of music and dance. Through contact with the other art form, both therapists have found new dimensions in their own area of expertise, as well as different ways to interact.

7.6 WHAT HAS BEEN LEARNT IN THIS STUDY

This research study represents an attempt to develop a methodology appropriate to the field of dance therapy. It also represents an attempt to move beyond observable clinical "benefits" towards an understanding of the dance therapy experience of a patient with dementia, a task made more difficult by the uncertainties of obtaining any direct verbal input from the patient. The decision to set aside one's prejudices and at least try to obtain this verbal material has been most fruitful and greatly enhanced the writer's understanding of the meaningfulness of the experience for the patient herself. While many more questions

have arisen in the course of the study, the writer believes that she has achieved much of her original intention and that the study has been valuable in the two areas as discussed below.

Methodology

The study was begun with the conviction that some form of post-positivist approach would be most suited to the kind of study of dance therapy she wished to pursue. It came therefore as a surprise to the writer that she in fact had to grow into a post-positivist over the course of the study. She learnt too that flexible, emergent methodologies in fact require extreme rigour and discipline, since they provide few landmarks and constantly challenge intellectual honesty. Now, with the study complete, the writer remains convinced of the value of this kind of methodology, in particular the multi-modal approach which allowed varying perspectives to illuminate each other. In this thesis, she offers not a closed research model for dance therapy, but an example of one person's attempt to adapt her methodology to her area of study, so that she might question, explore and study dance therapy without compromising the essence of the field itself or the ways of knowing which are the core of practice in the arts in therapy.

Dance therapy in the field of dementia

The researcher/therapist has been genuinely surprised by the results of this study and believes that the openness to the material, encouraged by a phenomenological approach, allowed her to see past some

of her own preconceptions. The major points arising from the study were:

1. That the patient was able to function in a much more integrated way during the significant moments of the dance session.
2. In these significant moments, she appeared to be more like her old self. (This appears to be supported by the patient's own words.)
3. The experience in fact went well beyond the experience of the dance session itself. She remembered and reflected on the experience, and looked forward to the next session.
4. The viewing of the video became a part of the dance therapy experience, in that it offered a way of processing that experience, which in turn was reinforced and developed in the dance.
5. In the course of the dance and processing experiences, the patient appeared to undergo a change in awareness, moving from a lack of recognition of and identity with the positive qualities of the person dancing, to self-recognition and an owning and reintegrating of those qualities.

It is hoped, in the first instance, that this study may be of value to dance therapy research. However, as a practising dance therapist with a strong commitment to working in the field of dementia, the writer also hopes that the image of E's dance will reveal possibilities for other dementia sufferers to come "out of the cupboard" "to the brightness".

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APPENDIX 1

NAIVE DESCRIPTION

Significant Moment 1

Precursor: E displays signs of tiredness as H and E swing arms (rapid loss of energy). H and E continue to swing a little longer then lower arms as E sighs.

1. H leans forward and strokes down E's arms twice while E looks at H. At first, E holds her arms partly raised as if expecting that she still needs to do something. She looks a little uncertain. Her arms gradually lower and her body begins to sink. H strokes a third time. E's body sinks slightly to the side, eyes closed. 4th stroke: E looks at H, sits up a little. 5th stroke: still eye contact, sinks down again. 6th stroke: E sinks more as H also presses down. E bends her head slightly to one side, eyes closed, then down on chest. H bends her head to the same side and circles down and up to the other side. H and E come up to face each other. H strokes again. E maintains a slight smile throughout this section - sense of letting go. Her eyes are half closed. E closes her eyes and reopens them but with a downward focus. H reaches for her shoulders, shakes her gently, then strokes again. This brings E's focus to H. H brings the stroke right down to the tip of E's fingers. E and H's hands come up simultaneously to meet palm to palm. Eye contact. E is smiling, her body relaxed.

2. H and E push palms, leaning towards each other with direct eye contact which is maintained and emphasised into a staring quality. E increases the movement forward. Her eyebrows raise. H and E's hands open up and sway apart and then closer together again during this. E's face relaxes as she lets herself be

pushed back into her seat. Her hands stay up at chest level, fingers curled over, smiling, direct eye contact. E leans forward. E's hands open up. H and E's palms meet. E's eyes look at the hands and then back to H. E raises her eyebrows as the hands open out to each side and she and H are face to face. H's position is lower than E.

3. H and E's joined hands move over to one side. E closes her eyes. Her head bends over. H and E's hands and bodies sink further still to that side, heads down. H and E lose palm to palm contact, but maintain finger contact. They reconnect on rising to the vertical. Eye contact. H and E sink over to the other side and return to palm to palm contact when upright. E looks at the hands, then at H. H leans slightly towards E. Eye contact. E has a benign smile throughout.

4. H initiates some finger play. E looks at the fingers and back at H. She raises her eyebrows. H removes her hand with a start. E has a slight smile, opens her mouth as H backs off. H opens and closes her fingers, then returns to a palm to palm position. She pushes slightly forward.

5. E pushes H slightly. H pushes back, E makes a funny face, using her eyes, as H moves slowly back. E chuckles and leans back. There is not much strength in the pushing.

Sequel: E drops hands and sighs. Loss of energy. Eye focus drops, body sinks. H reinforces this.

Significant Moment 2

Precursor: H and E are palm to palm (E's right palm, H's left). H initiates finger play. E watches the hands and her face slowly brightens.

1. The finger play (tickling) becomes more vigorous, as E becomes more engaged. E's energy does not however match H's. (It is lower.) E tries to catch hold of H's wrist as both arms writhe and twist. Finally, E leans right forward with a sudden movement, reaching for H's face (or neck). E's face is very open, her eyebrows raised somewhat. Her hand comes down. She leans back, looks straight ahead then back to H. H then tries to tickle up her arm. E, smiling, partly raises her arm to ward H off. When H tries again, E reaches forward to tickle H, but does not lean forward with her whole body. There is eye contact. E has a wide smile. In these two latter interactions, she displays less energy than in the first.

2. H brings one hand then both hands up to tickle E's shoulders and arms. E looks at H, her eyebrows raised, and then away. She puts her hand on her chest, looks at H again and gives a deep sinking sigh. H mirrors and brings her hands up again and strokes down E's arms. E immediately responds by bending her head. H sits up. E's head raises slightly, her eyes stay down. H strokes again. As her hands reach E's elbows, E's head rests on H. E brings her head to one side and starts to sit up as H swings to the other side to come up. H and E both sit back. Eye contact. E's hands rest on her lap. As H comes back to put her hands on E's shoulders, E closes her eyes and seems to raise her head slightly before dropping it down. H and E both sink down till E's head is resting on H. H strokes and pats her back. E's body begins to shake with laughter. She still laughs as she sits up and looks at H. Her body is relaxed.

Sequel: As H reaches forward, there is a slight shake of E's head, which is leaning to one side. H leans similarly with a deep sigh. E again shakes her head.

H puts out her arms to E's shoulders, strokes down. E bends her head and looks down. H and E stay like this, H's hand on E's, H's head lower than E. As the music stops, H and E both look up.

Significant Moment 3

Precursor: H and E's hands, crossed and joined, swing from side to side. H begins to pull. At first E is pulled a little towards H but then leans back and pulls against H. At this point there is not very much engagement. She is merely holding her own.

1. E tugs and brings the hands right back to her body. She holds the position and looks at H. H is pulled forward, head bowed with the effort of resisting. There is a slight smile on E's face. Her body is straight. E tugs again. She looks at H whose head is bowed. She has a slight smile. E maintains the pull and has eye contact as H comes up off her seat. H gives in and drops forward, face close to E's. E sticks out her tongue quickly. E's smile increases during this time. The pulling is all towards her. There is no movement towards H. However, after the tongue gesture, her arms are allowed to be pulled forward a little, but her body continues to lean back.

2. A diagonal stretch develops, in one direction and then the other. E pulls as far as H can physically twist. H is practically off her chair. There is further twisting and writhing with hands joined. There is a give and take quality, in contrast to (1) above. E maintains a straight body, with her eyes watching the movement all the time. She is very much controlling the movement.

3. H and E pull against each other and hold the tension, with subsequent release between pulls, both

maintaining crossed hand contact. This happens twice. There is a widening smile on E's face during this. The first pull is initiated by H, the second pull by E. The releases are initiated by H. In releasing after the second pull, H leans forward with bowed posture and looks at E. She raises her eyebrows and bulges her eyes. H slumps and sits up again. E watches.

4. H pulls back. E bulges eyes, and only pulls slightly. With direct eye contact and chuckling as she does so, E pulls H towards her, then up off the chair and leads her around the back. There is only slight pressure from E (H goes willingly), but she is clearly controlling this movement. E maintains her smile. As H goes behind, E's focus shifts down, straight ahead, then down again. H continues to E's right and E turns and looks at H. She smiles. Maintaining contact H comes back round. H pauses and attempts a sideways pull, but E does not respond. There is no eye contact.

5. H continues to move towards her seat. It looks like E might push H into the seat, but she instead engages in diagonal pulling and writhing, developing into a sustained, held, diagonal pulling. E's face is smiling and absorbed. Note the first diagonal pull (where E and H are in full body view). E's upper body is pulling away and maintains a counterweight to H, looking at her all the time. E has a solid, wide-legged base. H and E let go arms gently as E seems to lose energy. There is eye contact.

6. H reaches out with tension in her fingers and grasps E's upper arms. Throughout this section, E observes H constantly. H sways E from side to side. E's arms becomes rigid, glued to her sides. The sway develops into a shake and in response E bends her elbows, hands clenched at chest level. She becomes more and more rigid. H tries to prise the arms open,

tries to pull one elbow up, at which a faint smile and raising of the eyebrows occurs on E's face. The smile grows as E watches H try to pull up the other elbow. H stops, folds her arms and sits down. E also folds her arms, slightly readjusts her position, gives a slight nod of the head and shrugs her shoulders. She has a straight posture. H and E eye each other. There is a sense that E is watching to see what H will try next.

7. H offers her folded arms twice. E watches. On the third occasion, E leans forward and grabs H's arms with both hands, smiling. H struggles. Note E's facial involvement. She flinches when H's elbow comes too close. She drops one hand, then the other. Her face is smiling. E returns to upright, seems to murmur something and leans slightly forward. H offers her folded arms again and E tries with both hands this time. There is a diagonal quality to the pulling, struggling. Again E maintains the pull, rather than having a give and take. H collapses over E's lap. (H senses that E is losing energy.) E's right hand comes up to push in H's shirt label. E chuckles. H sits down and shakes out her hands. E smiles. There is eye contact.

8. E's hand comes up to her eyebrow as the energy seems to drain out and her body sinks. E looks at H and sighs. H strokes E's forearm. E says something and chuckles. H strokes down from E's shoulder. E looks at H and allows herself to sink down with the stroking movement. H moves her chair alongside E. E's eyes are downward focussed. H's arm is next to E's.

9. H looks at E. E starts pushing with her elbow against H. There is an elbow battle. She keeps increasing the strength in pushing with her elbow and finally uses her hand to nearly push H off her chair. She looks at H and is smiling. E keeps the pressure

up. Finally, H closes her fingers around E's wrist and pulls herself up. E is nearly laughing. H takes hold of E's other (right) hand.

10. H lets both hands sink to her lap and lets go of E. E's eyes drop, then come up again as H leans her arm on E's shoulder. E smiles, talks. H drops her head towards E's shoulder and then comes up smiling. E is looking straight ahead. H puts her right hand on E's left (which is on her lap). E looks down at it. H takes her hand away. E lifts her head slightly and flops it down, then up again slightly and down. Then E looks at H (H mirrored flopping) and speaks (one word). H looks at E and replies. H and E sway towards each other. E's eyes look away and down. (H may be holding E's hand. It is unclear on the video.) H also looks down, sways again. E looks straight ahead then down towards her hands. She continues to look down as H sways. H looks at E and brings her right arm up to stroke and pat E's shoulder. E slowly looks up, smiles at H. E initiates (with left arm) linking arms with H, using her other hand to bring H closer. E adjusts her position. As H sways, E allows her left arm (linked to H's right) to move away and back to her body. Eye contact at first, then a period without eye contact, though there is still a sense of being in tune. E sees H's right hand move and she moves her right hand to the side and back to her lap in a mirroring gesture. E's focus stays down and slightly to the side as H sways. There is not much movement in E's torso. H squeezes E's arm (with her right arm) and places her left hand on E's wrist. Eye contact when H squeezes E's wrist, held for a moment. H squeezes again. E acknowledges with a smile and nod of her head. H puts out her left hand. E looks down, gives H her right hand and looks at H. H shakes the hand several times. E's gaze moves off to the side. She looks at H again, slight smile

still here, then away, then down at her hands, then at H, then away. H also looks at the hands. E watches as H releases E's right hand. H takes E's left hand and, pulling it further through H's right arm, places E's hand palm down on H's upturned palm, fingers interlocking. E continues to watch. H pats E's hand with her left hand and looks at E. As H sways towards her, E shifts slightly away. (H is too close, perhaps, or too energetic ?) H continues to sway. E looks slightly to the side, then looks at the joined hands. She touches the back of her left hand with the fingertips of her right hand and comments on it. As E takes away her right hand, H's left hand comes up to stroke E's left hand. H and E both look intently at the hand. H strokes as E talks and H responds. H and E both look as E speaks and raises her right hand in an up and down gesture. E then looks away to the side, at the same time as H looks at her. H smiling, swaying, touches E's forearm. E seems to move her head slightly in response to this swaying, but not the rest of her body. She seems aware of H's swaying, even though not looking at her. E speaks again as she turns her head towards H, eyes still down to the side. E looks at H and then away again, smiling. H looks at E and is also smiling. E looks straight ahead at the camera. She makes another comment, then looks across at H as she smiles. H smiles back. E holds the smile as she slowly looks away (straight ahead). H starts to circle linked arms by rotating. H's palm is now on top of E's. E looks towards H. H takes her right hand away and shows an open palm to E, who looks at it. E and H return to a locked arm position. H puts out her other hand to take E's right hand, palm to palm, fingers interlocked. H and E both watch this. H and E's bodies are turned towards each other, H's more than E's.

11. With the two sets of hands linked, H and E do various intertwining movements in space, first in further reach space and then more closely over and around H and E's bodies. E is very focussed on what is happening. After one tangle H and E pause, look and laugh at each other. The intertwining gradually becomes more constricted in space and in the use of the body and ends up being mainly hands and forearms, till H's right and E's left arm rest on E's lap. They are raised again. Simultaneously, H's right arm goes round E's shoulder and E's left round the back of H's chair. The other two hands are joined.

12. H and E let go hands. H tries to resume interlocking contact but the connection is not made. E brings her hand palm down onto H's open palm and grasps it. H and E shake hands, maintaining eye contact. E speaks. H and E are turned towards each other. The firm, reassuring handshake is mirrored by E's smile and head shake. H pats E's shoulder as she looks away smiling. She looks at H briefly, then away again. H and E continue to move their joined hands up and down, H patting E's shoulder. E's gaze is down and forwards. H and E lower their hands. H pats E's shoulder, leaning slightly away to the side and drawing her hand back along E's shoulder. E looks at H, speaks smiling and with eye contact. H pats E's shoulder again. H slowly moves towards E and leans her arm on E's shoulder, with H's focus down and into the centre. E has a similar focus. E speaks again, focusses down and then looks at the music therapist. As H starts to draw away slightly, her hand comes to E's back. E gives a burst of applause to the music therapist as the music ends.

APPENDIX 2

DESCRIPTION OF THE FOCI

1. QUALITY OF MOVEMENT (WEIGHT, SPACE, TIME) AND FLOW OF ENERGY

Significant Moment 1

WEIGHT/SPACE/TIME	FLOW
1. Giving in to weight (that is, not active engagement of weight effort). Light effort in raising hands.	Neutral. Increasing relaxation. Slight rise in energy as H shakes E.
2. Mainly giving in to weight as E leans forward but there is a slight activation of weight (strength) towards the end as she stares. Sense of her making a connection with the therapist. Direct in space.	Gradually increasing low intensity, bound flow followed by recuperation (neutral flow).
Very slight mobilization of weight as E leans forward a second time. Direct in space.	Low intensity energy flow.
3. Giving in to weight. Possibly slight activation of weight. Directness in space ?	Slight rise in energy as E and H raise hands. Otherwise even, bound flow.

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|----|---|---|
| 4. | Sudden (eyebrow gesture). | Mainly neutral. Slight rise in energy with lifted eyebrows. |
| 5. | Light strength. Sudden movement (eyes). Giving into weight. | Decreasing low intensity flow, becoming neutral. Abrupt rise (slight) with gesture. |

Significant Moment 2

WEIGHT/SPACE/TIME

1. Light contact. Indirect. Followed by sudden, direct movement. Light arm gestures.

FLOW

- | | | |
|----|---|--|
| 1. | Light contact. Indirect. Followed by sudden, direct movement. Light arm gestures. | Gradual build up in intensity with sudden rise as E lunges forward. Never very high intensity. Diminishing intensity after lunge with small rises. E does not have a lot of energy and it runs out fairly soon |
| 2. | Giving in to weight. | Sudden release as E breathes out. Neutral flow. Slight increase in energy as she laughs, then return to neutral. |

Significant Moment 3

WEIGHT/SPACE/TIME	FLOW
1. Strong, direct, Sudden movement (tongue).	High intensity, even bound flow maintained throughout, interrupted only by abrupt tongue movement.
2. Strong, direct, becoming indirect and shifting between active use of weight and giving in to weight. (However, quality of bound flow seems more emphasised than the weight factor.	Medium intensity, bound flow, even, becoming fluctuating in writhing and twisting.
3. Strong, direct, alternating with giving in to weight.	Abrupt rise to high intensity, followed abrupt release.
4. Light weight (to pull H off seat), but otherwise active use of weight does not occur despite H's attempt to pull against E.	Slight increase in intensity as E brings H to standing but otherwise neutral and slightly bound.

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|----|---|--|
| 5. | Strong, direct.
Use of counterweight,
equal balancing against.
Giving in to weight at the
end. Recuperation but
not complete giving in
to weight. | Even, bound flow,
medium intensity.
Gradual diminishing
of intensity, but
seems to hold some
readiness for
action. |
| 6. | Centering of weight as
E resists. Further
emphasis on weight as
she folds arms and seems
to "make her stand". | Increasing intensity
bound flow to the
point of immobility.
Slight decrease in
intensity as E
changes position and
folds her arms. She
is not so rigid
in this position. |
| 7. | First pull: sudden,
strong, direct.
Second pull: less sudden,
becoming sustained. Strong,
direct. | First pull: abrupt
rise in intensity.
Even in quality.
Equally abrupt
release.
Second pull: medium
intensity, bound
flow. Even. |
| 8. | Giving in to weight. | Gradual loss of
intensity, becoming
neutral flow. |
| 9. | Strong, direct. | Gradual increase in
intensity. |

- | | |
|--|--|
| 10. Timeless. Alternation of inner and outer involvement . | Neutral or low intensity flow. No great highs or low of energy. Flow of interaction. |
| 11. Indirect in space. | Fluctuating, low intensity, bound flow. |
| 12. Indirect, light | Low intensity flow, winding down. |

2. AFFECT

Significant Moment 1

1. Slight smile throughout, benign but a little tired. Increase in smile as H strokes down and both pairs of hands come up to meet.
2. Face lightens up and smile increases.
3. Face is relaxed and a benign smile remains.
4. Face brightens during this. E ends with a smile, almost a chuckle.
5. Smile, then a chuckle after facial gesture. Tiredness is, however, becoming apparent.

Significant Moment 2

1. E's smile becomes wider and remains so until the end. While H is struggling, E appears quite calm and in control of the process. She watches. In leaning forward, E has a cheeky, mock "combative" expression.

2. E looks tired and apologetic: "I'd like to do more but I can't". She still smiles and she looks relaxed when being stroked. She bursts out laughing as she rests on H's shoulder and on rising, has an open, laughing look.

Significant Moment 3

1. Smiling. Sense of being in control. This is reflected in E's straight posture. She has no doubts she will win. Mischievous, humorous gesture in sticking out her tongue, chuckling.

2. Smiling. Confident.

3. Widening smile: "So what do you think of that" ?

4. E makes a "scary face" and then chuckles. E's smile fades a little as H goes round to the back. She seems slightly lost. She smiles on regaining eye contact and appears reassured by H's presence.

5. Smiling at first with a confident look, but there is a sense of increasing tiredness.

6. Smiling, enigmatic expression. This is interrupted fleetingly by a more serious expression as H attempts to prise open E's arms. Then comes a smile and an expression of challenge. E understands the game. A self-satisfied look appears as H gives up, and E readjusts her position. The look seems to say, "Well, what are you going to do next" ? Again a sense of challenge and dare.

7. Watching, enigmatic expression. Sense of being in control. E smiles as she grabs at H. Slight flinch when H's arm comes too close. She looks relaxed as she sits back. She continues to smile in the second

struggle, but the smile diminishes and a tired look appears. As H gives up the struggle, E looks tired but happy.

8. Tired, but relaxed and smiling. At ease.

9. A quite "cold blooded" look as E becomes involved in pushing H off her seat. As she looks at H's face, the look becomes more light-hearted, a smile develops and almost becomes laughing.

10. Relaxed. Smiling when in direct contact with H. At other times, E seems somewhat thoughtful, off in her own thoughts.

11. Serious at first, but a smile develops. Then tiredness reappears.

12. Smiling as H and E shake hands. E's face becomes more thoughtful. E smiles when talking to H, but at other moments, though the smile remains, she seems to be off in her own thoughts again.

3. INTERACTION

Significant Moment 1

1. H is the main initiator throughout. She mirrors E's tiredness. E responds by indulging in her tiredness. In between, she watches H to see what H will do next.

Synchrony (heads coming up).

Synchrony (palms come up to meet).

2. Synchrony.

Eye Contact.

E initiates in pushing further and in exaggerating facial gesture.

Eye contact and hands raised indicates readiness to move again.

Synchrony (responds in kind to H's leaning forward).

Appropriate eye focus (on hands, then H).

E initiates facial gesture.

3. Synchrony throughout.

Eye contact on coming up to the vertical but otherwise the eyes are slightly closed, with no definite focus.

4. H initiates throughout. E watches and responds, but mainly through facial expression.

5. E responds to H's pushing. Then returns to facial gesture. E initiates end of moment by leaning back.

Significant Moment 2

1. H initiates finger play. E responds and initiates battle to catch H's hand. Frenetic quality comes from H's energy, rather than E's.

H initiates the next two reaches, and E responds but does not follow through.

2. E indicates tiredness (initiation).

Immediate response to H's pressing down movement. She does not look at H, but seems to be waiting for the next stroke (attunement to the interactive process).

Synchrony in sitting up.

Eye contact.

Again, immediate response to final stroking by H and synchrony in sinking down and in rising.

E initiates laughter.

Significant Moment 3

1. What started as H's initiation is taken over by E who controls the whole section. H's resistance is useless. E watches H the whole time.

2. E initiates diagonal pulling and seems to control throughout.

E watches H's body move, like a puppeteer pulling the strings. (Contrast earlier moments where H initiated and E merely responded.) H allows herself to be manipulated.

3. H initiates pull, E responds, then E initiates and H responds. H seems to initiate the releases.

E initiates facial gesture. H responds by slumping over.

4. H initiates pulling. E responds with slight pull and adds facial gesture. She initiates and controls the pulling around behind her.

Eye contact during the pulling. Eyes unfocussed as H moves behind, then eye contact re-established as H comes to the side. No eye contact or response to H's pulling when H returns to the other side.

5. E is still in control of H's movement. It is unclear who initiates the pulling. Eye contact ?

Synchrony as H and E drop arms gently. Eye contact.

6. H initiates approach (tense, slightly threatening) and E responds by resisting. During this, E is very much in control. Again a sense that H is the puppet and E pulls the strings, this time simply by resisting all of H's endeavours to open her up.

She watches H constantly.

7. H initiates (offers elbows). E watches.
E takes over by grabbing. She initiates the ending as well.

E responds to the second offer by H and picks up other cues and responds (for example, when H lifts one elbow for her to grab).

H initiates the ending of the vigorous section as she anticipates diminishing energy in E.

E initiates gesture.

Eye contact.

8. E spontaneously expresses her tiredness. H mirrors.

E maintains eye contact.

H initiates change of chair position.

9. Eye contact.

E then looks at arm and initiates pushing. She maintains this to the limit of her energy which H anticipates, pulling herself back up to sitting. (Again H gives in.)

Direct eye contact as H does this.

10. This section is made up of gestures affirming friendship, taking hands in various ways, smiles, touch and so on. Most of these are initiated by H, but are readily responded to by E. Note that it is E who initiates by linking arms early in this section. In between these moments of direct involvement are moments which are more reflective when E appears to be with her own thoughts. There is however, a continual return to relationship, a kind of touching base. Flow of togetherness and apartness.

11. Synchrony in moving together.

H and E watch their hands move.

Synchrony in hands dropping behind each other's backs.

12. Again flow between togetherness (gestures of friendship) and being with own thoughts.

5. MUSIC

The music therapist gave an analysis of each of the significant moments in terms of (a) the music elements and (b) the affective qualities related to these elements.

Significant Moment 1

MUSIC ELEMENTS

Melody: Smooth, flowing, climbing by step towards resolution.

Harmony: Tenuto. Consonance with a slow harmonic rate.

Rhythm: Steady, slow.

Beat: Regular.

Time: Common time. 4/4.

Tempo: Medium. Gradually becoming slower.

Mood: Warm, cohesive, secure.

Texture: Orchestral texture, ground bass (sustained left hand chords). Middle range.

Volume: Moderately loud.

Key: Major key.

Form: Redundancy.

AFFECTIVE QUALITIES

Warmth.

Resolution, reduction of tensions.

Security, grounded, stabilizing.

Reposeful, affable.

Reciprocity: co-operation, enjoyment, eye contact.

Unity, closeness.

Significant Moment 2

The music in this significant moment falls into two sections and is analysed accordingly:

MUSIC ELEMENTS

	<u>Section 1</u>	<u>Section 2</u>
<u>Melody:</u>	Complex, repetitive, chromatic pattern. Small, agitated steps. Rapid changes in pitch.	Lyrical, flowing.
<u>Harmony:</u>	Consonant, slow harmonic rate.	Slow harmonic rate.
<u>Rhythm:</u>	Fast triplet rhythm. Complex.	Relatively simple.
<u>Beat:</u>	Definite.	Slower.
<u>Time:</u>	2/4.	2/4.
<u>Tempo:</u>	Very fast.	Slower.

<u>Mood</u> :	Agitated, restless.	Reduction of energy.
<u>Texture</u> :	Full.	Full.
<u>Volume</u> :	Loud.	Moderate.
<u>Key</u> :	Major key.	Major key.

AFFECTIVE QUALITIES

High energy, conflict. Tension, frenzy. Annoying, irritating. Challenging, playfulness, fun, provocative.	Resolution. Reduction in energy. Friendly, relaxed, reposeful. Sigh: need for relaxation, closeness.
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Significant Moment 3

MUSIC ELEMENTS

This also falls into two sections.

	<u>Section 1</u>	<u>Section 2</u>
<u>Melody</u> :	Rising smoothly by step. Russian style.	Flowing, reflective.
<u>Harmony</u> :	Sustained 4th. Sustained bass and constant pattern.	Regular harmonic rate.
<u>Rhythm</u> :	Dotted rhythmic pattern, sustained and repetitive.	Simple.

<u>Beat</u> :	Strong.	Regular.
<u>Time</u> :	4/4	4/4
<u>Tempo</u> :	Moderate.	Moderate.
<u>Mood</u> :	Struggle.	Resolution.
<u>Texture</u> :	Full, orchestral.	Full.
<u>Volume</u> :	Loud.	Moderate.
<u>Key</u> :	Minor.	Major.
<u>Form</u> :	Redundancy.	Ternary form. A,B,A,B melodic sequence.

AFFECTIVE QUALITIES

Struggle, tension, taunting.
 Definite, stress, challenge.
 Fight-flight concept.
 Moving against, away, with.
 Finding strength, each person
 testing limits.

Warm, reflective,
 resolving,
 comforting, solace.
 Decrease in tension.
 Decrease in energy.
 Sedative qualities.
 Conjoining, friends.
 Mutual affirmation.
 Sharing, enjoyment
 of being with each
 other.

APPENDIX 3

TRANSCRIPTS OF VIDEO VIEWING SESSIONS

The viewing of videos of each of the sessions was videotaped, though the researcher/therapist also took notes. The record of patient and researcher/therapist conversations was mainly transcribed from video, but in one section on session 2, the videorecorder did not record and the researcher's notes were used instead.

The transcripts were divided into blocks which defined particular "flows" of conversation, in order to show who initiated the conversation and indicate responses and counter-responses, in contrast to a new initiation. The breaks signify reasonably lengthy pauses, where one might assume the following words would be the start of a new line of thought, a new initiation, rather than a continuation of the previous conversation. However, in the case of a person with dementia, such an assumption may not always be valid since there may be a delayed response due to difficulties in processing and formulating a reply.

The researcher/therapist has tried to indicate, particularly for session 1, in what part of the dance session, the viewing response occurred. (The dance session fell loosely into sections and these have been noted in terms of segment 1, 2, and so on). It was not always possible to link the comment exactly to a particular moment in the session.

The numbers in parentheses indicate meaning units. The next number is noted when a new thought is introduced.

Session 1

SEGMENT 1

When E sees herself appear on video, she leans forward in her chair.

E: (1) That's wonderful.

H: See yourself on video.

E: Oh, (2) that's not me...(she laughs)...(3) I'm not as good looking as that.

H: There you are. You surprised yourself.

E looks intently during the warm up.

E: (4) It'd be fun to be on like that and show your daughters.

H says she will show it to her daughters some time. Shortly after E says, "oh yes", but is not greatly responsive.

H: You've got a very fierce look, E. (E asks H to repeat, which she does.)

E: (Chuckles.) (5) Yes, and wrinkly.

E comments on the movement with the hands, but her words are unclear on video. She continues to look intently.

E: (6) The clever things they do today.

H: That's you doing all that.

E: (Laughs)...(unclear)...(7) I'm not doing it, all these things on television shows. (8) I'll have to give you a whacking tonight. (E looks at H.)

H: Why? What have I done?

E: (Smiling.) For telling fibs.

H: What fib did I tell?

E: (Laughing.) Saying I did this and I did that.

H: Well, there it is on the television.

H and E both laugh when E pushes H.

H: You're pushing me away there. (H mimes push.) You're a pretty wild woman.

E: (Laughing.) Yes. A smile remains on her face as she watches intently.

E: (9) This is magic what they do today.

H: Having a video, a picture of yourself ? (H looks at E who nods and says "yes".)

H: You look a bit tired there. Were you very tired ?

E: (Chuckles and looks at H.) (10) Yes. I'd...(unclear)...it up and snore.

E: She's tired.

H: Yes.

H and E both chuckle slightly as they watch the part of the session where H and E lean towards each other. Just before the bulging eyes, E chuckles.

H: (Laughs.) There are those eyes again.

E looks over at H, smiles and nods. E continues to smile and watch.

H: Was I working you too hard ?

E: Uh. (Slight nod.)

H is unsure if E understood. E looks intently at the screen and becomes more serious. This is during a slow, heavy, low energy section (not a significant moment).

E: (11) Gosh, she needs a sleep. (Chuckles and looks at H.) Beware I don't go to sleep. (H asks her to repeat, which she does. She chuckles. Shortly after, she yawns.)

H: You look very tired there.

E: Yes, she does. (E laughs.) I'll snore when I go, tell you I'm sleepy.

H: (12) I think you've had enough then. Do you think so ?

E: Yes.

H: A bit tired there.

E: (Nods and looks at H.) She looks it. She laughs several times during the next lively section, the battle part of significant moment 2.

E: (Chuckles.) That's enough. (significant moment 2, where H and E rest on each other.)

H: Watch this bit.

Shortly after:

E: Yes, that's the end. (13) That's fantastic. (Looks at H. Chuckles.)

H: Both worn ourselves out.

E: (14) Yes.

SEGMENT 2 (BREATHING SECTION)

H: Just some breathing.

E: She can hardly keep her eyes open. (Laughs.) (15) He's trying to put her hands where he wants them and they fall.

E watches intently. Laughs again.

E and H laugh simultaneously and look at each other.

E: (Laughs.) (16) That's enough, she says.

H: Had it.

E: That's enough. (E laughs and looks at H, then leans towards her again.)

SEGMENT 3

Near the beginning, E gives a chuckle. She watches intently. A smile appears simultaneously on E's and H's faces. E has a bright look on her face. H notices the smile.

H: What do you think of that ?

E: (Laughs.) (17) She'll fall off her seat if she doesn't stop soon.

H: I think you might be pulling me off my seat ... whoops. (Eye contact and smile.)

H: What are you doing there? (No response from E.)
What is she doing there ? (This is when E on screen is sitting arms tightly folded, resisting H.)

E: (18) She's strong isn't she ? (E shifts in her seat.)

H: She is pretty strong.
E is smiling.

E: (19) She's getting the better of him. (This is not totally clear.)

E: (20) She's strong.

E: (Laughs.) Ooh.

H: What are you doing there. (H repeats. This is the segment where E is resisting H's efforts to open her up.)

E shifts in chair. Some time after:

E: (21) I think she's trying to pull him off the chair. Shortly after, E in fact does so on the video. E gives a hearty laugh and leans forward in her chair.

E: Good on you mate. (Laughing.) The boy wouldn't be able to believe he was beaten like that.

H: Right.

H and E speak simultaneously:

E: (22) She's tired.

H: Maybe he thought this was just a weak woman...

E: Yes.

H: ...and then found out she was really strong.

E: That's right.

E laughs a lot though this section where she is pushing H with her elbow.

E: (23) The boy will be disgusted with himself.

H: Disgusted with himself.

E: Yes.

H: Why do you think, why do you think he'll be disgusted with himself ?

E laughs, seemingly in response to the video. Her reply is unclear.

E: (Smiles.) (24) He'll get a shock in a minute.

E looks intent in this "Let's be friends" segment, then a semi-smile appears.

H: What are they doing there ?

(No answer.)

E smiles in the last part as H and E are sitting quietly side by side. H and E smile together.

H: That's a good ending. E and H look at each other. E nods and smiles.

H: That's clapping the pianist.

E laughs as H fast forwards to segment 4.

SEGMENT 4 (Quiet swaying to music.)

H: Ian's just playing some quiet music.

E: Mmm.

H: Looks tired again. How does she look ?

E: Eh ?

H repeats.

E: (25) Good. (E's face looks serene and smiles.)

E still looks intently at the screen.

H: Can you hear the music playing ? (E asks H to repeat, which she does.)

E: Yes.

As E (on video) gets up to dance, E chuckles.

H: I didn't think she was going to get up.

E: (26) I was waiting to see her put him right out.
There are further smiles and chuckles in this section.

E: Make him sit on the chair. (Begins to smile.)

H: Sorry ?

E: I said to her, make him sit on the chair.
(Chuckles.)

H: Why should he sit down on the chair ? (H repeats.)

E: Finish him off.

H and E laugh together.

H: Looking very tired now, do you think ? (H repeats.)

E: (27) Oh yes...oh yes, I would think about dropping.

E begins chuckling again.

E: (28) There you... she's going to push him down.

E looks intent, smiling.

As the dance comes to an end:

E: (29) That's very good. (30) Bet she'd be tired when she'd finished. (Smiles and claps.)

At the end of the video:

H: And that's it. Do you know who that is on the screen.

E: (Leans forward.) Oh yes.

H: Who is it...it's you.

E: (31) No, it's not (incredulously).

H: It is.

E: Oh, it is not.

H: And that's me.

E: (Sits forward.) (32) I don't think I'd last as long as long as she did.

H: Well you surprised yourself, you see. See how much strength and stamina you have. You really worked hard today, this morning you worked very hard.

E: Oh yes...(unclear)...I couldn't last like that.

H: But you did.

H: (As the tape rewinds.) Well, so that's the tape of what we did this morning.

E: (33) It wasn't me.

H: It was.

E: Oh you...(She playfully pushes H away and laughs.)

H: All our dance, all our session.

E: No...(unclear)...(34) I'd like to have done that work but (35) it's just not me on there.

H: Not you on there, no ? So you don't think you could be as strong as that or last as long ?

E: (36) No I don't think so.

H: (Brings rewound tape to E.) Well E, so there was a very strong person in here, on this tape.

E: (37) Yes.

H: Someone with a good sense of humour.

E: I believe that, though hadn't really thought that was me. (Laughs.) (38) Would be good fun for my daughters to see me like that.

H says they will be able to see the video with her.

E: Would be nice. (39) It's marvellous what they do today.

(40) On the way back to the ward, E comments on how nice it was to have found a friend like H.

Session 2

The viewing of the early parts of this session was not videotaped. The researcher/therapist therefore used notes taken during the conversation.

(FROM NOTES):

E: (1) Is that you ?

H: Yes.

H: How are you feeling there ?

E: (2) Not nice.

(3) E asks who it is. H says it is E.

E: (4) She looks like my grandmother. Anyone tell me it's me, I'd say you're mad.

H: There's a bit of a smile.

E: (5) I (or she ?) was watching you.

E: (6) I look a dumb thing. I don't dance.

H asks if she didn't feel like doing anything.

E: ...? (7) That's clear.

E: (8) If you said that was me, I'd laugh.

E laughs when she and H tie their hands in knots.

E: (9) I wonder how they think of doing such things.

E: (10) I felt like tears.

(11) E then proceeded to talk of her little girls - her daughters are in fact in their 40s - about seeing them last at primary school. Then men came and married them. It was not right to do that. She also spoke about seeing them in the hospital but was unable to get to them. She said someone had told her their ages - they were older now - but she could not remember. (When H had seen E the previous week on the ward, E had been very unhappy as she said she had been told that her daughter was 40, when she thought she was a little girl.)

E: (12) It's a wonder I don't dive over and grab her hands. (This was when H and E were both sitting with hands in their laps.)

E: (13) I expect her to jump forward any minute.
When H asks her whom she means, E replies "me".

(FROM VIDEO):

During the breathing section, E looks fairly serious, but chuckles a couple of times. She is leaning slightly forward and towards H. As H and E start swinging arms to music in Segment 3, E laughs and leans over.

E: (14) Like schoolkids.

H: Skipping along to school. (E asks H to repeat.)

E: (Smiles and nods.) Yes.

E's face now looks brighter and continues to do so.

E: (15) You're strong.

H: Sorry ?

E: You're very strong.

H: You're pretty strong, too.

No particular response to this.

H: I think we both like a bit of...(H does strong gestures up and down.)

E: (Laughs.) Yes.

E: (16) What do you call it ? (Looks at H.)

H asks her to repeat, which she does.

H: What do you think we could call it ?

E: I don't know.

H and E both laugh at the strong movements.

H: Bit of a tug of war.

E: (Chuckles and nods.) (17) Strength.

E looks intently at the screen with a smile on her face.

H: You're smiling there.

E: (18) Yes, that's good.

H: You must be feeling a bit better. Do you think you were feeling better there than at the beginning.

E: (Looks at H and nods.) (19) Oh yes.

(20) E talks of a man who saw her home last night, her cousin but she appears a bit confused as she searches for the identity of the man. She says he is strong. He always wants her to go to the football. She doesn't want to, is not keen on football. Later she talks again of this man and how she is not keen on football. She continues to watch the screen.

H and E laugh together.

E: (21) She'll want to get under a rug tonight...(E laughs)...and sleep in...(unclear).

H: Sleep in?

E: That's right, she'll be tired.

E's face looks more serious.

When E does a hand gesture (in the dance therapy session), H and E both laugh.

H: What does that mean ?

No answer.

H: Very nonchalant.

E nods, laughs. E becomes more serious. She yawns.

H chuckles and looks over at E who is watching the screen. E gives a small chuckle.

E: (22) Who's the boy ? Is that a brother?

H: That's me.

E laughs and rocks forward. H shows her t-shirt.

E: (23) I just forgot for the moment...(24) silly ass.

H: You're sitting very straight there.

E: (Nods.) Yes.

E: (Laughs.) (25) I completely forgot it was him.

H: Completely forgot ?

E: ...that was the boy. I was thinking it was an advertisement. (Laughs.)

H: Oh, right.

E yawns again.

H smiles and looks over at E who looks and also smiles.

H: What am I doing there ?

E: ...(unclear)

E: (Laughs.) (26) She looks as if she's putting that to her nose. (E puts her thumb to her nose.)

Some yawning follows.

H, smiling, looks over at E, who begins to smile, her eyes still on the screen.

E: (Laughs.) (27) Tickling him under the arms.

E's face looks bright.

E: (28) What does your Mum think of it ?

H: She hasn't seen it yet.

At the end of the tape, E claps.

H: That's the end of it today. That was a long...

E: Yes.

H: What did you think about that ?

E: (29) I think it's very well done. (30) But I'm just thinking what did you get me for to do it. (Laughs.)

H: I think you do wonderfully well. You seemed a bit...not very happy to start with.

E: (31) That's right. (32) I thought oh, what a funny thing to have on the screen. (Laughs.)

H: Yes, but you look better there, look better now. You're more relaxed.

E: (33) Yes.

GENERAL COMMENT (SESSION 2)

Overall, while E did look and focus on the screen, she appeared more tired. The first part of the video, where there was little or no movement, seemed to elicit negative comments and take E back into the rather hunted, paranoid thoughts she had demonstrated both on that session day and in the previous week's group session.

In the latter half of the video, there were more positive facial and verbal responses. But overall, it was much more low key than the previous week's viewing.

Session 3

BEFORE THE VIDEOTAPE OF THE DANCE SESSION WAS PUT ON:

E: (1) In the daytime, I've been asking myself, am I doing all this or am I dreaming. I couldn't believe I was awake. It was all what I was...you know... what I had to do when I came back from the other state. I was in a maze. I thought to myself, heavens I'm dreaming and in the day it's the same. I'd see all this thing about what I've been doing.

H: What sort of thing did you see.

E: Just the normal things...(E searches for words)...you know, just schoolwork and I couldn't believe...wake up...see if I'm wide awake. Now this. I might be dreaming again.

While H readjusts the camera:

E: (2) Give them all a shock. (Laughs.)

E looks full of anticipation. As H puts on the video:

H: Let's put on the film and see ourselves.

E: (Starts to laugh.) (3) Is that me ? (Laughs again and leans forward.) Someone showed me a picture the other day and I...what are they talking about. I said, who's that. They said, you. (Laughs.)

H: Is that all right. You can hear the music ?

E: Yes, good.

E: (Laughs out loud.) (4) I look funny.

E laughs again. Her face is open and smiling, her gaze intent and her posture very alert.

E laughs. When H gets up to check the camera, E's concentration hardly falters. She smiles as she watches.

H looks across at E, who laughs as she watches the video.

H: What are you doing there to me ?

H looks across at E and, almost simultaneously, E speaks.

E: (Smiles.) (5) You're good.

Shortly after, both laugh. There is a mutual turning towards each other.

H: You're pulling me and pushing me.

E's face is broadly smiling.

E: (6) I hope my brother sees this. (E tends to call her older daughter her brother.)

H: Well, yes, you can show this to your family. Do you think he'd like to see it.

E: What ?

H: Would he, your brother, enjoy seeing this ?

(7) E gets rather confused, and seems to want H to look up her brother's number in the phone book. She gets rather frustrated at not finding her words. She looks more serious.

E: (Still serious.) I've been looking for the children. We brought them up and I thought, I was wondering if you could get the number to see if he's got them.

E's face begins to brighten.

E: (Laughs.) (8) It's unexpected.

H: What's unexpected ?

E: (Chuckles.) What you're doing.

E: (9) When I came back to...where they play golf (?) upstairs and I won twice, so I was feeling fit.

H: Yes, well you certainly looked fit there too.

E and H laugh together.

H: You've got a lot of energy.

E: (10) I'm glad that I have too, I'm glad I'm strong.

Shortly after, (at the part where H stands behind E and gives her a hug), E laughs.

H: That's a nice bit, isn't it ? (H laughs and looks over at E, who returns her look.)

E: (11) If(?) my children see that, I don't think they'll recognize Mum. (She chuckles and looks at H.)

E: (12) Your hair looks nice. (H doesn't quite hear, and asks her to repeat it which she does.)

E chuckles and H asks if she was feeling the heat. She looks at H, but doesn't speak.

E: (E chuckles and looks at H.) (13) I wouldn't believe it that I was going on television when you first told me.

H: Funny to see yourself on television, isn't it ?

E: (Nods, smiles and looks at H.) Yes. (The smile stays on her face for a while.)

H and E both laugh out loud and look at each other. There are smiles and laughter throughout this section.

H: You've got a wicked sense of humour.

E: (Leans forward.) What ?

H repeats.

E: (Chuckles.) (14) Don't say "wicked"...fun. (She smiles through this.)

E: ...(unclear)...(15) to be nasty to me.

H: I know you can fight me, did you say ? (She repeats it on E's request.) Yes, I would think twice before I tried to fight you.

E gives a start and laughs.

E: (16) Funny the things they put on television, I think...(turns to H)...don't you ?

As H look over at E, E returns the look and smiles.

H: We're not as funny as most things on television.
E laughs.

E: (Laughs.) Oh.

H: Where are you putting me there ?

E continues laughing. H laughs too. Then E concentrates again.

H and E laugh simultaneously and look over at each other.

E: (17) Sly.

H agrees.

E: (18) Good Lord, I can't believe me on television.
E laughs and puts her hand to her forehead.

At the end of Segment 1:

H: What did you think of that bit ? So much energy there.

E looks at H and leans over towards her.

E: Yes.

H: Where did you get it from ?

E: (19) Oh, Dad and Mum were strong. My brother was a strong lad. (20) But I never thought of doing this...(unclear).

H: So your Dad was strong and your Mum ? Were your Mum and Dad strong ?

E: (Looks at H.) (21) Yes, that's what I was saying. All my family was strong and the boys were strong - went to war - and Dad and his people were strong.

E pauses, looks at the screen as H tries to get the video to work. She looks somewhat weary.

E: (22) I've still got Dad, but not Mum....(unclear). (23) I'm still knocked out that I haven't got Mother. I think Mum's dead. (24) I've been away so long. (25) I always think I'm going down to see...(unclear.) (26) My brother said she'd failed, she was failing.

H: We're doing a little bit of breathing here. Your arm's a bit sore, looks a bit sore there.

E laughs.

E: (27) We always played in the open...(searching for words)...what do you call it...wild girls ?

H: Right.

E: Wild children I should say. We always played in the open air, played games in the open air.

H: Free spirits (H repeats when E doesn't hear or appear to understand)...free spirits, wild spirits.

E: (Looks, nods.) Yes. (28) We'd go swimming in the river and that's what we shouldn't. (She laughs and becomes very animated as she tells the story.) (29) When I think of the things we did, I laugh. (30) And Dad came round and I shouldn't have been there. He told us we wasn't to go down you see. (She chuckles here.) (31) The others got off and I was running round with Mum and Dad after me with a stick.

H: I think I can imagine that you would be a little bit mischievous, a bit of a mischievous child, a bit cheeky.

E: (32) I was always doing something I shouldn't. (Laughs.) Climbing trees, always climbing trees, swimming without any clothes on. (H and E laugh together at this.) (33) Dad would tell me, don't you go down to the river today, I'll tell you (E uses an emphatic hand gesture), not to go to the river today or you'll get it. No Dad. (E's body straightens up at this, like a cheeky child.) As soon as he's out of sight, rrrroooo (hand gesture of running) down to the river. (Laughs.) (34) Little devils.

H: Was that in the country ?

E: (Turns to H.) Yes...C...

H: I can see a little bit of that mischievous child still there, that's for sure.

E: (Smiles.) (35) I hope so.

H: It's a good part to keep, isn't it ?

E looks and nods, her face smiling.

E: (36) I was real surprised the girl, when I said I was going home now today, the others were going, I was real surprised the girl said, well, we'll see you after your concert, your dancing. I said, what dancing ? I thought she meant we had to go back there to dance. She said, you'll see it in the paper. (This probably refers to one of the nurses, who commented on E's going to the sessions.)

E looks intently at the video.

H: So you were a bit of a tomboy, were you ?

E nods in agreement.

E: (37) I only thought yesterday I must have grown up with strength. (38) I'd never have thought about this. I'd never thought a word about it since. (39) And I was doing something or other and I said I'm always like this, I've always got dresses on and doing things. And I just thought. Why do I put on dresses like this, put a dress on, but you don't know where to go so you put an old dress on and play around. (Laughs.)

H asks if seeing herself on video makes her remember how strong she is, but E does not seem to connect with that.

E: No, never thought about it.

H struggles with the video remote control and when the picture finally comes on, both H and E laugh.

E: ...(unclear)...(40)...I'm glad I don't get this strap every morning.

H: What were you feeling there, do you know what you were feeling there, when you bent your head down ?

E: No. (A smile appears, then a laugh when she sees herself tickling H.)

E: (41) They won't attack me. (H and E both laugh.) E's face is open in this part. She chuckles as she and H get into a head to head position.

E: (42) I nearly died when the girl said, we'll see you tonight on television. (Chuckles.) I nearly fell over.

H: You were counting there, counting the beat.

E: (Nods and smiles.) (43) Warn anybody not to get near me too quick...hit me. (She leans over to H as she speaks and chuckles.)

There are increasing smiles in this section. H and E both burst out laughing at the video and look at each other. (This is possibly at the part where E shows her fist.)

E: (44) What time is it on ?

H: Oh, I'm not sure.

Both smile at something on the video.

E: (45) I only tickle people under the arm when they're doing that to me. (Laughs and looks at H.)

H: You didn't do it that time to me, but you usually do. (H touches E.)

H: Look at our hands.

A smile gradually comes onto E's face.

E: (46) Oh good, I didn't think I could beat you. (Laughs.)

H: That's a nice smile.

E: (Smiles.) Huh.

At the end of Segment 3, E smiles:

E: (47) I'll go outside and I'll think I'm dreaming this. (She chuckles and looks over at H.)

H: Yes, it's hard to believe all the things that we've done over these last few weeks. It's like we've been on a journey together through all this different movement, all these things we've done. It's like a bit of a dream. (H needs to repeat. E responds with a smile, but it is difficult to know how much she has connected with what H said.)

E: ... (unclear).

(Segment 4:)

H explains that the music therapist played a quiet song, and says she wonders if E will recognise it now. H hums along the first few bars. At the very beginning E seems to be mouthing some words. She looks intently at the screen.

E: (Laughs.) (48) Look out, they're creeping up. (She says this just before she initiates, in the dance, taking hands.) H laughs and touches E's arm. E looks over at her.

E: (Smiles.) (49) You look so innocent.

H: I do ?

H and E look at each other and laugh. E remains smiling then gives a big sigh during the last chords and looks more sombre.

E: (50) Quite funny. Funny face. (She laughs.)
The video is switched off.

E: (51) I think I'm dreaming.

H: (Touches E's hand.) No, you're here. You're awake, believe me.

H: So that was a great session that one, that was a very good session that we had. What did you think of today's video ?

E: (52) I thought that's the end of it...(unclear). I never thought it would end like this.

H: You're a very strong person, aren't you ?

E: (53) Oh yes, thank God.

H: Yes, does that come from your childhood ?

E: (54) Yes. I was always tough. (E leans forward.)
(55) "Put that down, it's too heavy for you, put that down, you'll hurt yourself." Then I'd go behind their back and do what I want. (Chuckling.) (56) Wretch.

H: That's right.

E: (57) Oh well, I hope I don't fail you.

H: Oh no, you certainly haven't done that. (H and E smile together.)

H explains that the next session will be the last and that she will miss the individual sessions with E. She will however still see E in the groups. E seems to get a bit confused during the discussion.

E: (58) I would be sorry if you wiped me off the map. H reassures that this will not happen and that she will still see E on the ward.

E: (59) You tell me what to do every time. I'm a dumb cluck. I forget things.

H says she will arrange a video viewing with E's daughter.

E: (60) That'll be nice.

H again reassures that E will not be "wiped off the map".

E: (...unclear)...(61) so that I won't forget...dull people.

H asks if E has enjoyed the sessions.

E: (62) Oh yes. (63) You just tell me at the time because I'm such a dashed dull person. I always forget.

H: Have you enjoyed dancing with me ?

E: (Smiling.) (64) Yes, loved it. (65) I never got over you calling me to do it. I thought how did you pick me up, (chuckles), what did you see in me.

H: Saw your talent ! (H and E laugh together.)

When H talks of showing the "movie of E and H" to E's daughters, E laughs.

E: (66) I never in my life thought, I never thought I'd get on the movies.

H: Well, that's about as close as we'll get, the two of us.

E: (67) I thought it was all dead and gone, to be going on the movies, when I'd got word to go up to see you...I thought it was all over...shock.

GENERAL COMMENT (SESSION 3)

This was a very alive viewing session with much synchrony of response (smiling, laughter, eye contact) between H and E, both of whom seemed to be reliving the event in the viewing of it.

The researcher/therapist was also struck by the three-dimensionality of E's movement in the reminiscence segment ("the river story"). Her body and face assumed different characters - censuring father, naughty child - and she acted out the different actions of running and so forth. This seemed very much a lived reminiscence rather than a purely cerebral event.

Session 4

E: (1) That's not you there, is it ?

H: Yes.

E laughs. Her face continues to look fairly bright and alert.

E: (2) She's got my jumper on...(Chuckles and looks at H.)...and my skirt. (Chuckles again, looks again at H.)

H: Who do you think it is ?

Pause.

E: That's not me. (Chuckles and looks at H.)

H: Yes.

E: I thought it was the girl you spoke of just a while ago.

H: No, that's you.

E: Oh heavens. (Chuckles.)

H: Your shoulder was hurting there a bit. (H repeats, as E does not hear.)

E: Yes.

E: (3) That's very clear isn't it ?

She looks rather serious and at one point sighs and looks over at the camera.

E: (4) I hope my brother doesn't come in the meantime. (E had mentioned this on the ward and on the way over. She was anxious not to miss him, "him" probably meaning her daughter.)

H reassures E that the nurses would call her if a visitor arrived.

E: (5) I don't know why he hasn't been. (6) He always comes rushing in.

H again reassures her. E continues to look sombre for a while then a smile appears.

E: (7) You look good. (A small chuckle. Her face becomes less serious. Later, there is another chuckle.)

E: That's good of you. (Smiling.)

H: Look at our hands.

E: Mmm ?

H: Look at us struggling with our hands.

E: Oh.

She chuckles, but there is no real reaction. She fiddles with her jumper and her face becomes more serious.

E: (Makes a face and laughs.) Ooh.

H: Gotcha.

H and E smile together. E has a smile on her face for a while but slowly becomes more sombre again. She touches her eyelid.

H and E laugh together. E leans a little towards H, but keeps her eyes on the screen.

H: Look at the strength in our hands.

E looks at H briefly and nods. She touches her face again.

E chuckles.

E: ... (unclear). E's hands are on her face.

H: You like that bit ?

E: (Nods.) (8) Yes.

E: (Chuckles.) You could have that now for Christmas cards.

H asks her to repeat.

H: The picture ?

E: Mmm. (Nods and looks at H.)

E: Good.

Not long after:

H: You're holding onto me there.

E: Yes.

As H looks over at E, E laughs at the video.

E: (Laughs.) ... (unclear) ... Funny face.

H: You're grabbing me again. (H has to repeat.)

E: Mmm. (This seems to be merely a polite response.)

H: Shaking me up.

E chuckles.

E chuckles again.

H: You're not letting go of my hand. Can't shake you loose.

E smiles and looks at H.

H and E both chuckle together.

E laughs again.

H: What are you trying to do to me there ? (H has to repeat.)

E: (Looks at H.) (9) I don't know...catch hold of his head, make him let go.

E: (10) "He", I said, it's "she" isn't it ? (She laughs.)

H: That's right.

H and E laugh at the same time. H looks at E but E keeps her eyes on the screen.

H: Dropping my head.

E's face seems brighter in the latter part of the session.

E: (11) Good picture of you. (H looks at E, E returns the look.)

H: You too. You look lovely.

E's face becomes more serious, slight fidgeting. She sighs. Shortly after:

E: (12) Let's hope my brother doesn't come while I'm here.

H reassures that someone will ring if he comes.

E: Here ?

H: Yes.

E: (13) He's been such a comfort to me this last year. He came and picked me up and taken me round, you know. (14) I get nervy like this, you know. I don't know what to do.

H reassures again. E's face is sombre, her hands fiddling again.

H and E both laugh.

H: Tickling again.

E: Mmm ?

H: Tickling again. You always like to tickle.

E: (15) Oh yes (chuckling), it's a good spot to loosen up.

E's face appears a little brighter.

E: (16) Very alive, isn't it

H: Yes, it is. You've got such a big grin on your face. H and E look at each other.

E: (17) We were always like that, all our children, full of fun, doing things to make you laugh. (Her face is still smiling, but then becomes more sombre. Her hands fidget.)

E's face begins to brighten again. She laughs.

H: What was that look ?

E returns H's look. She chuckles as the segment ends.

E: (18) Gosh, it's so like me.

H: Well, it is.

H and E look at each other. E chuckles, touches her eyelid again.

H: There were some good bits in that.

E: (19) Oh, it was good bits, yes. (Her face becomes sombre again. She sighs.)

H: Do you enjoy Ian's music ?

E: (20) Oh yes. I love music.

H: Ian plays very well, doesn't he ?

E: Beautiful.

During Segment 2:

E: (21) Oh, look at the grin on my face. (Laughs.)

E rubs her eye again.

E: (Chuckles.) (22) I don't believe I'm on the film. There is a long pause before the next comment. E's facial expression fluctuates between a faint smile and a rather sombre look.

During the early part of segment 3:

E chuckles again.

H: Look at that grip.

E nods and chuckles. Her face is reasonably bright. Her left hand is on her jumper again.

H: I think - oo, ouch, your finger - I think you said it was a bit like a snake. (H demonstrates.)

E: (Looks, smiles.) Yes. (Her face is bright. Small chuckle.)

E's hands start moving again and she looks over at the camera a couple of times. There is a slight smile, but her face is fairly neutral. As the "Side by Side" music comes on, she touches her face again. She smiles as H looks over. Then her face becomes a little brighter and she smiles, as she sings "Side by Side". She and H look at each other. Her hand comes to her face again, with a slight glance towards the camera.

H queries something happening on video, but there is not much response from E.

E and H both laugh.

E: ...(unclear)...tickle under there. (She puts her hand under H's arm.)

E fiddles with her jumper. Another chuckle.

E: (Chuckles.) (23) I'll be jumping off the stool.
E's face becomes more sombre towards the end of the song. There is no terminating response. Some more glances towards the camera. Her hands again fiddle with her cardigan.

During the gavotte:

E: (24) Who's the boy ? (E looks at H.)

H: It's me.

E: (Smiles.) Is it ? Oh, I forgot. (Chuckles.) I just thought that you were...

H: Got me worried there.

E: (25) Silly. (26) Just for the moment I was looking at his head going round and round...oh, I forgot.

H: I maybe need to grow my hair.

E: (Smiles.) (27) Your hair is always lovely. (Her face is smiling slightly.)

E: (28) Thank you for bringing me (E's emphasis) out of my shell. (She looks across at H.)

H: It didn't take very much to bring you out. You just...

E: Mmm ?

H: It didn't take much to bring you out of your shell. You seemed ready to leap out...with a bit of encouragement.

E smiles, laughs during this. She is still fiddling with her cardigan.

E: ...(unclear)...(29) haven't been up to anything at all now. We used to play lots of things and do lots of things but I don't now. (She chuckles.) (30) So that's brought me out of my cupboard. (She laughs.)

As the gavotte reprises:

E chuckles slightly.

H: Yes there are lots of things have come out in this dance, haven't they ?

E: (Looks across at H and nods.) (31)
Yes...marvellous.

H: Your sense of humour. (E looks and nods.) and your strength. (E nods and adjusts her jumper.)

E: (32) Yes, everything. (33) It's brought back things from long ago to me.

H: Yes.

E: (34) When we were kids, we used to go and do all sorts of things at home. (She chuckles.)

H: Are there some things you thought you'd lost, but they're still there ?

E: (Nods.) (35) Yes, that's right.

H: (36) Yes, well I'm glad you've felt like that.

E: Yes, I'm glad.

H: Looks like you've just been waiting to come out of the closet. (When E asks her to, H repeats this, substituting the word "cupboard".)

There is eye contact and both H and E laugh.

E: (37) Years ago when I was young, we used to have a lot of concerts at home...I gave concerts. I was always doing something like that.

H: Singing and dancing...(E nods and says, yes)...and acting ?

E: (Looks at H.) Not so much acting...sometimes. A lot of dancing, though. (E takes a big breath in, almost a sigh.) The kids would have loved that, you know...(unclear). (She gets a bit of a frog in the throat and has to clear it.) (38) My youngest girl...I forget how old she is now...friend, he's a...oh, my brain's gone to putty...and I got such a shock. I like him very much too, he's a lovely fellow. He's a (E looks round) what do you call it, he's in the postal part of the navy.

H: I don't know all of those names.

E: I forget too, I forget how to explain it. But anyway, my youngest child has gone down there to live and they got engaged, got married. (Chuckles.) She's only young, I forget how old she is. But he's a lovely fellow...(unclear).

H: Oh, that's the one you told me about earlier, yes, yes, I think you did.

E: Oh, did I ?

H: Yes, I think you did, you mentioned him.

H: So there you are.

E: (39) Gosh, I wouldn't know myself. (She chuckles and looks at H.)

H: No...

H asks E what she has thought of the sessions on video.

E: (40) I thought it was good, don't you ? Yes, I do. (41) I think it's wonderful you picked me for it to do it. (H and E laugh.) (42) It's brought the dullness out from me (she uses her hands to demonstrate)...to the brightness.

H: Yes.

E: (43) I was feeling very off for a while. (44) When I heard about...(unclear)...being married to M, I couldn't believe it. He's the loveliest fellow alive. I was in love with him more often than not. He's such a lovely fellow. To think that she's the baby and she'd gone and married him. (E laughs.)

H: It happens too fast, doesn't it, they grow up too fast.

E: Yes, grows fast.

H: I think at the beginning of the dance a few weeks ago, you were quite down, you were quite flat, weren't you ? (E agrees.) You were feeling a bit tired and not very well. You seem to have really bobbed up.

E: (45) Yes, that's right, I've got together again.
(46) I talk about old times with myself now (hands clasped together) and like that. (47) And I think it's brought me out. (She uses a quick hand movement.)
Wake up. (She laughs.)

H: Yes.

E: (48) But I was going to ask you to...when you went home, I was going to ask you, could you try to get me my brother's telephone and see where he was. (49) I'm the biggest dumb thing out. I forget lots of things.

H: Being forgetful doesn't mean you're dumb though.
(H and E laugh together.)

E: (50) The age is coming on all the time. (51) Oh yes, anyway, I'm glad I met you. (E looks at H and chuckles.)

H: I am too.

H reassures E that she will continue to see H, and also talks of viewing the video with her daughter.

H: It's been a real pleasure for me to dance with you.

E: (52) Oh, it's been a pleasure to know you.

H reassures again that they will continue to see each other on the ward.

E: (53) I can't think of people saying look at E on screen.

H: You look terrific.

E: (54) I often get a remark...on how old I am and they say that they can't believe it and they think I look, you know, young. And they won't believe it and somebody else will say it, and I think I must look good. (Chuckles and looks at H.) (55) But eh, I'm glad I am alive. (Chuckles.)

H: Well, that's an achievement, isn't it ?

E: (Nods.) Mmm. (56) There's no good in feeling miserable.

The video stops and the television comes on and interrupts briefly.

H: I'm glad we got together for this.

E: (57) Yes, I am too.

H then tells E what she is going to do for this study.

E: (58) Somebody asked me this morning...I don't know who it was asked me where A was and how ... (unclear)...and I don't know, I can't remember. (59) I've been as dull as a ditch this morning. I'm tired I think. (She touches the side of her face.) (60) My brains not working. (61) I get worried. I shouldn't do this and I shouldn't do that, and I don't know why they picked me and then after, I feel good.

H: Did you feel a bit worried this morning when you came to the dance ?

E: (62) Oh yes. I did, yes. I didn't know I was dancing out the front in the garden for a while...(unclear). I thought, oh I shouldn't go out. (63) But we've always been like that as children together with me, the girls...we've always been dancing or making up concerts, something like that, all the time. (64) But this was beyond me, I thought. (65) I can't believe I'm on the stage.

H and E laugh together.

GENERAL COMMENT (SESSION 4)

Overall, a more sombre occasion. E seemed to be more fidgety and preoccupied with other thoughts. There were long silences between comments, and H had to initiate many of the comments with little or no response often. E seemed, also, less in tune with H (in terms of simultaneous responses). She still watched the video with surprising concentration and did burst out laughing several times. The viewing seemed very much a reflection of the quality of the dance session itself, with moments of response interspersed with lapses into self-absorption.

APPENDIX 4

WORKING NOTES FROM THE DEVIL'S ADVOCATE PROCEDURE

NOTES FROM THE AUDIOTAPE OF THE PROCEDURE

The music therapist takes the role of devil's advocate.

DA: E was tired. Were you pushing her too much ?

HH: This taps right into my guilt. I was assured she was feeling better and that there was no danger to her. I was conscious of the tiredness from the beginning but simply began to move with her, until the tiredness presented itself as the major factor. It needed to be addressed.

DA: Why not just have a chat to bring E out, since she was clearly out of sorts ? What is the rationale for use of the art form ?

HH: The fact of being at one with self, feeling the tiredness, fully living, allows to move on, transformation. Quotes research on depression which supports this.

DA: Quantum leap from comments re rising energy to cognitive improvement. What is the evidence ?

HH: Acknowledges that it could be premature in that part of the conclusions (before the transcript evidence was discussed). However HH does come up with some evidence on the basis of the movement itself:

1. (Possibly ephemeral, can't prove.) HH observes a certain look. For example in segment 3, E seems to be looking inside, remembering, tapping into. Different feel from the withdrawal of a person with dementia. In later transcripts she does in fact refer to memories.

2. Struggle/resistance game. On a physical level HH might appear to be invading, forcing. But in fact E seems to understand the nature of the game and act accordingly. There is good evidence of thinking, judging, perceiving, understanding in the dance

interaction, and some evidence in regard to reminiscence.

DA: You seem to be emphasizing cognitive processes. Was this a goal? I would have thought feelings were more important. Is the therapy effective because of the cognitive elements?

HH: Rejects dualism. Mind and body working together in a holistic way. Let go of will...minded body. Mind - emotions - action all in together. Action and intention are joined. Would not be a dance experience if mind, feeling and energy were not in there. Dance experience means functioning as a totality.

DA: Your study relies on debunking dualism.

HH: Points out even common sense awareness of when someone is functioning in a together way and when not.

DA: Question the personality emerging in its richness, "personality" is rather a large term. Also, was the aesthetic medium catalytic in this?

HH: Eschews causality. Am saying this was E's experience, and from looking at the literature this seems to be a dance experience in quality.

DA: Biased sample in choosing E?

HH: Was not trying to show causal connection. Just one experience, therefore chose the optimal situation.

DA: Making it easier for yourself?

HH: Wanted medium to be right for that person, so optimal experience could be had (access to self or growth). Medium not to be at odds with person to allow potential for transformation.

DA: Re personal power and equal partner. What are you suggesting here?

HH: H had power of the therapist, and the power of knowledge. E did not know what to expect.

Also E looks uncertain at the beginning when we are sorting out the video, and in the early part of the session, she takes her lead from H. Does not initiate. She is not resistant either, tries to do her best. In terms of dance interaction, there was inequality..

This changes as the session progresses. We become equal in knowing and unknowing. While this was not a goal, in retrospect, the researcher/therapist can say that an important goal in therapy is to empower. In arts experience it is obvious when leading and obvious when equal in leading and following.

DA: Connection of the dance process with E's qualities. Evidence of the qualities and how enhanced by the dance.

HH: Dislike this language.

DA: What are the qualities?

HH: Strength, energy. Within the dance experience she is able to live out how she is. Movement observations indicate quality of movement, transcripts indicate these have been her qualities and are valued by her. Her daughter also validates: "that's typically Mum".

DA: But they might have come out without dance. What did dance do to produce this? Other modalities could have produced the same.

HH: Don't like "produce". Body is an essential part of the self and the sense of self. In working with the body, come release, awareness, freedom to express the self unfettered by dementia.

DA: Why not exercises?

HH: I was working for E to do her movement, to move for the sake of moving. Hence the character of the dance movement is non-functional and authentic, coming from the self.

DA: Reminiscence was an outcome. So what? Everybody does it. What's so unique about it in this process?

HH: There are different types of reminiscence, not all are therapy. Character of E's reminiscence: lived reminiscence; life review; is lived in the present (symbolically expressed by E as "struggles in the water"; the particular reminiscences have the quality of being self-defining.

DA: Re "out of my cupboard" "to the brightness". What does she mean and can you then make leap to "restored to herself".

HH: Perhaps need to re-think the latter, and "personality" is perhaps too global. Strength is not total personality. After-thought: I'm not saying these are the sole aspects of her personality, but rather important aspects, and that evidence of the whole personality has to do with unity, lack of fragmentation of the self.

LETTER TO THE DEVIL'S ADVOCATE

(Having had some time for further reflection on the points raised by the devil's advocate, the researcher/therapist noted further thoughts on these issues in the form of a letter.)

Was it only *chance* that had you call on my feelings of guilt. You must know me well. Apart from what this says of my character generally, it also says something about:

1. The research situation, a situation which can have uncomfortable connotations of using other people for one's own ends. This is something I have not quite come to terms with.
2. The relationship at the beginning of the session, where personal ambition fought with caring and nurturing feelings towards the patient.

I'm not going to try to justify my actions, but would like to respond to the next point about why we did not just have a chat. My experience with patients has been that there is rarely the right moment to dance, but I know that if I can simply begin some sort of movement, any movement, to *move* the patient, something is likely

to happen. One can recognise but must not be daunted by the tiredness, depression, apathy. These in fact become the starting points. You must first know where you are before you can leave it.

This indeed reminds me somewhat of Gendlin's focussing. The moving can be a sort of inventory of where one is at (though there is more to it than that; there is also the raising of energy), moving until something emerges as foreground. That then is the focus.

Regarding the quantum leap to cognitive faculties. I want to add something about reminiscence. I agree that the evidence for reminiscence on the basis of observation in segment 3 relies on my intuitive response (which I trust), but in any case evidence of there having been some reminiscence process occurs in the transcripts of E's verbal comments. I agree though it cannot prove that reminiscence occurred actually within the dance session, as I'm suggesting for segment 3.

Regarding cognitive processes. Because I talk of cognitive processes, it does not mean I place more importance on their presence than the simple movement responses. Rather I identify the cognitive in order to show a wholeness of functioning and being. In arguing this with you, I feel even clearer in my view of the dancing body as a minded body, a body where all aspects of the self - thinking, feeling, acting - are united. Also, in the case of dementia, evidence of cognitive processes may signify a change in functioning.

I'm not sure my research does stand or fall on the issue of a rejection of dualism, but do agree that this rejection is at the heart of my view of E's experience and my dance therapy practice. I pointed to common sense, and again say that even staff from a totally

different orientation have noticed changes in E's functioning on video. I think the video and E's comments speak for themselves, regardless of one's philosophical orientation. However, an understanding of the full impact and implication of the experience does rely on a more holistic viewpoint.

I would further argue that there is much in the literature to support my viewpoint. According to Sacks (1991), there is even medical (from neuroanatomy) support for the rejection of dualism.

I need to reject several times the notion of causality. I feel myself wanting to say that yes, it was through a dance therapy process that E came to have her experience, but this is not to deny that other processes (to reveal my bias, I'd say probably other arts processes) could offer a similar experience, but must most heartily deny a scientific type of causality where applying dance therapy produces a certain result. Another dance therapy experience would be different, as would other arts experiences. Sacks (1991) asks "Why does art...sometimes `work', and sometimes not", and quotes E.M. Forster: "The arts are not drugs. They are not guaranteed to act when taken. Something as mysterious and capricious as the creative impulse has to be released before they can act" (p.283).

Regarding "personality" - this may indeed appear too global. I am not suggesting that E's personality consists solely in those aspects I have highlighted such as strength. I suggest these are key aspects of her personality, as revealed in how she moved at the time, and in her later comments. But when I talk of her personality in all its richness, I'm referring to a unity, a feeling of wholeness of personality, rather than fragmentation, a sense that all the bits are working together.

When you ask about other modalities "producing" the same results, it helps me clarify the particular "gift" of dance therapy, namely that it works with the body, and by the body is implied the self embodied. Merleau-Ponty has written that so long as someone has a body there is accessibility to the world. Further, is the differentiation from exercises. Dance therapy involves non-functional and authentic movement (though this is not to deny there are moments when a dance therapist may use exercises).

Reminiscence. I'm glad you brought that up because I see I have really sold it short in my "conclusions" section. Reminiscence is ubiquitous and is heir to many claims as a therapeutic tool. I have argued in a paper that the understanding of and talking about reminiscence is woolly, that there are several different types of reminiscence and not all of them relate to a therapeutic modality. Some reminiscence is, simply, "therapeutic", in the popular sense of making you feel good. Your comments therefore have made me think of the quality of E's reminiscence.

What have I gained from this devil's advocate procedure:

1. I noticed a progression during the procedure, in that at first, I seemed merely to be defending myself, whereas later, it merely became a starting point to argue with myself and to clarify various points.
2. It has made me realize that the section offered to the devil's advocate was unnecessary, being a mix of re-statement of findings and some statements more fitting for a final conclusion after the hermeneutic analysis. I decided to scrap this completely.

3. It has made me verbalise much of my dance therapy practice generally and in this research study in particular.

4. In supporting a non-dualistic viewpoint, it has clarified my position.

5. It has made me look again at the bases for making various conclusions and statements, and be careful not to make quantum leaps.

APPENDIX 5 SUPPLEMENTLY MATERIAL; VIDEOTAPE OF THE THREE
SIGNIFICANT MOMENTS OF DANCE SESSION 1

The video has not been included with either the online version
or print version. It is unavailable for general viewing.