



Research Article

The effect of the practice of Authentic Movement on the emotional state

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ABSTRACT

Authentic Movement (AM) is a discipline from Dance Movement Therapy in which a person moves with their eyes closed following their own momentum in the presence of a witness. By means of incidental non-probabilistic sampling 57 individuals (44 women and 13 men) were included in the study. An experimental design with pre- and post-test measurements was used. The effect on the mover's emotional state was explored after using AM in the presence of a witness. The results show a decrease in self-reported subjective experience of anxiety and happiness, and an increase in melancholy and anger occurs. This suggests that this practice would provoke the awareness of emotions that were being inhibited. The positive affective trait shapes the effect of AM on one's emotional state, resulting in an increase of the trait which is opposite to their own affective trait. This indicates that the person practising the role of the mover in AM comes into contact with repressed emotional content and faces emotions previously avoided.

Introduction

Embodiment, emotion in the body

From the philosophical concept of dualism, Descartes (1596–1650) understands that man consists of two substances of different and unrelated natures: the body (material) and the mind or soul (non-material), where the I-subject is found. This separation implies that the body becomes an object available for the I-subject and forms the ontological problem of duality: how the body and mind are united. Descartes also understood human beings as a machine acting automatically (automated man), who could also move in a way that was not explained mechanically, by an act of will (García, 2005; Muñoz, 2010; Novoa Gómez, 2002).

In contrast to the Cartesian conception of the body as an object, the philosopher Merleau-Ponty (1908–1961) proposes a new way of understanding the body known as Embodiment, according to which psychological processes are based on bodily states. From this perspective, the mind does not direct the body but is rooted within it and in the context where action is developed (Garavito, 2013; Michalak et al., 2009).

According to the theory of Embodiment, perceiving, recognizing and interpreting an emotion in ourselves or in others requires information from bodily systems. In this way “experiencing emotional states affects somatovisceral and motoric systems” and vice versa. In other words, “bodily states have effects on how emotional information is processed” (Michalak et al., 2009, p.580).

There is extensive literature linking the body, posture and movement to states of emotion and affection (e.g. Niedenthal, Barsalou, Ric & Krauth-Gruber, 2005; Price, Peterson & Harmon-Jones, 2012; Winkelman, Niedenthal & Oberman, 2009), in addition to other cognitive processes such as preference and valence judgements about stimuli in one's environment (for review see Ping, Dhillon & Beilock, 2009). Affection, body and memory have been related to each other. Different authors (Fuchs, 2012; Rothschild, 2000; Van der Kolk, McFarlane & Weisaeth, 1996) consider that affection is not always transformed into semantic content. Sometimes, in certain traumatic emotional experiences for example, it is registered as bodily sensations dissociated from consciousness.

Different studies have concluded that posture exerts an influence on the emotional states (Flack, Laird & Cavallaro, 1999; Harmon-Jones & Peterson, 2009; Shafir, Tsachor & Welch, 2016). Several revisions (Shafir, 2015; Shafir, Taylor, Atkinson, Langenecker & Zubieta, 2013) suggest that different postures induce different emotional states: an upright position, pride; a slouching position, sadness; and an expansive position, power. Gait pattern is determined by mood or exposure to emotional stimuli (Michalak et al., 2009; Naugle, Joyner, Hass & Janelle, 2010; Stins & Beek, 2011; Wendorff, Linnemann & Lemke, 2002). Also the isometric flexed arm (associated with approximation) and arm extension (associated with rejection) affect the evaluation of neutral stimuli (Cacioppo, Priester & Berntson, 1993; Chen & Bargh, 1999). Head movements influence emotional regulation in people with dysphoria (Rahona, Ruiz Fernández, Rolke, Vazquez & Hervas, 2014). And facial expressions can also shape emotional experience (Duclos &

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Laird, 2001; Lin, Hu & Gong, 2015; Price & Harmon-Jones, 2015; Rahona López, 2013; Söderqvist, Ohlén & Dimberg, 2017).

As can be seen, research suggests that the deliberate control of motor behaviour could regulate feelings.

Movement and intentionality

For Merleau-Ponty (1964) movement is not a decision of the mind/subject, as Descartes argued, but it emanates from the body. It does not respond to an act of will, since this would not explain human behaviour in physical terms, only in terms of chance. According to William James (1890/2007) an act of will must not be understood as an additional property which has actions or mental states. For James the process of volition is an ideomotor that produces action, and there is no chance relationship between the volitional process and action.

From a phenomenological perspective, intentionality is a fundamental property of consciousness, i.e. it will refer to an awareness of movement (Benjumea, 2009).

From a psychological perspective, when we perform an action we attribute the agency of the action to ourselves. This is because everyone has a system, understood as a set of cognitive processes, allowing them to judge whether an event, action or thought should be attributed to themselves as a chance agent or not. This concept is called authorship processing. The feeling that I am the chance agent of my movement is known as experience of conscious will and is also described as an emotion (authorship emotion). This emotion occurs when a thought becomes conscious just before an action, is consistent with the action, and is not accompanied by other more prominent causes of action. The feeling of conscious will of action is not necessarily a true expression of how the action occurred (although people interpret it this way). Sometimes, we can infer a chance agency of movements that we do not make with the body. In this way we may not perceive agency movements of the body itself (Wegner, Fuller & Sparrow, 2003; Wegner & Sparrow, 2004; Wegner, Sparrow & Winerman, 2004). A particular case in which authorship processing can be observed, by decreasing the feeling of conscious will of the action, is through the discipline of Authentic Movement.

Authentic movement

Authentic Movement (AM) is a practice from Dance Movement Therapy (DMT) whose origin lies in the Jungian concept of Active Imagination (Chodorow, 1990/1999). Active Imagination enables the patient to express images of the unconscious, including those that come from the emotional state. Although Jung (1916/1969); Jung, 1916, Jung (1961, 1970) did not develop movement as a form of Active Imagination, he reported that some of his female patients used spontaneous dance as a means to relate with the unconscious, and that he could communicate with them by imitating and reflecting their gestures. But dance was not used as a form of Active Imagination until the 1960s, when Mary Whitehouse developed the discipline named Authentic Movement (Whitehouse, 1958/1999).

AM can be applied in individual or group interventions and can sometimes be integrated with other DMT interventions. It is used in artistic fields to develop creative processes (Bacon, 2010); in the inner growth environment to facilitate self-knowledge (Stromsted, 2009); in the transpersonal and mystical world for the person's spiritual development (Adler, 2002); and in clinical settings as a therapeutic intervention, mainly within the DMT area: substance abuse, psychiatric patients and other adults (Musicant, 1994); psychological adaptation to breast cancer (Dibbell-Hope, 2000); individuals suffering from dissociation symptoms (Holifield, 1998/2007); sexual trauma (Stromsted & Haze, 2002/2007); post-traumatic stress (Dieterich-Hartwell, 2017); patients with medically unexplained symptoms (Payne, 2015); neglect in childhood (Stromsted & Haze, 2002/2007); and in a psychiatric patient with depression (Lee, 2014).

There are two roles in AM, the mover and the witness. The mover, with closed eyes, centres attention on him or herself and tries to identify which physical impulse, emotion, feeling, sensory experience or mental image arises. Then, he or she allows that physical impulse, emotion, feeling, sensory experience or image to express itself through movement, without forcing it, without it being prevented by an inner judgement, letting go of resistance, distracting thoughts or the need to be recognized (Mason, 2009; Pallaro, 1999; Speiser & Franklin, 2007).

During AM, feelings and emotions may arise that surprise the mover. Many times, the experience is explained as 'being moved', because it is experienced as if one is moving before one knows it (Mason, 2009; Pallaro, 1999; Payne, 2003; Speiser & Franklin, 2007)

According to Wittgenstein (1953), voluntary movement is characterized by the absence of amazement, while AM often causes a sensation of surprise about one's own movements after performing them (Wyman-McGinty, 1998).

The role of the witness consists in regarding, silently, in stillness and with a non-judgemental attitude, everything that happens to the mover and to him or herself. The mover always moves in the presence of at least one witness, who holds the space and creates a supportive environment in which feelings can be expressed, recognized and communicated (Mason, 2009; Payne, 1992; Speiser & Franklin, 2007).

One of the objectives of AM is the development of the inner witness, which could be described as the development of consciousness. Through this, the person becomes more aware of a wide range of physical movements, sensations, emotions and thoughts which had previously been embodied outside consciousness (Adler, 2002). Musicant (1994) believes that practising AM in a group for 15 years allowed her to develop her internal witnesses and increase her inner listening, AM "involves paying attention to the ongoing stream of bodily felt information" (p.93). She also believes that the clinical use of AM on clients allows them to experience "unknown feelings, thoughts, and images" (Musicant, 2001, p.30) and this provides "an opportunity for the mover to focus inwardly on kinaesthetic, imagistic, and affective material" (Musicant, 2001, p.20).

AM research to date is scarce and mainly centred on its effects as a therapeutic intervention. For Musicant (2001) certain safety conditions are necessary before using Authentic Movement as a therapeutic tool: "the individual's capacity to attend to, and to organize, internal information" (p.21) and "interpersonal trust and some familiarity with inner-directed moving, focusing inwardly, and having a witness" (p.21). Dieterich-Hartwell (2017) also considers that its use requires certain safety conditions and affirms that "since unconscious materials and stored memories can surface in this process, it may be advisable to withhold authentic movement until the participant feels stable and ready for this encounter" (p.41).

Dibbell-Hope (2000) studied the effect of AM on psychological adaptation to breast cancer in a group of 33 women between the ages of 35 and 80 (mean 54.7). Although she did not find that AM treatment was more effective than the control group, she did observe that AM can be effective as an alternative to a verbal support group for certain types of women, particularly those who are older, with less severe stages of cancer, who had received less invasive treatments, with more time having passed since receiving treatment, and past experience of sports or dance. Dibbell-Hope also observed that fatigue decreased and vigour increased in the AM group compared to the control group.

Bräuninger (2014) examined the correlation between specific DMT interventions and improvement in quality of life, stress management, and stress reduction. In a study with people who suffered from stress the author observed that AM used as a group intervention, "showed positive correlations with an improvement in social relationships and in the ability to seek social support" (p.18). The author also observed that "interpersonal sensitivity and phobic anxiety rose when Authentic Movement was applied" (p.22), which led her to warn that "it may be advisable only to apply it to clients with strong self-defences and not with avoidant personalities" (p.23).

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