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(Course location: by Zoom online)

Course approved by the ADTA for 1 credit (15 hrs) for Alternate Route DMT training.

I. Course Title: *The Moving Child Part I: Dance/Movement Therapy for Children*
(15 hours)

(This is part I of a II part course series totalling 30 hours. The Moving Child Part II explores work with children/teens aged 8-16 and continues work with special populations, whereas this Part I course explores work with children 0-7 years old and particular special populations).

Instructor:

Hana Kamea Kemble, MA, RCC, BC-DMT, CLMA

Cell: 604-781-6040 or home office: 250-476-116. Email: info@themovementarc.com

II Course Location: online using Zoom

III. Credits and #hours: 1 credit (15 hours)

Course Dates: January 27, 28, 29, 2023

Hours: (Pacific Daylight Time) (please arrive in the Zoom space 15 minutes early)

Jan 27: Friday 9:30am-12:30pm and 2-5pm

Jan 28: (Saturday morning self-study assignments) Class 2-5pm

Jan 29: Sunday 9:30-12:30 and 2-5pm

Course description: This course focuses on applying Dance/Movement Therapy to the development and wellbeing of children, in the context of family wellness. Course includes a review of the interrelated physical-psychological developmental stages in child development as well as attachment theory as relates to methods of DMT. Students will learn about applications ages 0-7, as well as discussion of family participation in the treatment process. Case studies from a variety of therapeutic contexts will be shared through video, along with didactic and experiential learning.

Prerequisites: It is recommended that all students taking this class for alternate route credit have taken *Introduction to DMT I and II*, or have completed a similar equivalent introductory DMT course. Student membership with the ADTA is recommended to support access to *American Journal of Dance Therapy* readings.

IV. Course Objectives

1. Students will understand how DMT can be used to support children's psychological needs at different developmental stages through connecting, moving, dancing and talking in relationship with a therapist.
2. Students will explore a variety of techniques and applications of Dance/Movement Therapy with children ages 0-7, and will learn about innovative methods for work with particular clinical issues and populations.
3. Students will learn about applications of DMT for children with special needs such as diagnosed disorders, disease and developmental disabilities, and also become aware of considerations for applying DMT cross-culturally.
4. Students will learn how to set basic goals and track progress in DMT work with children, and will demonstrate understanding of how to communicate about DMT to other mental health and educational professionals working with children.

V. Readings: See below class outline for a comprehensive list of required and suggested supplementary readings. Readings from the *American Journal of Dance Therapy* can be accessed by students with ADTA membership, or bought through the publisher Springer. Single chapters from books will be made available to students by arrangement with the instructor, or will be purchased.

Required online Video: students will be given online access to *The Moving Child Film I: Supporting Early Development through Movement* as well as access to *The Moving Child Film II: Dance Therapy in Action* (so that students can review clips used in class).

VI. Attendance policy: Students must attend 80% of all sessions to pass the course. If illness prohibits this, then the class will need to be repeated when next

offered. It is possible on Zoom to watch the class recordings and prepare a one page write-up as proof of watching the class, to submit to instructor.

VII. Methods of evaluation: Grade for the course will be determined by the following:

1. **Research paper (25%):** This will focus on a specific issue or treatment goal in work with children, of interest to the student. Student will outline the particular goal area(s) and explain the application of DMT for a child to meet goals. Length: 5-10 pages, double spaced, with 5 APA format references, which can extend beyond the required or supplemental reading lists and/or include class readings. Additional online research encouraged. Reference to peer reviewed academic journals encouraged. This will be due 6 weeks after class completion. (Follow-up phone meeting to discuss the paper can be arranged as needed with instructor).
2. **Class participation (35%):** Students must attend at least 80% of class time in order to pass the course. Participation grade is based on active contributions to discussions and activities and demonstration of comprehension of required readings. If a session is missed, students choose an additional reading on dance/movement therapy and write a one-page summary to discuss with instructor, as well as meet with a fellow student to review what was missed.
3. **Movement Facilitation (20%):** Students will prepare a **5 minute movement experiential** appropriate for work with children, in which to lead the class in order to practice facilitating movement. Students are encouraged to play with using vocalization, music and props. Students will submit a two page write-up of this experiential identifying age of children that they had in mind to serve, and rationale for chosen movement activity, as well as a brief reflection on his/her/their leadership. Students will be marked on preparedness, creativity, the use of body, voice and verbal narrative to accompany the movement experience.
4. **Journal (20%):** Students will submit a journal with personal reflections to document learning from each class and each assigned reading. This journal should include descriptions of both objective recording of class activities as well as subjective emotional and physical experience of in-class learning and readings. Due within four weeks of course completion. Double-spaced, two pages minimum per class (with assigned readings) for maximum 15 pages.

Grading: 85-100 A range, 70-85 B Range, 60-70 C Range. Must achieve a mark of 60 or above to pass.

VIII. Class by class outline indicates content, teaching methods, readings, and assignments for sessions. Classes are all three hours in length, with five classes total.

Class #1: Jan 27, '23: Friday morning 9:30am-12:30pm

Topics: Overview of Attachment Theory, Developmental Stages and DMT Theory relevant to therapeutic work with children.

In this class, we investigate the inter-relationship between attachment theory, developmental psychology and basic methodology of dance/movement therapy in working with children. Based on understanding of attachment and developmental stages, students will explore the efficacy of DMT techniques to strengthen relationship (engaging in techniques such as attunement, mirroring, kinesthetic empathy and movement play). Students will practice these movement therapy techniques and then watch inspiring examples of masters of attunement Susan Loman and Janet Adler. In small groups, students will identify the needs of children being expressed through movement, and then build a moving "Medicine Wheel" to support awareness of possible interventions with children based on assessment of the physical, emotional, social, mental/cognitive and spiritual needs of children. Students will then reflect on their own experience of a child in their practice through the lens of movement as means for attachment/bonding, regulation, self-expression, communication and agency. (Teaching methods Includes lecture/power-point, experiential movement practice, video case studies and discussion.)

Videos: (sections from)

Looking for Me. Janet Adler (1970). DVD. Expressive Media, Inc. 2009.

The Moving Child I: supporting early development through movement. Hana Kamea Kemble (2017). DVD. A Moving Body Films.

(in PowerPoint on Attachment Theory:

1. Still Face Experiment by Edward Tronick (1975) found at <http://scienceblogs.com/thoughtfulanimal/2010/10/18/ed-tronick-and-the-still-face/#.UPfkvC18-NQ.email>.
2. Susan Loman interview on attuning to children (2018/2019) and case studies with large group and one on one, unpublished from the personal collection of the instructor.

Required Reading:

Devereaux, C. (2014). Moving in the space between us: The dance of attachment

security. In C. Malchiodi & D. Crenshaw (Eds.) *Creative arts and play therapy for attachment problems* (pp.84-99). New York: Guilford Press.

Loman, S. (1994). Attuning to the fetus and the young child: Approaches from dance/movement therapy. *ZERO TO THREE: Bulletin of national center for clinical infant programs*, 15(1), 20-26.

Supplemental Suggested Reading:

Blau, B., & Reicher, D. (1995). Early intervention with children at risk for attachment disorders. In F. Levy (Ed.), *Dance and other expressive arts therapies: When words are not enough*, (pp.181-190). New York: Routledge.

Bowlby, J. (1988). *A secure base: Parent-Child attachment and healthy human development*. London: Routledge.

Hart, S. (2008). Resonance, synchronicity, and mirror neurons: the basic units of brain circuitry and affect attunement. In *Brain, attachment, personality: An introduction to neuro-affective development*, pp. 71-95. London: Karnac.

Hart, S. (2008). The basic body sensing and affect regulating brain: brainstem and cerebellum. In *Brain, attachment, personality: An introduction to neuro-affective development*, pp. 97-122. London: Karnac.

Hart, S. (2008). The brain of motor systems and emotions: the diencephalons and the limbic system. In *Brain, attachment, personality: an introduction to neuro-affective development*, pp. 123-140. London: Karnac.

Stern, D. (1985). The sense of an emergent self (Chapter 3), the sense of a subjective self: Affect attunement (Chapter 7). *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology* (pp. 37-68 & 138-161). New York: Karnac Books.

Toncy, N. (2012) Mutuality in Motion: Integrating movement within the child parent psychotherapy model to restore healthy attachment. *47th Annual ADTA Conference Proceedings (2012)*. <https://adta.org/product/47th-annual-conference-proceedings-2012/>

Class #2: Jan 28, '23: Friday afternoon: 2-5pm

Topics: From Co-Regulation to Self-Regulation: Supporting awareness of

Body, Movement and Self through DMT.

In this class, we continue to explore the effects of early sensorimotor experience (in relationship with caregivers and environment) on the infant and young child's health and regulation from in-utero onward. We look at how sensorimotor experiences become neurological imprints that continue to express through movement and behavioral patterns in relationship. We learn about the potential for healing these imprints and strengthening new neurological pathways for children who have challenges or delays by using sensorimotor input through DMT. We briefly explore Developmental Movement from age 0-3 and its psychological importance, and explore movement as our earliest means for regulation, self-expression and communication. We learn about movement's continued role in securing attachment/bonding throughout childhood and the importance of rhythmic and other sensory inputs for co and self-regulation. We also explore the application of DMT for prevention and wellness for all children in early childhood settings. (Teaching methods includes lecture, discussion, experiential activities and video case studies).

VIDEOS:

The Moving Child II: Dance therapy in action. Hana Kamea Kemble (2019). A Moving Body Films. (Section with BC-DMT Janice Geller on Yielding)

The Moving Child III: Developmental movement in the first year. Hana Kamea Kemble (2019). A Moving Body Films. (First section on developmental movement patterns).

Required Reading:

Loman, S. (1998). Employing a developmental model of movement patterns in dance/movement therapy with young children and their families. *American Journal of Dance Therapy* 20 (2), pp.101-115.

Tortora, S. (2009). Dance/Movement psychotherapy in early childhood treatment. In Chaiklin, S., Wengrower, H. (Eds) *The art and science of dance/movement therapy; Life is dance*. New York: Routledge, p.159- 180.

Tortora, S. (1994). Join my dance: The unique movement style of each infant and toddler can invite communication, expression and intervention. In *Zero To Three*. 15(1), 1-11, <https://files.eric.ed.gov/fulltext/ED375595.pdf>.

Supplemental Suggested Reading:

Harvey, S. (1994). Dynamic play therapy: An integrated expressive arts approach to

the family treatment of infants and toddlers. *Zero To Three*. 15 (1), 11-18, <https://files.eric.ed.gov/fulltext/ED375595.pdf>.

Pallaro, P. (1996). Self and body-self: Dance/movement therapy and the development of object relations. *The Arts in Psychotherapy*, 23 (2), 113-119. [https://doi.org/10.1016/0197-4556\(95\)00061-5](https://doi.org/10.1016/0197-4556(95)00061-5).

Stern, D. (1985). The sense of a core self: Affect attunement. *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology*. pp.138-161. New York: Karnac Books.

Tortora, S. (2004). Our moving bodies tell stories, which speak of our experiences. *Zero to Three*. 24(5), 4-12.

Tortora, S. (2006). The dancing dialogue: using the communicative power of movement with young children (pp.1-97). Baltimore: Paul H Brookes.

(Saturday morning is personal time for observation of children as well as catching up on readings or journaling)

Class #3: Jan 28, '23: Saturday afternoon 2pm-5pm.

Topic: Developing Emotional Intelligence using the body and movement, for ages 4-7.

In this class, we review the development of emotional regulation and enhancement of emotional intelligence using Dance/Movement Therapy for ages 4-7 (including in educational settings of preschool, kindergarten, primary grade ages). Using rhythm and movement games that incorporate the Pre-Efforts and Efforts of Space, Weight, Time and Flow as well as Shape (Laban Movement Analysis), we explore how to help children build body and self-awareness and enhance self-expression for emotional wellbeing. We learn about the developmental value of aggression and practice how to support its healthy expression by redirecting non-social movement impulse into healthier outlets and foci. Imaginative imagery and language for helping children to 'ground' and 'center' and expand movement and behavioral repertoire through both free and structured movement is included through exploration of "movement stories". Students will play with DMT props that help create a felt sense of connection in relationship. (Teaching methods include lecture, discussion and experiential activities and case study video).

VIDEOS:

Please review: Sections from The Moving Child Films I and II. Hana Kamea Kemble (2017, 2019). The Moving Child Films publisher.

Janet Kaylo's "Movement Stories"

Charne Furcron and Laurie Jones' "Moving in the Spirit"

Dennis McCarthy's short interview about a case study

Rena Kornblum's "Disarming the Playground"

Hana Kamea Kemble's section about the body being container for emotion.

Required Reading:

McCarthy, D. (2007). Energy, the power of no, falling and leaping. In *If you turned into a monster: Transformation through play: A body-centered approach to play therapy*. (pp.48-78). Philadelphia: Jessica Kingsley.

McCarthy, D. (2012). Aggressive play. In *A manual of dynamic play therapy" Helping things fall apart, the paradox of play*. (pp. 81-125). Philadelphia: Jessica Kingsley.

Suggested Reading:

Dulicai, D. (2009). Family dance/movement therapy: A systems model. In Chaiklin, S., Wengrower, H. (Eds.), *The Art and Science of Dance/Movement Therapy; Life is Dance*. (pp.145-158) New York: Routledge.

Kornblum, R. (2002). *Disarming the playground: Violence prevention through movement and pro-social skills*. Oklahoma City, OK: Wood & Barnes.

Class #4: Jan 29, '23: Sunday morning 9:30am-12:30pm

Topics: DMT for Special Populations. Historical and current overview of applications with special needs; including work with children on the Autism spectrum, Developmental Delays, Learning Disabilities, and for children in medical and psychiatric settings.

In this class, we explore applications of DMT to children with "special needs", i.e. with

special genetic challenges and 'different abilities', as well as those in the process of healing from or dying from diseases such as cancer. We review basic methods of DMT and show adaptations for ways to expand movement repertoire for those with physical disabilities, and address interventions for other clinical issues. We continue to practice using props and music. (Teaching methods include lecture, discussion, movement experientials and video).

Videos:

Dance/Movement Therapy with Children with Cancer. Suzi Tortora (2007).
Andrea Rizzo Foundation – a Dream Dances On.
<http://www.adta.org/Default.aspx?pageld=403546>.

Section from The Moving Child Films II. Suzi Tortora working with Evan.

Required Reading:

Levy, F. (2005). Dance/movement therapy with different populations: Children. *Dance/movement therapy: A healing art* (pp.179-200). Reston, VA: American Alliance for Health, Physical Education and Dance (AAHPERD; 2nd revised edition.

Scharoun, S., Reinders, N., Bryden, P., and Fletcher, P. (2014). Dance/movement therapy as an intervention for children with autism spectrum disorders. *American Journal of Dance Therapy*, 36(2), 209- 228.

Tortora, S. (2019). Children are born to dance! Pediatric medical dance/movement therapy: The view from integrative pediatric oncology. *Children*, 6(19), 1-27.

Payne, H. (1992). Shut in, shut out: Dance/movement therapy with children and adolescents, In *Dance movement therapy: Theory and practice* (pp.39-80). London: Routledge.

Suggested Supplemental Reading:

Devereaux, C. (2012). Moving into relationship: Dance/movement therapy with children with autism. In Gallo-Lopez, L., Rubin, L., (Eds.), *Play based interventions for children and adolescents with autism spectrum disorders*. (pp.333-351) New York: Routledge.

McCarthy, D. (2007). Harnessing chaos: Helping children with neurological disorders.

In If you turned into a monster: Transformation through play: A body-centered approach to play therapy. (pp.98-108) Philadelphia: Jessica Kingsley.

Erfer, T. (1995). Treating children with autism in a public school system. In Levy, F. (Ed.) *Dance and other expressive arts therapies: when words are not enough.* (pp.191-211). New York: Routledge.

Erfer, T. & Ziv, A. (2006). Moving towards cohesion: Group dance/movement therapy with children in psychiatry. *The Arts in Psychotherapy*, 33(3), 238- 246.

Stanton-Jones, K. (1992). Dance/movement therapy in child and family psychiatry. In *An introduction to dance/movement therapy in psychiatry.* (pp.170-204). New York: Routledge.

Mendelsohn, J. (1999). Dance/movement therapy with hospitalized children. *American Journal of Dance Therapy*, 21(2), 65-80.

Class #5: January 29, '23: Sunday afternoon 2-5pm

Topics: DMT for children who have experienced trauma. In class student movement leads, and course closure.

In this class, we acknowledge the prevalence of both personal and intergenerational trauma in cultures around the world, and we experientially explore how a child's experience of different types of trauma can impact attachment, self-regulation and wellbeing. We return to discussion of sensorimotor imprints and explore how traumatic experiences often manifest through the body and movement patterns of a child. We learn specifically about a child's altered relationship to space and time during and after traumatic experience, and discuss children's need to re-experience a sense of control and power, which can be facilitated, regulated and modulated through movement play. We further explore how traumatic experience can best be worked with somatically in order to harness children's resilience and free life-force energy for development and healing, through experiential activities. Each student will lead a brief movement activity (5 min each), followed by reflection and discussion in small groups to support a brief review and summary of course content. (Teaching methods include brief power-point lecture, discussion, movement experientials and video).

Videos:

Amber Gray working with children in Haiti post earthquake, from unpublished

personal video collection of instructor.

In PowerPoint:

Rena Kornblum speaks about her work with traumatized boys, from unpublished private video collection of instructor.

Required Reading:

Gray, A.E.L. (2008). Dancing in our blood: Dance movement therapy with street children and victims of organized violence in haiti. In Jackson, N., & Shapiro-Lim, T. (Eds), *Dance, human rights and social justice: Dignity in motion*. (pp.222-236). New York: Scarecrow Press

Goodill, S. (1987). Dance/movement therapy with abused children. *The Arts in Psychotherapy*, 14(1), 59-68.

Porges, S. W. (2004). Neuroception: A subconscious system for detecting threat and safety. *Zero to Three*, 15 (1), 19-24.

Suggested Supplemental Reading:

Devereaux, C. (2008). Untying the knots: Dance/movement therapy with a family exposed to domestic violence. *American Journal of Dance Therapy*, 30(2), 58.

Gaensbauer, T. J. (2004). Telling their stories: Representation and reenactment of traumatic experience occurring in the first year of life. *Zero to Three*, 24(5), 25–31.

Kornblum, R. (2008). Dance/movement therapy with children. In D. McCarthy (Ed.), *Speaking about the unspeakable: Non-verbal methods and experiences in therapy with children*. (pp.100-114). Philadelphia: Jessica Kingsley.

Kornblum, R. & Halsten, R.L. (2006). In school dance/movement therapy for traumatized children. In Brooks, S. (Ed.), *Creative arts therapies manual: A guide to the history, theoretical approaches, assessment, and work with special populations of art, play, dance, music, drama, and poetry therapies*. (pp.144-155). Springfield, IL: Charles C. Thomas.

Levine, P. & Kline, M. (2008). *Trauma-proofing your kids: A parent's guide for instilling confidence, joy and resilience*. Berkeley, CA: North Atlantic Books.

O'Donnell, D.A. (2006). Meditation and movement therapy for children with traumatic stress reaction. In Brooks, S. (Ed.), *Creative arts therapies manual: A guide to the history, theoretical approaches, assessment, and work with special populations of*

art, play, dance, music, drama, and poetry therapies. (pp. 156-167). Springfield, IL: Charles C. Thomas.

Schmerling, J.D. (1987). Stimulating communication in a child with elective mutism: Collaborative interventions. *American Journal of Dance Therapy*, 10 (1), 27-40.

Post-Course I ASSIGNMENTS:

Assignments for the interim period between Part I and II will be reviewed with students in an elective 15 minute phone call with the instructor during the 2-3 week period after Part I weekend in order to orient to writing assignments.

COURSE Required Readings List:

Devereaux, C. (2014). Moving in the space between us: The dance of attachment security. In C. Malchiodi & D. Crenshaw (Eds.) *Creative arts and play therapy for attachment problems* (pp.84-99). New York: Guilford Press.

Goodill, S. (1987). Dance/movement therapy with abused children. *The Arts in Psychotherapy*, 14(1), 59-68.

Gray, A.E.L. (2008). Dancing in our blood: Dance movement therapy with street children and victims of organized violence in haiti. In Jackson, N., & Shapiro-Lim, T. (Eds), *Dance, human rights and social justice: Dignity in motion.* (pp.222-236). New York: Scarecrow Press

Levy, F. (2005). Dance/movement therapy with different populations: Children. *Dance/movement therapy: A healing art* (pp.179-200). Reston, VA: American Alliance for Health, Physical Education and Dance (AAHPERD; 2nd revised edition.

Loman, S. (1994). Attuning to the fetus and the young child: Approaches from dance/movement therapy. *ZERO TO THREE: Bulletin of national center for clinical infant programs*, 15(1), 20-26.

Loman, S. (1998). Employing a developmental model of movement patterns in dance/movement therapy with young children and their families. *American Journal of Dance Therapy* 20 (2), pp.101-115.

McCarthy, D. (2007). Energy, the power of no, falling and leaping. In *If you turned into*

a monster: Transformation through play: A body-centered approach to play therapy. (pp.48-78). Philadelphia: Jessica Kingsley.

McCarthy, D. (2012). Aggressive play. In *A manual of dynamic play therapy” Helping things fall apart, the paradox of play.* (pp. 81-125). Philadelphia: Jessica Kingsley.

Payne, H. (1992). Shut in, shut out: Dance/movement therapy with children and adolescents, In *Dance movement therapy: Theory and practice* (pp.39-80). London: Routledge.

Porges, S. W. (2004). Neuroception: A subconscious system for detecting threat and safety. *Zero to Three*, 15 (1), 19-24.

Scharoun, S., Reinders, N., Bryden, P., and Fletcher, P. (2014). Dance/movement therapy as an intervention for children with autism spectrum disorders. *American Journal of Dance Therapy*, 36(2), 209- 228.

Tortora, S. (2009). Dance/Movement psychotherapy in early childhood treatment. In Chaiklin, S., Wengrower, H. (Eds) *The art and science of dance/movement therapy; Life is dance.*(pp. 159-180). New York: Routledge

Tortora, S. (1994). Join my dance: The unique movement style of each infant and toddler can invite communication, expression and intervention. In *Zero To Three*. 15(1), 1-11, <https://files.eric.ed.gov/fulltext/ED375595.pdf>.

Tortora, S. (2019). Children are born to dance! Pediatric medical dance/movement therapy: The view from integrative pediatric oncology. *Children*, 6(19), 1-27.

Supplemental Suggested Reading List:

Blau, B., & Reicher, D. (1995). Early intervention with children at risk for attachment disorders. In F.Levy (Ed.), *Dance and other expressive arts therapies: When words are not enough*, (pp.181-190). New York: Routledge.

Bowlby, J. (1988). *A secure base: Parent-Child attachment and healthy human development.* London: Routledge.

Devereaux, C. (2008). Untying the knots: Dance/movement therapy with a family exposed to domestic violence. *American Journal of Dance Therapy*, 30(2), 58.

Devereaux, C. (2012). Moving into relationship: Dance/movement therapy with children with autism. In Gallo-Lopez, L., Rubin, L., (Eds.), *Play based*

interventions for children and adolescents with autism spectrum disorders. (pp.333-351) New York: Routledge.

Dulicai, D. (2009). Family dance/movement therapy: A systems model. In Chaiklin, S., Wengrower, H. (Eds.), *The Art and Science of Dance/Movement Therapy; Life is Dance.* (pp.145-158) New York: Routledge.

Erfer, T. (1995). Treating children with autism in a public school system. In Levy, F. (Ed.) *Dance and other expressive arts therapies: when words are not enough.* (pp.191-211). New York: Routledge.

Erfer, T. & Ziv, A. (2006). Moving towards cohesion: Group dance/movement therapy with children in psychiatry. *The Arts in Psychotherapy*, 33, p. 238- 246.

Gaensbauer, T. J. (2004). Telling their stories: Representation and reenactment of traumatic experience occurring in the first year of life. *Zero to Three*, 24(5), 25-31.

Hart, S. (2008). Resonance, synchronicity, and mirror neurons: the basic units of brain circuitry and affect attunement. In *Brain, attachment, personality: An introduction to neuro-affective development*, pp. 71-95. London: Karnac.

Hart, S. (2008). The basic body sensing and affect regulating brain: brainstem and cerebellum. In *Brain, attachment, personality: An introduction to neuro-affective development*, pp. 97-122. London: Karnac.

Hart, S. (2008). The brain of motor systems and emotions: the diencephalons and the limbic system. In *Brain, attachment, personality: an introduction to neuro-affective development*, pp. 123-140. London: Karnac.

Harvey, S. (1994). Dynamic play therapy: An integrated expressive arts approach to the family treatment of infants and toddlers. *Zero To Three*. 15 (1), 11-18, <https://files.eric.ed.gov/fulltext/ED375595.pdf>.

Kornblum, R. (2002). *Disarming the playground: Violence prevention through movement and pro-social skills.* Oklahoma City, OK: Wood & Barnes.

Kornblum, R. (2008). Dance/movement therapy with children. In D. McCarthy (Ed.), *Speaking about the unspeakable: Non-verbal methods and experiences in therapy with children.* (pp.100-114). Philadelphia: Jessica Kingsley.

Kornblum, R. & Halsten, R.L. (2006). In school dance/movement therapy for

traumatized children. In Brooks, S. (Ed.), *Creative arts therapies manual: A guide to the history, theoretical approaches, assessment, and work with special populations of art, play, dance, music, drama, and poetry therapies*. (pp.144-155). Springfield, IL: Charles C. Thomas.

Levine, P. & Kline, M. (2008). *Trauma-proofing your kids: A parent's guide for instilling confidence, joy and resilience*. Berkeley, CA: North Atlantic Books.

McCarthy, D. (2007). Harnessing chaos: Helping children with neurological disorders. In *If you turned into a monster: Transformation through play: A body-centered approach to play therapy*. (pp.98-108) Philadelphia: Jessica Kingsley.

Mendelsohn, J. (1999). Dance/movement therapy with hospitalized children. *American Journal of Dance Therapy*, 21(2), 65-80.

O'Donnell, D.A. (2006). Meditation and movement therapy for children with traumatic stress reaction. In Brooks, S. (Ed.), *Creative arts therapies manual: A guide to the history, theoretical approaches, assessment, and work with special populations of art, play, dance, music, drama, and poetry therapies*. (pp. 156-167). Springfield, IL: Charles C. Thomas.

Pallaro, P. (1996). Self and body-self: Dance/movement therapy and the development of object relations. *The Arts in Psychotherapy*, 23 (2), 113-119.
[https://doi.org/10.1016/0197-4556\(95\)00061-5](https://doi.org/10.1016/0197-4556(95)00061-5).

Schmerling, J.D. (1987). Stimulating communication in a child with elective mutism: Collaborative interventions. *American Journal of Dance Therapy*, 10 (1), 27-40.

Stanton-Jones, K. (1992). Dance/movement therapy in child and family psychiatry. In *An introduction to dance/movement therapy in psychiatry*. (pp.170-204). New York: Routledge.

Stern, D. (1985). The sense of an emergent self (Chapter 3), the sense of a subjective self: Affect attunement (Chapter 7). *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology* (pp. 37-68 & 138-161). New York: Karnac Books.

Stern, D. (1985). The sense of a core self: Affect attunement. *The interpersonal world of the infant: A view from psychoanalysis and developmental psychology*. pp.138-161. New York: Karnac Books.

Toncy, N. (2012) Mutuality in Motion: Integrating movement within the child parent psychotherapy model to restore healthy attachment. *47th Annual ADTA Conference Proceedings (2012)*. <https://adta.org/product/47th-annual-conference-proceedings-2012/>

Tortora, S. (2004). Our moving bodies tell stories, which speak of our experiences. *Zero to Three*. 24(5), 4–12.

Tortora, S. (2006). The dancing dialogue: using the communicative power of movement with young children (pp.1-97). Baltimore: Paul H Brookes.

Other resource articles and books relevant to attachment, sensorimotor development and DMT with children:

Amighi, J. K., Loman, S., Lewis, P., and Sossin, M. (1999). *The meaning of movement: Developmental and clinical perspectives of the Kestenberg movement profile*. Amsterdam: Gordon and Breach.

Ayres, Jean. (1979). *Sensory integration and the child*. Los Angeles, CA: Western Psychological Services.

Bowlby, J. (1988). The role of attachment in personality development. *A secure base: Parent-child attachment and healthy human development*. (pp.119-136). London: Routledge.

Canner, N. (1975). *...and a time to dance*. Boston: Plays, Inc.

Chaiklin, S. & Wengrower, H. Eds. (2009). *The art and science of dance/movement therapy; Life is dance*. New York: Routledge. (Section I and II, p. 3-216).

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