Submitted: 4.5.21 Accepted: 24.8.22

Dancing the blues: An interdisciplinary collaboration between artists and therapists

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Abstract

Creative practice differs widely across the contexts of artistic performance and therapy. In this article the authors describe a novel example of how the otherwise separate fields of choreographic practices and dance movement psychotherapy (DMP) have fed into each other. More specifically, the article outlines (i) how research into the effectiveness of DMP for depression has been used to create an interdisciplinary performance and (ii) how the creative process has informed the development of therapeutic work. The performance was originally intended to disseminate quantitative findings from a study in DMP, but, as it developed, the resonances between artistic and therapeutic practice became a key focus and led to the artists contributing to the principles of a new creative therapy. The performance toured internationally and the new therapy model 'Arts for the Blues' has been piloted in the NHS, charities and schools in the North-West of England.

Key words

Interdisciplinary performance, art-based health research, creative psychotherapy, dance movement psychotherapy, poetry, depression

Introduction

The making of the performance *Getting Out of Your Own Way* began in November 2017, involving a poet/researcher, a dancer/choreographer and a composer/musician, supported by a dance movement psychotherapist and a counselling psychologist. The three artists took a set of principles from research on the efficacy of dance movement psychotherapy for depression (Meekums et al 2015, Karkou et al 2019) as starting points for a hybrid dance/poetry/music performance initially intended as a form of knowledge dissemination. As the creative process

developed however, the artists recognised to what extent the principles were essentially identical with the fundamental creative approaches they were using in order to make the piece, and could even be related back to vintage models such as Graham Wallas (1926). The therapist and psychologist visited rehearsals at key stages and, crucially, later used the emerging understanding of the original principles facilitated by the art work to develop the new creative therapy model for working with depression which has become known as Arts for the Blues.

This art-based health research took place in the context of a longer, ongoing collaborative project between artists and therapists which produced Arts for the Blues (Omylinska-Thurston et al 2020), previously known as Dancing the Blues. The project has recently received significant funding from UK Research and Innovation to explore scaling up the implementation of the model in the North-West of England in order to help address structural inequalities in health provision. Ultimately, the project hopes to influence policy around mental health treatment via the National Health Service by advocating for the inclusion of creative approaches alongside talking therapies. The project has also recently received Arts Council England funding for a further piece of art-based research for which the performance discussed here offers a prototype. The reflections on the creative process described below began not long after its completion in 2018, but the writing process across a new interdisciplinary team was both time-consuming (we reviewed approximately 30 hours of rehearsal footage) and disrupted by the global pandemic. Nevertheless, we believe that there is useful knowledge to be gained from reflecting on this work as artists and therapists examining how a performance initially conceived as form of knowledge dissemination unexpectedly also contributed to knowledge creation (Boydell and Belliveau 2017: 135).

The project team's initial reference points were choreographic works which explore the experience of mental health issues such as Company Chameleon's performance *Witness This* (2017), which follows the mental health struggles of the choreographer Kevin Edward Turner, and Mark Edward's experimentation with embodied roles and drag as part of a process of exploring and resolving mental health issues (Edward and Bannon 2017). The artists on the team however did not feel drawn to make work that explicitly referenced their own mental health landscapes, nor to create a therapeutic performance (e.g. Ray and Pendzik 2021), as they both felt mentally well. Instead, they utilised concepts from the background research directly. In a way closer to the multi-disciplinary nature of our team, DMP practitioner Beatrice Allegranti has produced several pieces that deal with the interplay between dance and DMP for people with dementia (*Moving Kinship* 2019) and those facing loss (*In My Body* 2005 and *Witnessing Loss* 2014). In *Witnessing Loss*, creative writing is also incorporated as a way of managing loss and bereavement. As with Edward, Allegranti's work becomes an exploration of the artists' own pain and distress, exploring ways out of it, but as a dance movement therapist, Allegranti also relates her artistic experimentations in the studio to dance movement therapy sessions, although she stops short at drawing directly upon therapy research as a stimulus to devise new artwork. Hagit Yakira's *Free Falling* (2016), a choreographic piece that looks at aspects of the therapeutic journey, also draws on the artist's experience as a choreographer and a dance movement psychotherapist to tap into both the distress of people faced with anxiety as well as the hope one can find from the therapeutic encounter. But, as with Allegranti, Yakira does not draw directly on research material.

Hodgins' (2017) pan-Canadian study of art-based health research practices usefully distinguishes between the role of the arts in the creation and/or translation of health research knowledge, whilst acknowledging the 'complexity in separating the knowledge creation and dissemination aspects' of art works, with these processes often viewed by artists as 'occurring simultaneously during presentation of artworks' (Hodgins 2017: 235). This was very much the experience of the team involved in this project, who, like the participants in Hodgins' study, also valorised the 'affective and the embodied capacities of knowledge generated through art' (Hodgins 2017: 235).

RESEARCH QUESTIONS

- (i) How can quantitative research studies in DMP be used to develop performative material?
- (ii) What aspects of the creative process of developing performative material were useful in the development of a new creative therapy model?

METHODS

The foundational research stimulus for the performance was a Cochrane Review (Meekums et al 2015) which summarised the key factors of the efficacy of DMP for depression. The *Cochrane Database of Systematic Reviews* (CDSR) is the key journal and database for systematic reviews in health care, so not an obvious starting point for art-based research. Nevertheless, the artists in the team found the four principles that describe how DMP works with depression highly suggestive for creative exploration, namely:

i. It [DMP] uses the body in such a way as to enhance vitality;

- ii. As a form of psychotherapy, it places the therapeutic relationship at the heart of the work;
- iii. It supports unearthing deeply rooted feelings through imagery, symbolism and metaphors and the development of insight;
- iv. It supports integration through the development of movement narratives and individual/group processing.

As rehearsals got underway, it quickly became evident that the principles could be related to key aspects of the creative process emerging, in particular for the two performers, although this awareness developed in a somewhat non-linear way, not unlike the *iterative cyclic web* described by Hazel Smith and Roger Dean (2009), a reference point from one performer's roots in literary practice. Our studio-based practice predominately made use of improvised movement and text production alongside ideokinetic exercises that use imagery to stimulate movement (e.g. Todd 1937), poetic composition and, later, the use of digital audio recording devices to capture sounds and movement to compose the score to accompany the performance.

DISCUSSION AND FINDINGS

The findings discussed below relate how the artists experienced the four principles in relationship to their creative process, and how, in turn, other members of the team drew on these experiences to develop the key ingredients of the Arts for the Blues creative therapy model.

The devising and rehearsal process ran from November 2017 through to a tour in Summer 2018, with three work-in-progress showings along the way. Feedback on the rehearsal process came from the therapists on the team, and the findings and reflections upon them were shared with colleagues working on a systematic review of the literature on helpful factors in therapy (Parsons et al 2019). Touring took place from December 2017 to July 2018, each performance feeding back into the ongoing process and modifying subsequent performances. Works in progress were shown at Edge Hill University and SUNY New York in February and March 2018 before showing the completed performance at the University of Bedfordshire, the Startelpa Festival in Riga and The King's Arms in Salford in June and July 2018. The whole process was documented using video and hand-written notes, later used in writing this article.ⁱ It became clear to the performers at the outset that, although the piece would work with an awareness of the four principles, it needed to find its own creative direction and integrity rather than only attempting to make the findings readable to audience in a transparent manner. This, combined with the desire to avoid overtly representing mental health issues, led to a performance which staged an encounter between two characters who initially struggle to connect and who experience tension in the act of relating before discovering ways in which to be together and explore creatively. They then manage to separate from each other at the end of the pieceⁱⁱ.

i. The use of the body to enhance vitality

A standard part of any studio-based rehearsal practice is the warm-up. On a physical level it is necessary to prepare the body – including the voice – for the exertions of sustained creative practice, but, in the experience of the performers involved, it is also important for preparing oneself mentally and emotionally for the work – which can include raising one's energy levels so one is able to work at or close to the level of intensity and effort required for performance. The warm-up can also provide a more unbridled space for play and expression – prior to the specific engagement of making an actual piece of work – and the performers really valued this part of their work together. Therefore, it was not a stretch to recognise a link between the warm-up and the DMP principle of using the body to enhance vitality – it was also a key aspect of the dancer's lifelong love of dance and the reason the poet had been drawn to dance and movement practice.

In terms of adapting this principle, and drawing from the reflections on the experience, in the new therapy model, there was a recognition that it was not only a physical activation taking place, but also an overall creative activation, so this ingredient was labelled *active engagement* (Omylinska-Thurston et al 2020) to reflect this multiplicity.

ii. The importance of the relationship

The performers had not worked together before coming together to undertake this project, and also came from different disciplinary backgrounds. Therefore, establishing a relationship and understanding the different levels of skill in the different modalities (the dancer's facility with words, the poet's with movement) was a crucial aspect of the early phase of the creative process, and had a far-reaching influence on the development of the piece.

One way of addressing these needs at the outset was to use structured improvisatory frames as a way of relating, generating material and learning from each other. The performers

set simple scores, for example: copying each other's movement; stopping and starting; 'arriving' in the same place at the same time (without overtly connecting); introducing words and phrases whilst moving. Each score was limited by short time frames. These practices enabled the performers to begin to learn each other's artistic languages and to start cocreating a new, shared language that combined vocalised text and movement material. In art psychotherapy literature there is a discussion around how overwhelming the 'blank page' can be (Chilton 2007), and how structured improvisation can offer an important 'scaffolding' for therapy work (Bruscia 1988). However, it is also important to acknowledge, and studio work reflected this, that one must *learn* to speak a new language. In therapy and creative psychotherapy in particular, one may need to learn how to use creative material with ease and to improvise. Thus, in our new model, the need to *learn skills* became another important principle of practice (Omylinska-Thurston et al 2020) alongside developing relationships.

The performers also had the opportunity to experience a workshop on the key principles of DMP which further developed their capacity to deepen their movement and word-based relationships with each other, shifting their attention to their own psychological needs and their contributions to the evolving relationship. During this session they explored key concepts such as mirroring (with respect to finding a mutual emotional quality in a movement); exaggeration and minimising (Chace, as cited in Chaiklin and Schmais 1986); meeting in rhythm and effort (attunement) and meeting in shape (adjustment) (Kestenberg 1999); and meeting vitality effect (Stern 2010). These principles all constituted different ways of meeting without copying or imitation.

We have chosen three images which illustrate how the dynamics of relationship became a theme of the performance. Figure 1 shows the artists engaged in a tense, side-byside exchange where one performer's right arm is being held whilst the left is flung upward at speed in time to the words: 'I'm up, I'm down, I'm out'. The total phrase evokes states of mental and emotional challenge but also shows a kind of staying-with the trouble.

INSERT FIGURE 1

Figure 1: 'I'm up/down/out' phrase by Julia Griffin and Scott Thurston performing 'Getting Out of Your Own Way' at Edge Hill University, with soundscape by Steve Davismoon. 13 June 2018. Courtesy of Edge Hill University.

Figure 2 shows one performer sitting on the other's sacrum – a position which was exchanged three times during the performance. The image plays with power – the upper

performer's position readable as dominating or protective, and the lower performer's position as passive or nurtured by turns. The moving in and out of each position to keep the power dynamic changing and fluid, formed another analogy for the therapeutic relationship and relationship to the self. Issues around power relationships within psychotherapy (Clarkson 2013) and arts psychotherapies (Karkou and Sanderson 2006) have been extensively discussed, raising awareness of the necessity to negotiate different types of relationships according to the client's needs.

INSERT FIGURE 2

Figure 2 'Power exchange' by Julia Griffin and Scott Thurston performing 'Getting Out of Your Own Way' at Edge Hill University, with soundscape by. 13 June 2018. Courtesy of Edge Hill University.

Figure 3 shows perhaps one of the strongest images in the piece – with the artists cradling each other's heads and rocking from side to side whilst lying on their backs. The image became a movement metaphor for the therapeutic alliance and for holding each other, offering a kinaesthetic and visual reference to the intimate development of relationships. It became clear that the complexity of the relationship, and the feelings experienced whilst performing it, was difficult to capture outside its artistic realisation, highlighting the value of the information shared through creative means (Hervey 2000), in this case via the image of the cradled heads.

INSERT FIGURE 3

Figure 3 'Complex intimacy' by Julia Griffin and Scott Thurston performing 'Getting Out of Your Own Way' at Edge Hill University, with soundscape by Steve Davismoon. 13 June 2018. Courtesy of Edge Hill University.

With accompanying poetry in each phase of the performance, this experimentation with not only shifting from one artform to another (Stern 2010) but also meeting while engaged in different artforms, created confidence in the development of the multimodal approach adopted in the new creative therapy model.

iii. Unearthing deeply rooted feelings

During the DMP workshop and session four, the movement explorations generated symbolic material around the image of a magic beanstalk. It included feelings of being ready to produce an offspring – images of sowing seeds and ploughing. The incubation phase described by Wallas (1926) was clearly evident here with material ready to be unearthed. During this workshop difficult images were also revealed: images of deceit and destruction (understood as a desire to get rid of something) and images of holding onto what is left (interpreted as vulnerability and fragility). These images were possibly referring to unspoken difficulties that surfaced through symbolic material. In a psychotherapy context, one would have explored these images further as carrying potent information; specifically, a psychoanalytic perspective would argue that depression is the result of internalised anger that turns against oneself (Freud 2017). By expressing it outwardly, things may shift.

As the devising process continued, the poet read aloud a poem (composed earlier on, using research materials) whilst the dancer performed the initial phrasing that became part of the 'Power exchange' phrase:

OPENING

Pain around the scapula, A cut maple bole dances, reconfigures self, makes the rest of me visible.

What gets released here? Deregulated in a tonic slump where the eyes reach out – unveil the world.

The body sensible because it is sensual, sensual because it is sensible.

Leap across the patella then shift into the sternum, weight borne aloft in effort.

A crow lifts into the evening.

This was a key decision, as the combination of the words and the movement created a compelling effect, the magic of 'pairing the similar with the "not exactly the same" (Stern 2010: 78). Alongside the deepening of the artists' personal involvement in the devising, this technical development also reflected the principle of *processing at a deeper level*, from the creative psychotherapy model (Omylinska-Thurston et al 2020).

The performers observed that this deeper processing was enabled by vocabulary that named physical and emotional shifts. For example, the poem talked about parts of the body ('scapula', 'patella', 'sternum'), the choreography ('dances') as well as words that referred to both motions and emotions ('release', 'reach out, 'leap', 'shift', 'weight' and 'effort'). Given the artistic context of this work, further exploration of the meaning of these words and their associated movements was not attempted, a process that in therapy is referred to as an 'oblique' approach (Pearson 2008).

This processing led to the composition of a new poem, this time written directly in response to the 'power exchange' choreography:

GETTING OUT OF YOUR OWN WAY

your suddenness dropped me down in soft collision where we entangle falling into each other's support

in an echoing cry for help catch me where you can when I fold into myself

hidden beside

you what I try to break free from leaves a mark in space

this changing pattern beckons us forward to cut our teeth on a tranche of time

This material was then fed back into the choreography that inspired it, with both performers reciting the poem whilst performing the movement. It felt as if the piece had matured at this point and opened up new depths of meaning. Moreover, the performers decided not to fix the timings of the text and movement too strictly, so as to retain the edge of live unpredictability in performance. Later they even began to freely improvise a dialogue with the ordering and repetition of the words and phrases from the poem whilst in movement.

By this point, the artists had generated enough material for a twenty-minute duet and invited members of the therapy team to the studio to review the work and offer their feedback. The therapists' immediate impressions addressed the tone of the piece which had become somewhat dark and intense. They suggested that, in a therapy context, clients could be encouraged to explore the material in different ways – as a game or story shown on a bigger or smaller scale – so different perspectives could be gained on it. This helped the team to find the differences between the artists' intentions and how the therapists responded to the material: the therapists, almost in the role of dramaturgs, offered different perspectives, which helped the artists to gain more of an understanding of how the meanings of the material communicated to the audience. This shift in perspective and the insights that it generated could be related to the *gaining understanding* component of the therapy model (Omylinska-Thurston et al 2020).

iv. Integration through the development of narratives

From this point onward, the devising process evolved into a rehearsal schedule during which the performance continued to develop as details were refined. Although the artists were not deliberately creating a story as such for the piece, the final work nevertheless exhibited a narrative logic. The poetic elements integrated with the choreography meant that there was both a frame to hold the piece together as well as a space for the ongoing unfolding of a psychological process as the story was told and re-told in slightly different ways from one performance to the next. This part of the process therefore became identified, via reflections on the value of rehearsals within a therapy context, with the principle of *experimenting* (and practising) *with new ways of being* after achieving new insights, again within the new therapy model (Omylinska-Thurston et al 2020).

It was at this stage that our composer joined the process, making recordings of the physical sounds of the performers in the studio, such as their voices reciting parts of the text; their breath; clapping of hands and feet moving on the floor. The sounds were edited and treated in a variety of ways and wrought into an organic soundscape, interacting with the rhythmic motion of the performers and at times incorporating recognisable vocal utterances. In the first performance at Edge Hill in February 2018, Davismoon performed this soundscape live (by way of controllers in an Ableton Live set), interacting dynamically with the performers and enhancing the multi-disciplinarity of the piece.

Understanding the work as a fluid, evolving performance, was crucial for each performance incarnation in the UK, New York City and Riga. The therapy team reflected on the value of performances in psychotherapy and considered their potential to *integrate useful material* (another principle added to the therapy model) from the therapeutic journey, acting as a clear and concrete reference to what worked for them, while leaving behind the things that did not. A performance was also a potentially useful rite of passage that signified the end of therapy and the beginning of something new outside the therapeutic environment (Omylinska-Thurston et al 2020).

Conclusion

Although this performance had originally been conceived as responding to the first research question (How can quantitative research studies in DMP be used to develop performative material?), this was superseded by a more art-based approach which then informed the second research question (What aspects of the creative process of developing performative material were useful in the development of a new form of psychotherapy?). As a performance, it was open enough to be read in different ways: as about an individual

experience of mental illness and as a depiction of a therapeutic process. As one audience member reflected:

I was constantly switching between thinking about it as a piece about a single person dealing with depression and a fractured ego; or a drama about a patient and therapist struggling to find (and ultimately finding) a way to have a conversation about illness and dissociation. (Audience response, The King's Arms, Salford, 1 July 2018)

The artists felt that the assimilation of the four original research principles had almost been too easy; recognising to what extent these elements were already implicit in artistic practice. This was also somewhat of a surprise to the therapy researchers, who gained a new appreciation of the continuum between artistic and therapeutic practice, a position extensively argued for by psychotherapists such as Bonnie Meekums (2002) who shows how the therapeutic process maps clearly upon the creative process as described by Wallas (1926), for example. Furthermore, meeting through different art forms, in our case dance, poetry and music, often used simultaneously, created confidence in the development of a multimodal approach to psychotherapy, following Natalie Rogers' concept of the creative connection (Rogers 1993), and Paolo Knill et al on the concept of intermodal transfer (Knill et al 2005).

The performance therefore contributed to the development of the Arts for the Blues model of psychotherapy (Omylinska-Thurston et al 2020) (cf research question 2) alongside helpful factors identified during our extensive literature review (Parsons et al 2019) and workshops with practitioners, clients and the general public (Haslam et al 2019; Karkou et al 2022). To revisit these principles, in turn, the performance enabled a view that 'active engagement' could occur not only with the body but with a range of creative media. The concept of 'learning skills' incorporated structured improvisation as a useful skill next to other relevant self-care strategies allowing clients to learn the language used in this particular form of creative psychotherapy. The principle of 'developing relationships' refers to how the relationship between the artists was enriched by extensive non-verbal explorations, including mirroring and dialoguing. The therapy team was reminded of the need to acknowledge, and modify if needed, power relationships between the therapist and clients, especially since these relationships can become particularly intimate and complex.

The creative process reminded the team that 'processing at a deeper level' when difficult material is concerned can happen through imagery, metaphors and symbolic work, without having to verbally describe what is being explored. Similarly, 'gaining understanding' can take place though non-verbal means such as movement. Further insights can be achieved through the presence of others in the group and/or the therapists, as demonstrated by the impact of the therapists' visit. As a result of the creative process of 'experimenting with new ways of being' in the final rehearsal phrase, the model incorporated rehearsing and repetition as important aspects of the therapeutic process. Finally, 'integrating useful material into one's life' added to the model opportunities for clients to celebrate what was explored and learned during the process of therapy by summarising their experience in artistic ways as a movement sequence, a script, a song or a drawing. This resembles the performance created in this project.

The project team thus recognised that there was value in using art-based methods as a data collection tool and adopted this as an ongoing process for all evaluations of the new psychotherapy model alongside qualitative and quantitative methods. The team also recognised that the performance was created as a response to a quantitative research study (Meekums et al 2015) and as such it did not involve experiences of the therapeutic journey from either clients or the artists. For this reason and following the development and delivery of the new model, we proposed that co-production be considered as the way of creating a connection between the experiences of the intimate and private space of psychotherapy and the public character of performing in the presence of external audiences.

Still, in the current study, the richness of this interdisciplinary encounter in part derived from the fact that the therapy team implicitly granted the performance group full artistic freedom to follow their own creative path with the research material rather than attempting to shape the creative output. Almost paradoxically, allowing the artistic practice to be most fully itself has contributed to more clearly seeing the analogies between creative and therapeutic practice, a process akin to the alchemical principle, in Carl Jung's account that 'only separated things can unite' (Jung 1977: 552).

As a team, we look forward to the next phase of experimentation as we explore a fully co-productive model for therapeutic performance. At the time of writing, Arts for the Blues has received funding from Arts Council England to devise a new performance which will be developed as a result of a 12-week group process using the therapy model referred to throughout. The artists involved in 'Getting Out of Your Own Way' will be part of the therapy group as well as helping the whole group to select and devise material for an immersive performance planned to tour the North-west of England in Summer 2023.

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Julia Griffin has a professional dance career spanning 30 years including collaborations between dance, choreographic practice and film/video medium in a contemporary context, challenging the symbiotic relationship that exists between dance, camera, body and site, performer and viewer. She is a selected artist for bOlder, hosted by Castlefield Art Gallery.

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Steve Davismoon (Liverpool Hope) has created a diverse body of work in music and wellbeing over the last 30 years including solo, orchestral and choral works, and a number of liveelectronic/interactive soundscapes. In 2016 he was commissioned by the BBC Philharmonic to compose a work on the Somme centenary.

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Joanna Omylinska-Thurston is a counselling psychologist with the Greater Manchester Mental Health Foundation NHS Trust and a lecturer in Counselling and Psychotherapy at the University of Salford. She has been practicing within NHS for the last 20 years providing psychological therapy, supervision and placements for Counselling Psychology trainees.

Contact: School of Health and Society, Room MS3.43, Mary Seacole Building, University of Salford, Manchester M5 4WT, UK E-mail: J.Omylinska-Thurston1@salford.ac.uk ORCID: <u>https://orcid.org/0000-0001-8329-171X</u> Vicky Karkou is the Director of the Research Centre for Arts and Wellbeing at Edge Hill University, a dance movement psychotherapist, a humanistic psychotherapist, an educator and a researcher. She is widely published in peer-reviewed journals and edited books and has four monographs to her name.

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ⁱ see documentation at the project website: https://dancingtheblues.org/

[&]quot; see full performance at Edge Hill in June 2018: https://youtu.be/Onfd7uzcF0o