

# Studien zur Tanz- und Ausdruckstherapie

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- **Körperorientierte Diagnostik und Psychotherapie bei Essstörungen.**

Joraschky P, Lausberg H, Pöhlmann K (Hrsg) (2008)

Psychosozial-Verlag, Gießen, 293 S., ISBN 978-3-89806-813-0, EUR 36,90

[Psychotherapeut Volume 54, Number 6](#), 500-502, DOI: 10.1007/s00278-009-0688-0 34€

**Download:** <http://www.springerlink.com/content/133t4061q6229171/>

- **Effects of DMT: A meta Analysis:** Meredith Ritter Ba und Kathrin Graff Low  
In: Arts of Psychotherapy Vol 23 No 3 249-260

- **DMT is more effective as previously reported:** Meredith Ritter Ba und Kathrin Graff Low  
In Arts of Psychotherapy Vol 25 No2 101-104 1998

**kostenpflichtiger Download:**

<http://www.sciencedirect.com/science/article/pii/S019745569800015X>

<http://www.psychologie.uni-heidelberg.de/projekte/bewegung/index.shtml>: Forschung zu embodiment, Leibgedächtnis und Sprache (Dr. sabine Koch, Dr. Thomas Fuchs, Dr. Cornelia Müller)

Artikel Thomas Fuchs, Uni Heidelberg: Erkenntnisse Neurowissenschaften und Körper

# **Dance movement therapy for obese women with emotional eating: A controlled pilot study**

Bonnie Meekums, Ieva Vaverniece, Indra Majore-Dusele, Oskars Rasnacs,

The Arts in Psychotherapy

Volume 39, Issue 2, April 2012, Pages 126-133

## **Abstract**

This study explored the effectiveness of dance movement therapy (DMT) in obese women with emotional eating who were trying to lose weight. 158 women were recruited from a commercial weight loss programme: 92 with BMI  $> 30$  were identified as emotional eaters and divided into: an exercise control ( $n = 32$ ) and non-exercisers ( $n = 60$ ). The non-exercisers were partially randomised to non exercise control ( $n = 30$ ) and treatment group ( $n = 30$ ). Using a pre- and post-intervention design, 24 of the DMT treatment group, 28 of the exercise control and 27 of the non-exercise control completed all measures on a battery of tests for psychological distress, body image distress, self-esteem and emotional eating. Findings were analysed for statistical significance.

The DMT group showed statistically decreased psychological distress, decreased body image distress, and increased self-esteem compared to controls. Emotional eating reduced in DMT and exercise groups. The authors cautiously conclude that DMT could form part of a treatment for obese women whose presentation includes emotional eating. Further research is needed with larger, fully, and blindly randomised samples, a group exercise control, longitudinal follow-up, a depression measure, ITT, and cost analyses.

## **Highlights**

Uses a controlled study design to explore the effectiveness of dance movement therapy (DMT) in obese women with emotional eating. ? DMT showed statistically decreased psychological distress, decreased body image distress, and increased self-esteem compared to controls. ? Emotional eating was reduced in both the DMT and exercise groups. ? The authors cautiously conclude that DMT could form part of a treatment for obese women whose presentation includes emotional eating. ? Recommendations for future research are made, including larger, fully and blindly randomised samples, a group exercise control, longitudinal follow-up, a depression measure, ITT and cost analyses

## **Keywords**

Obesity; Dance movement therapy; Emotional eating; Controlled study psychological distress; Body image distress

# **Moving in and out of synchrony: A concept for a new intervention fostering empathy through interactional movement and dance**

Andrea Behrends, Sybille Müller , Isabel Dziobek

The Arts in Psychotherapy

Volume 39, Issue 2, April 2012, Pages 107-116

## **Abstract**

In this theoretical article, we link literature from different disciplines such as the neurosciences and psychology, dance/movement therapy, dance studies, and philosophy, in order to show that interactional, coordinated movement forms an important base for the development of empathy and prosocial behavior. The presented body of literature suggests that specific elements of joint movement and dance, namely imitation, synchronous movement and motoric cooperation, are suitable for fostering empathic abilities, especially in people with empathy deficits. In the second part of the article, we present a newly conceptualized dance and movement intervention for people with empathy dysfunction, tailored to its first application for people with autism spectrum disorders. Through enhancing and refining kinesthetic empathy skills, we hypothesize within an integrative concept of empathy, that both emotional and cognitive empathic processes such as empathic concern and perspective taking can be fostered. With a first treatment outcome study of the presented intervention that we will conduct in the near future with people on the autistic spectrum, we aim at evaluating the program and contributing to the understanding of dance and movement approaches for people with empathy deficits.

## **Highlights**

Literature shows that coordinated movement fosters empathy and prosocial behavior. By refining kinesthetic empathy, we aim to promote emotional/cognitive empathy. Synchronous and imitated movement is associated with liking and prosocial behavior. Bodily self-perception and expression are to be considered as prerequisites. We present a newly developed empathy-fostering dance and movement intervention.

## **Keywords:**

Empathy; Mirror neuron system; Synchrony; Imitation; Movement/dance intervention; Autism

## **Cochrane "Dance/movement therapy for improving psychological and physical outcomes in cancer patients"**

### **Kostenpflichtiger Online-Artikel:**

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD007103.pub2/abstract>

Bradt J, Goodill SW, Dileo C. Dance/movement therapy for improving psychological and physical outcomes in cancer patients. Cochrane Database of Systematic Reviews 2011, Issue 10. Art. No.: CD007103. DOI: 10.1002/14651858.CD007103.pub2.

### **A B S T R A C T**

#### **Background**

Current cancer care increasingly incorporates psychosocial interventions. Cancer patients use dance/movement therapy to learn to accept and reconnect with their bodies, build new self-confidence, enhance self-expression, address feelings of isolation, depression, anger and fear and to strengthen personal resources.

#### **Objectives**

To compare the effects of dance/movement therapy and standard care with standard care alone or standard care and other interventions in patients with cancer.

#### **Search methods**

We searched the Cochrane Central Register of Controlled Trials (CENTRAL) (The Cochrane Library 2011, Issue 2), MEDLINE, EMBASE, CINAHL, PsycINFO, LILACS, Science Citation Index, CancerLit, International Bibliography of Theatre and Dance, Proquest Digital Dissertations, [ClinicalTrials.gov](#), Current Controlled Trials and the National Research Register (all to March 2011).

We handsearched dance/movement therapy and related topics journals, reviewed reference lists and contacted experts. There was no language restriction.

#### **Selection criteria**

We included all randomized and quasi-randomized controlled trials of dance/movement therapy interventions for improving psychological and physical outcomes in patients with cancer.

#### **Data collection and analysis**

Two review authors independently extracted the data and assessed the methodological quality. Results were presented using standardized mean differences. Dance/movement therapy for improving psychological and physical outcomes

#### **Main results**

We included two studies with a total of 68 participants. No evidence was found for an effect of dance/movement therapy on body image in women with breast cancer. The data of one study with moderate risk of bias suggested that dance/movement therapy had a large beneficial effect on participants' quality of life (QoL). The second trial reported a large beneficial effect on fatigue. However, this trial was at high risk of bias. The individual studies did not find support for an effect of dance/movement therapy on mood, distress, and mental health. It is unclear whether this was due

to ineffectiveness of the treatment or limited power of the trials. Finally, the results of one study did not find evidence for an effect of dance/movement therapy on shoulder range of motion (ROM) or arm circumference in women who underwent a lumpectomy or breast surgery. However, this was likely due to large within-group variability for shoulder ROM and a limited number of participants with lymphedema.

### **Authors' conclusions**

We did not find support for an effect of dance/movement therapy on body image. The findings of one study suggest that dance/ movement therapy may have a beneficial effect on QoL. However, the limited number of studies prevents us from drawing conclusions concerning the effects of dance/movement therapy on psychological and physical outcomes in cancer patients.

### **PLAIN LANGUAGE SUMMARY**

#### **Dance/movement therapy for cancer patients**

Having cancer may result in extensive emotional, physical and social suffering. Current cancer care increasingly incorporates psychosocial interventions to improve patients' quality of life. Creative arts therapies such as dance/movement, music, art and drama therapy have been used to aid in the care of cancer patients and in their recovery. Following medical therapies, which can be invasive, cancer patients use dance/movement therapy to learn to accept and reconnect with their bodies, build new self-confidence, enhance self-expression, address feelings of isolation, depression, anger, fear and distrust and strengthen personal resources. Dance/movement therapy has also been used to improve range of arm motion and to reduce arm circumference after mastectomy or lumpectomy. For this review, studies were considered only if dance/movement therapy was provided by a formally trained dance/movement therapist or by trainees in a formal dance/movement therapy program.

This review included two trials with a total of 68 participants that examined the effects of dance/movement therapy on women with breast cancer. Their results did not find support for an effect of dance/movement therapy on body image, the only common outcome between these two studies. The findings of one study suggest that dance/movement therapy may have a beneficial effect on the quality of life of women with breast cancer. However, no conclusions could be drawn regarding the effect of dance/movement therapy on psychological and physical outcomes in cancer patients because of an insufficient number of studies. More research is needed.

## **Tanztherapie. Verbesserung der Lebensqualität und Stressbewältigung**

**Als Buch beim BTA vorhanden! Kontakt Isabella Gross**

Bräuninger, I. (2006). Tanztherapie [Dance therapy]. Weinheim, Germany: Beltz PVU.  
Schlüsselwörter: Tanztherapie, Kurzzeit-Gruppentherapie, Randomisierte Kontrollstudie (RCT), Lebensqualität, Stressbewältigung

### **Zusammenfassung:**

Eine hohe Stressbelastung und eine niedrige Lebensqualität können zu einer Vielzahl psychischer und somatischer Gesundheitsprobleme führen und dadurch hohe Kosten im öffentlichen Gesundheitswesen produzieren. Als Konsequenz ist in den letzten Jahrzehnten eine Vielzahl an Stressmanagement Programmen entstanden. Bei keiner dieser Programme wurde bislang die Effektivität in Bezug auf die Lebensqualität und die Stressbewältigung untersucht. Indem sowohl die Lebensqualität als auch die Stressbewältigung verbessert werden, könnten Primär- und Sekundärstress verhindert und die psychische und somatische Gesundheit verbessert werden. Ziel dieser Studie ist, die Effektivität von Tanztherapie als kreative Körperpsychotherapie zur Verbesserung der Lebensqualität und Stressbewältigung zu untersuchen.  
Diese randomisierte Interventionsstudie mit between subject-Design sowie mit Vor-Nachuntersuchung und sechsmonatiger Katamneseuntersuchung vergleicht eine zehnstündige Kurzzeit-Gruppentherapie in Tanztherapie mit einer Warte-Kontrollgruppe.

### **Design:**

Randomisierte Kontrollstudie (RCT). Methode: Die TeilnehmerInnen ( $N = 162$ ) werden über Zeitungsannoncen rekrutiert, sie leiden unter Stress und psychologischer Belastung. Die Zuordnung zur Behandlungs- oder Warte-Kontrollgruppe erfolgt zufällig.  
Bei den insgesamt zwölf Behandlungsgruppen ( $n = 97$ ) und neun Warte-Kontrollgruppen ( $n = 65$ ) werden zu allen drei Untersuchungszeitpunkten, nämlich zur Baseline, direkt am Ende des zehnstündigen tanztherapeutischen Kurztherapie-Interventionsprogramms und sechs Monate nach Ende der Behandlung, die Lebensqualität, die Stressbewältigung, das psychologische Stresslevel, die Selbstwirksamkeit und die Imaginationsfähigkeit mit standardisierten Selbsteinschätzungsfragebögen erhoben (WHO-QOL-100; MLDL, SVF120, BSI, GSE, Imaginationstest). Varianzanalysen mit Messwiederholungsdesign (repeated measures: Messzeitpunkt t1 X Messzeitpunkt t2, bzw. Messzeitpunkt t1 X Messzeitpunkt t3) werden in Bezug auf die Interaktion zwischen Gruppenzugehörigkeit und Erhebungszeitpunkt und in Bezug auf den Haupteffekt Messzeitpunkt durchgeführt.

### **Ergebnisse:**

Die TeilnehmerInnen der tanztherapeutischen Gruppenintervention verbessern sich im Vergleich zur Warte-Kontrollgruppe kurz- und langfristig signifikant in Bezug auf verschiedene Dimensionen der Lebensqualität, der Stressbewältigung und der Verringerung der psychischen Belastungssymptome.

### **Schlussfolgerung:**

Durch Tanztherapie kann die Lebensqualität erhalten und verbessert, psychischer Stress reduziert und Stressmanagement Strategien und Gesundheit kurz- und langfristig wiederhergestellt werden.

# **Tanztherapie in der onkologischen Rehabilitation: Konzepte und empirische Ergebnisse zu Auswirkungen auf die Lebensqualität**

**Online-Artikel: 14,50 €: <http://www.psycontent.com/content/hv8k8hj7l7063622/>**

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## **Autoren**

E. Mannheim, M. Liesenfeld, J. Weis

## **Zusammenfassung**

Die Tanztherapie kann ein wesentliches Element innerhalb der psychoonkologischen Behandlung und Betreuung von Krebspatienten sein und hat sich in den letzten Jahren zusehends, insbesondere in der Nachsorge und in stationären Rehabilitationsprogrammen, etabliert. Mit hoher Akzeptanz wird diese Form der Kunsttherapie in der Klinik für Tumorbiologie seit vielen Jahren eingesetzt. Aufgabe einer ersten Pilotstudie war es, die Auswirkungen der Tanztherapie auf die Lebensqualität von Krebspatienten zu untersuchen und hierbei methodische Untersuchungsansätze im Bereich qualitativer und quantitativer Methodik im Hinblick auf ihre Adäquatheit für die Fragestellungen zu überprüfen. Das Konzept der Tanztherapie in der Klinik für Tumorbiologie verbindet psychoonkologische Arbeitsansätze mit Prinzipien der Salutogenese und Gesundheitsförderung. Die Ergebnisse der Pilotstudie zeigen, dass sich die Lebensqualität durch das Tanztherapieprogramm signifikant verbessern, wenngleich die Effekte nicht allein auf die Tanztherapie zurückgeführt werden können. Ergänzend zeigten die Ergebnisse der Interviews, dass die Tanztherapie in der Lage ist, Krankheitsverarbeitungsprozesse zu unterstützen. Ebenso können aus den Interviews erste Hinweise auf Wirkparameter der Tanztherapie identifiziert werden. Abschließend werden die Ergebnisse im Zusammenhang mit dem Konzept der Tanztherapie diskutiert und der zukünftige Forschungsbedarf in diesem Bereich skizziert.

## **The effect of dance/movement therapy on affect: A pilot study**

### **kostenpflichtiger Download:**

<https://springerlink3.metapress.com/content/v55307h34m443145/resource-secured/?target=fulltext.pdf&sid=0ruw4ugenqtccc5sph3ymsr&sh=www.springerlink.com>

Diana Brooks und Arlynne Stark  
American Journal of Dance Therapy  
1989, Volume 11, Number 2, S. 101-112, DOI: 10.1007/BF00843774

### **Abstract**

This pilot study was designed to show the influence of dance/movement therapy on affect. The hypothesis was that a dance/movement therapy session would effect significant change in affect. The tool used to assess change was the Multiple Affect Adjective Check List (MAACL), a self-rating checklist that specifically and exclusively measures hostility, depression, and anxiety. Results showed that the dance/movement therapy session significantly effected the participants' affect. Depression and anxiety were effected more than hostility. No significant difference was found between the scores of the hospitalized and nonhospitalized populations. This study supports the premise that dance/movement therapy can change how people feel. Suggestions for further research studies are included.

## **Dance Movement Therapy improves emotional responses and modulates neurohormones in adolescents with mild depression.**

**Download:** <http://cat.inist.fr/?aModele=afficheN&cpsidt=17238981> (www.refdoc.fr)

International journal of neuroscience ISSN 0020-7454 CODEN IJNUB7  
2005, Vol. 115, No. 12 , Pages 1711-1720 (doi:10.1080/00207450590958574)

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This study assessed the profiles of psychological health and changes in neurohormones of adolescents with mild depression after 12 weeks of dance movement therapy (DMT). Forty middle school seniors (mean age: 16 years old) volunteered to participate in this study and were randomly assigned into either a dance movement group ( $n = 20$ ) or a control group ( $n = 20$ ). All subscale scores of psychological distress and global scores decreased significantly after the 12 weeks in the DMT group. Plasma serotonin concentration increased and dopamine concentration decreased in the DMT group. These results suggest that DMT may stabilize the sympathetic nervous system. In conclusion, DMT may be effective in beneficially modulating concentrations of serotonin and dopamine, and in improving psychological distress in adolescents with mild depression.

## **Tanztherapie. Zum aktuellen Diskussionsstand in Deutschland**

<http://www.springerlink.com/content/trld07hew7y15vet/>

Psychotherapeut

Volume 48, Number 4, 215-229, DOI: 10.1007/s00278-003-0315-4

Sabine Trautmann-Voigt

### **Abstract**

Tanztherapie wird als eine prozessorientierte psychotherapeutische Methode vorgestellt. Ihre historischen Wurzeln im deutschen Ausdruckstanz und in der Humanistischen Bewegung in den USA werden ebenso diskutiert wie aktuelle Strömungen in Deutschland. Die Phänomene Rhythmus, Raumerleben, Vitalitätskonturen, außerverbare Abstimmung und Bewegungsanalyse werden theoretisch erörtert und jeweils durch kurze Beispiele aus der tanztherapeutischen Praxis untermauert. Die Integration von Psychoanalyse und Tanztherapie wird am Ansatz von E. V. Siegel durch die Erörterung leiblicher Übertragungs- und Gegenübertragungssphänomene in Bewegungsbeziehungen illustriert. Die Arbeit mit dem Körperbild und die Idee des kreativen Spielens zum Zweck der Neuorientierung von Interaktionserfahrungen (Sterns RIGs) werden anhand von Fallvignettenausschnitten in ein modernes, tiefenpsychologisch orientiertes Konzept von Tanztherapie eingeordnet. Indikationsfragen werden aufgeworfen, aktuelle Forschungsvorhaben kurz umrissen. Die Tanztherapie zeichnet sich als die jüngste Kreativtherapie neben Musik- und Kunsttherapie durch ihre Offenheit für interaktive Spielräume aus, die zur Integration von Verhaltensbeobachtung (durch Bewegungsanalyse) und psychodynamisch fundierter Rekonstruktion einlädt.

Dance therapy is presented as a processorientated psychotherapeutic method. Its historical roots in the German Expressive Dance and in the Human Potential Movement in the USA are discussed together with current trends in Germany. Phenomena as rhythm, the experience of space, vitality contours, nonverbal attunement and movement analysis are discussed theoretically and backed up by short examples of dance therapeutic sessions. The integration of psychoanalysis and dance therapy is illustrated by the approach of Elaine V. Siegel, speaking about physical transference and counter transference. The therapeutic work with body image and the idea of creative movement and playfulness for the purpose of a new orientation of Stern s RIG's (representations of interactions that have been generalized) are fit in a modern and psychodynamic oriented concept of dance therapy. Questions concerning indication and current research are shortly summarized. Dance therapy, as the youngest creative therapeutic method beside music therapy and art therapy, is characterized by its openness for interactive scopes, the integration of behavior observation (through movement analysis) and psychodynamic reconstructions.

Schlüsselwörter Tanztherapie - Therapeutische  
Vitalitätskonturen - Körpererleben - Modellszenen

Bewegungsanalyse - Abstimmung

von

Keywords Dance therapy - Therapeutic movement analysis - Attunement of vitality  
contours - Body experience - Model scenes