

Melanie Brierley

Covering letter for The Lisa Ullmann Travelling Scholarship Fund Dance for Parkinson's Disease Training at The Mark Morris Dance Group, New York, 2012

On Wednesday 13th June 2012, colleague Daphne Cushnie and I embarked on a shared journey exploring the programme 'Dance for PD' at the Mark Morris Dance Group. We had been awarded a Stanley Wertheimer Scholarship from The Mark Morris 'Dance for PD' programme entitling us to two years free training in New York and also from The Lisa Ullmann Travelling Scholarship Fund which enabled us to get there in 2012. We were in New York for five days and were able to experience being with many wonderful people and having time to share practice.

Daphne and I have been working together here in the UK for about five years. We run weekly sessions for people with PD in Kendal, Cumbria, as well delivering training as part of the Dance for Parkinson's Network UK* and the Foundation for Community Dance Summer School. We are both committed to developing our practice, expanding the field of Dance and PD, and contributing to the concept of a more 'caring society' rather than a 'bigger one'. This type of work is also important in helping to break down barriers between the NHS services and the arts; each area is valued by the other and benefits to consumers come from their integration.

As founder members of The Dance for Parkinson's Network UK, supported by Dance Umbrella and The Foundation for Community Dance, Daphne and I are able to share our work and the ideas emerging from the visit to New York with our colleagues across the country. Currently, the network meets biannually to share practice and there are other occasions when a focus group meets to plan future events and frameworks for the developing network. As a group, we already have a strong relationship with the Mark Morris Group and David Leventhal will be coming to England again in 2013 to support the Network in developing a training programme here in the UK. The UK network is interesting since it is made up of practitioners using many different styles of dance. The following report will outline the practice that Daphne and I bring to this field and how the visit supported us in finding future directions for our own work in the UK and renewed confidence as practitioners.

Personally, I would have been unable to do this trip without financial support, as I am a single parent with three children. I am very grateful to the panel of the LUTSF for awarding me the scholarship. I am also thankful to my friends who supported me by caring for ZZ, Poppie, and Elvis in my absence from home and for my children for understanding the importance of my work. The scholarship enables people to re - engage with their practice in a different context. In doing so, I have gained new insights into current and future work.

Since returning from the States, I have also been awarded a studentship from the Dance faculty at The University of Roehampton to study for a PhD in the relationship between dance, somatics, and Parkinson's disease.

Regards

Melanie Brierley

Report 2012: Melanie Brierley

For me, New York is truly a place of marvel, action, positivity, and direction; I have been previously when teaching somatic dance practice at 'Moving Body Resources' on 112, West 27th Street. The trip to Brooklyn in June 2012 incorporated a whole stretch of events, meetings, conversations, movements, ideas, images and thoughts that have helped to further shape my practice in the field of Dance and Parkinson's.

The purpose of the visit to New York was to take part in a weekend's training on the Dance for PD programme at The Mark Morris Dance Group. This training helps support people to develop their practice in the field of Dance and Parkinson's. The participants on the training programme, from the US, Canada, and the UK (me and Daphne), have varied experiences of delivering community classes: some have already worked in the field of dance or movement based activities, whereas for others, running groups is a fairly new venture. Class leaders had worked together either in the past or for a long time; some were friends, some worked alone, and others themselves had PD. Yet, what brought all participants and leaders together was the fundamental desire to develop skills and ideas which could be taken 'back home' and shared with PD groups to improve physical and mental wellbeing. Seated, a circle of twenty-six participants each with a story or exercise to share, each dispelling a sense of urgency or eagerness to listen, absorb, and filter through those particular processes of delivering movement that might benefit people living with PD. The room is filled with an air of concentration and anticipation. There is a real feeling of presence. I'm aware, at this point, that this practice could be described as a 'calling'.

What is it about the combination of Dance and PD that creates such vocation? For me, it is something to do with knowing movement and knowing myself through dance: 'My dance cannot exist without me; I am my dance' (Fraleigh, 1987: xvi), and then considering what my life, what 'I', would be without it. It is about finding movement connection within my self and trying to find that same connection within someone else. The someone else whose sense of 'self' in this way has been veiled, like a performance that has ended too soon with the untimely closing of the curtain. It's about my resources as a dancer, as a person: what can I find within me that can be shared with another? How might this phenomenon be supportive, connective and life affirming?

Keeping with the theme of the curtailed performance, in leading Dance for Parkinson's sessions the question is: how do we as practitioners sneak backstage, head for the wings, and enter the space to partner that unwitting performer? Similarly, how do we entice the performer to the wings, show them the way to the dressing room and invite them to the after show party? In other words, what is the means and delivery of movement that best supports people to re – engage with their own moving selves? How can moving once again hold some satisfaction, enjoyment, and release?

In this analogy of course, the brain could be the stage and the body the auditorium. In PD the connection between mind and body has been disrupted at the beginning and continues throughout the onset of the disease. It could also represent the separation between those with PD with others and their environment around them. As well as being physically debilitating, many people living with PD are isolated and experience depression, anxiety and other mental health issues. What is it that we are trying to do in 'Dance for PD' sessions and how might we best perform our task? Currently, in the field there are a growing number of practitioners asking this question. In the UK, there is an established group 'Dance for Parkinson's Network UK' supported by Dance Umbrella and the Foundation for Community Dance. Myself and Daphne Cushnie are part of the founder members group of this new organisation which meets biannually to share practice and develop nationwide links. We are also directly related to the Dance for PD programme in New York. Research in this area is relatively new and as such is a developing field. A recent mixed methods research conducted through The University of Roehampton at the English National Ballet concluded that, 'taking part in a dance class for PD enabled people to achieve more physically and helped them to rise above some of the limitations of their neurological condition. It created an event where people relished the social interaction and, in some, it encouraged a more positive outlook on their lives.' (Houston and McGill, 2011:p30). In her study of dance movement therapy with Parkinson's patients, Bunce writes that 'benefits to Parkinson's disease patients and their carers focused on the increase in body awareness and an improvement in confidence, which lifted depression.' (Bunce, 2002:p44)

Other dance research has been concerned with addressing the value of a particular dance or movement style, such as Tango or Contemporary dance, in respect of factors such as balance, and gait (Hackney, Kantorovitch, Levin and Earhart, 2007; Earhart, 2009; Batson, 2010). Currently, there is an ongoing study through The University of Hertfordshire that is looking at the possible benefits of Tango or Improvised dance on PD.

Since returning from New York, I too am embarking on a PhD study into the relationship between Dance and Parkinson's disease, having been awarded a studentship from The University of Roehampton. My study looks at personal experiences of moving with PD and ways in which somatic dance theory and practice help to describe this process.

It would be accurate to say that there are a number of approaches to using dance in a PD class. There are different dance styles and perhaps different

intentions or starting points for using movement. Daphne and I found that we share many common areas with the Mark Morris Dance for PD work.

In The Mark Morris Group Dance for PD practice, the intention is to engage participants in the aesthetic as well as technical aspects of a dance class. Dance is not be used as therapy, but indeed could be described as therapeutic. The knowledge of the dancing body, as well as the fundamental aesthetic principles of dance, is used to transport participants into an imaginative and focused encounter with movement. Repertoire from Mark Morris is adapted to form an important part of sessions.

Our work in Cumbria also uses the principles and practice of dance studies and in particular influences from Laban, Contemporary Dance, and Somatic Dance practices allowing for a felt sense of the body such as experiential anatomy, ideokinesis, and the fluid systems.

David Leventhal (Dance for PD) describes the language of dance used in his sessions:

“Even when we’re not using specific stories in our class, we always used aesthetic goals to motivate our students. Dance is designed this way. When you think about how ballet is learned, it is really a language of images based on metaphor. For instance, if we say *fondue*, we’re describing a melting action rather than just saying bend and place the legs and feet in this way. We appeal to the imagination and image of melting. If we say *plié*, we evoke the image of bending the knees rather than saying put this foot in this way and that foot that way and lower yourself to this level, and so on. The body and the imagination are working together, and we see people in our class using their imaginations in this way to initiate graceful and conscious movement”. (Jeanine Young – Mason,” Art, Body, and Soul: A Conversation with Dancers David Leventhal and John Hegibotham”: Vol 24 N0.6 Nursing and the Arts).

The repertoire of Mark Morris is used to support the relationship of image and movement. There is an emphasis on the use of gesture and metaphor developed through the choreography. In our work, image is a fundamental starting point. The training days reflected the importance of image in dance for PD practice.

In our work, we use image in a number of ways: image that comes from the practitioner where movement might come from an embodied exploration together with an understanding of the fundamental issues concerning movement in PD - neurophysical processes; images coming from the participants having a felt sense of the body; and images created out of language and music. The image directs the body and encourages it to stir. Attention is focused on moving with the image rather than on any absence of movement. Each embodied image can create a different moving experience; perhaps through the exploration of the space, weight, articulation, flow and dynamic movement of different body parts.

Our playful, imaginative selves awaken. In this way ‘... we as dancers can remind people of what it’s like to be a body, rather than to have a body; to remember all the different kinds of experiences we hold in our physical being’ (Greenland, 2000:33).



Imagery helps to reconnect the mind and body. (Image from one of our groups in Ulverston 2007)



Images can be an outward expression of the internal world (Ulverston, 2007)



(Kendal, 2012) Images help to support and create meaning. Through shared meaning, we can move in relationship with others. 'Relationships give confirmation of who we are and give meaning to our lives'. (Hayes, J. 2011:33)

Music is fundamental to the process through which image and movement are joined. As David Leventhal explains; 'Once the live music starts, they (participants) become dancers, first and foremost, and move in a focused, conscious way that belies their condition'. (Doorway to Room 217 online, issue 51, April 2011). Indeed, 'Music acts as a support to the imagination, bridging the internal and external, liberating expression for the outside world to share, as a reminder for the body to join in again with the action, as a means of becoming present and conscious in the moment of moving.' (Melanie Brierley, Foundation for Community Dance from 'Making it Happen' Tuesday 22nd November 2011).

The use of language is also seen as important tool in Dance for PD sessions. The following are some of the significant areas that I have found in my practice:

- Speaking and moving combined, supports and enables movement. This is highlighted in the Brooklyn project as well;
- The language of the moving body comes out of spoken reflection (also could be written/ drawn etc). We use reflective practice to develop awareness;
- "Often as movers are speaking about their movement they re-inhabit the movement again." (Hartley, L. 2009:14);
- The practitioner's embodied language comes out of sensing and noticing in themselves in order to form a connection with the group;
- It also comes from an understanding and knowledge of the principles and aesthetics of dance studies (Brierley, 2012 taken from a lecture on image and the changing body: Dance for Parkinson's Network UK)

The training weekend echoed the fact that moving as a group together, or witnessing the movement of an individual, brings shared experiences and discoveries. It creates a place for recognition and empathy. We had the opportunity to work closely together in training and also work with participants from the Brooklyn Parkinson's group. In this way we were able to share experiences of moving which reinforced the ideas and methods used in our practice. We were also able to take part in Pam Quinn's sessions at the Mark Morris studios. She is an amazing woman who, as a dancer, was diagnosed with PD. She now teaches her own classes which are full of imaginative and useful ideas for helping people with PD to move in their everyday lives. Pam also choreographs pieces illustrating the many feelings and experiences of living with PD.

Whilst in New York, I saw many different images of dance: dancers on the billboards on Broadway, young people exploding into subway carriages with stunning break dance and aerial moves, dancers training diligently in studios, long rows of ballet bars and at The Juilliard Centre, people energetically dancing to Salsa in the street, participants dancing at dance for PD classes. All of these images brought home how much dance plays an important part in our society. It has made me even more determined to discover how dance can help support and give confidence to those with physically debilitating conditions.

At the start of the training we were invited to join in a 'technique' class in order to prepare us for the work ahead. In reflection, one of the most important issues

shared after the event, was the group's anxieties prior to taking part in the class. There was the anticipation of not being able to: move well, being unable to do what you used to do, of not feeling connected, of people judging your movement, of living up to the mark, of feeling worse after trying - so not trying, of embarrassment, of being singled out ... Surely, this could be the way a participant may feel when contemplating engaging in a Dance for Parkinson's session?

In the event, however, people found that they were able to move and that they loved moving. Perhaps they had judged themselves too harshly? Enjoyment was in being able to dance in that moment, of suspending judgment and having fun. Here, I am reminded of the words of Michael J Fox when speaking of his own experience of living with PD:

'If I let it affect everything, it's gonna own everything. I don't deny it or pretend it's not there, but if I don't allow it to be bigger than it is, then I can do everything else.'

(Read more: <http://www.esquire.com/features/what-ive-learned/michaeljfox0108#ixzz2BARUjDpl>)

My experience of working alongside people who have PD in dance class is that they are determined to keep moving, that dancing inspires confidence and increases movement potential, that being with others with the same condition is supportive and heartening.

Melanie Brierley
2012