

Dance/Movement Therapy in Virtual Spaces: Building Practices for Connection

虚拟空间中的舞动治疗：构建联结实践的新范式

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Abstract

The COVID-19 pandemic brought significant changes to multiple aspects of study, practice and teaching in dance/movement therapy. As dance/movement therapy clinicians, educators, and students adapted their practices to virtual settings, questions arose around the concept of embodiment and community building in these new spaces: what does it look like to embody connection and kinesthetically attune to one another through the screen? In this phenomenological study, researchers focused on the experiences of dance/movement practitioners and students as they navigate online tools to innovate teaching, learning, and practice. Through individual interviews and a focus group, researchers invited conversation across diverse perspectives to support emergent knowledge in techniques and practices examining theory and ways to grow and innovate as a field. Participants were able to share their own experiences and model engagement in embodied conversation in a virtual space to speak about these emerging themes.

Keywords: Dance/movement therapy, telehealth, hybrid learning, distance learning, aesthetic presence, embodied presence

摘要

新冠疫情给舞蹈/动作治疗的研究、实践和教学带来了深刻变化。当舞蹈/动作治疗师、教育工作者及学生将其临床实践迁移至虚拟场域时，本质性追问随之显现：屏幕媒介中的联结建构与双向动觉协调如何成为可能？本研究采用现象学方法，考察从业者与学习者在数字化场域中创新教学与实践的具身经验。通过深度访谈与焦点小组，研究人员汇聚多元视角展开对话，旨在探索技术与实践中的新兴知识，并审视本领域理论发展及创新路径。参与者不仅分享了个人经验，更在虚拟空间中通过具身化对话示范，深入探讨了这些新兴议题。

关键词: 舞蹈/动作治疗, 远程医疗, 混合式学习, 远程教育, 审美具现, 身体具现

Dance/movement therapy (DMT), an embodied and kinesthetic practice, has presented practitioners, educators and students with a creative challenge when utilizing virtual spaces. Prior to March 2020, promising practices emerged in the creative arts therapies from the world of telehealth and distance learning regarding adapting to online

spaces (Beardall et al, 2016; Blanc, 2018; Lee, 2018; Levy et al., 2018). Could such embodied practices be effective and supportive within an online and digitally focused environment? The COVID-19 pandemic caused a further pivot in teaching, learning and therapeutic work; one that caused a critical examination of what this work could look like in online spaces. Researchers began to explore how the theories of creative arts therapies could be upheld in an online space (Feniger-Schaal et al., 2022). How would the expressive arts therapies in practice and training be supported by this change and what would be lost? Emerging from this time offers a chance to reflect on the practice of technology and dance/movement therapy.

This study gathered the phenomenological experiences of dance/movement therapy practitioners, educators, and students in online spaces. Questions focused on ways that participants build connection in teaching/learning, telehealth, and community experiences. Researchers explored the knowledge and experience of the participants sharing what they have learned using online tools to innovate dance/movement therapy teaching, learning, and practice.

Through individual interviews and a focus group, researchers invited conversation across diverse perspectives to support innovation in the field and in DMT practice.

Literature Review

The literature reviewed comes from the formative theories in distance learning research as well as specific pedagogical research expressive therapies and distance learning. Authors will review literature related to the clinical practice of telehealth and the expressive therapies both before and during the COVID-19 pandemic as well as community building in online spaces.

Distance Learning Theories

Distance learning and technology in education have been exploring themes of community and connection through extensive qualitative and quantitative research. One highly researched framework in this area is the Community of Inquiry (COI) (Garrison et al., 2010), which builds on three presences in the online learning environment: social presence, cognitive presence, and teaching presence. Each of these presences represents a learner's interaction with the content of the course, their instructor, and their peers. Ideally, in an effective and connected online learning environment, there is constant overlap between these presences and relationship with classmates, instructor's facilitation and by the content itself. Similarly, Lee (2018) spoke about the importance of engaging in a multilayered community of practice, where online learning occurs both in the container of the online course and in the students' everyday lives through social learning activities. Layering experiences both internal to the course and external to the learner's lived experience encourages an authentic and constructivist approach to learning.

Distance learning scholars have also focused on the unique opportunities and benefits that the virtual environment affords (Arasaratnam-Smith & Northcote, 2017). Virtual spaces can start students on a more equal footing, can offer more time for

formulating responses, and can build more agency in social connections. Catyanadika and Rajasekera's study (2021) surveyed 133 online students to connect the importance of developing psychological safety and social presence in online courses to support knowledge sharing behaviors. Developing psychological safety and care online was a key scaffolding to invite social connection that would enhance online discussions.

Expressive therapies educators have also studied the importance of aesthetic presence (Sajjani et al., 2020) and embodied presence (Beardall et al., 2016; Blanc, 2018) in their pedagogical research of online learning. Teaching in the creative arts therapies includes the arts and embodied practices, and these themes also need to be actively present in the virtual learning process. Aesthetic presence in an online classroom forefronts metaphor, imagery, and multi-sensory approaches that are integral to the instructor's approach and presence (Sajjani et al., 2020). Blanc (2018) found in her study that student participants who were enrolled in a hybrid low-residency DMT program benefitted from an active involvement in the learning process as well as community and human connection. The student participants also appreciated the layering of learning modalities in their learning process and found lack of access in experiences where there was a lack of arts-based opportunities.

LeFeber et al. (2023) explored the integration of embodied presence within DMT's pedagogical practice after the COVID-19 pandemic, as educators returned to in-person teaching from online and hybrid spaces. They found that embodied aesthetic presence integrated with social, cognitive, and teaching presence with a foundation of care were a promising practice in DMT pedagogy. DMT educators engaged explicitly in care-based conversations in the classroom while moving from a self-awareness to community awareness, especially within themes of cultural responsiveness. Access for this work was expanded in the online and hybrid spaces, including acknowledging learning styles of students, also continued as learning returned to in-person.

Telehealth in the Expressive Therapies

Levy et al. (2018) studied a tele-rehabilitation program for rural veterans that used the expressive therapies, physical rehabilitation, and mental health support. Authors found that telehealth offered the participants more access and an active role in therapy and rehab services. In dance/movement therapy DMT services, participants self-reported body sensations and postural awareness. Also, there was also positive access to mirroring and observing of micro-movements through the screen.

Levy et al.'s (2018) research was completed several years ahead of the COVID-19 pandemic yet reflected many themes that continued during the pandemic. In many ways, the access and barriers that creative arts therapists experienced were similar, yet compounded by the fact that therapists were experiencing high levels of stress themselves as the effects of the pandemic were felt more widely (Feniger-Schaal et al., 2022). The context of expressive therapies during the pandemic forced a change to telehealth instead of a chosen shift that was experienced in other contexts. Some challenges included the lack of shared physical space and energy and less direct eye contact (Feniger-Schaal et al., 2022). Yariv et al. (2021) cautioned about the loss of initial movement moments and

ways into the DMT-embodied work when using virtual tools, including a questioning of the ability to access shared space in the therapeutic movement relationship.

Benefits included the ability to continue and maintain the therapeutic relationship and an increased intimacy, as therapists and clients were sharing their home environment. Technological tools became another space for creativity and resource, like using the screen as a stage (Feniger-Schaal et al., 2022). There is also a possibility of empowering the client to offer verbal witnessing for any body parts that are not visible on the screen. Yariv et al. (2021) spoke to a about “double mirroring” when clients choose to make their own self-view visible on the screen. Traditional in-person DMT engages therapist and client in an attuning movement experience where the therapist’s body acts as a mirror for the client. With a telehealth DMT session, a client’s movement can be mirrored both on the screen as the view of themselves and through the therapist’s body as a second mirror that can increase the emotional experience of a telehealth session (Yariv et al., 2021).

Keisari et al. (2023) spoke about a “dual experience” (p. 9) in the shift to remote therapy. Both therapist and client were often engaging in a new territory together, affording a joint journey into this new area. There were also restorative experiences within this shift, like the continued or increased accessibility, opportunities for peer support, supervision, and training which that could feel containing rather than isolating (Keisari et al., 2023). The effectiveness of creative arts therapies via telehealth is in many ways comparable to in-person treatment and can overcome geographic and stigma-related barriers (Poletti et al., 2021). Specific to DMT, continued research has supported tracking micro movements and small gestures in online spaces (Garcia-Medrano, 2021). DMT through telehealth also increased a sense of connection and belonging, and although it may take a longer time, it enhances body awareness and embodied empathy. Barriers included environmental factors that were out of the facilitator’s control, like what was present in the client’s space (Feniger-Schaal et al., 2022; Garcia-Medrano, 2021).

Community Building

A need for connection and affiliation are is reflected across communities and exhibited in the use of technological platforms and social media (Wilson Mau & Giordano-Adams, 2016). Membership in social groups supports belonging and identity development. Support systems within online spaces can support collaboration and relationship building with the strong importance of reciprocity in these spaces (Wilson Mau & Giordano-Adams, 2016).

Online support groups can give the participants connection with those who have similar experiences, increasing the feelings of being understood and met in those experiences. Individuals join online community spaces to access support socially, emotionally, and informationally while also holding the importance of storytelling in shared spaces (Erčulj & Pavšič Mrevlje, 2023). The accessibility and immediacy of these spaces are also key reasons that many participants join online community spaces. Hallward et al. (2024) for example, conducted semi-structured interviews exploring the motives of Instagram content creators who shared their experience in eating disorders

recovery. Participants expressed the duality of exposing themselves to support and validation while also risking scrutiny and critique in the online space.

Penfold et al.'s (2024) qualitative survey data explored the ways that LGBTQIA+ young adults engaged with online community content (including creators, interest groups, information, and media) during the COVID-19 pandemic and how participants felt this content affected their relationships and sense of identity. Results showed a desire to have replacements for in-person connections, a time for reflection, finding "others like me" (Penfold et al., 2024, p. 7) and comfort in their identity. Participants' interaction with online content supported a time to reflect and a time to explore their identity in depth due to the visibility and accessibility of this content and community. As scholarship continues to emerge related to online community spaces, it is important to understand the experience of virtual communities and how they support relationship.

Methods

This study was conducted by a research group at Lesley University with faculty, students and alumni and employed a used phenomenological approach. The research was approved through Lesley University's institutional review board. Participants were invited via email through purposeful sampling pulling from professional and alumni networks, with an awareness of experience in online spaces and a diverse representation of generations, ethnicities, races, and gender identities. Two DMT educators, 2 graduate students, and 2 DMT professionals were selected. Thirty-three percent identified as White, 33% identified as Asian, and 33% identified as Black. Sixty-six percent used *she/her* pronouns, 16% used *he/him* pronouns, and 16% used *they/she* pronouns.

Researchers began with 30-minute individual interviews, conducted by a member of the team using the same interview questions. Interviewers were trained by the principal investigator who had extensive experience with qualitative interviewing studies. This was followed by 1.5 hour focus group via Zoom, including all participants in the first round of interviews. All interviews and focus group were recorded via Zoom recordings and transcription.

Interview transcripts were reviewed using *in vivo* coding (Saldana, 2016) with affective and embodied coding focus (Kawano, 2017). Researchers used participants' direct quotes to build qualitative themes and including participant voice directly as another way of community inclusion. Each individual interview was reviewed and coded by a researcher who had not conducted the interview. The initial round of qualitative themes was used to develop four questions for the focus group. Focus group transcripts were reviewed by the entire research team.

Results

The six individual interviews yielded five categories. These thematic categories supported the formation of subsequent focus group questions. Quotes in this section are taken directly from the voices of the participants.

TABLE 1 | Individual Interview Categories

Preparation
Shared energy/energetic exchange
Space limitations and expansion
Agency/autonomy/choices
Tools and practices

Preparation

Before virtual encounters, participants discussed the importance of rituals of preparation. Preparing the physical space as well as their own personal body mind was essential for them to show up actively and mindfully. Students and instructors shared how they felt more grounded and prepared to engage in these encounters if they had been able to engage in their own personal practices (e.g., journaling, meditation, structured movement practice). Students, instructors, and clinicians also mentioned needing to prepare for moments of wavering attention, relying on additional sensory input to “stay grounded” during their time online. For the instructors and clinicians who transitioned from in-person work to fully virtual work, these rituals of preparation allowed them to maintain a pace that was similar to their in-person schedules. For example, one participant shared that the gap left by the absence of a traveling commute to and from an office needed to be filled with a “movement commute” to “bookend” the working day, allowing a smooth transition in and out of the different roles of the day. Transitional movements supported the energy and efforts spent during online encounters.

Shared Energy/Energy Exchange

Each participant shared some aspects of the ways that energy, connection, presence, and embodiment related to the way that relationships were built, and that learning could be supported. One educator stated that her own “introspective and reflective teaching style” was supported by having an in-person residency component where the learning community could engage energetically and kinesthetically with one another. She also shared the ways that embodiment grew developmentally for learners; engaging in an “entry level of embodiment” from which their learning could enhance and continue in online spaces from this foundation of in-person practices. A student also stated the importance of feeling one’s “personal identity reflected in the space” bridging in-person and virtual learning.

Students also shared their learning preferences for feeling a “connection to the learning space” of which “energy of the space being a big component.” One student shared that they felt connected and attentive/ready to learn when there was an exchange of “energy sending and sensing.” One educator reflected a similar theme when they spoke about the “relational dynamic between ourselves, the camera, and whoever else” in virtual learning spaces. There was also a common theme of embodiment as an energetically “outside to inside experience” and in virtual spaces embodied practices

could serve to “thwart disengagement.” Clinicians reflected on the ways that they transitioned therapeutic relationships to the virtual space versus navigating building those relationships for the first time via telehealth. One clinician stated that she would explicitly share the relational aspect of therapy differently than she had with in-person work. Participants also spoke of shared experiences in virtual spaces that built relationship, like sharing the experience of world events. Lastly, clinicians expressed feeling “more drained” after a virtual session and spoke about the amount of energetic work that it took to focus with this therapeutic modality.

Space Limitations and Expansion

Participants communicated about the role the environment and space plays when meeting in virtual spaces. They noted that virtual spaces can sometimes offer greater accessibility for facilitators and clients, but they also mentioned multiple limitations. One participant described the ability to move freely as a “luxury,” highlighting how the small view within a Zoom box can be restrictive. Many participants referred to the virtual space as “minimalistic” due to physical constraints and the limited area available. Contrastingly, participants also shared how their personal identities were reflected in their virtual spaces. One participant emphasized the “value to my identity in this space,” while another felt “nourished by the things that I have ... decorating the walls.” For example, one participant mentioned using the camera blur feature to minimize distractions in a “very confined space” with “a bit of clutter.” Participants also discussed the limitations of the virtual environment, noting that the “atmosphere” is challenging to replicate online. It was observed that the co-creation of a physical space in in-person settings is often missing in virtual ones. Despite these limitations discussed, participants acknowledged that engagement is still attainable within virtual spaces.

Agency/Autonomy/Choices

Participants discussed the ways they have experienced greater agency, choice, and accessibility in virtual spaces. They also acknowledged specific drawbacks regarding virtual spaces. Educators, students, and clinicians shared about the value of allowing for movement and bodily autonomy (including the option to have cameras on or off) during virtual meetings. One educator expressed that “being able to have choices feels really important,” and provided their students agency in “allowing them to move away from the camera, trusting that they’re doing what they need to do.” Regarding virtual spaces, a student stated, “I feel the autonomy to make choices for my body a little more freely.” Another student shared that learning virtually provides a feeling of freedom that “I don’t have to feel pressed to do what I feel called to do.” However, one student mentioned that meeting virtually often means that a dance/movement space is not accessible, either due to space limitations at home or lack of access to campus resources.

One clinician shared that she could serve a larger population with the virtual option, providing “access without having to relocate.” Still, participants discussed how adequate technology can be a barrier for clients and students, including access to accessibility tools and updates that can incur costs. Clinicians, educators, and students all noted that

access to a private environment for virtual meetings can also be a barrier to accessibility. They also started to explore how virtual meetings may not be conducive to all styles of learning. Yet, one educator suspected that younger generations (their students) were much more comfortable than older generations with the videoconferencing medium, and “they probably use it in a more sophisticated way.”

Tools and Practices

Coupled with the expression of autonomy, the participants spoke directly about the tools used for engaging in a virtual space and the ways in which those interactions might look. Across all groups of participants, there was dialogue around the technological complexities of being a part of a virtual space. Although articulated differently, student and teacher participants mentioned shared agreements and/or classroom rules and norms as being beneficial to the overall virtual classroom experience and more specifically, allowing space for check-ins around student feelings related to university changes.

Educators and students reported the use of breakout rooms as a tool that enhances engagement in a virtual space. One teacher reported that allowing a student to move freely on and away from the camera enhanced a student’s ability to stay engaged. Clinicians expressed that the camera could be a limitation by not capturing the entirety of client’s environment or body language or nonverbal communication. They subsequently stated that inviting prompts to move back to allow more movement space or invite clients to report their own sensations helped to support those barriers.

Focus Group Thematic Analysis

Questions for the focus group centered around levels of embodiment, creating container, power dynamics, and the role of community in virtual experiences. Researchers identified five categories and seven subcategories.

TABLE 2 | Focus Group Categories and Subcategories

Energy	– Dynamic interplay
	– Agency and freedom of choices
Practices	– Verbal/nonverbal
Transitions	
Therapeutic container	– Space and environment
Power dynamics	– Shared experiences in COVID-19
Community building	– Kinesthetic understanding

Energy

Participants in the focus group agreed that maintaining presence in the virtual spaces requires a different level of energy. Coming from the lens of dance/movement therapy DMT, participants spoke about the ways that presence and embodiment were interchangeable for them, “Is it just actually just one in the same, one other way to say it?” When they spoke of energy, participants were not just speaking about internal and individual energy but also the importance of the exchange in energy. One participant said, “it’s really important for me to feel the energy of the room,” and another said that the “recognition of embodiment is important for me to be recognized in the space and for others to know that I’m present.” In-person experiences afforded the opportunity to have the “friendly interruptions or like sharing the environment,” which are missing in the virtual space.

Dynamic Interplay

Students and therapists named the importance of being aware not only of one’s sense of embodiment but also what is “happening on the other side of the screen.” There was discussion of the way that visual cues became a way to sense a client, student or peer’s engagement in virtual sessions, which were often met with a kinesthetic response. For example, “sensing disembodiment on the other side of the screen ... that I sort of respond in proximity to (the) screen, right? Like, I do this leaning in.” Modeling physical cues to those moments of observing disengagement was a common response to that perceived sense of disengagement. Participants spoke about what they did to increase or invite embodiment both for themselves and for the person on the other side of the screen.

Agency and Freedom of Choice

Another energetic exchange in support of embodiment and presence was the use of choice and agency. Participants spoke of the importance of having a collaborative space for choice-making to be able to regulate their own presence and participation. One participant stated that having “clear intentions and expectations for how we use the online space to try to allow space for collaboration, but also space for choice ... so finding that flexibility, I think, within the space but also trying to hold clear boundaries.” Space for collaboration and connection were important while also holding space for each person to engage from their own level of presence and/or need for witnessing.

Practices

Similar to the individual interviews, conversations emerged in the focus group around what practices used in their multiple roles in online spaces. One participant stated the need for both grounding practices and energizing practices, “I have to feel really kind of centered in my body. ... I need to really do something that’s really aerobic that helps me to stay engaged on the screen.” Many participants also spoke about the need for a

connecting practice or community check-in facilitated by the leader of the virtual space. Connecting with their bodies and their humanness was an important piece to invite participation in whatever task the space required. There were also conversations around technical tools like turning off self-view to aid in focus or in DMT facilitation, turning on self-view to support mirroring practice and attunement with a client.

Nonverbal/Verbal

Participants also noticed shifts in both nonverbal and verbal engagement that differed from in-person interactions. One participant spoke about using more facial expressions in telehealth to communicate their affect and presence. Several participants spoke about eye contact and where they were placing their gaze. Awareness of viewing the top half of the body was another nonverbal observation and including ways to invite lower body awareness and/or movement became more present. For verbal interactions, the tolerance of longer pauses in verbal responses and waiting in those moments was shared. One educator was aware of their own adaptation to interject more than they would in the in-person classroom space, “I was just observing that, I’ve been doing that more so, this verbally interjecting when I’m online versus when I’m in person, which I think is interesting.”

Transitions

Transitions between sessions, classes, and meetings was another salient theme. Participants differentiated between the fluid and physical transitions in person (walking out of the office or down the hall) and the distinct abruptness of virtual transitions. As such, participants spoke about their needs to create mindful transitional practices between virtual sessions that would support their bodily needs (moving, getting water, etc.) and create a better pacing. One participant named that due to the quick turnaround between online sessions, their “personality gets lost in that” and mindful transitions help against that.

Therapeutic Container

Participants discussed the importance and the challenges of creating and maintaining a supportive therapeutic container in virtual environments. Although in-person settings, either in a classroom or in a therapeutic space, can rely on the shared physical boundaries between clinician and client, instructor and student, the boundaries of the virtual environment must be clearly defined and agreed upon. Behind the Zoom box is a world of unknowns that can affect each participant’s capacity to fully engage and be fully present. Focus group participants highlighted the importance of “explicit and transparent naming” in order to create those boundaries. Stating and asking for confirmation of privacy and confidentiality and of comfort is a regular part of establishing the therapeutic container. Questions such as “What is it that you need in your space to be comfortable and present in the work?” were asked in order for clients and students to be able to begin to create their physical comfort and establish their boundaries in the virtual space.

Space and Environment

The importance of a separate physical space for work, learning, and teaching was also named. Feeling that there was a space dedicated to work supported that containment, “now I’m in work mode.” Clinicians also spoke about ways to encourage clients to do the same to support confidentiality and experience of container in their own space.

Power Dynamics

Participants spoke about ways that they presented themselves in the virtual space related to power in the therapeutic relationship as well as teaching and learning. Dressing “professionally” was an important piece to encourage “the students feel like this is a person who is coming to us with a certain amount of knowledge.” For telehealth, there was a heightened awareness of power in the therapeutic relationship, especially related to questioning what it was to “look professional” in this context. This idea of presentation also connected to gender and racial identity for participants. One participant spoke about their gender bringing an “expectation to talk more” as a male-identifying person. This also arose as non-white participants’ experiences in predominantly white spaces and interacted with ways that professionalism was traditionally defined in those spaces.

Shared Experience in COVID-19

Discussion also focused on virtual spaces through the shared experience of the COVID-19 pandemic. The fact that people had “equal sized boxes on Zoom” offered a shift for many spaces and invitation for people to regulate their own needs through the use of camera and microphones. Power dynamics were more palpable and harder to regulate in person while in an online community everyone is in their own space with more control over grounding, preparation, and engagement choices.

Community Building

Participants shared their perspectives on the impact that virtual spaces have on their ability to foster community with other individuals. Physical distance was noted as a particularly impactful barrier to this development. As a participant referred to it, one aspect of community that is missed out on in the virtual space “is all of the little interactions that would happen if we’re physically in the same space.” Another participant mentioned the “humanness that gets sort of missed, like the water cooler talk.” This sentiment was shared across the student, educator, and clinician participant groups.

With physical proximity came a greater ease in maintaining fluidity and cohesion of community conversations, which the participants suggested can be lost in virtual spaces. There was less inherent community in telehealth/distance learning, as one clinician said “as an individual therapist, I mainly just sit there with my client. I don’t really know who my colleague is and we also don’t really talk to each other like that. My only support becomes my supervisor.” Feelings of community were also interrupted by the direct nature of virtual interactions, “virtual is more direct straight to the point,

there's less opportunity for spontaneity unless it's invited (explicitly) within a virtual experience.”

When there were existing relationships, however, virtual connections were often experienced as an extension of in-person community, where participants felt “grateful for it, feeling grateful for that opportunity to connect in that way.” These connections were intentionally recreated virtually like the example of offering an open co-working time where students could be online together, replicating what an office space would feel like if they were on campus.

Kinesthetic Understanding

The need to engage with others in an embodied way before interacting in virtual spaces was also an important piece. Participants spoke about the need for a “kinesthetic understanding” of others in order to feel connected as a community. This was experienced in hybrid offerings such as low-residency educational offerings where students and faculty engage in in-person learning and then continue online. The importance of those physical engagements to “sustain the virtual experience” was crucial, as one participant stated, “that energetic exchange can be remembered and then you can start to be a little bit more sensitive and attuned based off of that information and bring that to the virtual space.”

Discussion

The interface of virtual technologies and embodied practices like dance/movement therapy DMT can seemingly be disparate and in philosophical conflict. The recent necessity of online tools in clinical practice, teaching, and learning has brought challenges but also opportunities to examine expansion of these practices. This qualitative study captured experiences of virtual spaces across professional identities in DMT. Findings of the pilot study highlighted the importance of the interchange of energy in DMT online spaces, and the integral way embodied and kinesthetic understanding of others could build into further learning and therapeutic growth. Participants shared ways that scaffolding of these embodied experiences supported DMT in online spaces. Participants also spoke about the ways that experiences of community in online spaces intersected with agency, choice, and power dynamics. In these spaces, there were opportunities for shifting traditional power differentials in the classroom and therapeutic spaces because of the equitable nature of online tools.

Fluidity and Directness

Scholars have written extensively about ways that aesthetic and embodied presence can be retained in online spaces (Blanc, 2018; LeFeber et al., 2023; Sajjani et al., 2020). Study participants reiterated the themes from early distance learning studies about the importance of an energetic exchange that could be remembered. The “kinesthetic experience” of peers or clients was named as an important building of relationship across spaces. Similar to LeFeber et al.’s (2023) results, there was an importance of oscillation from the therapist/student/educators’ body awareness to the person on the other side

of the screen. Participants went a step further to speak about the “direct-versus-fluid” experiences of this oscillation. In virtual spaces, there was more of a direct, explicit, and at times verbal translation to bring the embodied forward, which in person could be a fluid experience. Both skill sets are important and are reflected in early studies like Levy et al. (2018) when they reported clients showing more explicit naming of their own body states in telehealth. As an emerging best practice, participants in virtual spaces can build skills of more explicit naming of embodied experiences for clearer communication.

Scaffolding

Theme in the discussions built on one another. Participants shared the importance of flexibility, agency, and autonomy in online spaces. Students and clients were able to take care of their own embodied needs in the culture of video-conferencing. When facilitators extended group agreements to the virtual space, there was also an increased agency and body autonomy. A participant could turn off their camera or microphone when needed and could use the chat feature to engage when verbal processing was not accessible. Previous studies have also spoke of the ways that online communities increased experiences of psychological safety (Catyandadika & Rajasekera, 2021; Penfold et al., 2024).

These intentional practices of building community in online spaces can subsequently affect the sense of power dynamics in those spaces. Participants spoke of the shared experiences in early COVID-19, which shifted some roles and power hierarchies, also reflected across literature on telehealth shifts during COVID-19 (Feniger-Schaal et al., 2022; Garcia-Medrano, 2021; Yariv et al., 2021). Participants agreed that there was expanded collaboration in virtual spaces and also an invitation for multiple ways to be engaged. Furthermore, when community and personal engagement occurred in online spaces, participants spoke about the ways that this leveled their experiences of power differences. This was reported mostly in educational settings but could also be explored in clinical relationships.

Intention and Awareness

Participants spoke repeatedly about the importance of rituals and practices that supported their own engagement in online spaces. There seemed to be a mindful intention of the transitions differently than in person. The feeling of the “camera as witness” added an additional level of awareness and intention that otherwise may have been assumed, connecting to Yariv et al. (2021) concept of double-mirroring where the client is both mirroring themselves and being mirrored by the therapist.

There were also ways that intentional practices could affect the creation of community building and engagement. Participants were aware of these themes in a much more explicit and clear way that could be brought into the relationships with a potential for increased connection. These themes were also reflected in scholars’ writings about psychological safety (Catyandadika & Rajasekera, 2021), reporting of body awareness (Levy et al., 2018), and intimacy in the sharing of experiences (Feniger-Schaal et al., 2022).

Lastly, participants expressed gratitude for the opportunity to share and connect about their own experiences and new awarenesses about engagement in online spaces. They were able to pause in their own work and name new learning about virtual spaces. Several times throughout the focus group, participants were able to not only speak about past experiences across roles but also to name something that was happening for themselves in the moment. Conducting the focus group conversation through an online format allowed participants to speak about experiences of an online space, in real time in an online environment. Literature has continually reflected the ways that we are constantly learning about tools and technology (Erčulj & Pavšič Mrevlje, 2023; Hallward et al., 2024; Penfold et al., 2024), and as innovation continues, naming these changes can support practitioners in their own continual learning and awareness.

Limitations and Future Directions

Innovation requires constant inquiry as new methods of communication expand and grow. One limitation of this study was the community to which the researchers had access. This pilot study focused on participants from an academic setting and did not address the experience of those receiving DMT treatment online. A further area of inquiry could be to survey clients' experiences of DMT in online spaces to better understand the ways that these practices are being received, as well as a purposeful sampling of participants who identify as kinesthetic and visual learners to expand the diverse perspectives around how individuals prefer to learn and connect with others.

Also, a future direction could be exploring the ways that the COVID-19 pandemic has affected our modes of connection. Although online tools were supportive during a time when there were no other ways to connect, how do these tools shift our ways to connect in an embodied way? For some people, returning to the use of virtual tools could feel disadvantageous due to their experiences in the early pandemic associated with loss and trauma. Some participants spoke about the ways that using online tools when in-person connection is possible was a huge barrier for their engagement in spaces. Future studies could examine the ways that online tools can be used as a default without considering the learning styles or preferred engagement methods for individuals. This pilot study project begins to build conversation of online tools across teaching, learning, and practice to inform future studies in these areas.

About the Author

This research project was conducted by the Dance/Movement Therapy and Technology research lab at Lesley University, under the direction of former dance/movement therapy program coordinator Dr. Valerie Blanc. The lab's work focuses on the application of technology in dance/movement therapy practice, teaching and learning. Co-researchers were Dr. Valerie Blanc, LMHC, BC-DMT clinical director at The Artful Life Counseling Center and Studio; Darrel Hyche, MA, R-DMT; Sahita Pierre-Antoine, MA, R-DMT; Nicole Rivera, MA, R-DMT; Ambrie Sward, MA, R-DMT; and Clare Terrio, MA, R-DMT.

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