Follow My Lead: Partner Dancing as an Intervention for Couples Therapy

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FOLLOW MY LEAD: PARTNER DANCING AS AN INTERVENTION FOR COUPLES THERAPY

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Submitted in partial fulfillment of the requirements for the degree of Master of Science in Dance/Movement Therapy

Sarah Lawrence College
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As I move my body in my living room, my movements not just reflect me but all the people who have contributed to my being. This thesis would not have been completed without the guidance and support of a lot of these people who have crossed my life for various reasons.

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Abstract

Couples seek therapy for various reasons, including managing or navigating conflict, aggression, and infidelity, separation or divorce issues, and navigating psychological disorders or medical issues. Differences in communication style can also contribute to conflicts in couples, and much of this communication happens on a subconscious, non-verbal level. This thesis proposes utilizing the elements of partner dance, such as nonverbal communication through the roles of lead and follow, use of music for synchronicity, spatial proximity, gesture and posture as interventions in dance/movement therapy with couples. Dance/movement therapy can help individuals be more aware about themselves, express themselves and communicate with others in an authentic way. Dance/movement therapy has the ability to foster attunement, empathy, and social bonding in individuals. Dance/movement therapists may facilitate joy, attunement, empathy, emotional regulation, conflict management, effective communication and intimacy between couples utilizing the framework of partner dancing.

Keywords: partner dancing, couples therapy, dance/movement therapy, non-verbal communication, conflict management, lead and follow, mirroring, bonding
Table of Contents

History and Applications of Couples Therapy.................................................................5
Partner Dancing and its History......................................................................................13
    Basic Components of Social Partner Dance Forms....................................................16
Dance/Movement Therapy and its Applications...............................................................20
    Dance/Movement Therapy with Couples.................................................................27
Discussion........................................................................................................................29
References.......................................................................................................................39
Human beings have always been inquisitive about our own kind (Yalom, 2005). Although there are various schools of thought around the evolution of an individual, none of them have developed in a vacuum. It is always through understanding one’s interpersonal relationships (Yalom, 2005). Orbach (2003) argues that there is no such thing as a body and that the body exists only in relation to others. Yalom emphasizes the importance of the need to belong, and that the survival of human beings would not have been possible without creating deep, positive, reciprocal interpersonal bonds (2005). Bowlby states that the parent-child attachment is not only necessary to survive but also genetically built-in. James states that this stems from an innate need to be noticed by our same kind. Sullivan further states that the development of self is through the reflection of their significant others. Fishbane (2015) explains how humans are wired to connect with others. As the field of psychology is evolving, there has been a shift from one-person Freudian psychology to a two-person relational approach based on the acknowledgement of the importance of relatedness and attachment (Yalom, 2005). Fishbane (2015) emphasizes that the notion of a separated self is outdated and that the root of human self is relational.

**Couples Therapy and its Applications**

Humans seek intimacy, support, and companionship through relationships. Relationships are defined as any association or connection between two or more individuals (Gonsalves, 2021). These connections can be positive, negative, emotional, physical, platonic and/or intimate. According to Gonsalves (2021) there are four basic types of relationships: family relationships, friendships, acquaintanceships, and romantic relationships. Gonsalves (2021) further breaks down these relationships to include roles such as professional, student-teacher, community/group relationships, location-based such as roommates, landlord-tenant, enemies or rivals and
relationship to self. This thesis focuses on romantic dyadic relationships. This could include two individuals dating short term or long term, who are committed exclusively (monogamous) or non-exclusively (polyamorous), and are emotionally and/or sexually involved (Gonsalves, 2021). The couple could be married or unmarried.

Gottman and Gottman (2015) highlight that frictions usually emerge from differences in perception and need in interactions and experiences, leading to misunderstandings, hurt feelings, escalation, anger, pouting, sulking and emotional withdrawal. Conflicts can evolve into consistent interactional patterns between two individuals in a relationship (Fruzzetti & Payne, 2015). Fruzzetti and Payne (2015) assert that these patterns can be healthy or unhealthy. In mutual avoidance and withdrawal patterns, individuals avoid bringing up important issues or have a period of avoiding interactions as a consequence of negative reactions to emotional arousal by both partners in the relationship. This decreases closeness and intimacy even though the couple might be having fewer arguments. When a couple engages in a mutually destructive engagement pattern, the couple mutually attacks each other and expresses extreme anger and become so emotionally volatile that they could forget they are interacting with a loved one. Partners fail to listen to each other and understand each other's point of view. The next time a conflict arises, it increases a partner’s vulnerability to negative emotional reactivity. The engage-distance pattern, also known as demand-withdraw pattern, often develops when one partner wants to engage in discussion about a topic but the other withdraws or does not want to engage at the moment. This pattern results in distance or disconnect between the partners (Fruzzetti & Payne, 2015). If these conflicts and patterns of interactions are not addressed and/or processed, it could lead to dysfunctional relationships which not only affect the partners but also their families and children. People in troubled relationships can often develop anxiety, depression, substance
The goal of couples therapy is to foster a constructive engagement pattern where partners feel safe to bring up issues and express themselves without attacking the other person. Creating this space for each other to be able to listen and understand each other’s perspectives is where the role of the therapist comes in.

Couples seek therapy due to various reasons. These reasons include inability to manage or navigate conflict, aggression, and infidelity, separation or divorce issues, and navigating psychological disorders or medical issues. Gottman (2011) normalizes having conflicts and states that happy couples have conflicts too. However, successful relationships don’t get stuck in negative and/or hostile cycles. The role of a therapist is to help individuals in a dyadic relationship take a gentle approach to conflict. Through constructive conflict management and problem solving, a therapist can help couples navigate their relationship (Gottman & Gottman, 2015). Couples therapy can also help individuals in a romantic relationship manage and navigate the impact of various psychological and medical issues, and gain more awareness into their relationship. Couples therapy gained popularity only in the mid to late 1960’s (Gurman, 2015). Before that it was only service oriented professionals like gynecologists or family life educators who used to offer “marriage counseling” about family and marital roles and societal values. The term “couple therapy” has only recently replaced the term “marital therapy”. Couples therapy focuses on the bond between two people, whereas “marital therapy” signified a societal norm which could potentially negate the relationship between two unmarried people. There are various approaches to couples therapy and each approach focuses on certain goals based on their research and theory of how functional relationships should look. Gurman (2015) asserts that most of these approaches will have five “ultimate goals” which are reducing psychiatric
symptoms, or improving presenting problems if psychiatric symptoms are not very evident; increasing resourceful skills (e.g., enhance communication, problem-solving, conflict resolution skills and build coping skills and adaptability); working on individual psychological needs like attachment, cohesion and intimacy; helping the dyad improve interactions with larger social systems; and bringing awareness and understanding to patterns of interaction which influences each other’s quality of living.

Some of the reasons why partners encounter friction in a relationship are power differentials, lack of, or differences in, communication styles, boundaries, intimacy, trust, values, beliefs, and culture. Haley (1963) believed the main reason for conflict between a couple is power dynamic. When there is a “hierarchical incongruity,” problems arise in the relationship due to lack of communication or ambiguity regarding “who is to tell whom what to do under what circumstances” (Haley, 1963, p. 227). In today’s world, couples aspire to egalitarian power sharing as opposed to being patriarchal (Pinsof et al., 2015). Fishbane (2015) believes emotional regulation is at the heart of the power differential. When distressed partners do not know how to convey their needs calmly, one may resort to dominating behavior or may get frustrated and shut down or submit. Gottman (2015) labeled these as “The Four Horsemen of the Apocalypse” which are criticism, defensiveness, contempt, and stonewalling. Criticism is when a partner states a problem as a deficit in the partner’s character. When a partner tries to protect themselves or counterattacks, they get defensive. Contempt is when a partner includes sarcasm, direct or indirect insults, or name calling to show their superiority. The fourth horseman, stonewalling, is when a partner disconnects emotionally in a conversation. One of the solutions for stonewalling is learning and applying self-soothing techniques to reduce one’s physiological arousal and thus remaining engaged emotionally. Pinsof et al. (2015) assert that the role of the therapist is to help
couples figure out their leadership style based on their needs, capacities, and contextual demands. These leadership patterns could change based on needs and environmental change, and each individual in the relationship is encouraged to be flexible and open to communication (Pinsof et al., 2015).

Differences in communication style or lack of effective communication skills is another common reason for conflicts in couples. Johnson (2015) asserts that how a couple fights is more important than what they are fighting about. Reflective listening is an effective communication skill where one partner tries to listen to the other and then rephrase what they heard in order to make the speaker feel heard and understood (Fredricks, 2021). It is used as an intervention in couples therapy where each partner takes turns being active listeners. It demonstrates interest and effort to connect on a deeper level. Practicing reflective listening can help a couple improve communication (Fredricks, 2021). Reflective listening is applied in various different approaches such as Cognitive Behavioral Couple Therapy and Narrative Therapy.

Effective communication is not just limited to learning or enhancing verbal skills (Fishbane, 2015). Neurobiology suggests that neural activity is not just connected to the brain, but is a bidirectional flow between the brain and the body (Damasio, 2010). The vagus nerve sends information to the brain, where we name the feeling, from the viscera (gut, heart, lungs). Being aware of one's body’s cues, also known as interoception, helps one recognize and verbalize one’s own emotions and also read the emotions of others. A person's interactions are hampered if they are unable to read their own or other’s emotions. Emotions serve as a survival function where one can sense what is safe and what to avoid, thus acting as a basis for communicating with each other (Damasio, 2010). Fishbane (2015) affirmed that research shows facial muscles (particularly around the eye) specialize in expressing emotions, and neurons in the
brain specialize in reading these emotions. Most of this communication happens on the subconscious level. When individuals in a relationship unconsciously read each other's emotions, one partner's raised eyebrow could be a signal for fighting, resulting in escalating any situation or conflict through these rapid subconscious interactions (Fishbane, 2015).

Fishbane (2015) stresses that having boundaries is critical in all relationships. Lewis (1989) argued that every relationship has its own balance of interdependence and independence. Pinsof et al. (2015) state that boundaries regulate one's proximity. It helps one create distinction between self and others (Killian, 2015). There is a “partner boundary” that each member of the couple establishes for each other and then there is a “couple boundary” that differentiates themselves from the society. Lack of boundaries and failing to communicate boundaries create discrepancies within the relationship that could result in various issues or conflicts. For example, a couple presents with intimacy issues, and the therapist is informed that one of the individuals always has their phone available for their patients throughout the day and night, interrupting the time meant to spend with their partner. The therapist first has to address the issue with the lack of boundary between work and personal life before anything else (Pinsof et al., 2015).

Robles and Kiecolt-Glaser (2003) state that the quality of one’s health is directly proportional to the quality of one’s intimate relationships. Oxytocin, a feel good hormone, is released with gentle touch, massage, orgasm, childbirth, nursing and empathy (Fishbane, 2015). Also known as the “cuddle chemical”, oxytocin not only facilitates bonding between caregiver and babies, but also between adults in a romantic relationship (Feldman, 2012). Fishbane (2015) points out that by fostering physical connection like hugs, massage and sex, partners in a romantic relationship nurture each other and seek intimacy. Touch regulates our internal homeostasis by producing feel-good chemicals like oxytocin and dopamine thus resulting in
fostering social connection (Petrella & Rovers, 2014). Fruzzetti and Payne (2015) express that inability to manage or navigate a conflict can lead to frustration, bitterness, blame, judgment, and increased distance, leading to little or no physical intimacy. Couples could also struggle with intimacy due to various psychological and medical issues. Facilitating clear communication and reframing are some interventions used to treat these issues. Reframing is an intervention used by therapists to help an individual or the couple look at the issue from a different perspective (Fruzzetti & Payne, 2015).

Issues in communication, or differences in perceptions, values and beliefs can arise due to differences in various cultural identities like race, nationality, ethnicity, socio-economic background, gender, religion, language, societal constructs, and upbringing (Killian, 2015). Thus Killian (2015) emphasizes that therapists prioritize and recognize how privilege and power intersect with ecosystems of various cultural backgrounds and gain a deeper understanding of its impact on the relationship between two individuals. Many conflicts arise due to the inability to see or understand the other’s point of view. By deepening one’s knowledge of their partner's cultural identities, one can acknowledge their partner’s perspective and thus foster empathy and connection.

Gottman (2015) introduced the concept of Sound Relationship House Theory for couples to have tools to have a secure healthy relationship by communicating effectively. According to Gottman, a foundationally secure partnership is like a house. It has different levels, or floors, and weight-bearing walls that each partner builds to create a strong bond. The first level, Building Love Maps, is about getting to know each other. Sharing Fondness and Admiration is about vocalizing the characteristics one appreciates about their partner in small everyday moments. The third level talks about being able to create a space for each other and turn towards one’s
partner when they express the need for attention, support, and comfort, vocally or through
gestures. The fourth floor is Positive Perspective, meaning that partners give each other the
benefit of the doubt and refrain from criticizing and offending. Gottman believes the next level,
Managing Conflict, is key to a long-lasting healthy relationship. Managing Conflict involves
accepting a partner’s feelings and desires, opening a dialogue about an issue, whether it is
solvable or perpetual, and learning to apply self-soothing techniques to reduce one’s
physiological arousal during a heated argument. Honoring one another’s life dreams and helping
each other achieve them shows that one wants the best for their partner. The top of the house is
about the couple creating rituals of connection, commitment, and support together to express and
represent who the couple is as a team. Gottman believes members of a couple develop meaning
by honoring the roles they play in life. Careers, roles as family members, leader, or
philanthropist, exhibits the variety of roles we all embody in life. The therapist can help the
couple process how they support, appreciate, and complement each other’s roles.

The Sound Relationship House cannot stand without the pillars of Trust and Commitment
(Gottman, n.d.). Gottman suggests that building trust and commitment between each other might
be attained by practicing attunement (Gottman, 2015). He defines attunement as listening to and
processing a partner’s negative emotions in a non-defensive manner with empathy. Gottman
elucidates certain “blueprints” that the therapist provides to the couple for down-regulating
negative conflicts, enhancing positive affect and creating shared meaning in a relationship.

Emotionally focused couples therapy has developed ways to enhance emotion regulation
and responses which lead to increased emotional responsiveness and bonding interactions.
Johnson (2015) mentions one of the roles of the therapist is to nurture “effective dependency”
which means depending on each other to empower and support individuality and autonomy in
each partner. Johnson (2015) believes the ultimate goal of therapy is to develop new patterns of interactions which would create secure bonds and positively reinvent the nature of the relationship.

Fishbane (2015) asserts that in addition to regulating one's own emotions, a successful partnership involves attuning to the partner’s emotions as well. She encourages partners to become co-authors in a relationship. Nurturing “we” as opposed to “me” promotes empathy, resulting in creating deeper bonds. She further explains empathy starts with eye contact, which helps in reading others’ emotions. With the fast growing technology of texting and emailing, individuals are deprived of face-to-face non-verbal communication. Fishbane (2015) develops the reflective listening intervention into role-playing where the therapist asks the couple to switch seats and act as the other from time to time. The couple could even replay a stressful situation, each taking the other’s role. This intervention allows the partners to experience what the other partner feels in their body, and thus facilitates empathy. Fishbane encourages therapists to shape interventions depending on the dynamics of empathy (2015).

**Partner Dancing and its History**

Dance is a set of rhythmic or non-rhythmic movements that can be defined as a form of non-verbal communication (Garfinkel, 2017). It is not limited to humans and is performed by various animals for information exchange (bees) or courtship (insects, fish, birds) (Garfinkel, 2017). Gabitov et al. (2016) state that gesture, movement, and dance were the first language to emerge long before written languages and music. People communicated their experiences and various states of emotions individually or in a group. Dance/movement was the most widely used method to pass down stories intergenerationally before the invention of written languages (Gabitov et al., 2016). Garfinkel (2017) describes how the origin of dance is associated with
courtship activity in which an individual uses non-verbal communication to attract a mating partner. He describes how dance started as an activity for the purposes of courtship in prehistoric times, earlier than 100,000 years ago and later imbued more social functions (Garfinkel, 2017). Garfinkel further suggests that since dance does not require verbal communication, music or communal rituals, dance as a method of courtship could have existed before any other functions of dancing emerged.

Partner dancing is any dance form that involves two individuals moving together over a series of coordinated steps, as opposed to dancing individually. Upon additional research on the history and origin of specific partner dance forms, such as Latin and Ballroom, the link between partner dancing and relational connection is furthermore clear. Drake-Boyt (2011) states that no one is entirely sure when and where partner dancing first appeared, however it is believed that it evolved from the court dances of Provence, France as part of the courtly love and troubadour traditions (Drake-Boyt, 2011) Ballroom dances have similar structures to ballet, as they both originated in the royal courts of Europe. Some of the ballroom dance forms are Waltz, Foxtrot, Rumba, Tango and Quickstep.

Harman (2019) describes how the Waltz, derived from a German peasant dance, the Ländler, symbolized romance and ‘proffered the ideal overture to courtship’ in among people belonging to a higher socio-economic class (Buckland, 2011, p. 10). Balls played an important social function, allowing people to meet in a large space to socialize and dance. Such balls could also facilitate couples meeting and later joining together for marriage, which had the function of preserving the social positions of the families involved, given their frequently similar backgrounds (Buckland, 2011).
Latin dance forms are among the most popular social partner dances for couples in the United States (Drake-Boyt, 2011). Latin dances historically come from Spain, Latin America, and Africa (Drake-Boyt, 2011). Latin dances can be danced individually or with a partner. Some of the Latin dance forms which require to be danced with a partner are Cha-cha, Rueda de Casino, Rhumba, Salsa, and Bachata. While there are some forms that seem to overlap between Latin Dancing and Ballroom Dancing, such as Tango and Salsa, the structure and the postures of the two forms are different. Drake-Boyt (2011) identifies two types of Latin dances, Spanish Latin dances and Tropical Latin dances. Spanish Latin dances are defined as having direct roots from Spain along with connections from North Africa. Tropical Latin dances derived from the Caribbean islands such as Cuba, Puerto Rico, and the Dominican Republic where they blended with African influences. According to Denniston (2007), Tango is a street dance that originated in the 19th century, mixing elements of music and dance brought to Argentina by immigrant communities. The majority of the immigrant population were men. In Argentine society, the only acceptable way for a man to meet and charm a woman was by dancing the Tango, so, in order to please the women, the immigrants had to learn to dance Tango. They had to learn it well, or else the women wouldn’t dance with them. In this way, the Tango became an expression of the fundamental human need, “the hunger of the soul for contact with another soul” (Denniston, 2007, p. 15).

Drake-Boyt (2011) asserts that Latin dance is the ultimate expression of couples’ social dancing in the United States. She argues that this is because Latin dances allow the dancers to explore the balance between power dynamic and pleasure through the roles of leading and following. The main essence of Guaguancó, an Afro-Cuban Rumba dance, is the flirtatious play between two people. Traditionally, the movement of the woman’s role exhibits trying to attract
the man and being cautious to not get a *vacunao* by the man. *Vacunao* signifies the symbolic action of the man thrusting his pelvis towards the woman in a sexual context. In the dance it can look like the flip of a handkerchief, or throwing one’s arm, leg or pelvis towards the woman. The woman tries to play hard to get by covering her pelvis with her skirt. The very essence of this dance form is based on building an intimate relationship between two people.

**Basic Components of Social Partner Dance Forms**

Kimmel (2012) describes four layers of awareness that is required in any partner dancing: self, partner, music, and surroundings. One must be aware of their own body, their partner’s body in relation to theirs and the environment, the music, and the space they are dancing in, to achieve attunement.

One of the main structures that constitutes any partner dance is the presence of roles of leadership and following. Traditionally, men inhabited the role of leader and women were followers (Kaminsky, 2020). The leader is responsible for initiating action and steps by signaling universally (specific to the partner dance world) recognized non-verbal cues to the follower. These cues can be conventional and/or physiological. Conventional cues are symbolic. In Salsa, for example, when a leader lifts an arm, it is to cue a turn. Physiological cues are when a move by the leader compels an action. In Tango, because the leader and followers maintain contact at the chest, when the leader takes a step forward with their right leg, the follower is compelled to take a step back with their left leg. Another function of the leader is to navigate the space in which they are dancing. The follower is responsible for reading these non-verbal cues and responding to the impulses of the leader. A follower has to be in the present, attuned to what is happening in the moment rather than anticipating the leader’s next move. Kaminsky (2020)
points out that while there is a lot of information on the responsibilities of a leader, there is not much written or explained about followers. According to Kaminsky (2020), a follower may also be able to contribute to how the dance develops if the leader is able to understand the follower’s capacity and creates space for self-expression. The extent of this freedom, however, is dependent on the leader or the dance form itself.

Spatial proximity plays an important role in any partner dance. Kaminsky (2020) states that the distance between the partners affects whether the nonverbal communication is going to be visual or tactile. There are various hand holds or positions which determine the space between each partner. In the closed hold or position, the leader's right palm is on the follower’s left shoulder blade and the follower rests their left arm above with their elbows stacking up on each other. The free arms (leaders left and followers right) are holding palm to palm and the torsos are facing each other but not touching. There is still enough room for each individual to do their footwork without getting entangled. This amount of physical contact allows most of the communication to be tactile. Close embrace is similar to the closed position, but the torsos are also in contact. Dances like Tango, Kizomba and Bachata use close embrace. Open hold or position is when the partners are only connected by the palms of both or one arm. This allows more space and range of motion. Dances like Salsa make frequent use of this position. There are moments in Salsa or Bachata when the partners drop their arm and dance without any physical contact in close proximity. These momentary suspensions of the lead/follow relationship, where each partner moves independently, are called “shines”. Most of the partner dances keep changing these positions throughout the dance. The closer the contact, the better the communication, and the farther apart there is greater freedom and range of motion (Kaminsky, 2020).
Kaminsky (2020) defines frame as the physical aspect of connection between the partners that allows them to communicate kinesthetically. Frame can also be used to define the shape of the dance as whole involving both the partners. Physical connection is an essential part of partner dance for nonverbal communication (Kaminsky, 2020). Each couple has to find their comfortable pressure of connection that allows them to communicate on a body level smoothly and effortlessly. For example, in a closed frame in Salsa, there are three points of contact. The first connection is the leader's right palm to the follower's left shoulder blade. This connection helps the leader guide the follower through steps that require moving across the floor or turning together. The second point of connection is the follower's left arm stacking on top of the leader's right arm. If the follower does not relax their arm and there is a gap between the two arms, the possibility of reading the tactile cues accurately will decrease. Thirdly, the leader's left palm should be connected with the follower’s right palm. It is both the leader and follower’s responsibility to hold this frame together to be able to communicate effectively.

Posture holds great significance in partner dances. Posture alone can set apart two different styles of partner dances. For example, Spanish Latin dance postures are different from Tropical Latin Dances. Drake-Boyt (2011) emphasizes the main difference between the two is the posture and the motion of the hips and the pelvis. In Spanish Latin dances, if one were to draw an imaginary line from the shoulders to the knees, the line would be straight. However, in Tropical Latin dances, the line breaks at the hips. The bending and straightening of the knees helps the hips push back and create space to make circular motions. In Spanish Latin dances like the Argentine Tango or the Brazilian Maxixe, there is no break. In this way, the Spanish Latin dances are closely related to other European dance forms like Ballet, where the energy is pulling
upward. In Tropical Latin Dances, the movements are more grounded due to the bending of the knees (Drake-Boyt, 2011).

All formalized social partner dances will have one or more basic steps, foot work with weight-shift and/or movement patterns as a foundation from which more advanced steps can emerge (Kaminsky, 2020). Most of these partner dances have some universally recognized established parameters on how to move and how not to. These steps are organized together in a sequence form called “patterns”. When dancing in a close or open position, the footwork of the partners mostly always mirrors each other. For example, in Salsa, when the leader steps back with their left foot, the follower steps forward with their right foot, and vice versa. When the dance breaks into shines, the partners may or may not choose to mirror each other’s steps.

Partner dances stand out from other dance forms due to their articulated motions (Kaminsky, 2020). Articulated motions can be isolations and contra-body movements. When one or two parts of the body moves independently while others remain relatively still, it is called an isolated motion. Moving the hips or shimmying the shoulders are isolated motions. Contra-body movement is when the upper and the lower body is moving in opposite directions. It involves twisting the lower and upper vertebrae in the opposite direction, such as stepping the right foot forward while pushing the left hip and shoulder forward. Articulation allows the follower an opportunity and freedom to stylize and execute movement independently. A follower does not need to wait for a cue or signal from the leader to shimmy their shoulders or roll their head.

Styling is defined as the use of gestures to individually express oneself. Styling is usually implemented when there are parts of the body available for articulation that are not physically in contact with the partner. Typically, the follower does most of the styling. The capacity to which one can incorporate styling depends on the proximity, and type of dance form. Styles like Salsa,
where there are open positions and only one hand being used as a point of connection, provide more scope for styling as there are more body parts available for articulation. A dance like Tango is more restrictive when it comes to styling, due to the partners being in really close proximity (Kaminsky, 2020).

According to Kaminsky (2020), the primary function of music in partner dances is synchronization. The music promotes synchrony by providing an external rhythmic framework (Tarr et al., 2014). Dancers typically dissect a song into two different types, melody and rhythm. Rhythm is a set of repetitive regular patterns of sound or movement. Rhythm is prevalent in human interactions, both verbally and non-verbally (Chaiklin, 2016). This helps partners attune to the music and thus find harmony with each other (Kaminsky, 2020). According to Kaminsky (2020), the rhythm of the music also sets the pace of the steps. He reinstates that it helps the dancers keep the count and make their movement dynamic. The different instruments in a song creating a regular beat inspires the dancers to create regular movement patterns (Kaminsky, 2020). Melody, also known as the tune, is a succession of musical tones. Kaminsky (2020) asserts it is typically the part sung by a singer or a featured instrument. The melody gives an emotional context to the dance. Dances like Salsa and Cha-cha are structured along with the rhythm, whereas dances like Tango are freer to let the melody be at the forefront (Kaminsky, 2020).

**Dance/Movement Therapy and its Applications**

According to Serlin (1993), the main difference between the art of dance and dance/movement therapy is that dance/movement therapy helps bring the unconscious to one's consciousness by naming the actions or movements. Dance/movement therapy is the use of dance and movement as a psychotherapeutic or healing tool, rooted in the idea that the body and
the mind are inseparable. Its basic premise is that body movement reflects inner emotional states and that changes in movement behavior can lead to changes in the psyche, thus promoting health and growth (Levy, 2005). Chaiklin (2016) elaborates, saying that the idea that dance can bring a sense of belonging within a community while also giving an individual the autonomy to express themselves is the foundation for dance/movement therapy.

The role of the therapist is to help clarify movements into emotions, intent, or images (Serlin, 1993). Gray (2017) also states that dance/movement therapy has the power to bring the unconscious to the conscious through immediate shifts in the body. This momentary shift in physical state is a binding piece to the bigger picture of restoration, healing, and reconnection. Gray talks about incorporating polyvagal theory into the practice of informed dance/movement therapy and how it can help an individual find safety and respect in their body. One of the major contributions of Porges’s polyvagal theory is the correlation between visceral states and emotional regulation (Porges, 2011). Memories are stored in the body through visceral experiences such as increase of heartbeat, churning of the stomach, or skeletal muscular problems (Porges, 2011). Porges describes neuroception as the ability for neural pathways to discriminate when a situation or person can be safe, dangerous, or life-threatening. These are categorized into three stages of development of the autonomic nervous system: immobilization (shutdown/freeze), mobilization (fight or flight), and social communication/engagement (Porges, 2011). When these immobilization and mobilization responses persist for long periods of time due to trauma, chronic stress, or various external factors, they have a lasting imprint on the body (Gray, 2017). Thus, the shift of state in the body can bring about a shift emotionally and psychologically (Gray, 2017). In her work with survivors of trauma, torture, war, and human rights abuses, Gray found that dance or movement could
trigger feelings of provocation or vulnerability. Drumming or playing instruments can offer an intermediary object and provide a safe space for expression (Gray, 2017).

The work of theorists like Laban, Bartenieff, and Hall, among others, contributed greatly to the development of movement observation in the field of dance/movement therapy. Laban Movement Analysis and Bartenieff Fundamentals are widely used assessment tools for observation in this field. Laban Movement Analysis and Bartenieff Fundamentals are approaches to help increase consciousness of the relationship between movement and body function (Hackney, 2002). This can be achieved by incorporating change in the relationship of Body, Effort, Shape and Space through experiences. Laban’s work introduced and highlighted the concepts of Effort, Shape and Space. However, it was not until his student Bartenieff’s contribution to the full Body component that Laban Movement Analysis became what it is today. Bartenieff drew attention to how internal body connectivities can help movement come to life individually and interpersonally (Hackney, 2002).

Body is an approach by Barteneiff to identify basic developmental body connectivities for efficient movement functioning, stimulating self-expression and psychophysical involvement (Hackney, 2002). The developmental stages of body connectivities are breadth, core-distal, head-tail, upper-lower, body-half, and cross-lateral. Breath represents life, movement, and rhythm. Breath helps movement become more fluid and three-dimensional. It is also developmentally the first movement a living being shapes. The core-distal connectivity helps develop a relationship between the core of the body (the navel/abdomen region) to the extremities of the body like the hands, feet, and head. The connection starting from the head to the end tip of the vertebral column, head-tail connectivity aids in building a sense of self. A supportive spine plays an important role in changing different levels in space (high, mid, and low levels). The upper-lower
FOLLOW MY LEAD

connectivity is the relationship between the upper (body parts from the torso and up) and the lower (body parts from the pelvis and down) halves of the body. It helps an individual find strength, intention and groundedness. The link between the two sides of the body (left and right) is known as the body-half connectivity. This stabilizes one side of the body while the other side is moving. Cross-lateral connectivity is the last connection to form in the developmental stages. It helps develop links through the body diagonally which helps in three-dimensional movements like spiraling with complex level changes while moving in space (Hackney, 2002).

When an individual moves through space, there are distinguishable qualities of one’s movement, which is known as effort (Chaiklin, 2016). It reflects an individual’s perspective towards investing energy in four categories: Flow, Weight, Time, and Space (Hackney, 2002). Emotions and change in mood drives change in effort. Effort Qualities or Effort Elements are the two opposite components in each of these categories. Flow effort is free and bound, Weight effort has light and strong qualities, Time effort is sustained or sudden and lastly Space effort is indirect or direct. On a daily basis, an individual’s effort in movement fluctuates between two to three of these categories (Chaiklin, 2016). When three of these motion factors are combined, they are called drives (Chaiklin, 2016). For example, the punch drive incorporates quick, direct, and strong efforts. How an individual transitions between different actions is an important tool in a dance/movement therapy session to notice one’s emotional state (Chaiklin, 2016). For instance, if an individual’s movement was sustained, direct and light, and suddenly it transformed into quick, indirect and light movements, the therapist might be curious about what caused that change in the movement and encourage the individual to explore where it might be coming from.

Bodies are always forming different shapes in relation to one self and the environment (Hackney, 2002). The process of breathing reflects Growing and Shrinking, which is known as
the Shape Flow Support. Some of the shape qualities are Rising and Sinking, Advancing and Retreating, and Spreading and Enclosing. According to Hackney (2002), bringing awareness to these Shape Qualities helps one be more emotionally aware (Hackney, 2002).

Dance/movement therapy can help individuals be more aware about themselves and the space around them in an embodied and mindful manner. It can help individuals express themselves and communicate with others in an authentic way. Furthermore, dance/movement therapy has the ability to foster attunement, empathy, and social bonding in individuals. Dance/movement therapy has the ability to help individuals bring awareness to themself and the surroundings through the body. The extent to which an individual can reach farthest in space without changing one’s place is called the Kinesphere (Hackney, 2002). It can be near-reaching (close to the body), mid-reaching (elbow distance away) and far-reaching (farthest from the body) (Hackney, 2002). For example, picking an apple from a tree would be far-reaching, using a broom to clean the floor could be near and mid-reaching. How a person moves in their kinesphere in relation to themselves or others can be useful in dance/movement therapy. This understanding of one’s body in relation to how it moves in space is known as kinesthetic awareness (Levy, 2005). Schoop asserted that who we are is reflected in our bodies (Levy, 2005). She further describes how one’s physical gesture and posture are a reflection of one’s mind. According to Schoop, it is the lack of harmony between the mind and body that creates conflict. She states all human beings have the capacity to feel all the emotions and the polarities. But due to environmental factors like societal stigmas, people often repress some sides of themselves. One of Schoop’s major goals was to bring this hidden/repressed side to the conscious mind through movement (Levy, 2005).

An individual's unique repertoire of movement is not acquired through formal dance training, it is attained through one's own lived experiences of sensing, feeling, watching,
exploring and creating (Chaiklin, 2016). Whitehouse would use the Jungian concept of active imagination in her work. Through the utilization of spontaneous body movements driven by internal kinesthetic sensations, individuals gradually become aware of what they are trying to communicate. This realization, in turn, paved the way for transformative change (Chaiklin, 2016). Adler would often ask her patients to move with their eyes closed as she believed it helped one bring awareness to their unconscious experiences. The foundation of Adler’s work was based on the universal need to be seen and heard (Levy, 2005). She highlighted the relationship between the mover and the witness. In this case, the patient/client would be the mover and the therapist would be the witness. These roles could be interactive verbally and non-verbally and support self-observation, awareness, and insight. Adler believed interventions like mirroring, witnessing and honoring another’s dance had the power to fulfill an innate human need: to be seen and heard (Levy, 2005). Moving to one’s own impulses, the most authentic self helps one express themselves truly by bringing the subconscious to the conscious.

In addition to building a therapeutic movement relationship, Chace used rhythm to foster expression of thoughts and feelings in a supportive manner within a group. Rhythmic gestures and non-verbal communication help bring awareness to one’s own body. Group rhythmic movement assists in organizing thoughts and emotions of an individual within the context of others (Levy, 2005). Movement is an initial way of communicating with others and gaining support from the group which eventually helps one gain awareness of themselves (Chaiklin, 1975). This creates an opportunity for people to maintain their individuality while still building group rapport (Levy, 2005).

Chace was also known for conducting her group sessions in a circle. Dancing in a circle has been practiced since earlier times of human history across numerous cultures as a ritual,
special occasions, fostering community and unity (Gabitov et al., 2016). Karampoula (2016) describes the “Chacian circle” as an effective dance/movement technique, as it puts everyone, including the therapist, at an equal position. She also asserts that a circle creates a safe containment for group members (Karampoula, 2016).

Knapp et al. (2014) assert that humans interact with themselves and others through gestures and postures. Gestures are movements that can only affect the parts of the body that are involved in the gesture and not the whole body (Chaiklin, 2016). Postures involve the whole body. A posture may begin in one part and travel through the entire body (Chaiklin, 2016). Research shows that a person’s posture can tell a lot about how they might be feeling (Carney et al., 2010). For example, Carney et al. (2010) demonstrated that individuals who had an open and expansive posture showed a greater state of dominance, and individuals with a closed and contractive posture assumed a lower power. Chaiklin and Schmais (1993) talk about how a shift in the posture can bring about a change in the psyche.

Chace’s work focused on dance/movement therapy with groups (Levy, 2005). The basis of her work was the belief that dance is a way to communicate and thus fulfills one of the fundamental human necessities. Her focus was on respecting an individual and building an empathetic relationship with each person. She reflected her patient’s emotional expressions on a body level by involving herself and interacting with the patient. Chace’s ability to establish a deep emotional connection and communicate with her patients was one of her most important contributions to dance/movement therapy (Levy, 2005). This involved trying to communicate with the patient by kinesthetically and visually experiencing what the patient was feeling. She would mirror her patients by reflecting back what she saw and perceived not only verbally but on a body level as well. This differs from mimicry because mirroring is more than copying the
movement; it also includes integrating the meaning behind the movement. Mirroring promotes kinesthetic empathy or empathetic reflection. Fishbane (2015) explains that mirror neurons and the insula (part of the brain that receives information for the body) in the brain are responsible for initiating empathy. She refers to it as “embodied simulation,” the ability to feel what the other person is feeling in their own body.

**Dance/Movement Therapy with Couples**

Any relationship between two people or more has a non-verbal component that makes dance/movement therapy a potential treatment for relational therapy. Fishbane (2007) emphasizes that the fundamental aspect of human existence lies in the interconnections between psychic and somatic processes, as acknowledged in theories of human subjectivity for a considerable time. Engelhard and Vulcan (2018) conducted research on nine couples (18 individuals) and found that their expression of their difficulties and needs within the relationship was much fuller through body-movement integrated therapy. Their views on the process and its outcome came together around three primary themes: the significance of incorporating vitality, creativity, and playfulness into the relationship; the necessity to learn different ways of communication other than verbal; and the acknowledging how communication through the body helps them gain new perspectives about each other and their relationship (Engelhard & Vulcan, 2018). Kessel (2013) shares how introducing body psychotherapy in her work with clients provided an additional channel of communication, which almost immediately resulted in a positive change in the experience of both members of the dyad.

Wagner (2015) discusses the ways in which relational games played with infants—like peek-a-boo—develop ventral vagal nerve functioning. She claims this is key to social engagement system functioning, and that an understanding of the influence of relational dances
on ventral vagal functioning serves therapists who work with couples. Wagner and Mcguinn Hurst (2018) proposed a theoretical framework for couples’ dance/movement therapy, borrowing theories from couples and marriage therapy and dance/movement therapy integrated with neuroscience. Using attachment theory, Polyvagal theory, dance/movement theories, Kestenberg movement profile, Internal family systems theory and cultural theories, Wagner and Hurst (2018) came up with interventions that might be useful for couples’ dance/movement therapy. They talk about how palm-to-palm connections become a useful tool when working with couples. Palm-to-palm interactions offer potential to examine contrasting dynamics, and dance/movement therapists who identify instances of dominance or submission between partners could also modify the metaphor. As with palm-to-palm experiments, interactions that involve eye contact, reaching out, and touch have the potential to evoke triggering responses in individuals.

Another intervention Wagner and Hurst (2018) mention is mirroring. Mirroring is an exercise focused on attunement, different from the leading/following example mentioned earlier. In this activity, the couple faces each other, and one partner initiates movement while the other mirrors the exact same movement, like a reflection in a mirror. This face-to-face interaction allows one partner to feel truly seen by the other, fostering a sense of connection. It also gives the mirroring partner a chance to empathize with the other’s experience, creating a non-verbal, non-judgmental connection. The therapist’s role is to observe whether the couple can effectively mirror each other and maintain respectful non-verbal presence. Additionally, with the therapist's support, each partner is encouraged to notice any emotional triggers that may arise during the mirroring activity (Wagner & Hurst, 2018).

Using gestures and postures framework, the therapist might notice gestures or content related to taking up personal space within the couples’ kinespheres. As Wagner and Hurst (2018)
suggest, the therapeutic dance unfolding during the suggestion, initiation, and progression of the experiment contains valuable and intricate insights for everyone participating. By examining it through the lens of polyvagal theory, the dance/movement therapist can assess the couple's capacity to approach these experiments with a playful attitude. If the mere idea of such experimentation triggers hyperarousal, identifying areas of distress can highlight the potential benefits of ventral vagal nerve training.

**Discussion**

When I started school for dance/movement therapy, I was still teaching Latin dance forms to couples for their wedding dances and to those who just wanted to learn a dance form together for the fun of it. As I was teaching and simultaneously learning about dance/movement therapy, I noticed subtle nuances in the way each couple would dance with each other that made me wonder about their relationship outside of the studio space. It invoked my curiosity and I had this strong visceral feeling about how partners dancing with each other on the dance floor is a reflection of how they might be in their relationship. That gave birth to the idea of my thesis. In my two years of experience studying to be a dance/movement therapist, this intuition and inquisitiveness grew into research and finding material and theoretical frameworks to support my hypothesis. Here I lay down some ways dance/movement therapists can facilitate joy, attunement, empathy, emotional regulation, conflict management, effective communication and intimacy between couples utilizing the framework of partner dancing.

Any relationship between two people or more has a non-verbal component that makes partner dancing a potential treatment for couples’ therapy. I believe there is a strong correlation between partner dancing, couples therapy and dance/movement therapy. Each individual has a unique perspective on life which influences how one responds and acts. And these values and
beliefs are influenced by one's culture, upbringing, socio-economic status, ethnicity, race, and societal norms and constructs around gender, age and sexuality. This also impacts how one moves and responds with their body. It reflects one's capacity and style of learning a new dance style as well. As a dance/movement therapist it is our responsibility to be aware of these subtle differences in each partner and be able to bring that into the consciousness of the clients. The dance/movement therapist may stumble across blind spots due to their own experiences and perceptions; however, being open and curious can help diminish the limitations.

Most of the footwork in all of the partner dances mirrors each other. As mentioned earlier, mirroring is an intervention used widely in dance/movement therapy where one echoes or reflects another individual’s movements. This helps foster empathy and gain an understanding towards one another. Research conducted by Launey et al. (2013) showed that there is a direct correlation between synchrony and trust. Another study conducted by Lakens and Stel (2011) shows that moving in synchrony increases attributed rapport and perceived entitativity.

Galantucci (2005) examined how communication systems emerge in the context of joint activities. Thus partner dancing has the potential to increase effective communication as well. An intervention could look like learning the basic steps of any partner dancing and helping the couple learn to dance to the beat of the music. When partners are learning a partner dance, they are essentially mirroring each other. It could be the footwork or hand holds, posture and styling. By attuning to the music, partners are on the same rhythm thereby attuning to each other and achieving synchronicity.

Partner dances allow the dancers to explore power dynamics and non-verbal communication through the roles of lead and follow. Understanding each other's non-verbal cues and gestures through the body can help a dyad enhance their communication skills holistically.
As De Jaegher and Di Paolo (2007) asserted, partner dancing entails a dynamic exchange of movements, where each individual, irrespective of their roles of lead or follow, participates in moving each other and being moved by each other. The role of following should not be mistaken as a passive role, rather an active involvement and engagement in the dance. If the follower renounced their autonomy, the dance would lose its harmony and it might resemble a person maneuvering a doll across the floor. Similarly, in any verbal conversation, each partner must engage from their own autonomous perspective. If either or both partners gave up their autonomy, it could hinder the healthy exchange of ideas and perspectives, resulting in an inability to communicate authentically and effectively (De Jaegher & Di Paolo, 2007). These roles also foster “effective dependency” where each partner is able to learn how to empower and support each other’s individuality and autonomy. A therapist could utilize these roles to explore power dynamics in a relationship. For instance, the therapist might encourage one individual to take the lead, either by physically demonstrating how to move around the room and interact with objects and furniture or by verbally guiding their partner, who takes on the role of the follower (Wagner & Hurst, 2018). During any of the palm-to-palm explorations, the desire to exert control over a partner may emerge. Occasionally, playfully shifting and taking turns with hand pushing can alleviate that pressure, but in other instances, it may exacerbate the urge to control (Wagner & Hurst, 2018). The role of the therapist is to help the couple be aware of these subtle nuances and help them express their feelings authentically.

Partner dancing is danced in various levels of close proximity to each other. Hall’s (1969) theory of proxemics considers human uses of space within the context of culture. He argued that although the perception of space is derived from the five physical senses (touch, sight, hearing, smell and taste), these senses are influenced by one’s culture (Brown, 2001). Hall (1969) adds
that culture also influences an individual’s comfortability with space. He categorizes space into Intimate Distance, Personal Distance, Social Distance, Public Distance. Intimate distance (six to eighteen inches) suggests a stronger bond or higher level of comfort between individuals. It is frequently observed during moments of intimacy, such as hugging, whispering, or touching. Partner dances like Bachata, Tango and Kizomba are danced in intimate distance. Personal distance (one and a half to four feet) is typically observed between family members or close friends. The proximity at which individuals can comfortably stand while engaging with each other can serve as an indicator of the intimacy within their relationship. Dances like Salsa and Cha-cha are a good representation of this distance. Individuals who are acquaintances will often use Social distance (four to twelve feet). The only time a partner dance would involve social distance is during solo footwork, also known as shines. The therapist might be situated with the couple at a social distance, and this distance may change depending on the therapeutic relationship. Lastly, Public distance (12 to 25 feet) is used for public speaking purposes such as giving a presentation at work. Kinespheric relations address boundaries and expression of needs. Couples struggling with intimacy or boundaries can explore these different dance forms with different distances to find their level of comfortability with each other. In cross-cultural relationships, space and intimacy might be perceived differently. It is prudent for the therapist to understand each individual’s cultural context, in a couple, into consideration.

Touch is an integral part of intimacy. In partner dancing a vital part of the dance is through the palm to palm connection. A therapist might lead an experiment where the couple presses their palms together and explores degrees of pressure. This experimentation could help in discovering what kinds of touch each partner is comfortable with. Additionally, Petrella and Rovers (2014) state that using touch as an intervention for couples therapy increases feelings of
safety, repairs attachment wounds and decreases fear. The use of touch enhances neuroplasticity, thus resulting in a shift in the way a couple interact with each other in the long term (Petrella & Rovers, 2014). Different partner dances have different holding techniques and frames that can explore how one shapes their body in relation to their partner's body. This exploration can address themes of interdependence, trust, and differentiation within the relationship (Wagner & Hurst, 2018). The goal is to understand how the couple can respect each other's needs without assuming full responsibility for fulfilling them. When the partners hold a frame, the focus is on whether they can maintain their individual space without losing their sense of self. They are encouraged to connect deeply without feeling overwhelmed or suffocated, and also to disengage without feeling abandoned or disconnected. The role of the therapist is to help partners establish clear boundaries regarding the extent of support they can offer each other, without feeling burdened by guilt if their limitations cannot entirely meet their partner's desires (Wagner & Hurst, 2018).

The use of rhythm as an intervention helps us attune to our internal rhythm and rhythm of the world at large. The rhythm of our heartbeat, the gait of our walk and conversational patterns are all examples of our body’s rhythmic expression (Chaiklin, 2016). Use of rhythm is an important part of a dance/movement therapy session. Similarly, most of the music used for partner dances is rhythmic. It can be used to help partners find attunement individually and with each other. Kossak (2009) defines attunement as a deeply sensed and embodied experience that can manifest on an individual level as well as in a communal context. It encompasses psychological, emotional, and somatic aspects of consciousness (Kossak, 2009). Kossak further compares attunement to peak experiences or profound moments where individuals often feel an enhanced sense of perception, appreciation, or understanding. Additionally, they may experience
a deep sense of connectivity with themselves, others, and the world (Kossak, 2009). There is evidence indicating that when individuals synchronize with each other, it can impact their subsequent positive social emotions and feelings towards one another (Tarr et al., 2014). If two people can dance together on the same rhythm sharing the vibration and energy, it can help nurture support and connection.

One of the goals of a therapist is to help couples bring awareness to their unhealthy interaction pattern and help them communicate to each other in a healthy way. Fishbane (2015) points out that our brains are wired for habit. We tend to cling to the familiar, which makes it hard for us to make a change. Change can be intimidating, especially if it is a survival strategy. However, the human brain is also constantly adapting to the changing world. This happens due to neuroplasticity, the ability to form new neural connections and develop new neurons. Fishbane (2015) affirms that physical and mental exercises, paying attention and exposure to new challenges nurture neuroplasticity. In a dance/movement therapy session, the therapist can facilitate neuroplasticity and relational plasticity on a body level by encouraging partners to create new dance patterns based on the steps they have learnt. All dance forms, and Latin dance forms in particular, are pieces of moves or steps that, when put together in a sequence, become a pattern or choreography. Kronsted (2018) explains dancing with a partner is not just about seeing a motion (left foot forward) and then inferring that the partner wants you to move (right foot backward). Rather, understanding the intention is to interact and converse with each other (Kronsted, 2018). By helping the couple come up with their own dance patterns or choreographies, the couple can reinvent new ways of interaction and create secure bonds from a non-verbal point of view.
Authentic Movement could provide a model for intervention for couples’ therapy. In an individual session, the therapist typically takes up the role of witnessing and the individual seeking therapy is the mover. In couples therapy, each partner could take turns to witness and move. Most of the Latin dances have a component called “Shines” where the dyad breaks into solo footwork and styling during a dance. It is called a shine, because it is an opportunity for each partner to demonstrate their own moves and stand out. Utilizing shines in authentic movement could be a powerful tool where it gives the mover an opportunity to find their individuality and autonomy within the relationship and also fulfill the need to be seen and heard by their partner. This is also similar to approaches like Reflective Listening and Narrative Therapy in couples’ therapy.

It is also important to acknowledge the power of having fun. When two people are able to spend time together indulging in an activity that brings them in their bodies, it promotes a positive and safe environment to share each other's vulnerability. Creating a space for playfulness allows participants to let go of their inhibitions and let their guard down, reducing defensiveness. This can aid in increasing connection by creating joyful memories. In a dance/movement therapy session, the therapist could facilitate playfulness by inviting partners to play games. For instance, to work on power differentials through the intervention of lead and follow, the therapist might ask the follower to close their eyes to diminish anticipation and help the follower go with the lead. The couple might switch roles and explore moving through space and different levels. The follower might decide to resist the leader's urges and then follow again. This can bring up elements of joy and humor. Doing activities together like learning a new dance style also releases feel good hormones like oxytocin and endorphins which promotes a positive and fun-loving environment.
Traditionally, partner dances are danced between male and female partners where the male leads and the female follows. These roles reflect the values of heteronormative patriarchal society. There are two issues with assigning men to inherit the role of “leaders” and women being “followers”. Firstly, this implicitly implies that a woman’s traditional role is to be passive and follow while a man should be active by initiating action. Secondly this excludes a whole community of people who do not conform to gender norms. In order to create an inclusive and safe space for everyone, we must evolve from these patterns. Many instructors have started using the terms “leader” and “follower” instead of using gender specific terms like ladies and gentlemen and using “they/them” as pronouns associated with both the roles as opposed to gender specific pronouns. Even with this adjustment, the terms “leader” and “follower” have a lot of negative connotations. For example, when the term “follower” is being used on a person repeatedly, it might make a person believe they are less capable of initiating action (Kaminsky, 2020). Kaminsky (2020) proposes the idea of using “impulse” and “balance” for the two roles while teaching to reduce the negative connotations. McMains (2015) suggested using “proposers” and “interpreters”. I would encourage therapists to allow each person in a relationship to explore both the roles to promote a more egalitarian dynamic. For instance, the therapist could ask each partner to switch the role of leading and following and then ask how it felt to be in each role. The therapist could ask questions which could help partners bring more awareness of their roles in the relationship. As a leader, how did it feel to take responsibility for the next moves in the dance? As a follower, were you able to not anticipate the moves and go with the flow? Are there other situations where you felt this way?

To get a clearer picture of how partner dancing could be used in dance/movement therapy sessions with a couple, I am going to describe a hypothetical scenario of a couple going to
dance/movement therapy over several sessions. Some of these have emerged from my experiences as a dance teacher over the years, teaching partner dances to various couples.

**Example**

A couple decides to seek therapy because they have been having issues with intimacy. They have been in a relationship for about five months. Partner A shares every time they try to initiate being intimate, it is always received with partner B getting defensive. Partner B complains to the therapist saying, “He always moves towards me aggressively and during inappropriate times.” To which partner A immediately retaliates by responding, “Well it's never an appropriate time for you, you always have something else that is more important.” As the conversation continues to escalate, the dance/movement therapist notices how partner A keeps advancing his torso towards partner B and trying to make eye contact, and partner B begins to retract and look away from partner A. When asked by the therapist about their feelings, they shut down and refuse to talk.

At this point the therapist suggests a movement based activity. The therapist guides the couple through a series of progressive exercises based on lead and follow roles. It starts with each partner facing each other and only connecting palm to palm and exploring various degrees of pressure. Initially, every time partner A advances or leans in towards partner B, partner B immediately leans back with her upper body which results in her weight shifting to the heels and causing resistance to partner A’s movement. The therapist suggests partner A refrain from making advances towards their partner and keep the posture of their upper body straight. After making this adjustment, partner B expresses feeling secure and their posture becomes upright as well. Over several sessions, the therapist may have them switch roles between lead and follow using the palm to palm connection. The responsibility of the lead is to move around the space,
making sure the follower is able to move around safely. Once there is comfort with that, the therapist may ask the follower to close their eyes in order to not anticipate the next step of the leader. The therapist may then teach the basics steps of any partner dance like Salsa or Bachata where the couple has to learn different hand holds.

Starting and ending sessions with a check in allows the couple to give each other feedback on their roles and how they felt being led or followed. The therapist can encourage them to use “I” statements and focus on how each feels rather than expressing how the other partner could do better. As the sessions progress, partner B may become more comfortable with the closed hold which requires the couple to decrease the spatial proximity between them. The embodied experience may provide them with a deeper understanding of the power dynamic between them, and allow for improved verbal articulation of the feelings experienced. Learning a new dance style may foster joy and levity during the sessions which could lead to increased connection between the partners. Additionally, it promotes neuroplasticity, which, as mentioned earlier, aids in creating new ways to communicate with each other.

This example highlights the role of the body in joint emotional experiences, suggesting that engaging in movement combined with verbal processing may enable partners to transform implicit bodily knowledge into conscious material in their relationship. And I imagine this could extend to any relationship. It does not have to be romantic partners. I truly believe that partner dancing can open up a whole new portal of awareness and consciousness on a body level for dyadic relationships.

I feel confident that this topic has the potential to be researched further. So, will you follow my lead?
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Infatuation: passion only, Fatuous love: passion + commitment


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