

Research Article

The circle in dance movement therapy: A literature review

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ABSTRACT

The circle represents a powerful symbol with perceived characteristics of totality, wholeness and completeness. Forming a circle is used frequently in Dance Movement Therapy (DMT), emerging on several occasions during a DMT session, especially when working with the model which originated with Marian Chace. The therapeutic factors of the circle formation are fascinating but are rarely documented. This article explores the circle as a symbol and documents the ways in which DMT works with groups, by comparing the essential elements of circle DMT with group therapeutic factors. It reviews the pertinent literature on the subject and summarizes three basic elements of working within a circle, namely, containment and holding, multi-mirroring, and physical contact through the holding of hands.

Introduction

Dance Movement Therapy (DMT) group sessions usually start and end with the formation of a circle, in which all group members are either standing or sitting next to one another, thus having direct access to participants' verbal and nonverbal cues. Additionally, everyone can see and can be simultaneously seen by everyone else. The circle is used in various forms and on various occasions during the process, since it can be part of all four stages of a DMT group session (Panhofer, 2005). It is frequently proposed during the initial, often verbal check-in and may continue throughout the warm-up phase which allows the participants to arrive psychophysically into the here and now. The circle formation usually dissolves during the so-called process, a phase of free improvisation and play, and re-emerges towards the end when participants return to their seats for a guided cool down and a verbal or nonverbal checkout. "In a DMT session the circle is the basic figure" (Steiner, 1992, p. 144), a powerful movement metaphor that has been used by mankind since ancient times in dance (Schott-Billman, 2000).

Many well-known approaches in DMT stem from Marian Chace's interactive approach (Karkou, 2006). Although she had no formal model describing her work (Chaiklin & Schmais, 1979), it is characterised by emphasis on the communicational aspect of dance (ibid; Karkou & Sanderson, 2006). Her approach introduced the *Chacian circle*, a very frequent and widespread technique in DMT Western practice today. The therapeutic factors of the circle formation in DMT are fascinating but are sparsely documented (Karampoula, 2016). This article explores the circle as a symbol and documents the ways in which DMT works with groups. It reviews the pertinent literature on the use of

the circle in DMT and summarizes three basic elements of working within a circle, namely, containment and holding, multi-mirroring, and physical contact through the holding of hands.

Methodology

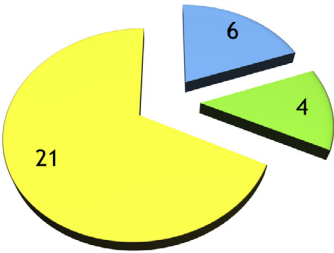
The keywords "circle", "circle dance", "Dance Movement Therapy" and "Group Dance Movement Therapy" have been introduced into a series of search engines: Google Scholar, Academia Edu and Mendeley, in addition to the most pertinent scientific journals for the field of DMT (The Arts in Psychotherapy, The American Dance Therapy Journal and The Body, Movement and Dance in Psychotherapy). Furthermore, a series of relevant books on the subject, such as DMT handbooks from different countries, but also group analytic literature from the pioneers on the field, developmental psychology books, object relations authors, art therapy books, art history books, symbol dictionaries and etymological dictionaries, have been scrutinized for these key words, representing thus a large sample of Western literature of the field.

A number of 31 studies showed up but only 6 studies had invested directly into the therapeutic effects of the circle: Beard and Koch, 2016; Borges da Costa and Cox, 2016; King, 2014; Koch et al., 2007; Hamill et al., 2011 and Jerome, 2002. A total of 24 sources include information on the therapeutic effects of the circle, out of which 4 come from actual research (Behrends, Müller, & Dziobek, 2012; Bräuninger, 2012, 2014a, 2014). 21 sources contributed to the study with theory unsupported by data such as literature research, case studies or essays (see Tables 1 and 2).

The next section thus introduces the circle as a symbol in its different contexts.

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Table 1
Bibliographic sources addressing the benefits of the use of the circle – without sources.



- Sources supported by data addressing directly the therapeutic effects of the circle
- Sources supported by data addressing indirectly the therapeutic effects of the circle
- Sources unsupported by data addressing directly/indirectly the circle (case studies, literature research etc.)

Table 2
Bibliographic sources addressing the benefits of the use of the circle – with sources.

Sources supported by data addressing directly the therapeutic effects of the circle	Sources supported by data addressing indirectly the therapeutic effects of the circle	Sources unsupported by data addressing directly/indirectly the circle (case studies, literature research etc.)
Beard and Koch (2016) Borges da Costa and Cox (2016) King (2014) Koch et al. (2007) Hamill et al. (2011) Jerrome (2002)	Behrends et al. (2012) Bräuninger (2012) Bräuninger (2014a) Bräuninger (2014b)	Berrol et al. (1997) Bunce (2006) Cammany (2005) Capello (2009) De Tord and Bräuninger (2015) Foulkes (1964) Karampoula (2016) Karkou (2006) Ko (2017) Meekums (2002) Panhofer (2005) Rodriguez (2005) Sandel and Johnson (1983) Schmais (1985) Schmais (1985) Schmais and Salazar (1998) Schott-Billman (2000) Schott-Billmann (2009) Schott-Billmann (2011) Steiner (1992) Verreet (2010)

The circle as a symbol

The word *circle* has innumerable connotations. While its definition has a number of layers starting from the description of a geometrical shape in mathematics or of movement patterns, such as circles or curves, the word itself is used in astronomy, or in everyday language to represent states of life, such as life cycles and vicious circles.

The circle, like the sphere, is a symbol of the self (Jung, 1964a, 1964b; Winnicott, 1986). It represents totality, the wholeness of the psyche, and whatever form it takes (in mandalas, worship of Gods, rituals, myths, dreams, etc.) signifies completeness. It represents the perfect and eternal and has no beginning or end. Subject to a perpetual motion it brings to mind the concept of infinity; of what is completed and restarted. It can be seen as a conclusion and a fulfillment and is characterised by harmony. Early in history it even symbolised the male divinity and was often used as a symbol of God, of perfect existence (Fontana, 1993), or as a representation of heaven and perfection.

There are profound psychological implications in this particular concept of perfection. (...) the square, representing the lowest of the composite and factorial numbers, symbolizes the pluralist state of man who has not achieved inner unity (perfection) whilst the circle would correspond to this ultimate state of Oneness. (Cirlot, 1962, p. 47)

The circle sets the space inside and defines the space outside. According to Jerrome: “In therapeutic dance the rituals mark the boundary between [sic] enfolding circle and the space outside it (...)” (2002, p. 174). Whole cities, such as Palmanova in Italy, but also places of worship have been built in a circle; the Pantheon’s dome, for example, is a full circle illuminated through a round lantern in its centre, as a symbol of the universe. The circle can be considered as synonymous with the edge “just as the circumference is often equated with circular movement” (Cirlot, 1962, p. 47), which also carries the meaning of creation, of bringing into being, and of mobilising the forces kept inside.

Circle dances formed part of community life from when people first started to dance, marking special occasions, rituals and encouraging togetherness and providing a sense of belonging especially when coping with difficult personal and collective changes (Jerrome, 2002). Examples for circle dances in different cultures are abundant: Ceili Dance in Ireland, most Greek dances such as Sirtaki, Kalamatianos etc., the Joydance Hava Nagila en Israel, the Sardana in Catalonia, the An Dro in Brittany, the Ganggangsullae in Korea (Ko, 2017), only to name a few. In the UK a movement called Circle Dance, stemming from the work of Bernhard Wosien, emerged during late Seventies and has since spread throughout the UK and other European countries and to the rest of world. Currently, the Circle Dance network includes groups active in Africa, Australia, Europe, North America and South America (Borges da Costa & Cox, 2016, p.198).

In DMT group sessions the circle may be suggested by the therapist as a way to assemble the group, but may also appear spontaneously as a movement metaphor throughout the group process; It is a kinaesthetic experience that bridges thus the “symbolic and knowing realms” (Ellis, 2001, p. 182).

The use of the circle in DMT: recent findings from the literature review

Bräuninger (2014a), in her research on the techniques and interventions used in DMT that have positive effects and that are most successful in stress management, stress reduction, and in promoting quality of life, found that the Chacian circle is a successful group DMT

technique because it “(...) places the participants in the group and the therapist in equivalent democratic positions, which enhances therapeutic relationships through movement” (p.446). According to the participants of the study, who were experienced DM therapists in leading groups and private practices from eleven different locations across Germany, the Chacian circle is widely used amongst dance movement therapists. Alongside interventions such as mirroring and echoing the clients' emotional states, working with the circle results in increasing the Global value¹ and in reducing somatization.

In a pilot study conducted by Hamill et al. (2011) with older people with dementia and their carers, the circle dance represented the main technique. It is proposed that moving together in a circle can facilitate a concrete sense of connectedness between group members (Borges da Costa & Cox, 2016; Violets-Gibson, 2004). The sessions took place mainly in circle formation with variations on the movement (simple walks, sways, moving into the circle, and arm waving), with the participants either sitting or standing, and with the use of props. The circle dance, being the main structure of the approach, was not introduced merely as an initial or closing phase of the session; instead, the participants were in a circle formation for the duration of the sessions.

Circle dance provides an opportunity to engage in touching, holding, moving together gently, and to be part of a group; this promotes re-attachment and connection by overcoming communication difficulties through the use of non-verbal means and verbalisation of those experiences whenever possible and as required (Hamill et al., 2011, p. 712).

The participants benefited emotionally, socially, and cognitively, although the authors underlined the need for further research due to the time-limited design of the study.

Similarly, Verreet (2010) evaluated the effects of DMT on emotional exhaustion and depersonalisation of professional carers in residential aged care services. By including the circle formation as an integral part of her 20 sessions with sixteen care workers, the author confirmed a significant improvement in the symptoms of chronic stress and burnout. Verreet's use of the circular structure was largely meant as a unifying measure, in order to increase group cohesion and to support those entering and leaving the therapeutic sphere in the work environment where the sessions took place. The results of the study confirmed a significant improvement of the symptoms and an increase in the participants' well-being. Even though further research – with a control group and a larger sample – that looks at the particular effect of the circle formation is required, the positive effects of DMT were clearly shown.

Koch et al. (2007) examined the effects of a circle dance with a jump rhythm and hand-holding for adults with depression. She compared a group which participated in DMT sessions with a circle dance from Israel (*Hava Nagila* or *Let us have joy*) intended to evoke joy, with another group in which the participants sat listening to the music of the dance, and with a movement-only control group with a home-based trainer. Although, as the author stresses, the research includes limitations such as the brevity and the typicality of the approach, the results showed an important decrease in depression, anxiety, lifelessness, and tiredness: “Dance was the only condition that did significantly decrease depression after the intervention” (p. 347). Even though there was a clear outcome for the group that had danced while holding hands in a circle, the exact elements of the dance were not analysed. Was it the holding of the hands, the circle, or the interaction with the participants and therapists that reduced depression in the patients to such an extent? The general question of this particular study was whether a repetitive exercise without vertical movement in the trunk and upper limbs (home trainer group), or passively listening to the music of the dance (music-only group) can truly be valid correspondents to the holistic, social, and

engaging conditions of the dance. (p. 347). Koch et al. (2007) suggested that in order to fully understand the therapeutic factors of such an approach, it would be interesting to look at two circles dances, allowing for better experimental control, and compare circle dances with jump rhythms to circle dances without jump rhythms.

King (2014)² thus designed a pilot study to address this specific question. She examined the effects of Irish circle dances used as rituals during the beginning and end of sessions in three experimental groups consisting of people with severe, predominantly psychotic, mental illness. The first group performed a dance with jump rhythms and holding hands, the second group performed the same dance without jump rhythms but holding hands, and the third performed it without holding hands but with jump rhythms; a control group did no movement at all. She found that the Irish circle dance decreased depressed affect and increased vitality in the participants. She also suggested that the most important aspect of the approach was the holding of hands, since “the depressed affect decreased most significantly in the group that danced with holding hands but without the jump step” (p. 75). Similarly, vitality increased significantly only in the group of holding hands with no jump step.

The ritual and the circle are powerful entities, creating solidarity, a sense of community, inclusiveness, and equality. The circle acts as a container as well as being contained by the therapist: given that psychiatric patients often have a limited sense of their body boundaries, which may indicate a lack of differentiation between self and non-self, the circle dance, by creating boundaries, helps in the definition of the self. (Beard & Koch, 2016, p. 76)

In the following section we will be referring to some basic elements of the use of the circle in DMT group sessions.

Basic elements of the circle found in DMT

Circle formation can include the following elements: mirroring, echoing of emotional states, containment and holding and physical contact (touch) through holding hands. Furthermore, factors promoted by movement in circular group formations which contribute to symptom improvement are social relations and connectedness, solidarity and increased Global value, learning from each other, being part of the group, and vitality. It is important to note that some of these elements overlap with one another, or may as well have special features (e.g. Global Value within the WHOQOL questionnaire). In this study they were charted according to their general relevance with the curative factors of group psychotherapy, as mentioned earlier, and with the healing processes of group DMT. In particular, at least five of these elements have their analogues in the group analytic situation (as described by Foulkes 1964; Yalom & Leszcz, 2005) and at least four of them correspond to elements of the “healing processes” (Schmais, 1985). The respective relevancies are presented in Table 3.

Mirroring and multi-mirroring

Mirroring is a powerful process, widely used in DMT. Chace's empathic reflection (mirroring) in group DMT had an effect on people with mental health issues (Levy, 1988). The therapist kinaesthetically and visually captures participants' nonverbal communications, similar to Stern's (1985) later formulated uni-modal and cross-modal matching. It bears the characteristics of a movement dialogue, promoting the potential for understanding (Penfield, 1992; McGarry & Russo, 2011).

Behrends et al. (2012) designed a dance movement approach to foster empathy with people who experience empathic challenges such as for people who have a diagnosis of autism. They suggest that

¹ Quality Of Life (QOL) as referred to by Angermeyer, Kilian, & Matschinger (2000).

² The initial study is under Ella King's maiden name. Further publications from the same author are under her married name, Beard.

Table 3

Comparison of essential elements found in circle DMT and group therapeutic factors.

Basic elements of the circle found in DMT literature	Therapeutic factors in group psychotherapy <i>Foulkes (1964) and Bion (1962)</i>	Therapeutic factors in group psychotherapy <i>Yalom and Leszcz (2005)</i>	Healing processes in DMT groups. <i>Schmais (1985)</i>
Mirroring-echoing of emotional states Container-Holding	It creates the “mirror reaction”. <i>Bion's (1962)</i> concept of the “container/contained”	Imitative behaviour	
Physical contact-touch-holding hands Social relations-connectedness Solidarity-Global Values	Fosters social integration and relieves isolation Activates the collective unconscious or condenser phenomena Promotes exchange	Development of socialisation techniques Universality	Integration
Learning from each other Be part of the group Vitality effect		Interpersonal learning Group cohesiveness Installation of hope	Education Cohesion Vitalisation

conscious practice of the mirroring technique may result in “the important ability of self-other differentiation, and to thus contribute to increased social integration, affiliation, and agency” (ibid, p. 112).

In *Bräuninger's study (2014a)*, the mirroring and echoing of the clients' emotional states are stressed as successful approaches in group DMT sessions within a psychodynamic orientation. The author concludes that these approaches may strengthen the group members' self-confidence and physical resilience.

In a group situation, while in a circle, mirroring is multiple. Being reflected by many people in a group has a powerful effect on individuals; they see themselves being echoed by others and therefore feel heard and accepted by a whole and not solely by one person. *Steiner (1992)* uses the term “multimirror” to describe the function of mirroring in a therapeutic community.

Being actively mirrored by another person is quite different to being reflected alone in a mirror: DMT as a nonverbal technique allows working through these aspects, with or without verbal interaction and thus allows access to very early stages of one's life (*Panhofer, 2012*).

Containment and holding

The terms holding and containment are essential in psychotherapy and psychoanalytical thought. In DMT group sessions, the circle formation allows for the holding of the client's fears and anxieties through movement, while the therapist herself takes on containing function. The entire space too provides containment as does keeping strict time boundaries in the session (*Meekums, 2002*). Sometimes it is not so easy to close a session. Participants may not want the session to end or may, on the contrary, be in a rush to finish in advance. Rituals in circle formation during the beginning or end of the session may embody the role of the container (*Steiner, 1992; Verreet, 2010*), while at the same time allow working with transitions in a conscious but not overwhelming way (*Meekums, 2002*). This gives meaning and processes thoughts that came from a lived emotional experience contained in the body (*Pylvänäinen & Lappalainen, 2017*). The circle as a containing structure for the group (*Chace, 1953*), supports physical holding (*De Tord & Bräuninger, 2015*).

The synchronous movement itself, the rhythm (*Capello, 2009; Chaiklin & Schmais 1979; Ko, 2017; Schmais 1985; Schott-Billmann, 2009, 2011*), the holding of hands, and the ritual function of the circle, all help clients embody the notions of containment and feel contained and held within the circle of the group.

Physical contact (Touch): holding hands in DMT

The nonverbal aspect of the therapeutic relationship is one of the key principles of DMT Western theory and practice (*Schmais, 1985; Malaquias, 2010; Meekums, 2002*). Touch is a nonverbal way of communication: “we speak and listen through our hands” (*Warnecke, 2011, p.236*). The use of touch is a theme of great interest in psychotherapy and psychoanalysis, creating many debates and discussions amongst

authors. As shown above, recent findings (*Beard & Koch, 2016; King, 2014*) demonstrate that the element of holding hands while in a circle has positive effects for people experiencing negative symptoms of severe mental health disorders.

However, the effect of holding hands can have different results, depending on the cultural context, and the stage of a particular group's progression (*Malaquias, 2010; Popa & Best, 2010*). Adolescents, in particular boys, can be avoidant of physical contact (*Payne, 1992*), but holding hands along with synchronous movement in a group with other adolescents in a circle formation may have very different results, as described by *Schmais and Salazar (1998)*.

In the case of depression, as shown by *King (2014)*, holding hands can be one of the most important factors contributing to participants improvement. Many people with enduring mental disorders such as schizophrenia can experience persecutory hallucinations, or ideas of invasion of the body, including the infringement of one's own boundaries. As a useful technique to help clients build solid body boundaries, *Capello (2009)* suggests, amongst others, the tactile stimulation of the body periphery, as well as holding of their hands by others.

Holding hands in a circle may be the only active and nonthreatening way for withdrawn clients to touch and be touched in a safe, contained, and holding environment, thus strengthening their social skills. It may be their only opportunity to be touched whatsoever. Holding hands and forming a circle are therefore common approach especially suggested for older people in therapy (*Berrol, Ooi, & Katz, 1997; Cammany, 2005; Rodriguez, 2005; Bräuninger, 2014b. Matherly (2014)* stresses that most references to the application of touch in DMT concern “socially based motivations” (p.82). Holding hands within a circle formation in DMT group sessions seems to be of importance, addressing the social and the personal sphere at the same time and transmitting a multi-layered nonverbal message to the participants.

Limitations of the research and future research

One of the major limitations of the present research was the lack of relevant DMT literature on the subject. Only five sources in the field of DMT could be found that dealt solely with the circle and its use in DMT (*Beard & Koch, 2016; King, 2014; Koch et al., 2007; Hamill et al., 2011; Jerome, 2002*). One article found from the field of occupational therapy was exploring the experience of meaning through the engagement in Circle Dance (*Borges da Costa & Cox, 2016*). Numerous articles with unsupported data mentioned the use of the circle amongst other beneficial factors (see *Table 1*). A large sample of English, Spanish and Greek language texts were surveyed to arrive at this conclusion.

Although the findings of the research undertaken in the field of DMT concerning the circle are promising, the small sample and the brevity of the sessions limit the results. Some future research is needed in order to compare DMT groups with and without a circle formation, for example during the beginning or ending phases of the sessions. Some more qualitative research could look into moments when circles emerge spontaneously – open narratives from participants or semi-directed

interviews with the group facilitator/participants could shed a light on the underlying functions of the groups. Applying DMT evaluations for observation and movement analysis (LMA, Kestenberg) during circle work might provide a clearer view of group dynamics or cultural differentiation etc.

Conclusions

The moving, living, breathing circle, with the according archetypical symbolism that it carries, seems to resonate with our human need for wholeness and completion. Given the popularity of working in groups and in circle formation, we reviewed the literature on the use of the circle in DMT group sessions. Our findings indicate that the circle influences the individual in various modes and levels at the same time, and designates the spheres of the self, the body and the world.

We furthermore observed a theoretical correlation between the curative factors of group analytic therapy (Foulkes, 1964; Bion, 1962; Yalom & Leszcz, 2005), the “healing processes” in DMT groups (Schmais, 1998), and the use of the circle in DMT. Mirroring or multi-mirroring of emotional states, social integration and connectedness, interpersonal exchange and education, group cohesion and vitality are five of the factors that show clear parallels among the different theoretical frameworks. “Circle dance brings together emotional, physical, cognitive and spiritual aspects of being. It emphasizes relationship and group solidarity, but is also an intensely personal experience” (Jerome, 2002, p. 173).

The mirroring effect and Bion’s theory of container/contained are two other factors that correlate with analytic group therapeutic factors. We believe to have demonstrated that the circle functions as a container (Tosey, 1992; Meekums, 2002; Karkou, 2006) for the participants’ emotions, thoughts, fears, and motion statements. The shape of the circle might speak in a metaphorical and nonverbal language for each individual’s need for containment and holding.

Referring to the factor of holding hands within a circle formation, the pertinent literature underlines its significance as a nonverbal way of interacting, helping even the most withdrawn participants to be included, feel accepted, safely touch and be touched, while at the same time having bodily boundaries affirmed. Populations that seem to have benefited from the use of the circle formation during DMT group sessions are older people who have dementia (Hamill et al., 2011); people who have a diagnosis of depression (Koch et al., 2007) or mental health disorders with psychotic symptoms (Beard et al., 2014); and children experiencing mental health challenges. Nonetheless, more research needs to be undertaken that specifically addresses the circle and its benefits, both for these and for other client groups, in order to highlight the importance of this valuable process for the DMT profession, but also for other therapeutic and educational approaches.

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