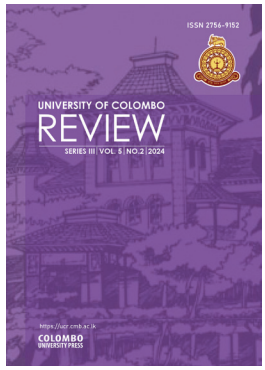

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Dance as a mode of intervention in indigenizing social work in Sri Lanka: A systematic review

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ABSTRACT

This review examines the connection between Dance Movement Therapy (DMT) and social work, focusing on two traditional Sri Lankan dances: Low-country dance and Bharatanatyam. It emphasizes the importance of adapting social work practices to local cultural contexts by integrating therapeutic elements from these dance forms. Using thematic analysis of secondary data from national and international sources, the review identifies key therapeutic aspects of Sri Lankan dance rituals and their relevance when addressing contemporary societal challenges. The findings suggest a mutually beneficial relationship between DMT and social work in Sri Lanka, highlighting kinesthetic empathy, attunement, and sensory-based principles as key healing elements in DMT. For example, the traditional Shanthikarma ritual, Rata Yakuma, provides therapeutic benefits through expressive movements, drumming, chanting, and enactments that support emotional well-being. Bharatanatyam, too, generates physical and cognitive benefits through rhythmic movements, hand gestures, and emotional expression. The review highlights performing arts' role in post-war reconciliation in Sri Lanka, promoting cultural integration and addressing societal issues. It also explores dance-based research methods and anti-oppressive DMT strategies, recommending a strengths-based approach to assess factors impacting service users. This model examines both environmental and personal factors, and strengths and deficits, contributing to the challenges faced by service users. The review promotes a strengths-based approach, empowering service users as creative performers. Additionally, the review addresses the challenges of indigenizing social work in Sri Lanka, advocating for the integration of traditional dance into therapy to tackle culturally specific issues, promote social integration, and enhance holistic well-being within social work practice.

KEYWORDS:
Dance Movement Therapy, Indigenization, Social Work

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Introduction

The relevance of indigenous knowledge in social work is mentioned in the definition of social work by the International Federation of Social Work (IFSW) and the International Association of Schools of Social Work (IASSW) (2014):

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversity are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing (IFSW, 2024).

As mentioned by Majumdar et al. (2023), indigenous social work is a broad concept that addresses issues specific to local traditions, cultural knowledge, sensitivity, and practices that are relevant to the community. These practices promote a local perspective on social-work education, research, and practice (p. 4). Indigenization of social work is gaining recognition, as seen in the creation of the Indigenous Commission by the IFSW and the increasing literature on indigenous and culturally relevant practices in Africa, South America, Asia, etc. (p. 4). Indigenous social work professionals advocate for integrating culturally responsive knowledge, practice models, and research methods (p. 3). Examples of indigenous social work practices around the world further illustrate this. In South Africa, the concept of Ubuntu emphasizes interconnectedness and communal care, which is applied in social work interventions to foster community solidarity and collective healing. Similarly, in Brazil, social work with indigenous communities incorporates local traditions like communal decision-making and respect for natural resources in interventions aimed at environmental protection and social development.

Dance Movement Therapy (DMT) is a therapeutic intervention utilized in the field of psychology. It is a relatively new discipline and profession that was initially developed mainly in the USA in the 1940s (Mantillake, 2021). According to the American Dance Therapy Association (ADTA) (n.d.), DMT is a "psychotherapeutic use of movement to promote emotional, social, cognitive, and physical integration of the individual, for the purpose of improving health and well-being". This underscores the holistic approach of DMT, which addresses various aspects of an individual's well-being. As Quin, Redding, and Frazer (2007, as cited in Rajeev, 2014, p. 4) state, "Dance therapy is based on the idea that body and mind are co-relational, that the physical state of the body can affect the emotional and mental wellbeing both positively and negatively". This interconnectedness makes DMT a successful intervention at the micro level of social work, as highlighted by scholars such as Crooks and Mensinga (2021) and Levine, Land, and Lizano (2019).

Shanthikarma[1] is very significant in the indigenous knowledge of Sri Lanka. In "Sri Lankan traditional society, *Shãnthikarma* are unique behavioral patterns blended with various forms of beliefs, rites, and rituals that were performed in order to achieve various collective objectives related to their day-to-day lives such as protecting and enhancing the harvests, achieving prosperity, protecting from epidemics and expecting good health, and protecting from bad evils" (Panampitiya, 2024, p. 60). Even though this is still a new concept in Sri Lanka, social, cultural, and dance anthropologists have proved the importance of traditional *Shanthikarma* containing healing mechanisms in their rituals, dances, chants, and decorations. (Jinadasa, 2016; Harindi & Hapugoda 2023; Mantillake, 2021). These researchers mainly focus on Low-country dance, also known as the *Pahatharata* dance tradition, which is primarily practiced in the western and southern parts of the island (Harindi & Hapugoda, 2023). Several rituals are practiced within this dance tradition including *Yak Thovil* (exorcisms to dispel evils), *Deva Thovil* (rituals to seek the protection of gods), and *Bali Thovil* (rituals to ward off ill luck). They consist of rites that aim to address various challenges, including illnesses and crop harvests, through rituals involving gods like *Paththini, Natha, Vishnu, Katharagama*[2] and *Saman*[3], as well as devils like *Mahasona*[4] and *Kalu Kumaraya*[5] (Silva, 2019). According to the *Encyclopedia Britannica*, the ritualistic performance of *thovil* includes mime, song, dance, acrobatics and bits of prose dialogue (Harindi & Hapugoda, 2023). These activities please the five senses of sight (eyes), sound (ears), smell (nose), taste (tongue), and kinesthetic pleasure (body), which is central to achieving the healing of the patient (Harindi & Hapugoda, 2023). As stated by Mantillake (2021),

In ancient societies, various performance elements were used for healing through festivals, ceremonies and various rituals. Dance, movement, music,

1 "According to *Tittapajjala Gurunnanse* (teacher), *'Shãnthikarma'* is a Sanskrit term, and *'Santi'* (blessing), and *'Karma'* (activity), infer the 'blessing-invoking rite'. In Sinhala, this becomes *'set kam kirìma'*, *Set* (blessing), *kam* (activity), *kirìma* (doing) infer the 'doing a blessing invoking rite' (Walcott, 1978). *'Shãnthikarma'* which is related to the traditional agricultural Sinhalese society in Sri Lanka, can be categorized into basic three types. They are, *'Shãnthikarma'* that are held for Gods or deities, *'Shãnthikarma'* that are held for *Yakkha* (demons), *'Shãnthikarma'* that are held for Nawa Graha (nine planets)" (Ananda Thero, 2011, as cited in Panampitiya, 2024, p. 60).

2 The four Hindu guardian gods of the polity. It is important to note here that those Hindu gods become Sinhala gods and certain Hindu rituals became mixed with Buddhist rituals. As pointed out by Gombrich and Obeysekere (1988) "As Sinhala Buddhist monks have taken control of the sacred areas, the Sinhala Buddhist laity has adopted Tamil ritual forms" (Appuhamilage, 2018, p. 163).

3 *Saman* (in Sinhalese) and *Sumana* (in Pali) is "one of the four deities who have taken upon themselves the task of protecting the Island and the religion of the Buddha professed by the majority of its population" (Paranavitana, 1958, p. 11).

4 The great cemetery demon, most often associated with death (Larsen, 1998, p. 263)

5 A demon who especially "lusts" for women (Larsen, 1998, p. 262).

storytelling, and roleplaying have been used for healing purposes for many ages. However, it is only after the 20th century that those healing practices have been framed more professionally as "therapy" in the Global North (p. 150).

In 1952, Sri Lanka initiated social work education, integrating it into the formal education system (Samaraweera, 2021), and is currently expanding its boundaries in diverse working arenas. However, the incorporation of aesthetic fields, specifically dance, into direct social work practice[6] is less common in the country. The absence of a formal licensing procedure for social workers and the scarcity of certified dance/movement therapists in Sri Lanka further complicate efforts to incorporate dance within the field of social work.

Understanding these gaps, this review will explore how Sri Lankan dance forms can be effectively utilized in developing social work intervention models aimed at indigenizing social work practice in Sri Lanka. The focus will primarily be on two traditional dance forms: Low-country dance and *Bharatanatyam.*[7]

Methodology

The review employed secondary data sources from both national and international peer-reviewed journals, research articles, books, and relevant sources focusing on key terms relevant to Sri Lankan traditional dance, indigenization of social work practice, social work intervention models and therapeutic dance in Sri Lanka. The data were analyzed by utilizing thematic analysis, identifying common themes and patterns across the chosen studies, following the proper guidelines for reporting the systematic review. Several limitations of the review should be noted. Firstly, the reliance on thematic analysis of secondary data instead of primary research may restrict the depth of insights and the ability to capture current trends, experiences, and nuances in the therapeutic practices of DMT and social work in Sri Lanka. Additionally, due to a lack of local literature, the social work interventions referred to are primarily drawn from Western sources, affecting the cultural relevance of the findings. The focus on Low-country dance and *Bharatanatyam* also limits consideration of other dance forms and their therapeutic benefits, narrowing the understanding of the broader landscape of Sri Lankan dance therapy. Finally, since

6 Direct social work practice (also referred to as a micro practice) involves professional interventions to bring about personal or interpersonal change, while indirect social work practice (also referred to as mezzo or macro practice) focuses on systemic changes in an organization, community, or a larger social system (University of Toronto, n.d.).

7 *Bharatanatyam* is one of the oldest classical dance forms in practice today. *Bharatanatyam* has three divisions within itself: *Nritham*, *Nrithyam* and *Natyam*. *Nritham* is the pure dance or rhythmic movement of the body that reflects the mood of the musical composition but does not traditionally convey any emotions. *Nrithyam* is the part of the dance that conveys the emotions. It is the application of physical movements in conjunction with the mind. Natyam is the dramatic representation in dance (Sivayokan, 2022).

the findings are based on specific traditional dances and cultural contexts, they may not be applicable to all regions or communities within Sri Lanka, affecting their generalizability.

Aspects of the Symbiotic Relationship Between DMT and Social Work

Social Work Elements Present in Dance/Movement Therapy

According to Crooks and Mensinga (2021), "DMT emerged from modern dance during the early 1900s and has roots in America and Europe" (p. 251). The authors have identified a connection between DMT and social work, emphasizing key elements such as "kinaesthetic empathy, attunement and sense-based principles, that a social worker might bring to practice" (p. 252).

Kinesthetic empathy, a foundational concept in Dance Movement Therapy (DMT), is defined in various ways by researchers, each highlighting different facets of therapeutic attunement. Dunphy et al. (2015) describe it as "the capacity of an individual to recognize and respond to what they perceive is the experience of another via their own active mind-body" (p. 178). This perspective emphasizes how therapists engage deeply with clients through bodily awareness, allowing them to better understand clients' experiences. Fischman (2009) further explains kinesthetic empathy as involving a sense of shared movement, where the therapist empathetically participates in a "bodily experience" with the client. This type of empathy, often described as "movement empathy" (Dunphy et al., 2015), promotes attunement that allows therapists to connect with clients' physical and emotional expressions. Malchiodi (2020) extends this concept by emphasizing the role of mirroring in building secure attachment. Here, therapists engage not only through body language but also through reflective facial expressions and empathetic gestures. This attunement nurtures the therapeutic relationship and establishes a secure foundation for the client's growth.

While touch is an integral part of DMT, it is also controversial and complex, especially within fields like social work, where physical contact requires careful consideration and ethical boundaries (Matherly, 2014, as cited in Crooks & Mensinga, 2021). In DMT, the use of touch demands rigorous training and ethical oversight. When used with clear boundaries and intention, touch can foster trust and strengthen the therapeutic bond between the therapist and client. However, safe and ethical practice in DMT also requires that therapists monitor clients' responses to ensure comfort and respect for personal boundaries. Therefore, safe and ethical use of touch within DMT requires additional training, research, and accountability. When used with clear boundaries, touch can help to build trust and regulate the therapeutic relationship between the therapist and the service user.

Dance techniques in Sri Lanka and their therapeutic context

The *Kohomba Kankariya* ritual, performed by a priest, continues to be practiced for forgiveness and peace, and is classified as a *Shanthikarma*. Other rituals rooted in dance include the *Bali* ritual, which combines pre-Buddhist, Hindu, and Buddhist elements to address situations when "planetary deities become malevolent" (Dona, 2016, p. 124). Another example is *Tovil*,[8] an exorcism ritual aimed at warding off demons or evil spirits believed to cause physical and psychological ailments (Fargnoli and Seneviratne, 2021). These rituals gave rise to three Sinhalese dance forms: Kandyan dance, Low-country dance, and Sabaragamuwa dance, each originating from different regions. Additionally, *Bharatanatyam*, a South Indian dance form, gained popularity in Sri Lanka in the early 20th century among Tamil communities and later influenced the development of Kandyan dance, appealing to diverse populations in Colombo, including Sinhalese Buddhists (Fargnoli and Seneviratne, 2021).

In post-war[9] Sri Lankan society, performing arts play a crucial role in reconciliation between ethnic groups by depicting the war's impact through dramas, songs, and dance. Visual representation contributes to addressing and processing the traumatic aftermath of the war. Moreover, cross-cultural initiatives in universities aim to foster better understanding between different ethnic groups through the study of each other's dance and music. Overall, Sri Lankan performing arts serve not only as a form of healing, but also contribute to societal well-being by promoting ethno-religious integration, reconciliation, cultural preservation, and social integration, while also addressing issues like corruption and serving as physical and mental therapy (Appuhamilage, 2018).

Low-country Dance

Fargnoli and Seneviratne (2021) have conducted a study on *Rata Yakuma Shanthikarma*, a traditional *Shanthikarma* in Low-country dance, and its therapeutic aspects. The *Rata Yakuma*, also known as *Riddi Yagaya*, is a Low-country dance ritual in Sri Lanka focused on exorcising demons associated with difficulties in childbirth and pregnancy. It aims to address infertility, prevent miscarriages and stillbirths, and ensure smooth delivery. "This ritual helps to foster the connection between a child and the outside world through the following dance patterns: *Nanumura* (12 movements of bathing), *Kapu Upatha* (planting of cotton, cutting leaves, drying

8 Also known as *'Thovil'*.

9 The period following the end of the Sri Lankan Civil War, which lasted from 1983 to 2009. The war was primarily fought between the Sri Lankan government and the Liberation Tigers of Tamil Eelam (LTTE), who sought to create an independent Tamil state in the north and east of the island. The conflict officially concluded in May 2009, when the Sri Lankan government defeated the LTTE (BBC, 2015).

them, and viewing the cloth to offer to Dipankara Buddha for blessings)[10] and *Daru Nelavilla* (taking care of the newborn) (p. 233). While some Sri Lankan dance rituals focus on women's issues, it is important to note that traditionally, all such rituals have been performed by men (Fargnoli and Seneviratne, 2021), a unique cultural dynamic that is beyond the scope of this review.

As mentioned by Fargnoli and Seneviratne (2021), the *Nanumura* procession is a traditional ritual with therapeutic elements aimed at addressing psychological and emotional well-being. Through its various components, such as dance forms, singing, drumming, chanting, and dramatic movements, the ritual serves as a form of catharsis and emotional release for participants (Harindi & Hapugoda, 2023). As noted by Fargnoli and Seneviratne (2021), the ritual's ability to address mental schemas – including societal fears surrounding childbirth and maternal health – serves as an important part of its healing function. By engaging in these ritualistic activities, participants are encouraged to confront and process their fears in a supportive environment (Fargnoli and Seneviratne, 2021), fostering resilience and a sense of empowerment. These activities allow participants to channel their emotions and release pent-up feelings, providing a sense of relief and emotional release. Additionally, the ritual involves improvisation and dialogue tailored to the needs of the individual, offering a form of expressive therapy where participants can explore and articulate their thoughts and emotions in a safe and supportive space (Fargnoli and Seneviratne, 2021).

Fargnoli and Seneviratne's self-reflective, cross-cultural study[11] explores the potential of *Rata Yakuma* as an approach within DMT. Together, they co-choreographed a short dance film that captures key themes emerging from their discussions on learning and teaching the *Rata Yakuma* ritual. The film specifically addresses how these themes resonate with the experiences of contemporary Sri Lankan women, touching on issues such as societal expectations around pregnancy, the limited discourse on sexuality and intimacy, and the complex responsibilities of motherhood within their respective social contexts (p. 238). While engaging with the choreography, the authors observed a balance between functional and expressive movement and identified *mandiya*, the basic stance in traditional dance, as a place of stability and strength. Through their sessions, they found that intentional focus on the breath while in the *mandiya* position led to greater ease of movement, influencing the Sri Lankan coauthor Seneviratne's teaching approach at her university and enhancing students' learning. The exploration of *mandiya* also increased awareness of specific body parts and movement patterns, such as cross-lateral movements and spine connectivity, aiding in understanding the ritual's foundational movements and

10 According to a legend, "seven queens named Riddi were barren… [but upon] offering a cotton cloth to Lord Buddha, they became pregnant (Wijesiri, 2020, p. 5-6).

11 This is a collaborative study where the authors learned from each other and practiced cultural humility when adapting movements from ritual practices.

emotional connections (Fargnoli and Seneviratne, 2021). Additionally, the authors explored the connection to nature, noting how dancing near the ocean influenced their movements.

Reflecting on their emotional responses, the authors explored the psychological impact of the ritual on women experiencing major life transitions, highlighting the therapeutic potential of engaging in improvisational movement. The study discovered that specific rhythmic movement patterns (particularly hand movements) found in Low-country dance could be beneficial for transitioning, recuperating, and energizing before or after therapy sessions, thus aiding in overcoming stagnation when working with clients (Fargnoli and Seneviratne, 2021, p. 243). The emotional release and catharsis described during the DMT sessions in this study draw parallels to the emotional experiences surrounding pregnancy and childbirth. The study observed parallels between the bodily ease experienced by the Sri Lankan coauthor during breathwork and the physical and emotional transformations women undergo during pregnancy and childbirth. As the coauthors practiced ritualistic movements such as *nanumura* and the basic stance in Sri Lankan traditional dance – *mandiya*, they noticed a deepened connection to their physical self, which in turn fostered emotional release and introspection. This sense of ease allows the body to access familiar patterns while also discovering new expressions, such as empathy and self-awareness. These expressions can create transformative shifts both physically – through alignment, strength, and breathwork – and emotionally, by experiencing the ritual's rhythmic and reflective qualities. For example, the Sri Lankan coauthor's sense of safety, described as "feeling comfortable" and "feeling like there is someone to remove all of the anxiety," highlights how the ritual fosters an environment of trust and security. Empathy emerges as the coauthors witness and mirror each other's movements, with the American coauthor expressing how she felt "comforted" by following the Sri Lankan coauthor. This kinesthetic empathy deepens their mutual connection. Self-awareness is cultivated through bodily attention, such as the Sri Lankan coauthor's focus on breath, spinal movement, and grounding. These heightened bodily sensations evoke an awareness of the emotional shifts, like the transition from heaviness to looseness, emphasizing the evolving connection between the physical and emotional experience. Rhythmic movements in the ritual offer kinesthetic empathy, enabling women to connect with their bodies and surroundings, which can ease the challenges of childbirth and foster emotional release (Fargnoli and Seneviratne, 2021, p. 240).[12]

Bharatanatyam

Bharatanatyam is known for its intricate blend of hand gestures, facial expressions, and storytelling through movement. It emphasizes the use of coordinated

12 While parallels between DMT and the Low-country ritual were noted, the authors avoided direct comparisons between indigenous practices and modern therapeutic methods.

hand and eye movements to convey a range of emotions. As Kilger (1993 as cited in Rajeev, 2014) describes, "*Bharatanatyam* encompasses all the traditional aspects of classical dance: the *hasta mudras* (hand positions), *abhinaya* (facial expressions), and *padams* (narrative dances)" (p. 1).

As mentioned by Rajeev (2014), similar to other traditional dances, *Bharatanatyam* involves *hasta mudras* that give importance to *padartha abhinaya*, which refers to words being "interpreted through mudras" (Rajeev, 2014, p. 6). This dance form consists of nine sentiments, also known as *navarasa,* in which "dancers express their inner feelings and it helps to release their emotions. This practice can be well used for emotional wellbeing and psycho-therapy" (Rajeev, 2014, p. 6). Iyengar (2024) pointed out the importance of using *hastas* in the context of creative aging, where they could promote the acquisition of new skills and physical benefits even in the face of arthritis and limited mobility, and the ability to assign meaning to gestures as well as create new gestures that are contemporary and relevant to the lives of older adults. According to Rajeev (2014),

This *Bharatanatyam* dance form strengthens the hamstring muscles including semi-tendinous, semi-membranous, biceps femoris, etc. This dance style depends on the component with emphasis on facial expressions, rhythm and movement of hands, legs, body and the hand gestures. The therapeutic part of this dance forms [sic] mainly deals with the facial muscle. (p. 6)

Dancing, particularly *Bharatanatyam*, engages both hemispheres of the brain through various body movements such as leg beats, hand gestures, eye and head movements (Rajeev, 2014, p. 7). This coordination aids brain function and oxygenation of muscles, joints, and organs. Dancers exhibit concentration, calmness, and uniform performance, contributing to their overall well-being. *Bharatanatyam* involves specific knee positions that strengthen muscles and improve balance (Rajeev, 2014, p. 7). Additionally, the dance form provides a comprehensive workout for the thorax and upper limbs, promoting spinal health and blood circulation. Proper breathing and coordination of movements play a crucial role in the dance's therapeutic effects, including anti-aging benefits and prevention of degeneration at the cellular level (Rajeev, 2014, p. 7). Scientifically, *Bharatanatyam* is compared to swimming in terms of its muscular-skeletal activity, making it an effective exercise for preventing non-communicable diseases (Chatterjee, 2013c, as cited in Rajeev, 2014, p. 7). Folk dancers, in particular, demonstrate physical and mental fitness compared to non-dancers, which contributes to their self-esteem and confidence. This popularity also fosters an interest in dance among young learners and indirectly supports their educational pursuits (Chatterjee, 2013c, as cited in Rajeev, 2014, p. 7).

While the physical benefits of dance, such as muscle strengthening and improved balance, are well-documented in traditions like *Bharatanatyam*, these practices also play a significant role in emotional and psychological healing (Rajeev,

2014). Rituals like *Rata Yakuma*, for instance, offer cathartic experiences and emotional release, facilitating mental and emotional well-being alongside physical movement. Therefore, the therapeutic value of these dances extends beyond a singular focus on either the physical or emotional, offering a more integrated approach to healing.

Applying therapeutic interventions of dance into the field of social work

Caldwell and Johnson (2019) have studied qualitative and quantitative dance-based research methodologies and identified the anti-oppressive DMT research which aims to centralize the voices and experiences of marginalized groups, focusing on social justice and challenging the power dynamics in traditional research. It emphasizes collaboration with the oppressed community, valuing their lived experiences, and aims to create research that benefits them directly. The authors have outlined several key strategies that dance therapy researchers may use to enhance inclusivity, autonomy, and social relevance in their work:

Involving members of marginalized groups as both participants and co-researchers;

Adopting terminology like "participant" and "co-researcher" to emphasize autonomy and legitimacy;

Considering and analyzing social categories of participants in research;

Tailoring research tools and methods to respect the diversity of the social world;

Empowering participants to assess their own bodies and movement patterns;

Utilizing social justice-based research methodologies like performance ethnography and community-based research;

Sharing research findings with marginalized communities through creative and artistic methods, incorporating culture into research approaches; and

Embracing the social conscience and activism exemplified by pioneers in dance therapy to address contemporary social issues effectively.

Crooks and Mensinga (2021) conducted in-depth semi-structured interviews with a sample of Australian parents and their children to explore their somatic experiences of oppression, treating interviewees as co-researchers rather than subjects. This approach involved collaborative modification of interview questions, review of transcripts, and shared analysis. The study resulted in various public presentations and performances, including choreographed pieces and conference presentations, focusing on gender identity transitioning and transgender issues. It also highlighted the challenges of navigating power differentials and acknowledging personal biases in the process. Additionally, the study explored innovative methods such as co-creating spoken-word-and-movement performances with graduate students using anonymized interview transcripts, which fostered empathy and emotional resonance

among performers and audience members. Performing the words of interviewees in a live setting facilitated kinesthetic empathy among performers and audience members, enabling a deeper understanding of lived experiences of oppression. Witnessing their own words performed on stage provided a transformative experience for participants, enhancing understanding of lived experiences of oppression.

Considering the role performing arts play in post-war Sri Lanka, the collaborative and performative methods discussed by Crooks and Mensinga (2021) offer potential pathways for fostering reconciliation and healing in the Sri Lankan context. Just as performing arts have been crucial in depicting the impact of war and promoting ethnic reconciliation through visual representation, similar approaches – such as co-creating performances based on lived experiences – could deepen understanding of marginalized voices and experiences of oppression within Sri Lanka's socio-political landscape. The integration of these methods could complement ongoing cross-cultural initiatives aimed at social cohesion and collective healing.

Hervey (2012) discusses a study conducted by a Dance/Movement Therapist, Nancy Toncy, by exploring how a small group of women in Cairo, representing various subgroups of Muslim culture, perceived experiences related to dance/movement therapy. These subgroups reflected differences in the women's backgrounds, experiences, or social roles, giving Toncy's research a broader perspective on how different groups within the culture relate to dance/movement therapy. The data collection technique used here was a form of video recording and movement re-creation by Toncy. Initially, the women did not consent to be videotaped themselves, so Toncy devised a method to preserve their movement data. She recorded herself re-creating the women's movements after they had danced, using this as a way to capture the embodied data for later analysis. During the interview process, each woman was asked to hold the camera and video-record Toncy as she explored her own kinesthetic response and attempted to recall and re-create the woman's movements in her own body. This approach allowed for the collection of movement data without involving the women themselves, respecting the women's trust and confidentiality. The women's participation in the recording process also deepened their relationships with Toncy and led to greater disclosure. Additionally, Toncy took detailed notes about each experience, including her responses and events during the sessions, to further document the data collection process.

The initial performance (Hervey & Toncy, 2003, p. 221) took place during a professional conference attended by Euro-American women, primarily mental health professionals, including many dance/movement and creative arts therapists. "The dance performance centered around the differences between Egyptian Muslim and North American women's experiences of oppression, their bodies, and their expressive abilities" (Hervey, 2012, p. 222). Several therapeutic techniques and concepts related to dance/movement therapy are mentioned in this study. Toncy described

experiencing kinesthetic empathy in her own body as she observed and became attuned to the movements of the women she interviewed (Hervey, 2012, p. 218). This involved the therapist's ability to sense empathically and understand the emotions and experiences of the client through their own bodily sensations and movements. Toncy also mentioned experiencing somatic countertransference, which refers to the therapist's personal responses triggered by the movements, feelings, and images expressed by the client (Hervey, 2012, p. 210). This heightened bodily awareness can help the therapist gain deeper insights into the client's unconscious thoughts and emotions, contributing to the therapeutic process by revealing unspoken material. She emphasized the importance of attunement to the women's movements during the movement interviews. Attunement involves the therapist's ability to engage and resonate with the client's internal experiences, emotions, and movements, creating a sense of connection and understanding (Hervey, 2012, p. 210). As a facilitator and observer during the movement interviews, Toncy used reflection as a therapeutic technique. Reflection involves mirroring back to the client their movements, emotions, or experiences, facilitating deeper exploration and awareness (Hervey, 2012, p. 210). She further mentioned providing gentle encouragement to the women during the movement interviews to expand their range of movement (Hervey, 2012, p. 216). This technique involves supporting and empowering clients to explore and express themselves more fully through movement. During the movement interviews, she encouraged the women to explore symbolism and memories associated with their movements (Hervey, 2012, p. 216). This technique involves facilitating the client's exploration of the deeper meaning and personal significance of their movements, allowing for insight and self-discovery. Toncy also discussed the challenges of setting culturally sensitive boundaries around time and availability during the interviews. Therapeutic boundaries are essential in maintaining a safe relationship between the therapist and the client, and navigating cultural differences in boundary-setting is an important aspect of culturally competent practice in DMT (Hervey, 2012, p. 222).

Scharoun et al. (2014) conducted a study on "Dance/Movement Therapy as an Intervention for Children with Autism Spectrum Disorders (ASD)". The study emphasized both qualitative and quantitative DMT intervention and analysis techniques. Mirroring, or empathetic imitation of movement, is a key component of DMT mentioned in the study. It also helps establish body image and improve social skills when interpreting facial expressions, and establishing relationships with others (Winters, 2008, as cited in Scharoun et al., 2014). Siegel (1973) worked with four children with ASD in a group setting, using DMT to promote body-image building and sense of self. Positive responses were noted, including a decline in aggressive behaviors. Kalish-Weiss (1968, as cited in Scharoun et al., 2014) observed interventions that began in the early symbiotic phase (Levy, 1988; Mahler, 1968), where therapists mirrored children's movements to create comfort. This mirroring

evolved over time, helping children recognize therapists as separate entities, which increased their awareness of body image and movement in space (Dratman, 1967; Kalish, 1968; Levy, 1988, as cited in Scharoun et al., 2014). Erfer (1995) described mirroring as a form of reflecting back, which helps children see the effects of their movements and explore their body's capabilities. Tortora (2006, as cited in Scharoun et al., 2014) stated that mirroring creates an emotional connection between the therapist and the child, promoting a meaningful and healthy relationship. Devereaux (2012, as cited in Scharoun et al., 2014) summarized personal experiences with DMT in children with ASD, noting increased self-awareness, eye contact, verbalization, and identification of specific body parts. She also observed improved tolerance for contact, empathy, and creative expression through mirroring.

Siegel (1973) incorporated a psychoanalytic perspective into DMT interventions for children with ASD. He focused on improving functioning through two main intervention methods. The first method involved weekly sessions where motor skills were assessed using the Oseretsky Test for Motor Proficiency. Specific movements were prescribed to meet group needs, such as folk dances for enhancing socialization. The second method included twice-weekly individual sessions combined with group therapy, allowing therapists to address each child's unique needs. This approach aimed to support children's transition from early developmental phases to individuation, aligning with Kalish-Weiss's (1977, as cited in Scharoun et al., 2014) perspective on development.

Loman (1995, as cited in Scharoun et al., 2014) described the successful utility of the Kestenberg Movement Profile (KMP), a Laban[13]-influenced system used by dance/movement therapists to observe, describe, and interpret nonverbal behavior. Dance/movement therapists use the KMP for description, assessment, treatment planning, intervention and interaction with a wide variety of clients (Loman & Merman, 1996). The KMP includes categories of movement patterns that provide insight into egocentric development and relationships to people and things (Scharoun et al., 2014). As mentioned by Loman & Merman (1996), KMP consists of two major systems: tension-flow-effort system (System I) and shape-flow-shaping system (System II). The tension-flow-effort system relates to inner feelings and ego development, tracking movement patterns from early life like tension-flow rhythms and attributes. These reflect internal needs, emotions, and responses to environmental challenges. The shape-flow-shaping system (System II) is focused on relationships with the environment, people, and objects. It tracks how the body expands and contracts, from early symmetrical and asymmetrical movements to more advanced patterns involving space and interaction. Each system reflects different lines of

13 "Laban Movement Analysis (LMA/LBMS) originated in the work of Rudolf Laban and has evolved into a highly detailed practical and theoretical system that describes qualitative aspects of movement and interrelationships among them – in dance, theatre, pedestrian movement, and other nonverbal behavior" (LSSI, n.d.).

psychological development, with System I focusing on personal dynamics and System II on relational aspects. Both are crucial for understanding an individual's temperament, emotional states, and communication styles. Loman (1995, as cited in Scharoun et al., 2014) used the Kestenberg Movement Profile (KMP) to assess a 4-year-old boy with autism spectrum disorder (ASD) named Warren, finding he was developmentally equivalent to an 18-month-old. Through Dance/Movement Therapy (DMT), Warren progressed through early movement stages at his own pace, advancing developmentally from the level of an 18-month-old to that of a 2-year-old, and eventually reaching the developmental stage of a 3-year-old, demonstrating DMT's positive impact. Similarly, Parteli (1995, as cited in Scharoun et al., 2014) applied KMP with two boys aged 6 and 7 with ASD, resulting in significant motor and psychosocial improvements. Both studies highlighted DMT's value in understanding non-verbal children's movements as forms of communication, promoting developmental growth.

Dance/movement therapists utilize elements such as props and music to enhance interventions for children with ASD. Props can help children feel more comfortable and safer, while music can increase attention span and aid in motor planning and execution. Duggan (1978, as cited in Scharoun et al., 2014) suggests that therapists should work one-on-one with children with autism in order to establish a safe relationship before working with other children, highlighting that props are an important component because they act as a "bridge for contact" between the therapist and child. Props may be especially useful for children who are socially isolated by enabling "the child to tolerate a relationship that might be too threatening if carried on more directly" (Erfer, 1995, p. 201). Siegel (1973) demonstrated that incorporating music and body contact in a nine-month DMT program helped children with ASD develop body-image and self-concept, showing positive responses and reduced aggression. Boettinger (1978, as cited in Scharoun et al., 2014) observed that music facilitated increased synchronous movement and communicative gestures among children with ASD, and decreased aversion to touch. In addition to these findings, Parteli (1995) and Loman (1995) highlighted that integrating music into DMT sessions supported motor and psychosocial development, particularly through symbolic play, which aids in reorganizing past experiences and enhances communication.

Dance/movement therapists emphasize the importance of tailoring interventions to meet the specific needs of children with ASD, starting at the child's developmental level and progressing at their pace. This individualized approach helps children feel comfortable and promotes engagement in therapeutic activities (Scharoun et al., 2014).

A social work intervention model to employ in dancing: The strengths-based approach

As mentioned by Crooks and Mensinga (2021), Cameron and McDermott (2007) argued that social workers need to view a person's development and wellbeing within the larger contexts of biology, environment, culture, and society. Dance/movement (DM) therapists work with a variety of theories (e.g., psychodynamic, attachment, behavioral) and employ diverse approaches (e.g., mindfulness, strengths-based, trauma-informed, and anti-oppressive practice) in order to address individual problems arising in both mind and body at once (p. 251).

The strengths perspective, as explained by Dennis Saleebey (1992), is a social work approach that is "guided first and foremost by a profound awareness of and respect for clients' positive attributes and abilities, talents and resources, desires, and aspirations" (p. 6). Having the notion that "clients are usually the experts of their own situation" (p. 7), this approach works as a collaborative initiative with the client to overcome his own problems. Dance Movement Therapy (DMT) serves as a powerful example of harnessing clients' strengths, where clients can express and process their emotions through movement, thereby utilizing their inherent physical abilities and creative expression. Two selected assumptions in this approach include avoiding the victim mindset and the view that the client's environment is regarded as abundant with resources for their healing. Avoiding the victim mindset emphasizes and orients the work of helping around clients' strengths can help to avoid "blaming the victim" (Ryan, 1976, as cited in Saleebey, 1992). In doing so, as the first step, the social worker tries to understand "how the elements of the environment eventually pervade the individual identity and energy" (p. 7), and the intervention phase starts with understanding "how the individual has managed to survive" during the crisis (p. 7). DMT can be instrumental in this phase, allowing clients to physically express how they have survived emotionally, fostering resilience and emotional release through movement. Another key assumption is that the client's environment is viewed as abundant with resources that can support their growth and healing. No matter how harsh the environment is, a strengths-based perspective always believes that each client's environment is full of resources that could help the client to overcome their challenges. This could be "individuals and institutions who have something to give, something that others may desperately need: knowledge, succor, an actual resource, or simply time and place" (p. 7). DMT programs, community-based dance workshops, or group therapy settings can provide such environments where individuals can heal collectively through movement and rhythm. These resources may not be traditionally recognized or utilized by formal social and public services. Despite the ongoing need to address social justice issues, it is important to acknowledge and leverage these existing resources while also advocating for broader systemic change.

The key concepts in this approach, including empowerment, membership, regeneration, synergy, dialogue and suspension of disbelief (Saleebey, 1992), highlight its traditional focus on a client-centered approach in micro-level social work practice. Furthermore, Saleebey (1992) mentions three assumptions that formulate the core of the strengths-based perspective. First, it is assumed that everyone has an inner strength or vitality that is part of being human. This inner strength may be referred to by various terms, such as life force or healing power. Empowerment involves assisting individuals in accessing this inherent strength within themselves. Second, it assumes that this inner strength is a valuable form of knowledge that can lead to personal and social change. It emphasizes respecting everyone's experiences and views equally, creating a community where knowledge is shared through dialogue rather than controlled by certain individuals or groups. Third, when people are encouraged and supported in using their strengths, they are more likely to grow and improve. This means focusing on their talents, experiences, and goals, which increases the chances of positive development.

The assessment process of a strengths-based perspective has two components, which align with Mary Richmond's (1917) distinction between 'study' and 'diagnosis' (Saleebey, 1992, p. 142). The first step/component in addressing any issue is 'defining the problem situation'. This involves providing a clear and concise summary of the problem in simple language, agreed upon by both the social worker and the client. It is essential to identify who is involved, whether individuals, groups, or organizations, and how these participants interact with each other before, during, and after the problem-related activity. Understanding the client's perception of the situation is crucial, including what meaning they ascribe to the issue, what they hope to achieve by seeking assistance, and their expectations regarding the outcome. Additionally, envisioning what the client's life would be like if the problem were resolved helps to clarify their goals and desired changes.

The second component is a framework for assessment, offering a structured model to evaluate the factors influencing the problem situation along two axes: one comparing environmental factors to personal factors and the other comparing strengths to deficits. Each of the resulting four quadrants represents key content for assessment, capturing both the client's context and their capacities. This framework has been used effectively in teaching, workshops, and agency consultations, helping clients and practitioners identify strengths, resources, and obstacles in a comprehensive way.

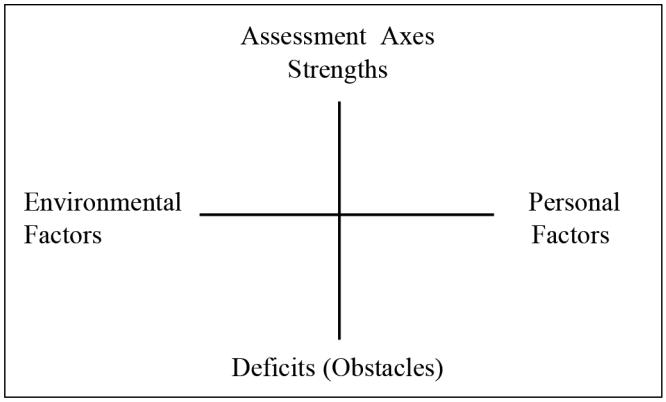

Figure 3.1: Framework for Assessment (Saleebey, 1992)

In most practice today, emphasis is often on Quadrant 4 (personal deficits), but the model promotes a balanced assessment, particularly stressing Quadrants 1 and 2 (environmental and personal strengths) when adopting a strengths perspective. Here, Quadrant 2, which addresses personal strengths such as cognition, emotion, motivation, coping, and interpersonal relationships, is a main focus. While physiological and environmental factors are especially important for certain clients, this assessment remains centered on personal strengths to support a comprehensive understanding within the broader problem context.

By providing a non-verbal medium for self-expression, DMT allows clients to explore their inner vitality and emotional landscapes, thereby tapping into their resilience and life force. This approach aligns with the fundamental belief that clients are the experts of their own experiences; through movement, they can articulate feelings and insights that may be difficult to express verbally. DMT encourages empowerment by enabling clients to access their inner strengths and fosters community connection through shared movement experiences. This collective aspect can enhance feelings of belonging and support among participants, promoting a sense of membership in a healing environment. Furthermore, DMT can identify and utilize existing resources within clients' environments, expanding the notion of support to include the emotional and relational benefits of group dynamics.

Application of a strengths-based model within a strengths-based approach

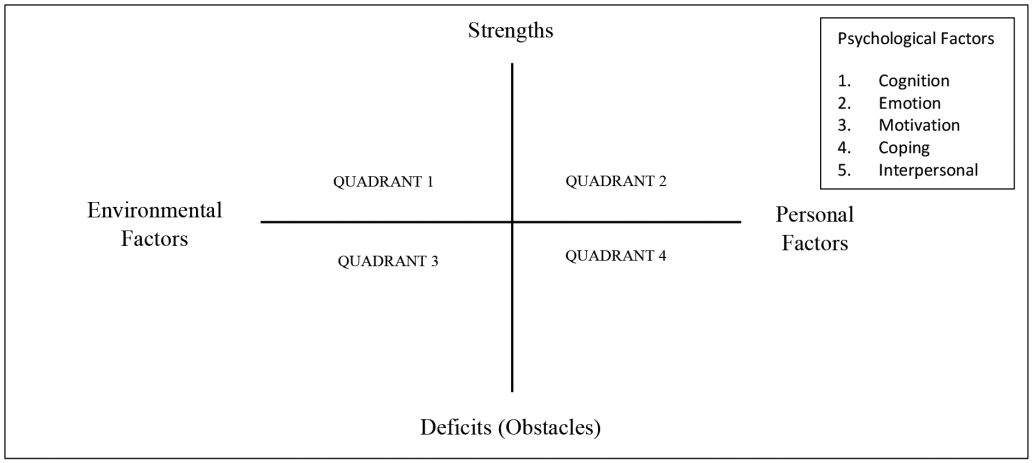

Figure 3.2: Assessment Axes (Saleebey, 1992)

Avoiding victim mindset (Saleebey 1992) is a key aspect in a strengths-based approach which is identified as a key component in DMT research. Through each form of dance, the service user (dancer) is considered as a performer, creating the pathway to showcase their creativity.

Shanthikarma, as a form of group therapy, is understood within the context of social work as a social group work method. This has the characteristics of both support and treatment groups. As mentioned by Appuhamilage (2018), the influence of performing arts as a psychotherapeutic approach is evident in Sri Lankan traditions where rituals and ceremonies are believed to ward off evil effects and provide mental relief. These ceremonies, such as the *Daha Ata Sanniya*, incorporate methods akin to Western therapeutic practices like psychotherapy, group therapy, and hypnotherapy. The priests conducting these ceremonies instill positive attitudes and confidence in patients, resembling cognitive behavior therapy and Gestalt therapy. Additionally, performing arts serve as group therapy, particularly for women experiencing similar illnesses among the spectators.

Commonly used Dance Movement Therapy (DMT) techniques, such as kinesthetic empathy and attunement, are often observed in ritualistic dances. For instance, in the *Rata Yakuma* ritual, performers take on the perspective of the *Athuraya* (the patient), who faces difficulties in childbirth and pregnancy. Through this process, the performers mirror the emotions, sentiments, and thoughts of the *Athuraya* by employing the reflection technique. This approach has the potential to help the patient manage their fears by transforming a feeling of helplessness into a ritualized experience, fostering resilience through the combined use of dance, music, and offerings made to the demons believed to be responsible for the *Athuraya's*

difficulties (though the extent to which this occurs may vary depending on individual circumstances).

Similarly, in DMT practices with children who have autism spectrum disorder (ASD), movement therapists employ bodily engagement to foster connection and interaction, shifting focus from limitations to strengths. Kalish-Weiss (1977, as cited in Scharoun et al., 2014) explains that, while the goals of movement therapy align with other body-focused psychotherapies, the methodology differs. The therapist actively uses their own body movements, sounds, and rhythms to draw the child's attention, establish emotional relationships, and create mutually enjoyable interactions. This technique supports a strengths-based perspective by emphasizing the child's unique capacity for connection and responsiveness, rather than a focus on their challenges.

As Crooks and Mensinga (2021) further note, DMT positions the body as both the "container and processor" of thoughts and emotions, as well as a medium for building relationships with oneself, the environment, and others. This perspective encourages clients to connect with their own bodily awareness and sensations, empowering them to recognize their inherent strengths and resilience. Through techniques that emphasize self-awareness and bodily expression, DMT fosters an avoidance of the victim mindset by helping individuals view their bodies as sources of empowerment, capable of processing and responding to their experiences. Therefore, this concept is vital in developing both personal and environmental factors that could enhance the service user's strengths.

In Synchronous Movement Profile (SMP), Costonis (1978, as cited in Scharoun et al. 2014) "divides the body into five areas of observation: head, torso, hands, arms, and legs, where movements are scored based on the presence/absence of synchronous movements" (p. 215). *Bharatanatyam* consists of fine movements from head to toe that could be effectively used by the practitioners to enhance cognitive development. For instance, Surjani et al. (2018) conducted a study involving 33 adult-Bengalee females (ages 18-30) who practiced *Bharatanatyam* regularly and 35 control group (CG) females of similar age and socioeconomic status who did not engage in any form of dance or exercise. The impact of *Bharatanatyam* was assessed through cognitive performance tests (MMSE) and reaction time (RT) as well as postural balance evaluations. The results showed that the *Bharatanatyam* Dance Group (BDG) exhibited significantly better cognitive performance compared to the CG, with higher MMSE scores and lower RT, indicating improved memory and quicker motor responses. Similarly, Mohan and Sunder (2022) explored the impact of *Bharatanatyam* on cognitive function through its influence on Brain-Derived Neurotrophic Factor (BDNF), which is crucial for neuronal growth and long-term memory. *Bharatanatyam* requires learning and perfecting new movements, which is likely to enhance BDNF levels in the brain. The research investigated the link between BDNF gene variants and *Bharatanatyam* performance in 93 participants,

including 45 dancers and 48 non-dancers. The results showed that dancers had a higher proportion of the genotype associated with optimal BDNF production. Dancers with this genotype reported feeling happier after dancing and engaged in other physical activities, whereas those with a different genotype did not report the same level of happiness and were less likely to engage in additional exercise.

Building on these findings, Bharatanatyam also shows promise as a therapeutic intervention within indigenized social work practices, particularly in medical settings. Integrating *Bharatanatyam* into therapy programs for individuals with intellectual disabilities can further support their cognitive and physical development. As Shrutika et al. (2019) pointed out, *Bharatanatyam*-based dance therapy effectively enhances fitness, strength, and balance in children with Down syndrome (DS) in a *Bharatanatyam*-based dance therapy program with 30 children and adolescents aged 5-18 with DS. Similarly, in a randomized design conducted by Raghupathy et al. (2021), 36 children with DS aged 6-10 were divided into two groups: Indian classical dance and neuromuscular training. Results showed that traditional Indian dance significantly improved gross motor skills and locomotor abilities compared to neuromuscular training. Therefore, further research is needed to explore how this approach could also support cognitive and emotional development, particularly within the Sri Lankan context.

These studies collectively indicate that Bharatanatyam can be leveraged as a culturally relevant and therapeutic practice in social work settings, tapping into participants' existing abilities and fostering growth in cognitive and emotional domains. *Bharatanatyam* can be presented as a practice that employs participants' inherent abilities and natural strengths – such as coordination, rhythm, and memory – to enhance cognitive and emotional well-being. The strengths-based model in social work emphasizes identifying and building on existing competencies and resources. Similarly, the studies demonstrate that *Bharatanatyam*, with its synchronous and structured movements, engages participants' innate capacities to foster growth in cognitive performance and motor skills. This approach focuses on amplifying strengths, such as memory and reaction time, contributing to resilience and overall quality of life, rather than addressing deficits.

Shanthikarma are not merely dance events. For instance, in *Bali Shanthikarma,* "a ritual to cure patients in which the exorcist, or leading dance artist, shows the patient indirectly that his illness would be cured through praise singing and dance movements" (Rajapakse, 2004, p. 72). An illustration of this phenomenon is provided below through two verses associated with the *pirith hooya* (or *pirith noola*), or the thread imbued with *pirith* chants, as depicted in the *Baliyaga*. These verses serve as an embodiment of blessings bestowed:

Kusinara Purayena - Weda Hinda Yahana Sethapena

Sak Devi Kendavima na - Pirith Penhooya Devvavigasi na Wadala Panathata - Kala Anuhas Balen Thu ta

Adath Me Athuran Hata - Pirith Noolen Dosa Duruko ta.

Translation: With the wisdom of the Buddha, the Dhamma and the Sangha, today too, with the glory and majesty of taking the *pirith hooya* into the hands, all planetary afflictions will be dispelled (Rajapakse, 2004, p. 73).

Environment factors, including the decorations, music, live dialogues, roleplays and other rituals play a huge role in enhancing the personal strengths of the individual. Through advanced verbal and non-verbal communication systems including *Aangika* (expression of the limbs), *Vachika* (expression of the speech), *Sathvika* (expression of emotions) and *Aaharya* (costume and scene), *Bharatanatyam* could be utilized as a holistic approach in enhancing both environmental and personal strengths within the individual. The *hasta mudras* could be effective in developing symbolism exploration. Allowing service users to explore their subjectivity is a key component in contemporary dance.[14] Incorporating adaptive techniques into traditional dances allows them to retain their significance while also creating space for individuals with special needs. By applying these adaptive techniques, traditional dances can help service users develop their motivational and coping strengths.

The strengths-based perspective encourages reducing the gap between the service provider and the service user. Unlike the typical therapist-client relationship, this promotes interpersonal relationships within traditional contexts like *Shanthikarma.*

Challenges the country is facing in indigenizing the social work profession

Although there is emerging recognition for social work in the country, interdisciplinary collaboration is still challenging. Dance and social work operate as two different disciplines within the Sri Lankan context where there is little acknowledgement of dance-based interventions for social work. A multidisciplinary approach is possible, but this might cause issues with ethical dilemmas in various professions and the objectives of their interventions. In the context of interdisciplinary collaboration between dance and social work in Sri Lanka, these may arise due to differing values, goals, and practices within each discipline. One key challenge is the issue of space, as social work often takes place in non-traditional environments, such as on front doorsteps, in cars, or in confined office spaces unlike the designated spaces typically used in DMT (Crooks & Mensinga, 2021). Social workers might not pursue formal DMT qualifications, but awareness of DMT principles can be fostered

14 Contemporary dance involves improvisation using sensory, conceptual, theoretical, or emotional themes, often through collaborative efforts, reflecting dancers' unique cultural backgrounds (Potter, 2018, as cited in Leach & Stevens, 2020).

through professional development. Incorporating concepts like kinesthetic empathy and attunement could enhance embodied practices. Additionally, applying social justice theories to DMT interventions could lead to greater social transformation, suggesting that both fields would benefit from deeper collaboration and dialogue (Crooks & Mensinga, 2021).

Mainstreaming western concepts in therapeutic settings is another issue. Mantillake (2021) has pointed out this issue by emphasizing the risk of colonization and nationalization in DMT. A colonial approach involves importing Western models of DMT that often carry Euro-American ideologies, methodologies, and hierarchical therapist-client structures. These models risk imposing external frameworks onto Sri Lankan communities, potentially reinforcing power dynamics that undermine local cultural practices and the lived experiences of individuals. On the other hand, a nationalized approach may involve the appropriation of traditional or indigenous dance forms into a structured therapeutic model. While this might appear to be a way of reclaiming cultural identity, it can also lead to fabricated and homogenized versions of these practices. Such an approach may ignore the diverse cultural nuances within Sri Lankan society, potentially antagonizing communities, especially when framed along ethnic lines. A holistic and inclusive approach to Dance Movement Therapy (DMT) can be implemented in Sri Lanka, emphasizing the need to move away from Eurocentric, individualistic frameworks. DMT can also incorporate indigenous knowledge, cultural traditions, and local realities to become a form of healing that resonates more deeply with the community.

Reimagining therapy as a form of collective healing offers an opportunity to move beyond the Western hierarchical expert-client dynamic, allowing for more community-driven, participatory practices. Such an approach could better resonate with the shared cultural and social experiences of individuals in Sri Lanka, aligning with a decolonial approach to therapy. Furthermore, Christopher (2024) further elaborates that while Western medical models of therapy emphasize evidence-based approaches, they often overlook the value of traditional practices like embodied storytelling (p. 2). This is particularly relevant in the context of mental health,[15] as there is a call to preserve oral narratives through naturalistic practice and documentation, despite the challenges of validating and referencing these stories in research. By integrating these culturally relevant practices into Dance Movement Therapy, there is potential to address mental health in a way that resonates more deeply with the lived experiences of individuals in South Asian contexts.

Integrating traditional dance elements into modern therapeutic practices could be more beneficial for local communities dealing with longstanding cultural

15 "Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community" (WHO, 2022).

challenges. As communities face challenges in integrating these foreign concepts with their traditional healing practices, this stagnation stems from the limited recognition of the therapeutic value in local dance rituals for addressing the emotional and social issues unique to these communities. This is not an easy task, and some scholars have pointed out its complexity. As Mantillake (2021) states, Waidyawathie Rajapakse, a scholar of traditional dance and daughter of the renowned Kandyan dancer Amunugama Suramba, argues that dance rituals in Sri Lanka are fundamentally different from Western DMT. According to Rajapakse, the roles of the individuals involved in these practices are distinct: in dance rituals, the relationship between the ritual priest and the receiver of healing (*Athuraya*) differs significantly from that between a therapist and a client in DMT (Rajapakse, personal communication, December 8, 2020, as cited in Mantillake, 2021). The *Athuraya* may also serve as the sponsor of the ritual, contrasting with the Western concept of a patient (Rajapakse, personal communication, December 8, 2020, as cited in Mantillake, 2021). Therefore, as suggested by Mantillake (2021), while a decolonial approach to DMT presents certain complexities, it raises important considerations that merit further exploration.

Further, although DMT can be effective for healing, both colonial and nationalized versions pose risks in Sri Lanka. Colonial DMT maintains Euro-American superiority, while a nationalized approach could deepen ethnic divisions. Instead, a decolonial approach can focus on collective healing, challenge patriarchal and hierarchical structures, and incorporate indigenous knowledge. This approach could connect personal healing with broader structural issues, aiming for both individual well-being and societal justice (Mantillake, 2021, pp 156-157).

Integrating Sri Lankan traditional dance into social work practices

Traditional dance rituals in Sri Lanka, such as the *Kohomba Kankariya* and *Rata Yakuma*, have been integral parts of cultural and healing practices for centuries. These rituals comprise movement, music, and symbolism aimed at addressing various societal and individual challenges. The therapeutic aspects of these rituals lie in their ability to facilitate emotional expression, community cohesion, and personal transformation. Traditional dance rituals provide a platform for individuals to express and process emotions in a non-verbal manner. The rhythmic movements, music, and symbolic gestures enable participants to externalize their inner experiences, leading to a cathartic release of emotions.

Beyond individual healing, traditional dance rituals foster community cohesion and social integration. These rituals often involve collective participation, where community members come together to perform and witness the rituals. Through shared movement and music, participants forge bonds of solidarity and belonging, transcending social divisions and fostering a sense of unity. Additionally, these rituals serve as platforms for intergenerational transmission of cultural values

and practices, strengthening the fabric of community identity.

Participation in traditional dance rituals can lead to personal transformation and empowerment. By engaging in symbolic enactments and embodying archetypal roles, individuals navigate personal challenges and transitions, gaining insights and resilience along the way. The rituals provide opportunities for individuals to reclaim agency over their bodies and narratives, fostering a sense of empowerment and self-determination.

The principles and techniques of Dance/Movement Therapy offer valuable insights and methodologies for social work practice, particularly in contexts like Sri Lanka where traditional dance forms are deeply embedded in culture and healing. DMT emphasizes the importance of kinesthetic empathy and attunement, whereby therapists engage with clients' movements and experiences on a somatic level. In the context of social work, these principles enable practitioners to develop a deeper understanding of clients' embodied experiences and emotions, facilitating empathetic connection and rapport. For example, in the context of traditional dance rituals, social workers can attune themselves to the movements and expressions of participants, thereby gaining insight into their emotional states and needs.

The strengths-based approach in social work aligns closely with the ethos of DMT, emphasizing the recognition of clients' inherent strengths and resources. In the context of traditional dance rituals, social workers can adopt a strengths-based perspective by acknowledging and validating the cultural resilience and coping mechanisms embedded within these practices. By leveraging the strengths of individuals and communities, social workers can empower clients to navigate challenges and pursue their goals.

While integrating traditional dance techniques into social work practice holds immense potential, it also presents several challenges and opportunities. One of the primary challenges is ensuring cultural sensitivity and appropriateness in the integration of traditional dance techniques. Social workers must navigate the complex cultural dynamics and power dynamics in these practices, ensuring that interventions are respectful, inclusive, and relevant to the community's cultural context. Effective integration of traditional dance techniques into social work practice requires interdisciplinary collaboration and dialogue. Social workers must collaborate with dance therapists, cultural experts, and community members to co-create interventions that honor cultural traditions while addressing contemporary social issues. Resource allocation and training pose additional challenges in indigenizing social work practice. Social workers require specialized training and resources so that they can effectively integrate traditional dance techniques into their therapeutic interventions. Additionally, funding and support for community-based initiatives and cultural preservation efforts are essential for sustaining these practices.

Moving forward, there is a need for continued research, training, and

advocacy to advance the integration of traditional dance techniques into social work practice. Research initiatives can focus on documenting the therapeutic outcomes of traditional dance rituals, exploring innovative interventions, and addressing gaps in knowledge and practice. Furthermore, developing training programs and capacity-building initiatives can equip social workers with the necessary skills and cultural competence to work effectively with traditional dance techniques. Advocacy efforts might prioritize the recognition and support of traditional healing practices within broader social and healthcare systems, ensuring equitable access to culturally relevant interventions for all communities.

Conclusion

The integration of Dance/Movement Therapy principles and traditional dance techniques holds great promise for enhancing social work practice in a culturally diverse context like Sri Lanka. By embracing the therapeutic potential of traditional dance rituals and leveraging the principles of DMT, social workers can foster healing, resilience, and empowerment within individuals and communities. However, this integration requires careful navigation of cultural dynamics, interdisciplinary collaboration, and ongoing advocacy and research efforts. Through concerted action and collaboration, social workers can harness the transformative power of movement and dance to promote holistic well-being and social justice.

Conflict of Interest

The author has no conflict of interest to declare.

References

ADTA. (n.d.). *What is dance/movement therapy?* American Dance Therapy Association. Retrieved February 23, 2024, from https://adta.memberclicks.net/what-is-dancemovement-therapy

Appuhamilage, W. (2018). *The performing artistes in Sri Lanka: The contribution to ethno-religious cohesion through their shaping and challenging of socio-cultural norms* [PhD dissertation, University of Leeds]. https://etheses.whiterose.ac.uk/23691/1/WINOJITH%20SANJEEWA%20_Performing%20Arts_PhD_2018.pdf.pdf

BBC News. (2015, January 9). *Q&A: Post-war Sri Lanka*. Retrieved November 1, 2024, from https://www.bbc.com/news/world-south-asia-11393458#:~:text=Sri%20Lanka%27s%20army%20defeated%20separatist%20Tamil%20Tiger%20rebels,ended.%20The%20rebels%20were%20also%20accused%20of%20abuses.

Caldwell, C. & Johnson, R. (2019). Embodying difference: Addressing diversity and social justice in dance/movement therapy research. In R. F. Cruz & C. F. Berrol (Eds.), *Dance/movement therapists in action* (3rd ed.) (pp. 125-144).

Charles C. Thomas Publisher, Ltd.

Christopher, N. (2024). Treatment resistant depression: A critical reflection on missing oral narratives in dance therapy literature. *Body, Movement and Dance in Psychotherapy*, 19(3), 1-11. https://doi.org/10.1080/17432979.2024.2323072

Crooks, A. & Mensinga, J. (2021). Body, relationship, space: Dance movement therapy as an intervention in embodied social work with parents and their children. *Australian Social Work, 74*(2), 250-258. https://doi.org/10.1080/0312407x.2020.1861315

Dona, L. M. K. (2015). Bali Healing Ritual in Sri Lanka from a Medical Ethnomusicology Perspective. *Musicological Annual*, 52(2), 121-136. https://doi.org/10.4312/mz.52.2.121-136

Dunphy, K., Guthrie, J., & Mullane, S. (2015). Dance movement therapy as a specialized form of counselling and psychotherapy in Australia. In C. Noble, & E. Day (Eds.), *Psychotherapy and counselling: Reflections on practice* (pp. 173-188). Oxford University Press.

Erfer, T. (1995). Treating children with autism in a public school system. In F. Levy (Ed.), *Dance and other expressive therapies.* (pp. 191-211). London: Routledge.

Fargnoli, A., & Seneviratne, D. (2021). Exploring Rata Yakuma: Weaving dance/movement therapy and a Sri Lankan healing ritual. *Creative Arts in Education and Therapy, 7*(2), 230-244. https://doi.org/10.15212/caet/2021/7/23

Fischman, D. (2009). Therapeutic relationships and kinesthetic empathy. In S. Chaiklin, & H. Wengrower (Eds.), *The art and science of dance/movement therapy: Life is dance* (pp. 33-53). Routledge.

Harindi, L., & Hapugoda, M. (2023). The traditional devil dancing (Thovil) and its healing capacity: Exorcism and catharsis as a psycho-therapeutic experience. In M. Cooper, A. Gnanapala, M. S. M. Aslam, & I. Ratnayake (Eds.), *The emergence and future of health tourism in the Asia Pacific region* (pp. 235-247). Cambridge Scholars Publishing.

Hervey, L. W. (2019). Embodied artistic inquiry. In R. F. Cruz, & C. F. Berrol (Eds.), *Dance/movement therapists in action: A working guide to research options.* Charles C Thomas Publisher. (200-226).

International Federation of Social Workers. (2024). *Global definition of social Work*. IFSW. Retrieved November 1, 2024, from https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/

Iyengar, S. (2023). The use of hand gestures (Hastas) in *Bharatanatyam* for creative aging. *Journal of Medical Humanities*, 45(2). https://doi.org/10.1007/s10912-024-09861-1

Jinadasa, M. (2016). Bali rituals and therapeutic communication in the traditional rural society in Sri Lanka. *Journalism and Mass Communication, 6*(11).

https://www.scilit.net/publications/c3b94ec354f943796c6ce6fc1537ca15

Laban/Bartenieff and Somatic Studies International (LSSI). (n.d.). *Movement Analysis*. Retrieved September 27, 2024, from https://labaninternational.org/scope-of-practice/movement-analysis/

Larsen, H. M. (1998). *Yak Tovil: Between health and entertainment* [Master's Thesis, University of Bergen].

Leach, J., & Stevens, C. J. (2020). Relational creativity and improvisation in contemporary dance. *Interdisciplinary Science Reviews*, 45(1), 95-116. https://doi.org/10.1080/03080188.2020.1712541

Levine, B., Land, H., & Lizano, E. L. (2019). Exploring dance/movement therapy to treat women with posttraumatic stress disorder. *Critical Social Work*, 16(1). https://doi.org/10.22329/csw.v16i1.5915

Loman, S & Merman, H. (1996). The KMP: A tool for dance/movement therapy. *American Journal of Dance Therapy,* 18 (1), 29-52.

Majumdar, K., Baikady, R., & D'Souza, A. A. (2023). Understanding indigenous social work education and practice: Local and global debates. In K. Majumdar, R. Baikady, & A. A. D'Souza (Eds.), *Indigenization discourse in social work* (pp. 1-14). Springer.

Malchiodi, C. A. (2020). *Trauma and expressive arts therapy: Brain, body and imagination in the healing process*. The Guildford Press.

Mantillake, S. (2021). Decolonizing dance movement therapy: A healing practice stuck between coloniality and nationalism in Sri Lanka. *Creative Arts in Education and Therapy*, *7*(2), 149-157. https://doi.org/10.15212/caet/2021/7/20

Mohan, N., & Sunder, A. (2022). A comprehensive evaluation of brain derived neurotropic growth factor gene on *Bharatanatyam* dancers. *Precision Medicine Research*, 4(2). https://doi.org/10.53388/pmr20220006

Panampitiya, W. M. G. N. (2024). A Study on Sociological Aspects of 'Kohombã Yak Kankãri Shãnthikarmaya.' *Journal of Social Sciences*, 2(1), 59–68.

Paranavitana, S. (1956). The God of Adam's Peak. *Artibus Asiae. Supplementum*, 18. https://doi.org/10.2307/1522591

Parteli, L. (1995). Contribution of dance/movement therapy to the psychic understanding of motor stereotypes and distortions in autism and psychosis in childhood and adolescence. *The Arts in Psychotherapy*, 22, 241-247.

Raghupathy, M. K., Divya, M., & Karthikbabu, S. (2021). Effects of traditional Indian dance on motor skills and balance in children with Down syndrome. *Journal of Motor Behavior*, 54(2), 212–221. https://doi.org/10.1080/00222895.2021.1941736

Rajapakse, W. (2004). On the origin and early history of Sri Lankan dancing: Between spirit beliefs and great tradition, appeasement of the gods, and healing methods. *The World of Music, 46*(3), 65-78. https://www.jstor.org/stable/41699592

Rajeev, S. R. P. (2014). Medical and social aspect of classical dance - *Bharatanatyam* from Tamil culture of Sri Lanka. *European Journal of Biomedical and Pharmaceutical Sciences, 1*(3), 1-21. https://www.researchgate.net/profile/Pholtan-Rajamanoharan-2/publication/346933020_Issue_3_01_-21_Year_2014_Research_Article_ejbps/links/5fd2d87845851568d154d4c4/Issue-3-01-21-Year-2014-Research-Article-ejbps.pdf

Richmond, M. E. (1917). *Social Diagnosis.* Russell Sage Foundation.

Saleebey, D. (1992). *The strengths perspective in social work practice*. Longman Publishing Group.

Samaraweera, H. U. S. (2021). Social work education in contemporary Sri Lanka: Issues and challenges. In S. M. Sajid, R. Baikady, C. Sheng-Li, & H. Sakaguchi (Eds.), *The Palgrave handbook of global social work education* (pp. 379-391). Springer eBooks. https://doi.org/10.1007/978-3-030-39966-5_23

Scharoun, S. M., Reinders, N., Bryden, P. J., & Fletcher, P. C. (2014). Dance/movement therapy as an intervention for children with autism spectrum disorders. *American Journal of Dance Therapy, 36*(2), 209-228. https://doi.org/10.1007/s10465-014-9179-0

Shrutika, P., Meruna, B., Sakina, S., Ramandeep Kaur, S., Madhura, S., Pooja, R., & Prajakta, S. (2019). Effect of *Bharatanatyam*-based dance therapy in children and adolescents with down syndrome. *Clinical Kinesiology,* 73(3).

Siegel, E. V. (1973). Movement therapy with autistic children. *Psychoanalytic Review*, 60(1), 141-149.

Silva, H. S. N. (2019). A socio psychological study on the psychotherapy mental therapy underlined in low country Shanthikarmas. *American Journal of Humanities and Social Sciences Research*, 3(5), 73-76. https://www.ajhssr.com/wp-content/uploads/2019/05/J19357376.pdf

Sivayokan, B. (2021). Understanding the Theoretical Framework of Choreography in Bharatanatyam: An Overview. *Integrated Journal for Research in Arts and Humanities*, 2(5), 50-57. https://doi.org/10.55544/ijrah.2.5.9

Surjani, C., Neepa, B., Sandipan, C., Satabdi, B., Debamalya, B., Shankarashis, M. (2018). Effects of *Bharatanatyam* dancing on the cognitive ability of adult Bengalee females. In: Ray, G., Iqbal, R., Ganguli, A., Khanzode, V. (eds) *Ergonomics in caring for people*. Springer. https://doi.org/10.1007/978-981-10-4980-4_38

University of Toronto. (n.d.). *Types of social work practice: Direct and indirect | Factor-Inwentash faculty of social work*. Retrieved September 30, 2024, from https://socialwork.utoronto.ca/practicum/practicum-manual-2/about-practicum/types-of-social-work-practice-direct-and-indirect/

World Health Organization: WHO. (2022, June 17). *Mental health*. WHO. Retrieved August 20, 2024, from https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response

Wijesiri, N. (2020). Performing identities in theatre: An analysis of intersectionality in pre-modern Sinhala theatre. *Journal of Humanities and Social Sciences*, 3(1), 1-10. https://pgihs.ac.lk/reserch/6/4%20-%20Performing%20Identities%20in%20Theatre.pdf