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**A Dance Movement Therapy Tool: To Name It To Tame It: A Development of a
Method with Grieving Children and The Four Zones of Emotional Regulation**

Capstone Thesis

Lesley University

5/3/2022

Khary Green

Dance Movement Therapy

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Abstract

Emotions have the capacity to influence the body at every level. Research studies have confirmed that emotions can be recognized from facial expressions and linked to the four zones of regulation (Ekman, 1972). The study aimed to help children identify their feelings and teach them strategies that would support them in coping with their feelings. This thesis explored ways clients can be aware of themselves and the skills needed to improve their understanding and tolerance of emotions. The method contributed to the current literature on emotion regulation and bereavement. The data collected were from several parts of written journals and analyzed for the frequency of recurring themes across the zones of regulation. The results showed three major themes of self-regulation, the four zones of regulation as a psychoeducational tool and increased awareness of emotions/feelings within self and others through facial expression and body language. The themes and techniques used in this method showed promising implications for developing self-regulation as a coping skill. The findings revealed insights into the power, strength, and vulnerability of being connected with one's emotions and, therefore, can be used as a guide to help children to self-regulate. Future studies can be used to examine what happens by adding more coping skills to the children's toolbox.

Keywords: Self-Regulation, Emotions/Feelings, Coping Skills, Awareness, Resources

Author Identity Statement: This was a student-created method design for this research by a forty-four-year-old, African American, male graduate dance movement therapy intern interning at a bereavement group in the metropolitan Boston area.

A Dance Movement Therapy Tool: To Name It To Tame It: A Development of a Method with Grieving Children and The Four Zones of Emotional Regulation

Introduction

Children experience happiness, sadness, anger, contempt, disgust, enjoyment, fear, and surprise just like adults - but do not always know or have the tools to express what's happening to them or their feelings. Many times, they are in the bottom part of their brain, and reaction is fight, flight, freeze or fawn, the 4f's of trauma stage. When the 4f's portion of the brain is activated, it is harder for the child to focus on anything, as they are in survival mode (Van Dyck et al., 2014).

I want to help children make sense of the world and their lives because it is important for them to have the tools that will help them to become aware of the sensations they feel inside in response to the different emotions they contend with and must learn to properly navigate. With the help of this method, I feel they can start to understand what's going on inside, while gaining the tools they need to be able to communicate what they're feeling. Once they recognize these triggers, it will help them to regulate their emotions and start to help them navigate social situations properly. This is especially evident now, in a time where children are lacking socialization due to the extensive period that many have spent utilizing online learning platforms, including the Covid-19 Pandemic. Emotional and behavioral regulation is a developmental process, and it takes time for vulnerable children and teens to develop that ability.

This thesis project explored how using Paul Ekman's Emotional Theory blended with the Four Zones of Regulation framework (Kuypers, 2011) can show how an individual emotion can

manifest within while influencing body movement. The four zones of regulation are good for helping individuals to label what's happening on the inside and is a good tool to teach an individual to self-regulate and have emotional control. This method of the blended frameworks helps individuals to develop emotionally while using constructive ways to convey and identify triggers. It also helps to establish an expressive and emotional outlet, giving individuals the chance to live with their emotions (Kuypers, 2011).

Paul Ekman (1993) wanted to know "if it was possible to have emotions without facial expressions" (p. 388) and if emotions materialize without any similarity of expression. In his research, Ekman explores how there are seven specific emotions that are shared across diverse cultures. The seven he speaks of are; anger, contempt, disgust, enjoyment, fear, sadness, and surprise. A poignant point in this literature is regarding how Eckman addresses the importance of context, and the differences in individuals' expressions of the seven emotions identified as the result of contexts. The various cultures represented in Ekman's research all had different contexts which determine the social cues, norms, and rules the individual learns in their own environment.

Grieving children are entitled to bad days just like adults, and it is vital for them to develop the tools and resources to bring them together in group contexts, which assists, them to learn together on how to share and articulate what emotions they are experiencing, what they are feeling inside, and how they express those emotions. In these times, when more literature is reflecting the impact of isolation and loss on social learning from the COVID-19 global pandemic on children and youth, they are doing the best they can with the skills, knowledge, upbringing, and resources they have. Abramson, discussed a survey that was conducted in 2020

facilitated by the Ann & Robert H. Lurie Children's Hospital of Chicago. The survey was sent to a thousand parents around the country. The purpose of the survey was to see how the pandemic has taken a toll on children mental health. It was discovered that 71 % of parents believed the pandemic took a toll on their children, and 69 % felt the pandemic was the worst thing to happen to their child (Abramson, 2022). Because of the pandemic a lot of things have been brought to the forefront. For instance, the pandemic has cause stress to the kids and their mental health. The kid's during this time needs assistance with addressing this in schools as mental health is on the rise. The University of Massachusetts Boston and University of Massachusetts Amherst completed a 2020 technical report. The findings of this report found that students who needed access to school-based services the most, particularly those with lower socioeconomic backgrounds, had lower rates of counselors and school psychologists in their districts. The capstone thesis project addresses and identifies the current need to explore issues for grieving children during a global pandemic. It considers treatment as prevention for potential future social issues as children and youth age into teenagers. This method can help them develop new skills, knowledge, and perspective. One benefit of learning emotionally healthy habits is that it can help improve childhood social learning journeys in building the capacity to properly express themselves and to self-regulate. This is crucial because when they are faced with challenges, they will have more tools to choose from and won't have to resort to un-resourced, avoidant, negative coping mechanisms such as violent behaviors.

Literature Review

This review highlights current literature as it pertains to how emotions physically manifest itself and can help ground complex experiences. Understanding how emotions can manifest in others can provide a greater sense of empathy or understanding as healers. I will also define what trauma is, what child grief is, what dance movement therapy is, what embodied grief is, as well as definitions for self-regulation and emotional regulation.

Defining Trauma

The American Psychological Association defines trauma as “a traumatic event where one has experienced death, or the physical integrity of self or others that causes horror, terror, or helplessness at the time it occurs. Traumatic events can include sexual abuse, physical abuse, domestic violence, community and school violence, medical trauma, motor vehicle accidents, acts of terrorism, war experiences, natural and human made disasters, suicides, and other traumatic losses”(American Psychological Association, 2008).

Child Grief

Within the body of literature on grief, there is a characteristic that indicates when a child experiences the death of a parent or sibling, there is no one way to grieve or one way to respond. Grief, like everything else in life, is not linear. Grief looks different in each child, and their developmental level and understanding of the death they experienced makes a difference (Norris-Shortle et al., 1993). It was noted that back in the day, people believed children could manage their grief in the same way adults handle it, but it has been found that the bereavement of children is different than adults; the researchers stated “cognitively and intellectually, they are

still growing and developing and do not have the same amount of life experience as adults to adapt to their grief in the same ways” (McNiel & Gabbay, 2018, p.13). While these are pertinent points, there are also very frequent misconceptions. The misconception that seems to be the most prevalent involved children’s grief and how they were not affected at all because they were too young to understand what was going on or happening. Norris-Shortle et al. (1993) shares the skills toddlers have regarding understanding death and loss. It was noted that although the average toddler’s cognitive skills may be limited, children aged three and younger do have emotional responses to the death of someone close to them (1993). Theories and research have found that children’s individual characteristics, where they are in their developmental stage, including cognitive level, and their environmental and familial experiences must be considered to understand where they are in the grief process. (Norris-Shortle et al., 1993). Between adult grief and child grief, it was discovered there is a big difference. This discovery showed that children and youth do not have the necessary tools needed to express what they have experienced. McNiel and Gabbay (2018) progress to discuss that even though the child may not fully understand what is happening to them or around them, they are still impacted on various levels.

However, in contrast, there are some studies that have shown it is possible for children to express their emotions or grief in a variety of ways. The method of using the Four Zones of Regulation could help children express what is going on inside. Norris-Shortle et al. (1993) mentions that although some children’s cognitive understanding is limited, they do feel and react to the loss of an important person in their lives with strong emotion and confusion. The way

children deal with their grief, their emotions, and their experiences can and will all manifest in the body. It shows up as physical reactions, as well as mental reactions (1993).

Defining Dance Movement Therapy (DMT)

“The use of movement as a healing tool, focused on the idea that body movement reflects the inner emotions and, when brought to awareness, can promote a change in mental, physical, and emotional health” is how Levy has helped define what dance movement therapy is (Levy, 1988, p.1). Some important focuses of dance movement therapy include the acceptance of deeper emotions, the development of imagination, and body wellness (ADTA, 2014). Beardall helps to support this notion and states that dance movement therapy can function as an outlet for unconscious memories to come forward. Using movement, people can let go of their cognitive defenses and attune to their body sensations and needs (Beardall, 2017).

As a future dance movement therapist, I am trained to allow the clients I am working with to express their needs through their bodies, while I interpret their movements as part of their story and while using kinesthetic empathy to assist the clients in their therapeutic processes.

Embodied Grief

Grief is frequently experienced and expressed through our emotions (McNiel & Gabbay, 2018). It has been noted that grief for children can manifest itself where it can be held physically in the body where it can be expressed in many ways. Early experiences form memories that are registered and organized through somatic, sensory, kinesthetic, and nonverbal modalities (2018). Because of the nonverbal, kinesthetic, and felt sense memories, it can occur throughout life while impacting and altering how an individual develops both a personal body image as well as a sense

of self (Chaiklin & Wengrower, 2016). It has been noted that the human body embodies, or holds a memory of the trauma, and expresses it in body language, posture, and physical symptoms. These trauma memories have a way of disconnecting from the brain's speech center and limiting the individual's ability to express the trauma verbally (Van Dyck et al., 2014). Therefore, theorists proposed the best way to treat trauma is by somatic or embodied approaches that seek to connect the work between the mind and the body (2016).

Self-regulation, Trauma, and Grief

Gillebaart (2018) has provided a thorough definition of what emotion regulation is: "Self-regulation can be defined in various ways. In the most basic sense, it involves controlling one's behavior, emotions, and thoughts in the pursuit of long-term goals" (Cuncic, 2002). It is also noted that emotional regulation is associated with the stress response systems and attentional (Gross, 2007; Shields & Cicchetti, 1998). It was noted "Self-regulation is powerful, and dysfunction in the ability to self-regulate is quite possibly among the more common reasons for seeking psychotherapy. Although fluctuations in regulation are inevitable on a moment basis, the ability to re-stabilize in a healthy manner is central to a person's sense of responsive embodiment or integration" (Seoane, 2016, p. 21).

Children trying to gain control of their emotional regulation, on top of having the experience of trauma, can be overwhelming. At times, a life-threatening experience can rear its ugly head at every triggering moment of the memories of a traumatic experience (2016). While there is a growing body of information within the literature, there is little knowledge of the potential for body observation tools used in dance movement therapy to be beneficial for such individuals.

The following critique of studies addresses the need to investigate this important area of practice. Van Dyck et Al. (2014) investigated emotions and dance movements. The authors sought to determine if emotions can be identified in choreographed or free dance movements with induced happiness and sadness from dance movements (2014). Thirty mixed genders were recruited for the study. The subjects recruited were of mixed genders, which used a convenience sample. Some of the subjects were trained in music and dance and others were not. All the participants were recruited by the Department of Arts, Music, and Theater Sciences and the Department of Movement and Sports Sciences of Ghent University, in Belgium (2014). None of the participants in the study received any payment. Sixteen video clips were used in this study. The sixteen videos that were used were ten seconds in length and they consisted of two dance performances that were shown side-by-side as well as played at the same time. The sixteen videos were broken up into three series in randomized order as well as the order of the emotions the dancers in the clip presented. After each clip, the participants were asked to fill out a quick questionnaire that asked them to identify which of the two-dance performances were happy and which one was sad. Followed by rating each dance performance concerning kinematic properties (2014). For this study, Van Dyck went with the behavioral method of eye tracking. He went with the eye tracking because it concerned an unobtrusive strategy for gathering information about the specific focus of the participants in this study by watching the video clips (2014). The results from the study revealed it is possible to recognize emotions from dance movement. These findings also supported previous research that was done on recognizing emotions from dance movements using portrayed emotions such as happiness, sadness and anger expressed in dance (2014).

A study conducted by Dietrich-Hartwell (2019) where she presented a heuristic art-informed method that asked two questions; how does music and dance movement influence one another? The second being, how does music and dance movement affect emotions when done together vs. separately? The study involved five participants, two therapists and three Dance Movement Therapists, plus two instructors who were part of the Ph.D. Creative Arts Therapy program (2019). The participants had studio class once a week for ten weeks, six of them being experiential (2019). The researcher wanted to learn how music and movement evoke emotions, and used a systematic art-informed heuristic inquiry that was carried out in six steps focusing on one emotion at a time. The first step was choosing music that reminded her of basic feelings. The second step was listening to music and noting the emotions it brought up. The third step involved singing the song out loud, again noting the emotions. The fourth step was embodying the emotional state at hand and noting the emotions. For the fifth step, she would physically move to the recorded music and note the emotions. Finally, the sixth step included watching a recording of her movements and noting those emotions (2019). The outcomes showed that music and movement affect emotions and bodies and can lead to psychological understanding and a shift in the intersubjective space as well as in solitude (2019). Dieterich-Hartwell also discovered that when music was added to the movement, it appeared to either heighten the emotion or offer a structure (2019). The limitation of this study was confined to Rebekka's own experience. She talks about the presence of lyrics in the music she chose and how that created bias (2019). This subject can lead to future research on the effect of dance movement and how dance movement affects other creative arts (2019). It appears that music and movement impact emotions and offer a structure that supports the development of this method.

Furthermore, according to the study by Simpkins and Myers-Coffman, they wanted to be able to interpret and describe the experience and the essence of body memory from those who have experienced death in childhood. Simpkins and Myers-Coffman used the concepts of body memory and continuing bonds, which led to nine themes found in relations (2017). The researchers used phenomenological methodology to describe the lived experience of an individual. One author was the main researcher, and the second researcher was the study adviser (2017). Participants were recruited through email and flyers. These participants were not taped and were asked to bring forth emotions through movement for different memories while being cognizant of what's coming up in the body (2017). The researcher witnessed and mirrored the participants' movements, followed by an interview that led into textual data. The Epoche' was reflexive and an iterative process that began before the interviews (2017). Results showed body sensations could bring deeper understanding in grief counseling, while promoting body awareness (2017). The research provides further support for the therapeutic strength and value of narrative stories through movement in grief work (2017). The limitations and findings suggest the participant grief experience was important to all participants (2017). This study was limited by the cultural bias of the researcher, who was white. Another implication for DMT is promoting body awareness (2017). This study provides therapeutic strength and value in narrative stories through movement in grief work (2017).

In the 2019 study, a study conducted by Lapum, and colleagues, focused on the treatment for individuals who have encountered a traumatic event. Using trauma focused cognitive and behavioral modes, they developed a 10-week hip-hop dance program that helps reduce trauma-related symptoms among youth who have experienced ill-treatment and/or exposure to violence

(2019). This study provided evidence about how the 10-week hip hop dance program affects trauma symptoms among youth (2019). The research also informed us that the combination of trauma-informed practice and hip-hop dance as an intervention for youth may be liberating and healing (2019).

Betty(2013)created a DMT treatment approach to support self-regulation for maltreated children. This was specifically for the residents in her treatment centers, where this intervention was implemented in four-phases that were two-hours long. Which totaled eight hours, where the direct-care staff were given the opportunity to offer body-based therapeutic group interventions to the clients in the program (2013). What is noticeable about this method is how Betty prioritized creating a safe space for the clients to begin with breath work, followed by doing some movement patterns that emphasized reaching out away from the body and then bringing everything in close to the body (2013). Phase two was focused on emotional awareness which was carried out through use of rhythm. Moving onto the third phase, coping skills were emphasized which strengthen internal emotions through rhythm, as well as role-playing through story telling. The last phase of the intervention promoted external expression management through attunement and mirroring. This four-part phase was hypothesized about how the four-step intervention that was presented could assist mal-attuned children in self-regulation (2013). Further supporting the need for an integrated approach that utilizes a variety of art forms to support the primary modality of dance movement.

An important concern is the complex experience of loss and regulation in children. In Iran, researchers carried out a study on the effects of using Cognitive Behavioral Therapy (CBT) with abused children and their experiences of self-efficacy and emotional affect and regulation. It

included 40 boys who were physically abused, and the focus was on the self-efficacy of the children in the study (Farina et al., 2018) Self-efficacy is when an individual understands how to control their behavior and their emotions (Farina et al., 2018). The researchers in this study explored how certain aspects of the person were gained through familial support. It was discovered by the researchers that 60% of girls and 53% of boys from twenty-one countries experienced child abuse starting in the early years of their primary schooling. In this study, they sampled 231 students with a multi-stage cluster sampling. Through this, forty children who had been abused were selected. They were randomly placed into two different groups. One of the groups was the controlled and the other was the intervention. The intervention group succeeded in completing 10 Cognitive Behavioral Therapy groups, where they got to meet twice a week. Those sessions were completed with the assistance of the teachers and the principal (2018). Themes that came up in this study were a positive sense of self, awareness of trauma, management of trauma response, and emotional expressions (2018). The results of the study showed there was an increase in self-efficacy. A small sample size and the English translation of the study were the limitations noted. Some sections of the writing are unclear and or repetitive at times, which makes it hard to understand the material fully for the reader (2018).

Ogden and Goldstein (2017) presented a study that looked at the body's response as a way to facilitate treatment. This treatment they presented was Embedded Relational Mindfulness (2017). This treatment they presented worked well for the population of young kids who struggle verbalizing. The researchers saw the possibility of movement and the body as a way for traumatized children to work with individuals without having to bring up memories or the details of that traumatic event that has happened (2017). The researchers felt like the body has its own

language that could express different emotions such as frustration, challenges, joy, and sorrow, which can be seen in the body through patterns of differing movement. The researchers also incorporated verbal processing in the therapy, creating the embedded approach. Goldstein and Ogden found that other research supports the idea that mindfulness, focusing on the body in a quiet environment, can help reduce depression, anxiety, pain, and trauma in children (2017). As they completed this work, they recognized that they were able to improve their understanding and acceptance of emotions, which led to higher self-esteem and self-regulation (2017).

Children, Loss, and Narrative, Arts – Based Research

Stutey and colleagues presented a study that addressed the question of, “How do children, who have been in therapy for a significant loss, express their grief process verbally and symbolically using photos to express emotional content?” (Stutey et al., 2016, p.156). In this research study, narrative, and critical inquiry, expressed through photo-elicitation methods, were applied to reveal differences experienced by children who have experienced grief. Additionally, to be consistent with the premises of play therapy, the authors sought to better understand this process by providing a creative, and nonverbal section that would provide the children a platform to express their emotions and experiences (Stutey et al., 2016). The literature suggested that photo-elicitation was an ideal tool to study the difficulty of describing the highly emotional, and somewhat taboo, topic of grief in children. The authors of this study believed that children, while not only legally defined as a vulnerable population, are also marginalized in the research process as they are rarely given the opportunity to represent their own experiences and reactions (Stutey et al., 2016). The combination of critical and narrative inquiry gave researchers the opportunity to represent the feelings and reactions to a significant loss as told by the children themselves. In

this study there were four children's participants between the ages of six and nine. One was male and the other three were females. All participants in this study have all experienced the loss of a loved one, and were, or had been, involved in some type of play or art therapy (Stutey et al., 2016). As highlighted in the literature so far, the participants in this study had all different types of experience, based on their contexts. Some of the experiences were loss, loss of a sibling, a parent, and or a grandparent. This study took place in the US in a western state. The participants were recruited through flyers that were distributed to multiple mental health and hospice agencies (Stutey et al., 2016). The participants recruited in the study were given a camera with directions to, "take pictures of anything that reminds you of your loved one who died or that will help me understand how things have been for you since they died" (Stutey et al., 2016, p.157).

During the study, the children were given the opportunity to explain each picture they brought in and the significance it held to them (Stutey et al., 2016). The data they gathered were transcribed, and then analyzed, followed by a member on the research team independently coding. It's consistent with the play therapy literature. Results showed how the participants the lacked the verbal expression skills needed to reveal the complexity of their emotions. The small number of recruited participants presented itself as a limitation. The researchers addressed how including more participants may have shed light on more aspects of the grief process of children (Stutey et al., 2016).

The Power of Play and Non-verbal Interventions

Following the principles of non-directive play therapy, it is important for play therapists working with children who are experiencing a significant loss to know that nonverbal, expressive mediums allow children the opportunity to express emotions around loss in a developmentally

appropriate manner (Stutey et al., 2016). It was noted that children who are experiencing a loss or trauma may not know how to verbally address their thoughts or feelings. However, with the assistance of expressive arts therapies, they can provide children with a platform that would provide the children with the opportunity to explore these thoughts and feelings in a way that is appropriate and practical (Stutey et al., 2016). Using the tools of dance movement therapy and the four zones of regulation, it could be used as a way for children to express themselves and explore their emotions in a developmentally appropriate way.

Methods

Through the literature and my internship, I have learned about embodied grief and how it can be present in complicated and complex ways. It can be seen in somatic complaints, such as headaches or stomach aches, feelings of forgetfulness or foggy memory, sleeping too much or too little. It can also be seen through, behaviors such as impulsivity or hyperactivity or even intense feelings of emotions are also presenting issues. For some individuals, these “symptoms” may cluster together; for example, if a child is feeling angry about the death of their loved one, they may experience tenseness in their shoulders. For others, when they are feeling sad, they may experience extreme chest pains or a decrease in energy.

I performed a single session group method at my internship site in the metro Boston area, which took place in a virtual meeting. It was a one-day family camp experience where children and teens of all ages and abilities and their caregivers were welcome. The participants were students who attended this free bereavement group. This particular program used movement, music, art, and play to help children, teens, and young adults with the development of coping skills. As discussed in the literature, treatment for grieving children is not a clear, linear

process, and includes the experiences of embodied grief. Embodied grief can present differently for each child (Gudmundsdottir, 2009). Working in this holistic way by using somatic and body-based interventions can be extremely beneficial to not only normalize these individuals' experiences, but also help with allowing the children to explore and express their grief (Kuhfuß et al., 2021).

The clients in my single session were given the opportunity to connect with peers and learn self-care skills. The theme for the day was "Care for Self While Grieving." The focus was "Tools to Care for Self." The clients who participated were recruited through an email blast that explained what the one-day family camp experience includes.

During the single session, I presented a visual of the Four Zones of Regulation. This visual assisted the clients with identifying their own emotions and getting them to communicate verbally. The participants learned about what emotions can look like on their face and other faces, going into what certain emotions feel like in their body and others' bodies. This was accomplished by practicing "Name It to Tame It" and identifying triggers. I put the seven specific emotions that are shared across diverse cultures and combine them with the Four Zone of Regulation framework which looks like:

- Anger – The Red Zone
- Contempt- The Green Zone
- Disgust- The Blue Zone
- Enjoyment- The Green Zone

- Fear- The Red Zone
- Sadness- The Blue Zone
- Surprise- The Yellow Zone

The participants were asked to identify their emotions at the beginning and at the end of the session using one word and the four zones of regulation that were introduced to them. After working with them to express their emotions verbally and connecting those emotions to a color, I worked with them on the techniques that help to embody those emotions. Techniques used were to move to the emotion and color zone together. We worked on matching emotions to music, so that the body and movement equate to the music. I then introduce the concept of body language by reading the book by Saxton Freyman and Joost Elffers “How are you peeling- Foods with moods”(1999). As the clients are sharing what they saw from the pictures in the book, I recorded the emotions/feeling labels the participants shared. Which led the group into the next activity, which is a game of “Feeling Charades with sound.” Where the participants got the chance to act out an emotion without using any words but using sound. Giving me the opportunity to introduce to the participants what emotions feel and look like on their bodies and other bodies. I kept a written journal after the single session. This journal was where I wrote and kept track of my observations on the clients in the session, what I saw in their bodies, and to keep track of my experience of witnessing the participants. I journal immediately following the workshop. I also journaled after processing the day with my internship site supervisor, followed by journaling the following day after having some time to marinate on the experience. I followed the Moustakas(1990) heuristic model that helped to keep myself organized with what needed to be done and when I needed to do it during data collection.

Procedure

Warming Up

I started the group with an opening grounding ritual. The ritual helped establish a grounded sense of the physical self in the present. If we were in person, we would have started the opening ritual in a circle. As the group was getting grounded together as a community, we did a call and response. I said a line and the group repeated it. Repetition and slow movement sequences helped the community of clients to self-regulate and calm their nervous systems. Then the group went into a warmup. For the warmup, I used the song “Happy” composed by Pharrel Williams (2014). I chose this song because of the fast pace, and joyful lyrics. The goal of the song choice was to help create a group rhythm to the music that incorporated different movements from pulse movements, swaying, twisting, expanding, contracting, and reaching movements. The first thing facilitated for the group was three breaths moving our arms up and down. After taking three deep breaths in through the nose and out through the mouth, I led the clients through aerobic movement that gave the body a proper warm up that gradually increased their heart rate and blood flow to muscles. While also demonstrating and participating with the group members, I invited them to move the whole body from our fingers, wrists, hands, arms, shoulders, knees, torso, hips, legs, and feet. I guided the aerobic movements warmup (for example, moving up, side, across, down), as well as encouraged some light and strong efforts of movement while moving the arms and legs. The goal of the warmup was to show them a way to cope with strong emotions or feelings they may encounter. As the warmup progressed, I led the group in movement phrases leading to descriptive metaphors and movement efforts of weight, flow, use of space, focus, and description of movement shapes. I also wanted to show them how

dancing is a great tool for self-care. Trauma theorist Kirk van der Kolk (2014) stated the first step in therapy is to focus on the body's physical state by breathing. He post that, "In order to change, people need to become aware of their sensations and the way that their bodies interact with the world around them. Physical self-awareness is the first step in releasing the tyranny of the past" (p. 101). After warming up the body, the group did a light stretch. The stretches included each part of the body from the top of the head down to the bottom of our feet and toes. After stretching, I modeled shaking the body out, encouraging everyone to shake out the tension that was just stretched.

Passing the Heart

Following the dance warmup, the clients got to pass the heart. Passing the heart is an activity that gives the clients the opportunity to share things about themselves with the group. Passing the heart also presented me with the opportunity to introduce the theme of the day to the group. This activity is also a way for the group to share why we were here in this group, giving the clients the chance to talk about the person that had died. The first question that was asked of the clients was to talk about a happy memory they had with the person who died. The second question was a funny memory they had with the person who died, the third was a sad memory they had with the person who died. The last question was "what music do you like listening to when you're feeling your best?".

After all the clients engaged in the pass the heart, I showed a visual of the Four Zones of Regulation and talked about the colors and the emotions, followed by a check in to see where the

clients felt where they were at. This assessment assisted me by helping me to understand where they were emotionally on the four zones of regulation chart. Van der Kolk (2016) also emphasized that body awareness assists with verbalizing memories. During this section, I pointed out that it was possible to be in two zones at once. As a demonstration, I shared how I was feeling then. How is it that I could be feeling like I was in the yellow zone (I was frustrated, worried, and excited) and the green zone (focused, happy, and calm) all at the same time. After giving everyone a chance to answer, I then ask “How do we tell how someone else is feeling? What are the clues?” This is the mind-body connection that a dance movement therapist aims to foster during a group. Followed by introducing the concept of body language. Which led me to introduce the book “How are you peeling- Foods with moods” (Freyman & Elffers, 1999). When I got to the pages that said, “How are you feeling?” I stopped and asked the clients to identify the emotion or feelings of the facial expressions on each fruit or vegetables face. I pointed out how each face can represent more than one emotion or feeling label. As the clients were sharing what they saw from the pictures in the book, in the group chat I wrote down the emotions/feeling labels they were saying. Which led to the next activity, which was “Feeling Charades with sound.” I asked the clients to pick a number and I associated the number they chose with one of the feeling labels. I private messaged the emotion/feeling label and then the client got to act it out without using any words but using sound. The other clients got the opportunity to try to guess the emotion or feeling. The client that guessed it correctly got to go next. I was positive about all the guesses and reminded them that some emotions/feelings can look alike. After each client that wanted to engage in the activity received a turn. I introduced the clients to three sighs.

Breath work, and Anywhere, Any Time Embodied Regulating

I introduced three sighing breaths as a strategy that can be used anywhere and at any time. I explained how it can relax them and give them a chance to put themselves on “pause” so that they can think about a helpful way to solve the problem. Explained that we can’t think clearly until we are calm enough to do so. Science has proven that three slow sighing breaths can help a lot to calm us down so that we can think. As I led everyone in the three sigh breaths, I emphasized a slow, steady exhale and explained that on the exhale, the body’s nervous system naturally calms the heart rate, decreasing the anxiety feelings they may experience. I discussed how we can take control of our bodies by doing three slow sighing breaths. Emphasized how they should feel the ground, feel the sensation of the breath, and our belly’s where we can sense the movement of our breathing. I first demonstrated it and then taught them how to do the three sighing breaths. You breathe in deeply and breathe out like you are fogging a mirror. I repeated this three times slowly and then we practiced it together as a group. I wrapped up the single session. Summarized what we did. Asked the clients “How did you figure out the feelings? What did you have to do?”

Data Collection

The data I collected were from several points of written and creative, free-write, journals. First, immediately after the single session. Secondly, following supervision. Thirdly, after one month.

Results

Data Analysis

I analyzed, frequency of recurring themes across the zones of regulation using the journal reflections. A general overarching theme came from participants' interactions with peers and emerged as; the ability to focus on the presented material and with the overall affects and moods of the group appearing to be friendly and supportive of each other.

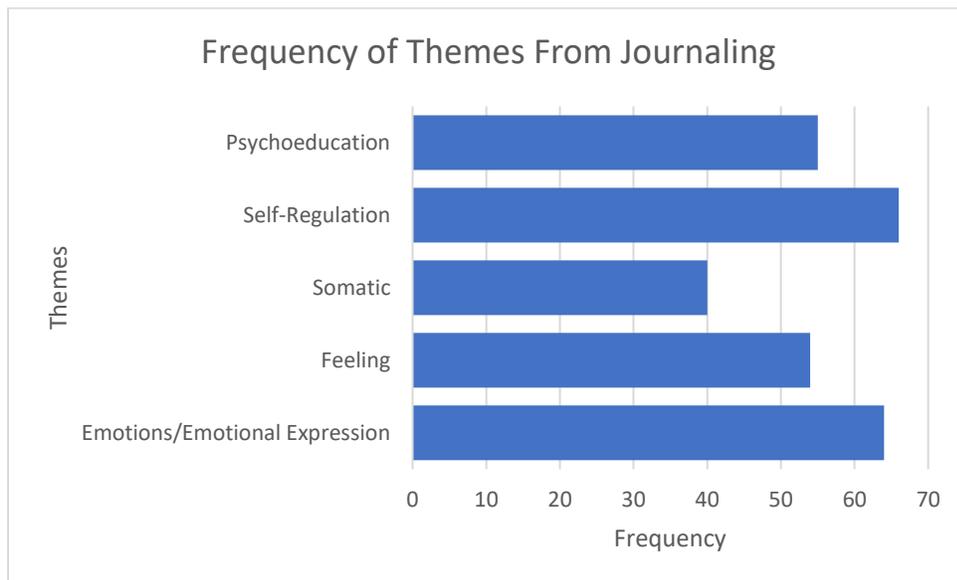
Table 1

Table Showing the Three Major Categories Across the Journal Reflection

Three Major Categories
Self-regulation
The Four Zones of Regulation as a Psychoeducational Tool
Increased awareness of emotions/feelings within self and others through facial expression and body language.

Table 2

Table Showing the Most Frequent Themes from the Journal Reflection



Changes in Emotions Before and After the Method

I reflected on the participants' statements during the check in and their comments during the discussion in the journal. These comments indicated the clients' liked the intervention and added insight into whether the clients were able to recognize and verbalize how they were feeling through words or with the help of the four zones of regulation.

Two Zones at the Same Time

There were combinations of feeling two zones simultaneously such as feeling tired (blue zone) and anxious (yellow zone) because of individual contexts, such as coming back from family trips over the weekend, and feeling of anxiousness and worried about the new lesson I was presenting to the group. This was the first time I led the group. I acknowledged that it is possible to be in

more than one zone at a time. I shared how someone can be at a funeral smiling, happy, sharing a good memory of the person who died, but sad and crying that the person is no longer here.

Predominant Color Zones

In my reflection, I noted that during the session three color zones were consistent across the whole group, which were, the blue zone, the green zone, and the yellow zone were the only zones felt. After check-ins, the red zone was never mentioned. The emotional state of neutral was noted in my reflections of before the session began, and no one stated to be feeling anything other than calm most describing their zone as being yellow due to the anticipation of the upcoming session. Another theme showed how different zones were entered at different times throughout the session. Once the session concluded the predominant emotions in the green zone was also noted for the group-as-a-whole. This information can show the shift from client zones and how the effect of the session tends to lead clients to the green zone from a zone. As this session results show the client will most likely end, whether a self-guided or instructor regulated session, in the green zone where we know they are feeling a state of happiness, in part due to the working through of their original color zone.

Discussion

The intention of examining my method with my clients was to see how emotions have the capacity to influence the body at every level. It has been confirmed in research studies that emotions can be recognized from facial expressions, and other universal expressive characteristics, that come with positive and negative feelings, on top of attitudes and

intentions (Ekman, 1972). I wanted to teach the clients ways to control their emotions, as they are still in the process of learning self-regulation. This method can provide clients a safe place to acknowledge their emotions as well as providing them the space to experience them while they safely communicate their emotions, with the hopes of giving them a better understanding of the chaos that is happening on the inside. This can be accomplished by teaching coping skills that will help them with emotional regulation.

The themes and techniques used in this method showed promising implications for developing self-regulation as a coping skill, as well as showing the use of The Four Zones of Regulation as a psychoeducation tool. Studying and doing this method has informed me that there is power, there's strength and vulnerability, with being connected with one's emotions. Which, in the long run, makes all of this healthy. A healthy being is connected with one's emotions.

Teaching individuals about the Four Zones of Regulation can help individuals to label what is going on inside and, in the end, be able to tame it with coping skills. The Four Zones of Regulation framework teaches people to self-regulate and to have emotional control, giving people a better understanding of their own emotions and the ability to communicate positively.

Re-Membering as Re-Embodying

Van der Kolk (2014) discusses that trauma patients lose touch with their bodies, sometimes being unable to feel sensations or whole areas of their bodies. Trauma can even cause depersonalization, which allows the self to become detached from the body, unable to experience pain or pleasure (van der Kolk, 2014). Beltran et al. (2016) discussed that boys with a history of

trauma may experience dissociation and a restricted ability to express emotions. Van der Kolk (2014) talks about the importance of reconnecting with the body to recover from trauma, but some individuals are not ready to do so. This is where meeting the client where they are is so important. Van der Kolk goes on to say, “noticing sensations for the first time can be quite distressing, and it may precipitate flashbacks in which people curl up or assume defensive postures” (p. 103). I go on to emphasize how they had to really tune into the person and pay attention to their faces and their bodies. In my notebook, I reflected on this, and the clients in the group and my reflection of the group experiences.

The strengths of the method can increase awareness of emotions, feelings of self and others through facial expression and the teachings of body language. When I ran the activity of Feeling Charades, the participants learned how it feels for someone who cannot or does not know the words to say or have the means to express how they are feeling on the inside. I provided them with the tools on how they can guess what the other person is feeling by interpreting their facial expression or interpreting the person’s body language. I also observed from doing this method when the clients were portraying happy, excited, and other emotions. The movement was big, up, and open as well as the sounds. The quality was upward, light, and soft. When it came to sad, mad, and angry, the movement was down, heavy, and slow. The sounds they were making were also slow, low, down sounds. The qualities matched the movement and the sound, all were down, and low. Just like Ogden and Goldstein research showed, the feeling charades, the how you peeling story, and the teaching of The Four Zones of Regulation helped the researcher to recognize that the clients are able to improve their understanding and tolerance of emotions, which can lead to higher self-esteem and self-regulation (2017).

Colors and Awareness

A theme that emerged during the session is that you can be in more than one zone at a time. I acknowledged that it is possible to be in more than one zone at a time. I share how someone can be at a funeral smiling, happy, sharing a good memory of the person who died, but sad and crying that the person is no longer here. This seemed to provide a mechanism to make the group members feel safe enough.

I also noticed how there was an overall sense of the group members having the abilities to attend to the tasks that I asked of them and all of them were able to be focused as a team. As Hodas (2007) highlights, when children feel contained, safe, and focused, they are better able to attend to their emotions and needs. This concept was presented by me during the single session which possibly led to participation of group members. I intentionally integrated attunement tools so that, all were seen, heard, and validated while attending to their emotions.

One of the major categories in Table 1 that I discovered was the “increased awareness of emotions/feelings within self and others through facial expression and body language.” I felt this was accomplished by reading the (Freyman & Elffers, 1999) “How you Peeling” book to the group. Reading this book assisted the clients to identify their emotions or feelings of the facial expressions on each fruit or vegetable face they saw in the book. It gave them the chance to become aware of what emotions and feelings look like on other faces. It was noted in the Stutey study that children who are experiencing a loss or trauma may not have the skill to verbally express and or address them (Stutey et al., 2016). I am gaining the tools and skills as a dance movement therapist in training to want to acquire the ability to make a mind-body connection with my clients. It allowed me the opportunity to introduce the concept of body language while

providing my clients with a platform to explore their thoughts and feelings in an appropriate and practical way. Both studies had participants who had lost someone close to them. By the end of my method, the participants gained the skills to verbally express their grief properly.

Using the tools of DMT and the four zones of regulation as a psychoeducational tool, provided me with the opportunity to share information with the clients. This gave them the skills on how to label what's happening on the inside as well as offering them support while teaching them how to self-regulate. I took advantage of the time together as a group to share with them some coping skills that would help them have emotional control and talked about the benefits of maintaining their own emotional health. By using the four zones of regulation as a psychoeducational tool, I was able to provide my clients with self-efficacy. In the literature review, it was noted that when an individual understands how to control their behavior and their emotions, that is self-efficacy (Farina et al., 2018). My method provides children with the opportunity to learn the skills necessary to express their emotions around loss in a developmentally appropriate and fun manner.

Considerations for Future Research

If I had been able to implement this method in more than a single session, I would have considered doing three one-hour sessions instead of one single session. As a bonus, it would be interesting to explore the red zone and all those emotions that fall under the red zone. I could educate with empathy and share that it is ok to feel all your emotions, even anger. We all have experienced uncomfortable emotions. Anger has a purpose; it makes us feel powerful and alerts us that something doesn't feel right. Anger also can attach to an emotion that covers up fear and sadness. When some experience anger, they feel the sudden urge to run, freeze, or fight, but

could be conditioned to not act on it (Cherry, 2019). As well as learning new skills to explore slowing down the movement and the rhythms, again to stimulate self-regulation in a slow, calm manner. I would also share more coping skills for the clients to add to their toolbox, as well as, work with them and ask them what do you think would help you next time you feel like you're in the red zone? If they respond, "I don't know", I encourage them to think of something by pointing out what has helped them in the past, or share what has helped me in the past, like taking a break, talking to a friend, playing music, dancing, journaling, or crying.

The ethnicity of the clients was known but the socioeconomic status of the group of clients was unknown. There were two males and three females in the group. Most of the clients in the group were Caucasian with one Asian. As for the socioeconomic status, it was unknown, however, based on the stories and contexts I witnessed during the session, it seemed apparent that a wide range of socioeconomic experience was present. As Stutey and colleagues (Stutey et al., 2016) highlights, there is a value and importance of understanding the individual's context, and how that impacts the experience and expression of emotions of loss and grief.

My goal of this project was to create a method that could help children to identify their feelings and learn strategies that would support them in coping with their feelings to remain calm and ready to do what is needed in school, home, and everyday life. This method can be used as a guide for children to become aware of their current state of alertness and guide them to self-regulate while learning to regulate their responses to sensory input, emotions, and impulses to behave appropriately. From my results, I can see how there is much potential and feel confident in continuing to develop this method. I recommend this method for further explorations and research and intend to use it while teaching this method to other professionals working in the

mental health field. Future studies can be used to examine the effects of teaching and doing more applications with the Four Zones of Regulation. Considerations for adding more coping skills to the children's toolbox is another recommendation, so that children can be able to verbalize it, and recognize their triggers.

Limitations of the Project

While the results showed that DMT may be a useful tool for some kids to name it to tame it, the method was only implemented in a single session. The Capstone project placed limitations on the amount of time that could be attended to and the amount of information that could be collected. More patterns may be recognized if the project could be replicated over a longer period.

Conclusion

My hope is that the clients I worked with will now be able to identify their feelings and have some strategies that support them in coping with their feelings to remain calm and ready to do what is needed in their personal, professional, and academic lives. The outcome of this method can help individuals become aware of their current state of alertness. It offers an opportunity for children to develop the ability to self-regulate while learning to regulate their responses to sensory input, emotions, and impulses to behave appropriately. By carrying out this capstone thesis method project, I now have a better understanding of how emotions physically manifest and how this method may help to ground complex grief experiences. This research gave me a better understanding of how to provide a greater sense of empathy and understanding as a healer.

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THESIS APPROVAL FORM**Lesley University****Graduate School of Arts & Social Sciences****Expressive Therapies Division****Master of Arts in Clinical Mental Health Counseling: Dance/Movement Therapy****Student's Name:** Khary Green**Type of Project:** Thesis**Title:** A Dance Movement Therapy Tool: To Name It To Tame It: A Development of a Method with Grieving Children and The Four Zones of Emotional Regulation**Date of Graduation:** *May 21st 2022*

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: *Rebecca Zarate, Ph.D., MT-BC, AVPT*