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Jennifer Noboise
jnoboise@lesley.edu

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Dance/Movement Therapy Used as an Intervention to Heal Racial Trauma Within the Black
Community: A Literature Review
Capstone Thesis

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Jenn Noboise

Dance/Movement Therapy

Meg H. Chang

Abstract

The history of dance within the black community has served an important role while living through a racist and discriminatory society. Dance has been used to express anger, grief, and joy during hardships and moments of rejoicing from the black experience. African American people have endured years of trauma and abuse from oppressive systems. Research has been conducted to demonstrate that dance/movement therapy has been effective in treating those who have experienced a form of trauma since the trauma is stored in the body. Examining trauma symptoms such as anxiety, depression, and substance use, the research found these symptoms diminished with the use of DMT as an intervention. This literature review serves as a collection of published work addressing and providing evidence DMT as an intervention is useful for helping heal the black community who have experienced racial trauma.

Keywords: Dance movement therapy, racial trauma, African diaspora, trauma, PTSS, race-based stress

Introduction

In May 2020, George Floyd was brutally murdered by a police officer in Minneapolis, MN. The officer kneeled on Floyd's neck for nine minutes when restraining him after reports came in of him using a fake \$20 bill at a local grocery store. This traumatic event left the Minneapolis community and the rest of the country in shock and heartache. Protests grew across the nation in response to this preventable and tragic incident. George Floyd is one of thousands of African Americans who continue to die at the hands of police officers. While police brutality is a controversial topic, it is clear that for many African Americans, we continue to see harm done in our community due to the police. As a result, we are left in a cycle where police officers are afraid of Black people, and Black people are afraid of the police. This discourse can be traced back to slavery here on American soil. Degruy's (2005) book, *Post Traumatic Slave Syndrome: America's Legacy of Enduring Injury and Healing*, notes how after the 13th Amendment was passed, white plantation owners were low on free labor in the fields. This led to Black people being arrested for petty and false crimes, which led them right back to plantation fields to work or worse. Degruy asserts, "The public's conscience was eased by the assertions of [...] police, and others in authority, that blacks deserved to be held captive, because of their inherent tendencies toward criminality" (p. 84). Black people were beaten, lynched, and continued into forced slave labor being upheld by white systems, slave masters, and the police. Black people are traumatized by the police and oppressive systems. There is an overarching need to provide support and heal the black community in large masses from these graphic incidents.

Many marginalized communities have used art as a means of expression when experiencing hardships. Black people would sing, hum, and create hymns that inspired various movements within the body while working on plantation fields as a way to cope and soothe

themselves during the hundreds of years of being oppressed (Degruy, 2005; Farr, 1997; Menakem, 2017; Primus, 1993). These artistic expressions and self-soothing skills are still used today. I, myself, have used dance as a way to express myself and found a cathartic release in the process. Imagine the lives changed and progress made in how to cope with daily challenges and a path towards healing from social injustices. There is a therapeutic tool that can serve this purpose, called Dance Movement Therapy (DMT).

This thesis will highlight how Dance Movement Therapy (DMT) can be used as an intervention for black clients experiencing racial trauma. DMT is a form of an expressive art therapy to help people express their emotions nonverbally. The American Dance Therapy Association (ADTA) defines DMT as “the psychotherapeutic use of movement to promote emotional, social, cognitive, and physical integration of the individual” (ADTA, n.d). DMT gives people the opportunity to explore their thoughts and feelings by using their bodies as a medium, a different way to process in a therapeutic space compared to traditional therapeutic practices. Trauma is defined as “an injury by an outside usually violent, force, event or experience” (DeGruy, 2005, p. 13). Trauma affects individuals in a multitude of ways: physically, emotionally, or mentally. Years of research have shown that trauma is stored in the body and recently discovered more about how it passes down from one generation to the next (Rosenthal, 2021). Trauma is being passed down from one generation to the next is called intergenerational trauma or historical trauma. Degruy (2005) coined the term, *Post Traumatic Slave Syndrome* (PTSS), to show trauma from slavery has been passed down from generation to generation and explains African Americans’ behaviors demonstrated today stem from our past. PTSS is only one of many descriptors to define racial trauma.

This literature review will examine how DMT and other body-based interventions can be used within the black population who have experienced racial trauma. This topic is important because it highlights how many African Americans have experienced an event that has had lasting impacts on how they move through the country on a physical and emotional level. Menakem (2017) states that in order for others to address their trauma it starts with their bodies by being in a settled state (p. 125). DMT is an intervention that can be used for black clients to regulate their bodies and be better attuned with sensations they feel as they relate to the trauma they have experienced. “The central feature of any trauma response is speed. [...] in order to work through your trauma, you need to learn to slow down” (p. 154). Providing time and space to process the mind and body from traumatic events is essential, otherwise processing too quickly can hinder the individual and leave trauma unaddressed and left within the body.

Members of the African American community are apprehensive when seeking services from medical personnel due to trauma called medical racism. The Tuskegee syphilis study from 1932-1972 is an example where black men were administered syphilis without their consent and did not receive adequate care or treatment (Degruy, 2005; Winters, 2020). Medical racism needs to be corrected for marginalized communities to seek out treatment without racist practices affecting their care. Most people think of healing in therapeutic spaces as a linear concept where people are healed or damaged. Menakem (2017) highlights how this is not the case: “More often, healing and growth take place on a continuum, with innumerable points between utter brokenness and total health” (p. 12). This paper will further examine these occurrences and take a role in helping de-stigmatize mental health and treatment from therapists. DMT and other body-based exercises will be tools used to help shift the narrative among the black community around receiving mental health services.

Methods

This literature review was conducted by searching for relevant articles through the Lesley University library database. Keywords used to locate articles include *racial trauma*, *race-based stress*, *trauma*, *dance/movement therapy*, *somatic therapy*, *African dance*, *African diaspora*, *African American concert dance*, *post-traumatic stress disorder (PTSD)*, and *post-traumatic slave syndrome (PTSS)*. The literature located included peer-reviewed articles, books, and graduate theses or dissertations. From the graduate theses and dissertations, the literature cited in those papers led to further resources to cite in this thesis. Additional search engines to locate literature include Google Scholar, *the American Journal of Dance Therapy*, and Minnesota State University, Mankato library database. Content related to racial trauma and DMT has been limited until recently; the work began to appear in *the American Journal of Dance Therapy* in the 1990s. Racial trauma and DMT literature have continued to be researched and published more frequently in the *Arts of Psychotherapy* journal starting in the 2010s. We continue to see an increase in published literature around this topic. Additional literature discussed and cited in this paper was provided by thesis consultant Charné Furcron: LPC, BC-DMT, NCC, BCC, ACS, MAC. Research articles for this thesis were documented as a list on an online document. Note-taking and personal reflections were done digitally on the student's electronic devices, or on physical copies of paper.

Literature Review

Dance, movements, and other body-based experiences have been a part of black culture for hundreds of years (Primus, 1993). Dance continues to be used as a tool of expression alongside hymns and songs to help heal or cope from hardships within the African American community today (Primus, 1993; Menakem, 2017). The use of dance and movements in a

therapeutic space for the black community has been gradually increasing and reviewed for decades. The literature covering racial trauma within a DMT lens is limited, although peer-reviewed literature on racial trauma and DMT continues to grow. While noting these limitations, the literature reviewed in this paper highlights the history and knowledge of trauma, historical trauma, racial trauma, the history of black bodies being oppressed, dance within the black community, and the use of DMT as an intervention with populations who have experienced some form of trauma and body-based exercises used with clients experiencing trauma.

Trauma

Trauma is a type of stress that occurs on a life-threatening level. Various events qualify as trauma such as earthquakes, migrating from one country to another, or experiencing war. The American Psychological Association (APA) (n.d) defines stress as “the physiological or psychological response to internal or external stressors. Stress involves changes affecting nearly every system of the body, influencing how people feel and behave.” When individuals experience stress the internal response is shown in an increase of hormones such as cortisol and can further affect how they interact around others especially if they sense danger (Menakem, 2017; Van Der Kolk, 2014). DeGruy (2005) adds to defining trauma as an event where violence or force ensues followed by changing an individual's attitude and behaviors. Post-traumatic stress disorder (PTSD) is commonly associated with and thought of when discussing trauma. PTSD is a diagnosis used in the mental health profession to identify a type of trauma from the *Diagnostic and Statistical Manual of Mental Disorders* (DSM). The American Psychiatric Association (2013) includes criteria for a PTSD diagnosis of directly experiencing or witnessing a traumatic event (p. 271).

When trauma occurs and the aftermath follows, an individual's brain physically changes including how a person reacts to an opposed threat versus an actual threat. The person will often resort to the fight versus flight versus freeze response (Van Der Kolk, 2014). The African American community has faced many forms of stress and trauma, such as racial profiling, police brutality, domestic violence, substance abuse, neglect, and more. These traumatic events have caused an entire racial community to shift how they respond to difficult situations and navigate through their day-to-day lives. When black people encounter the police, their instinct and body's response due to trauma is to run, the flight response, but historically this has led to the beatings and murder of many black people (DeGruy, 2005; Menakem, 2017).

Historical Trauma

Historical trauma and intergenerational trauma will be used interchangeably in this paper. Now we know that trauma can be directly experienced or experienced by witnessing a traumatic event occur to others. We are learning in recent years from studies that have showcased that the trauma an individual or community experiences can be passed down from one person to the next. This is called intergenerational trauma and produces a culmination of emotional and psychological issues on a group level. Isobel et al. (2021) cite, "Intergenerational trauma refers to the process of transmission from parent figures to their infants or children, resulting in the effects of trauma being experienced by the second generation without exposure to the original traumatic experience" (Hesse and Main, 2000, as cited in Isobel et al., 2021, p. 632). Studies have shown historical trauma has higher rates of domestic violence, alcoholism, and a variety of health disparities (Williams & Mills, 2018, p. 248). Long-term stress on the body and being passed down across generations can impact the immune system or cardiovascular system. Further research has shown that transmission of trauma can be due to both genetics and the environment

an individual resides in (Rosenthal, 2021). During development, children and youth learn from their caregivers and adults in their lives how they respond to stressors and cope when hardships arise. “This is learned through observation as well as through the body interaction and transference of body memory, through movement, mirror systems, imitation, and resonance” (Cozzolino, 2014, as cited in Rosenthal, 2021, p. 82). African Americans have learned through their family systems and their community that they are seen as the other across the United States. Whiteness is the norm and everyone else is the other (Menakem, 2017). From this notion, racial disparities have occurred for hundreds of years, since the beginning of America’s existence. Black individuals have learned and seen coping through the use of substance use like alcohol or smoking marijuana as a way to numb their feelings (Williams & Mills, 2018).

When individuals recount their traumatic events, it can re-inflict the wounds and the person’s body re-experiences the trauma all over again. When this occurs repetitively it can appear as a person’s personality (Menakem, 2017). Reflexive trauma responses from a set of triggers will lose context over time within intergenerational trauma; those responses can be perceived as a culture within marginalized communities (p. 9). This culture is witnessed and experienced when non-black people tell black people that they are overreacting, or should just comply with the police, or are told there are two sides to every story; these emotions are only emboldened by not being heard and letting the cycle continue. This reaffirms stereotypes and implicit biases that all black people are angry or dangerous (Campbell, 2018; Martin, 2022; Menakem, 2017).

Racial Trauma

Racial trauma has not been highlighted in professional mental health spaces until recently, starting in the late 1990s and gradually supplying additional research on the topic in the

2000s and beyond. Racial trauma is the latest wave of understanding how psychological trauma occurs and affects another person's well-being. Martin (2022) cites in her dissertation:

Racial trauma, a form of stress, based on race is the overall psychological, emotional, physical responses expressed by people of color as a result of psychological, emotional, and sometimes physical threats and injuries endured by the hands of oppressive systems. (Comas-Diaz et. al., 2019 as cited in Martin, 2022, p. 17)

Racial trauma is a form of race-based stress that affects the livelihood of black, indigenous, and people of color (BIPOC) primarily in Western countries (Martin, 2022; Winters, 2020). Racial trauma is a chronic form of stress as race is characterized by external factors such as skin color, facial features, hair texture, or how a person speaks.

Racial trauma is a plethora of events including racial profiling, micro and macro aggressions, police brutality, systemic racism, implicit bias, PTSS, and stereotypes. Martin (2022) argues how education on mental health and support is sparse for black clientele. In fact, most clients are unaware they have racial trauma when a mental health practitioner informs them (Martin, 2022). The lack of awareness on resources and knowledge regarding trauma and other mental health disorders continues to contribute to the stigma associated with receiving mental health services within the black community (p. 110). Martin (2022) interviewed black mental health professionals for her dissertation and the participants highlighted how black clients are often “ambiguous on how to label their experiences or understand how their trauma is rooted in their lived racialized experiences” (p. 111). These experiences clients note may be about discrimination at their workplace and no changes made to address the issue at hand, and as a result, they experience heightened anxiety when thinking about or attending work. Racial trauma also manifests in numerous forms of symptoms and fatigue for individuals. Winters (2020),

coined the term, *Black Fatigue*, to note how chronic pain and suffering from discrimination and oppressive systems fatigues the black body. This can be seen in instances where racism is demonstrated in multiple forms whether overtly like shooting black people in places of worship such as the Charleston shooting (New York Times, 2015), or covertly like a black woman being seen as aggressive in the workplace when she speaks with passion and ambition. These incidents occur repetitively and across generations and can lead to further health conditions from chronic anxiety, stress, etc. When experiencing chronic fatigue, it can break down people's bodies and lead to further health concerns affecting other major organ systems and their daily living.

Martin's (2022) dissertation cites:

From a health standpoint, racial minority groups have been found to have higher health issues such as obesity, infant mortality and/or maternal mortality during childbirth, postpartum deaths, hypertension, cancer, diabetes, heart disease, stroke, liver cirrhosis, autoimmune diseases, and homicide (Hemmings & Evans, 2018, as cited in Martin, 2022, p. 36).

Chronic race-based stress experienced by black people leads to an increased chance of chronic health concerns but also prematurely ages the body. Winters (2020) highlights in her book that recent studies have indicated that racial discrimination ages the BIPOC community. This included higher levels of stress leading to cells in the body to age faster and thus leading to more wear and tear on their bodies (p. 74-75). Black people are in a constant state of worry, on high alert no matter the environment they are in, and minimal changes are seen to dismantle oppressive systems that place the black community at a disadvantage. This further positions black people and their bodies in survival mode for long periods.

Medical racism is another leading factor in racial trauma in BIPOC communities. Black people have a lack of trust in medical personnel due to racist practices on black bodies. Winters (2020) highlights how during slavery, medical providers created the diagnosis, *drapetomania*, known as runaway slave syndrome (p. 87). White people believed that black people were mentally ill for attempting to flee slave plantations and that black people could not handle being free in society. Additionally, black people were subjected to experimentation without their consent throughout slavery, the Jim Crow era, and today, in modern history (Degruy, 2005; Menakem, 2017; Martin, 2022; Winters, 2020). According to the Population Reference Bureau (PBR), black women are currently five times more likely to die from pregnancy-related issues than white women between 2016 and 2017 (PBR, para. 2, 2021). Black women's symptoms experienced during pregnancy and postpartum are often ignored because of precedent from racist ideologies. The negligence practiced includes black people not being able to feel pain or minimal amounts of pain compared to their white counterparts (Degruy, 2005; Martin, 2022; Winters, 2020).

History of the Black Body

To better understand racial trauma, viewing the history of the black body through different systems is necessary within this field. In order to be better equipped in helping the process of healing for the black community, we need to discuss the history and oppression of the black body. The black body throughout Western history has always been seen as dangerous and sexualized from white people's perspective (Gottschild, 2005, p. 41). Black people and their bodies have been deemed as the other, and whiteness as the norm. This is seen in other systems such as concert dance and everyday life. In Western history, before the police we know today, there were slave patrols. The slave patrols watched for black people who tried to escape

plantations during slavery. Police officers today view the black body as “dangerous and disruptive, as well as superhumanly powerful and impervious to pain” (Menakem, 2017, p. 28). This explains why when police have an inherent reaction to being forceful and controlling when encountering black people, there is trauma and history within white people as it connects to slavery. The mythical reasoning among white people as if black people were not in servitude, they were perceived as a threat and to be punished harshly and quickly (p. 98). While it has been proven false that black people cannot experience pain like white people, this notion comes from white people's perception of threats and black bodies responding in the fight versus flight versus freeze. From this, Menakem (2017) coined the term, white body supremacy, where white bodies are the norm and used in comparison to other BIPOC bodies (p. 90). Menakem (2017) highlights other pervasive concepts of white body supremacy:

The Black body is incredibly strong and resilient— almost invulnerable. The Black body is hypersexual. The Black body is dirty. The Black body is unattractive, especially in comparison with the white body. Therefore the Black body needs to be managed and controlled— by any means necessary (p. 90).

Years of white people reaffirming white body supremacy led to white people tensing up parts of their bodies in the presence of black bodies. Menakem (2017) further showcases from these concepts of white body supremacy that police officers will often explain their reasoning for shooting and killing black people, who more often than not are unarmed, and state they feared for their lives. The false conceptions of the black body being seen as dangerous and impervious to pain, has led to the continued cognitive dissonance of white people (Terrance Carney, 2016). White supremacist systems in power believed that black people would retaliate in response to

hundreds of years of oppression and in turn commit the same violent acts towards white people which continues the vicious cycle of police brutality at this time.

White body supremacy and oppressive systems are also reflected within the world of concert dance and as a result black dancing bodies are left in a similarly vulnerable position. Gottschild (2005) argues how black bodies are over-sexualized within the dance world due to the African aesthetics in the diaspora and from the years of sexual violence from colonialism and orientalism. “the black body has served as the screen upon which white fears and fantasies have been projected” (p. 41). For hundreds of years, black women were subjected to rape, sexual assault, and beating from slaveowners without any repercussions. As a result, the black dancing body was observed as exotic-erotic, the term coined by Gottschild (2005). Josephine Baker, a prominent black dance figure in the 1940s is an example of a black body being exploited and using this to an advantage to perform in front of white audiences. Baker was known for dancing topless and white spectators exoticized and mythologized her body while she was performing. This connects back to black people in servitude to white people by being entertainment; their bodies were seen as inferior and degraded (Farr, 1997; Degruy, 2005; McCarthy-Brown, 2012; & Menakem, 2017).

The black body continued to be looked down upon in concert dance for many years and this is still upheld today in the dance community. An example is the dance style, jazz. Jazz dance derives from African roots and vernacular jazz alongside jazz music emerging on the scene (Trenka, 2014). The African aesthetics from the diaspora were displayed in the early years of jazz dance. Jones (2014) states, “the carriage of the bodies drops, the torsos become more articulated, and body parts move in syncopated rhythms” (p. 235). The black dancing body used a grounded body position to distribute their weight easier across other parts of the body.

Eurocentric aesthetics and beauty standards both within the dance and non-dance world were pushed by Jack Cole, a prominent dance figure, using subtle yet selective details in how jazz dance is seen and practiced. Jones (2014) further describes the appropriation that occurred in jazz dance:

Dropping the pelvis, rolling through the hips, and rebounding up through an articulated torso are replaced by a rigidly controlled torso with elongated arms and a leg extension. The reason for raising one aesthetic over another emerges from racial privilege favoring a white choreographer over others (Jones, 2014, p. 236).

The black dancing body used aesthetics from the African diaspora such as polyrhythms and hip exploration were then replaced by Eurocentric aesthetics in jazz dance. The black dancing body and its history were appropriated and seen as inferior to push the white body supremacy agenda while leaving black people sidelined and undervalued.

The black body continued to be critiqued from Eurocentric beauty standards within the dance community. McCarthy-Brown (2012) cites how 1960s dance critics spoke about how black dancers were not suited to learn or perform ballet techniques. John Martin, a notable dance critic argued, “the only problem it involves is to keep the Negro dancer from having to pretend to be what he is not and to deny what he is” (Martin, 1963, as cited in McCarthy-Brown, 2012, p. 391). Martin’s excerpt is in the context of how a black dancer would look out of place performing in a classical ballet such as *Swan Lake* in part due to racial stereotypes. McCarthy-Brown (2012) goes on to name the historical stereotypes about black women that continue to be upheld today. “There is Jezebel (the seductive temptress), Sapphire (the evil, manipulative bitch), and Aunt Jemima (the sexless, long-suffering nurturer)” (West, 2001, as cited in McCarthy-Brown, 2012, p. 392). These stereotypes limit and dehumanize the complexity

and emotions a black woman can possess which inhibits them from being able to perform in classical ballet roles as ballet fits a feminine aesthetic usually seen with white female dancers. The combination of these historical stereotypes is still used and seen today, where black women are labeled as the strong black woman. This limiting and controlling image further marginalizes black women within dance spaces and beyond.

DMT as an Intervention

When providing treatment for clients with trauma, there are three main methods within the mental health profession. The first and most common method is titled the *top-down* method; this includes talk therapy and understanding what is happening to the body due to the trauma experienced (Van Der Kolk, 2014). This is seen within the cognitive-behavioral therapy (CBT) framework. The second method includes the use of medicine to manage symptoms a client may be experiencing from residual effects of the trauma they faced or witnessed that altered brain chemistry. This can include antidepressants, or stimulants such as Adderall to address mental health disorders. Medications are usually paired with talk therapy as they are seen as most effective together. The last method is titled *bottom-up*; this focuses primarily on the body. Research has shown that trauma is held within the body (Van Der Kolk, 2014). To address healing with an individual or a group, it cannot be completed through the mind, but rather both, as the mind and body are connected (Menakem, 2017). Menakem (2017) further highlights how talk therapy keeps individuals in a habitual pattern due to trauma being stored in the body. If we are to address the trauma an individual has endured and start the healing process, there is a need to examine the client's body and responses they have inherited from such traumas.

Hanna (1993) discusses how dance has been used as a tool for healing within many cultures while contributing to the literature from the *American Journal of Dance Therapy* and her

expertise in medical anthropology to support this claim. Hanna (1993) argues there are four practices that dance can be practiced as a means to help heal others and gain a sense of control. “These are 1) possession by the spiritual manifested in dance, 2) mastery of movement, 3) escape or diversion from stress and pain, and 4) confronting stressors to work through ways of handling their effects” (p. 326). These practices are reflected within several cultures as a means of a healer who possesses an individual and dancing is performed to exonerate the illness. Or another practice is seen when fighting social injustices and communicating those emotions through dance, Pearl Primus being one of many dancers to use this model. Hanna (1993) asserts the significance of DMT:

Dance therapy, [...] is a process of acquiring insight, experiencing catharsis, [...] uses movement and verbal interventions to achieve these goals. [...] acknowledges the fusion of mind and body [...] and expressive and communicative primacy of nonverbal body movement in revealing aspects of a person’s mental and emotional state (p. 329).

Hanna (1993) highlights some of the key practices and premises of what DMT is and the purpose of utilizing this specialty with clientele. The following literature discussed in this section further goes in-depth on how DMT has been used with clients experiencing trauma and the results of using DMT as an intervention.

Levy et al. (2021) conducted a study with urban youth utilizing hip-hop dance and music in a therapeutic space to process adverse experiences within marginalized communities. Weekly sessions were held for 90 minutes and had a specific theme for each week. The participants were ages 8-11 years old and watched content tied to hip-hop to help prompt creativity with poems, dancing, songwriting, and other expressive art modalities. Data collected from the study noted how participants were more comfortable expressing and discussing sensitive content matters

from the use of hip-hop music and dance videos such as gentrification and homelessness. A participant from the study shared her positive experience with the use of hip-hop as an intervention, she stated, “[...], performing in front of their peers, being video or audio recorded, and learning new skills they did not already possess were all identified as ways in which participants stepped outside their comfort zones” (p. 221). The participant noted how she had some discomfort showcasing her dance to other participants but naming that feeling and continuing group discussions around topics of financial and food insecurities helped strengthen group cohesion. While this population of participants is on the younger side, it does not negate the reality of hardships faced individually and within marginalized communities. The use of dance and music made the participants feel more comfortable to start discussions on hardships faced within African American and Latinx communities.

Farr (1997) argues the importance of DMT with African American adolescents who are at risk for adverse childhood experiences (ACES) such as sexual abuse, substance use, and domestic violence. The author highlights the cultural significance and history of dance within the black community from West African countries in secular and religious settings. “Dance ritual functioned as a [...] mechanism for communal coping— an expressive outlet with restorative benefits to ensure healthy adaptive functioning, particularly under difficult circumstances” (Hannah, 1979, as cited in Farr, 1997, p. 184). Farr (1997) discusses how black adolescents are less inclined to seek out therapeutic services unless coming from juvenile courts referring the child for mental health interventions and black parents seek out support and help for their children when they feel they are out of options. However, the fruition of hip-hop music and dance emerged as an alternative to express feelings of anger, break the rules or push back against systems of power, and appreciate blackness. Hip-hop music and dance led to less violence in

gangs in New York and channeled into dance battles instead which unified black children and young adults (p. 185). The creation of hip-hop brought another tool for black people to express themselves and process the grief from social injustices within the black community. Farr (1997) notes characteristics of the African aesthetic and culture in hip-hop come from the African diaspora roots such as interaction/participation, improvisation, integration of music and dance into daily life and public occasions (entertainment, politically, and religiously), and expression of emotions. These characteristics can be applied within a DMT lens to process hardships adolescents experience, racial identity, and intergenerational trauma within their community. The article goes on to propose hip-hop, African dance, and creative movement like improvisation as DMT techniques applied to African American youth to bring forth a secure mindset in expressing themselves in a therapeutic setting. Farr's (1997) article highlights how dance has been a part of the black community for centuries and has served as a tool for healing individually and as a community. The only difference is to encourage African Americans to join therapy and have the guidance of a multiculturally and trauma-informed clinician who can address and help with racial trauma with black people.

Monteiro and Wall (2011) explore the use of ritual dances and overall movement as a means of healing within African communities. For hundreds of years, many societies within different countries of Africa have believed and seen the benefits of dance without scientific research tied to the benefits. Dance is a powerful cultural, and historical context within the African diaspora. Monteiro and Wall (2011) argue how the mind and body are connected in the following quote, "The self is not separated into individualized parts [...] such as mental and physical. In the African worldview, humans' spiritual root is [...] balance and equilibrium within one's spirit" (p. 235). Years before modern medicine and researching the mind-body relationship

(Monteiro & Wall, 2011), African communities believed and knew the connection between the mind and body was important and not to be split apart. Furthermore, the movement was seen as a way to address problems that arise and embody these issues naturally.

Monteiro and Wall (2011) list several ritual dances within West African communities that harbor movement to heal themselves. *Ndeup*, a Senegalese dance, is highlighted as it uses improvisation and free movements for the individuals in their culture to be more attuned to themselves and their spirit (p. 240). This ritual dance prides itself on being a self-identifying ceremony where the person chooses if they will participate and are in need to cleanse their spiritual and physical/emotional selves. From this, they can express themselves in a natural and freeing way about current stressors that have arisen in their lives. “Dance is a physical behavior that embodies many curative properties that are released through movement, rhythms, self expression, [...] the mechanisms of cathartic release. These properties allow individuals to shift emotional states, often times, creating an experience of wholeness” (Leseho & Maxwell, 2010, as cited in Monteiro & Wall, 2011, p. 239). While this article is not specifically noting DMT, it does highlight the importance of dance and movement and it is central to their culture and community to stay connected within their bodies when illness arises, mentally or physically.

Menakem (2017) discusses the impacts of historical trauma on the black body from slavery in his book, *My Grandmother's Hands* and argues the importance of healing through a somatic therapy lens. He highlights the importance of slowing down when addressing trauma to heal the mind and body. This is due to trauma being viewed as an action that was thwarted and then stuck within the body (p. 178). Slowing down helps the client stay grounded and self-regulate as needed. Menakem (2017) names the five anchors in his book as a tool to strengthen regulation and grounding techniques. Anchor number one relies heavily on slowing

down to calm the mind and body, instead of reacting, having the mind and body process what was experienced (p. 168). This anchor is an essential aspect of DMT practices where we examine our body sensations and the emotions or thoughts tied to them. This can include an increased heart rate, tight chest, sweaty palms, or a headache. Additionally, anchor number four discusses staying present in your body while moving and as the experience unfolds responding from the best parts of yourself (p. 170). A practice utilized heavily within DMT and somatic therapy. Mindfulness is important as trauma is processed. The act of staying present helps the individual be better informed about their body and whether they are encountering resistance or not. Furthermore, being present can locate where the body tenses or relaxes to learn what movements are needed to stay with the relaxation or how to transition from a tense body.

When processing generational trauma Menakem (2017) notes how the generations before us, ourselves, and the future generations are all being healed simultaneously (p. 179). By addressing this trauma with past, present, and future generations not only acknowledges the trauma endured and stuck in the body for multiple generations but also the chance to be equipped with the education and tools to heal. Additionally, it allows the current generation and future generations the opportunity to learn about their family's trauma without having to hold it themselves in their body and continue the vicious cycle. Menakem (2017) lists several activities or exercises that can be done individually and as a group to facilitate the mending of the black body from historical trauma and systemic oppression. These activities include humming, singing, rocking the body back and forth, rubbing your belly and other body parts, walking, giving or receiving massages, and sitting or standing still (p. 184-185). These exercises can be incorporated into everyday interactions or communal events. Menakem (2017) notes how these exercises have been utilized within black spaces for generations to survive, cope, and harmonize

with others (p. 191). During American chattel slavery, while working in the cotton fields, black and brown people were singing hymns and humming to help with time passing by and connect with their peers during this gruesome period (Menakem, 2017; Winters, 2020). Additionally, slaves were forced to entertain white slave owners by dancing and singing for them, acting as caricatures, and this kind of entertainment continued to grow popular and is known formally as minstrelsy (McCarthy-Brown, 2012). However, black people took their power back by subtly mocking white slave owners during these bits of entertainment and as a result kept themselves alive. We as a community can learn from our ancestors as they incorporated movement practices when possible to survive, communicate, and process the oppressive systems placed upon them.

Dieterich-Hartwell et al. (2021) conducted a study examining the use of DMT with refugees who have experienced PTSD in migrating to the United States. The study took 11 months to complete with 13 participants and used exclusion criteria for participants including substance use, suicidal ideation, or homicide (p.77). Participants were asked to complete a survey before starting individual or group therapy about their thoughts and relationship to movement and their bodies. About 3-5, 60-minute movement sessions were conducted with participants with the use of DMT. Movement sessions included “[...] a body warm-up, theme development with either mutual dancing, learning cultural dance from the participants or assisting the participants in integrating individual resources, etc., and a body cool-down with stretching and attention to breath” (p. 79). Participants completed a second survey at the end of the study and were interviewed by the authors to discuss their movement experiences. The overall themes from the data collected in this study found that expressive movement relieved tension in their bodies physically and emotionally such as chest pains, headaches, dental problems, etc. The surveys the participants took at the end of the study showed an increased

awareness and positive emotions about their relationships to their bodies and movement. Relief, relaxation, and comfort occurred for participants in the movement sessions. One participant shares their experience stating, “You taught us to breathe deeply. Take a deep breath. It made me comfortable, feel like I’m resting” (p. 82). The role of body and movement contributed to the participants in this study helping regulate themselves and promote a stronger sense of their identity from experiencing trauma. Utilizing a trauma-informed approach with DMT helps guide an individual to increase their understanding of their body sensations and emotions tied to body cues they may not otherwise be able to explore in traditional psychotherapy practices. Furthermore, sharing movement experiences promotes togetherness and building community with others who have also dealt with a form of trauma.

Dance within the Black Community

Dance and movement practices are heavily intertwined within black culture, history, and building community with each other. African Americans have become resilient due to the years of trauma passed down from each generation. As a result, body-based exercises have been used to help soothe themselves such as rocking, clapping, and humming (Menakem, 2017). The black community has been using somatic interventions without the help of mental health professionals. However, with continued use of these coping skills and a secure, safe, and open space with a practitioner, black clients can see the benefits of DMT and help manage and heal from their racial trauma and address the collective damage and healing needed.

Farrah Griffin’s (2013) “Pearl Primus and the Idea of a Black Radical Tradition” highlights how a prominent black dance figure utilized movement as a means of expression to communicate the pain, suffering, history, and hopes among black people here in the United States. During World War II, Primus joined a multiracial group for artists to rise up and discuss

how war could benefit them in having better racial and economic rights and equality about democracy (Griffin, p. 42). Primus used her love and passion for dance to perform pieces about her experiences as a black person. “Both were dances of social protest. [...] the dancer’s movement has the power to transform the observer’s consciousness. [...] Dance provided a new medium for protest against segregation,” (p. 42). Primus used aesthetics from the African Diaspora such as African and Caribbean dance styles, in addition to modern dance as it connected to protests within the dance community of breaking out from the moldings of classical ballet. Primus and her mentors, Katherine Dunham, and Zora Neale Hurston, brought forth their ethnographic research and racial identities and tied them into dance (Griffin, p. 44). While Primus’ use of dance was within a concert dance lens, she still brought forth the social justice and racial inequalities model by using dance as a medium and expressing the collective pain endured within the black community. Primus’ love for dance and utilizing it to promote and bring awareness for social justice within her community highlights how dance has been used as a tool for healing and fighting against oppressive systems. However, it showcases the use of dance in healing from racial injustices but without the help of mental health systems to supply this option in a traditional setting or outlook.

Bill T. Jones, a prominent black dancer, and choreographer, spoke at the ADTA conference in 1998 about his experiences within the concert dance world. Jones (1998) speaks on how he offered survival workshops for people diagnosed with HIV and AIDS aimed towards bringing people together, serving as a community, and not only discussing but utilizing movements in processing life and death from this disease. Jones (1998) states:

In the *Survival Workshops*, I used the most accessible techniques I had available to engender trust and warm-up the body. Something else happened as well, [...] They were

sharing with each other, coining terms, marking declarations, giving and receiving advice. [...] I am convinced this richness was fueled by movement. Was it therapy? (p. 11)

Jones' (1998) reflection on the use of dance with participants and witnessing firsthand how it provided a cathartic release within this population provided questions and relief in how powerful the use of movement can be. Jones was known for creating and performing emotional and thought-provoking dances throughout his career and was able to express himself and depict struggles experienced within the black community. Jones' reflections on using dance within a community that was experiencing hardships around the AIDS epidemic in the 1980s and 90s showcase how dance is a form of healing. The survival workshops served as a tool to express themselves by identifying and using movement without realizing in the present moment they were utilizing DMT practices.

Discussion

Limitations

Some drawbacks of this paper include having little to no qualitative and quantitative literature about racial trauma and DMT research. Additionally, the literature researched and cited in this paper was specifically viewed from a dance movement therapist's perspective and did not include extensive research from somatic therapists aside from Menakem's (2017) book. Becky Carter: LCPC, is a trauma and somatic therapist trained in providing services that are trauma-informed approaches paired with somatic therapeutic interventions. Carter offers seminars and training on systemic racial trauma and it is linked on her website and other social media platforms for further exploration. Further drawbacks for this paper included the literature cited specifically from an American perspective and did not include literature about racism and

systemic oppression from other Western countries. Another limitation includes the number of literature cited in this thesis. Exploring all the literature that mentions racial trauma, or race-based stress with dance or movement practices would be an exhaustive list. A limited scope was necessary for citing literature in this thesis. As a result, an appendix has been curated from additional sources researched but was not cited in this paper including graduate theses and dissertations about racial trauma and somatic therapists' work around race-based stress and systemic oppression.

Recommendations

The literature discussed in this paper highlights numerous models and tools as to how dance, movement, somatic, and other body-based exercises have been or could be used to address the centuries of discrimination due to racism committed against black people. The literature and history showcase that while movement and somatic practices are beneficial to healing racial trauma this answer has been here all along and demonstrated across multiple generations for centuries when experiencing hardships. The issue is not that black individuals need to be informed on DMT services and treatment but rather, the black community knows dance is healing (Monteiro & Wall, 2011; Ojelade et al., 2014) and feeling a sense of a cathartic release but it is not referred to as DMT within their culture. Farr (1997) illustrates that dance was utilized heavily by Black Americans throughout slavery as a means of expression and upon arrival to the States they were from West African countries where dance was used for religious and secular gatherings (p. 184). The development of DMT and ADTA included co-founding members identifying as BIPOC dance therapists who were minimized and disaffiliated due to racism which contributes to the lack of knowledge and erasure of DMT in marginalized spaces (Chang, 2016, p. 271). These implications correlate to the sentiment of dance being seen as

healing but not referred to as DMT. Ojelade et al. (2014) conducted a study where 22 participants are interviewed about using indigenous African healing practices instead of Western mental health interventions. All the participants in this study note they used personal resources to address life stressors and mental health problems including, meditation, African dance, drumming, and social support systems (p. 504). The black community has used dance and other arts-based interventions to promote healing and regulation of their bodies in response to difficult hardships throughout history (Primus, 1993). These interventions are similar and seen within the practice of dance movement therapists today. However, the use of dance interventions needs to be prioritized on a community-based level to help establish a firm foundation towards destigmatizing and minimizing distrust within Western mental health services if there is to be an increase in black people receiving treatment with DMT practitioners.

Rodgers and Furcron (2016) conducted a study where a youth dance program can provide skills to marginalized adolescents to strengthen life skills and avoid risky behaviors. Furcron (2016) discusses the program, *Moving in the Spirit*, an out-of-school arts program that provides therapeutic support and community around the love for the arts with inner-city kids from Atlanta, Georgia. The program is targeted toward BIPOC youth and utilizes movement to integrate a combination of cognitive, emotional, physical, and spiritual discoveries as it pertains to current stressors in their personal and communal systems (p. 7). Usually, therapeutic services are inaccessible due to being in an office building, or inpatient setting. Clients need to commute a long way to seek therapeutic support and often miss appointments or decline to receive therapy altogether due to scheduling and transportation issues (Campbell, 2018; Martin, 2022). By providing DMT within a heavily populated BIPOC community, it makes programs like *Moving in the Spirit*, more accessible to all. Rodgers and Furcron (2016) refer to DMT in their article as

expressive dance movement, or movement activities when explaining the interventions used with BIPOC youth. This choice in language also showcases accessibility by providing the resources as to how dance and movement activities are therapeutic paired with therapeutic frameworks such as cognitive behavioral therapy (CBT) and Chacian dance/movement therapy techniques (p. 7). This not only provides the opportunity for psychoeducation with clients but also showcases how dance is healing and gives these tools to BIPOC youth early on.

Campbell's (2018) thesis conducted a program development project that integrates the healing domains from Degruy's research on Post traumatic slave syndrome (PTSS). This program provides DMT, creative arts interventions, and trauma-informed care within the Roseland, Chicago community. The program was held at the Roseland community center and participants were primarily African-American adolescents. This program development project provided increased awareness in several areas such as job opportunities, education, crime, and safety precautions related to crime within their community (p. 44). Additionally, Campbell (2018) highlights how funding for programs within the black community is a challenge whether people will attend or not. This program set a base fee of \$50 per participant for the 10 weeks sessions were conducted. Payment plans and scholarships were available for participants who had financial hardships. The financial accommodations Campbell (2018) provides for her program development project within the Chicago community for black youth are important so this barrier does not inhibit black people from receiving support and services that are otherwise needed when experiencing hardships. Black people are less likely to build generational wealth due to slavery and the push for reparations from chattel slavery usually are dismissed by U.S. lawmakers (Degruy, 2005; Martin, 2022; Winters, 2020). By eliminating or reducing the costs of therapeutic services, it provides more opportunities for black people to seek out the help they

need without finances imposing limits. Reduced costs are reflected in community outreach services and provide accessibility to marginalized clients who are not commuting as far to receive support. Furthermore, community-based services bring a sense of togetherness to address issues experienced by the collective and help the group start the healing journey.

Dieterich-Hartwell et al. (2021) conducted a study with refugees who experienced trauma and noted that each group session included a break for refreshments and lunchtime. Additionally, a designated area for play and sleep was provided as some participants in the study brought their children to partake in this study (p. 79). This accommodation is needed when providing support and services to marginalized clients since they are more likely to work long hours, or multiple jobs to provide for themselves and their families and may struggle to find childcare in the process (Martin, 2022). By integrating all of these changes, reduced costs, community-based services, and refreshments offered to clients, in return provides an accessible space for BIPOC clients to receive therapeutic support and a greater likelihood to participate. These are recommendations needed if mental health professionals are looking to help destigmatize mental health within the black community and promote healing from racial trauma.

Conclusion

This literature review contributes to the continuing discussion around offering treatment and support to the black community due to racial trauma. This paper gathers literature on racial trauma and DMT thus far to showcase the growth in research and the importance of how trauma impacts the black individual and the collective. However, the use of DMT interventions has not explicitly been named within black spaces due to a lack of awareness and mistrust of the medical field due to medical racism. Dance/movement therapists are listed in the same category as

counselors and mental health practitioners which is connected to the field of psychology and at large is tied to the medical field, as a result, has a history of racist medical practices.

Instead, the use of dance/movement, and other body-based exercises are being utilized in a community-based model versus inpatient and outpatient therapeutic settings. The use of dance within communal settings without mental health professionals facilitating serves as a reminder of the mistrust black people have with all medical personnel, including licensed dance/movement therapists. However, it serves as a sign of encouragement to bring dance/movement therapists to community spaces to help black people understand that dance/ movement is therapeutic and introduce a trained practitioner to hold space for others in times of need. The role of a dance/movement therapist in community spaces can help by utilizing psychoeducation and reminding black people that dance is used as a means of expression when words are not enough to process hardships. Reminding black people that all black and brown people have experienced similar emotions and hardships to which they can relate to. From the communal aspect, it helps the black community come together, make new connections and friendships, and additional support from each other outside of therapy sessions when needed. A dance/movement therapist can also help the black community utilize self-authorization and ownership of their bodies at any given point to dance and/or move in ways that feel comfortable to them. DMT joins with African dance traditions or the diaspora by using polyrhythms and rhythmic methods such as call and response when utilizing movement practices to facilitate healing. DMT and a therapist to facilitate group sessions help others learn and practice social skills and problem-solving which can be impaired by any form of trauma. Lastly, DMT can help the black community work on self-regulation and grounding techniques when they are overwhelmed with emotions during or

outside of therapy sessions. Regulation and calming skills are important and necessary for a black individual's survival when in predominantly white spaces.

DMT helps strengthen skills of self-regulation and calming the mind and body in any population. Racial trauma and race-based stress require grounding and regulation skills when addressing trauma as triggers can occur. Menakem (2017) discusses the use of five anchors to help strengthen the skill of self-regulation in the mind and body when processing trauma. These anchors include processing instead of reacting and unlearning the body responses to go in survival mode aka fight versus flight versus freeze (p. 168-171). While these anchors focus primarily on the aftermath of triggering incidents or from recounting a traumatic event, these anchors can be applied to DMT interventions such as improvisation where clients dance and move their bodies in a natural and unchoreographed manner. Individuals let their bodies express themselves freely without restrictions and bring out their best parts of themselves; being authentic is crucial in the DMT process. Racial trauma involves sensitive subject matter from racial discrimination and can bring forth upsetting recounts from clients. However, being able to name those traumatic events, and use movement to unpack the body sensations when talking about their racial trauma or talk about the experience of utilizing movement to express how racial trauma presented within their lives connects to Menakem's (2017) five anchors concept.

The mind and body are connected which led to an understanding of how trauma is stored in the body (Menakem, 2017; Van der Kolk, 2014). To effectively process trauma, utilizing movement and body-based practices like DMT are essential to facilitate healing. The African American community has leaned heavily on one another to process and cope with many hardships and used expressive arts like music and dance to heal. The use of expressive art therapies is ever present within the community however, the push for seeking out mental health

services continues to be controversial. Dance is healing by being able to utilize it as a means in self-expression and communicate historical trauma but, the role of a dance/movement therapist is to then offer insight and educate clients on how to support the release of emotions by moving their bodies in everyday life. DMT can help the black community direct their emotions into creating art and processing their trauma without inflicting trauma within their family systems, to break intergenerational trauma, or avoid engaging in risky behaviors like substance use. DMT is not the singular tool to heal racial trauma, but it is one factor needed to start the journey toward healing for the black community.

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Appendix A

Theses and Dissertations on Racial Trauma

This appendix is a list of resources from graduate level theses and dissertations on racial trauma that were researched for this thesis but not cited. This list serves as a guide for future students and clinicians interested in providing support to clients with racial trauma. These graduate theses and dissertations highlight and provide further information on racial trauma versus historical trauma and how it impacts the black community. Racial trauma continues to be upheld by oppressive systems and to heal it includes disassembling these oppressive systemic structures in Western countries.

- Anderson, D. (2019). Examining the impact of DMT with African American families affected by trauma: A literature review. (Publication No. 156) [Expressive Therapies Capstone Theses, Lesley University] https://digitalcommons.lesley.edu/expressive_theses/156
- Bryan, A. (2021). Dance/movement therapy in response to continuous race-based trauma. (Publication No. 80) [Dance/Movement Therapy Theses, Sarah Lawrence College] https://digitalcommons.slc.edu/dmt_etd/80
- Ferrer, M. (2021). Racial trauma as a diagnosis: Recognizing the impact of racial violence and discrimination on mental health. (Publication No. 83) [Global Honors Theses, University of Washington Tacoma] https://digitalcommons.tacoma.uw.edu/gh_theses/83
- Gamba, M. (2019). Dance/movement therapy As a tool to address racism and injustice in service learning. (Publication No. 137) [Expressive Therapies Capstone Theses, Lesley University] https://digitalcommons.lesley.edu/expressive_theses/137

- Jordan, T.A. (2017). Experiences of racism and race-based traumatic stress: The moderating effects of cyberracism, racial/ethnic identity, and forgiveness. [Dissertation, Georgia State University] <https://doi.org/10.57709/10561423>
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Appendix B

Trauma and Somatic Therapists

This appendix is a list of resources from somatic therapists who have worked with clients with trauma and utilize a trauma-informed approach within their practices. These resources were researched for this thesis but were not cited due to limiting the literature primarily to dance/movement therapists' perspectives on trauma and race-based stress. These references provide further insight on the importance of the body and moving when processing trauma. There are similarities and crossover in the practices of somatic therapy and DMT however, somatic therapy did not derive from dance history and heavily utilized modern dance and improvisation exercises like DMT practices.

Carter, B. (Host). (2021, September). Healing racial trauma through embodiment with Becky

Carter. [Audio podcast episode]. In *Transforming Trauma*. NARM Training Institute.

<https://open.spotify.com/episode/7N1SQycu29Be3RH5BdxGpt?si=791b6fe293944684>

Menakem, R. & Wong, R. (Hosts). (2019, August). Mending racialized trauma: A body-centered

approach with Resmaa Menakem. [Audio podcast episode] *Connectfulness Practice*.

<https://open.spotify.com/episode/42D0FDY5DmHL1oQzefVUWH?si=3763f00b95004f88>

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Scratchfield, R. & Maximé, M. (Hosts). (2020, September). Becoming an embodied anti-racist

for collective trauma healing with Francesca Maximé. [Audio podcast episode]. In *Body*

Kindness: Transform Your Health and Never Say 'Diet' Again.

<https://open.spotify.com/episode/3OXzyAatXkyEc3KfE1I4n6?si=e2c9730bbd214540>

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, MA

Student's Name: Jennifer Noboise

Type of Project: Thesis

Title: Dance/Movement Therapy Used as an Intervention to Heal Racial Trauma Within the Black Community: A Literature Review

Date of Graduation: May 20, 2023

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

Thesis Advisor: Meg H. Chang, EdD, BC-DMT, LCAT, NCC