

# Dance Therapy Acceptance & Enthusiasm Through A Wellness Class: A Before-After Study

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## Abstract

### Keywords

Dance Therapy  
Before-After  
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The objective of this study is to determine the acceptance and the relationship of dance enthusiasm before and after a wellness class as well as the changes after the class particularly in the understanding and promotion of dance therapy. This study adapts a before-after model through a wellness class and a cross-sectional method is also used to assess the before-after changes and the rest of the study variables. Results show that acceptance is high at 70% for dance therapy as Complementary and alternative medicine (CAM) and its practitioner as a healthcare professional, dance enthusiasm significantly increased as well, however, the before and after variables show that generally there is no significant difference ( $p= 0.072$  with 0.05 level of significance) except in understanding ( $< 0.001$ ) and promotion (0.019) variables. It can be concluded that more sessions must be conducted for development of dance therapy as a single class only improves understanding and promotion. Other CAM therapies may also be introduced based on the responses from the participants; these are poetry and recreational therapies.

## 1. Introduction

Alternative and complementary therapies have been growing in many countries including the Philippines. There has been forms of CAM that are presently considered therapeutic from its origin as a hobby like art and those that include movements like gaming therapy, sand play and adventure therapy [1]. Dance or movement therapy is one CAM that is fast becoming popular, it has been demonstrated that movement in a regulated manner by health professionals will give therapeutic benefit [2] [3] including those that are of martial arts in origin like Tai Ji Quan [4]. To some point that movement may be used as a method of

expressive therapy onwards safe and healthy disclosure of HIV infection [5]. This study examined the acceptance of dance therapy in a health institute in Dasmariñas, Cavite, Philippines, as well as the enthusiasm among dance enthusiast respondents through a dance therapy session conducted by a dance therapy professional.

Although dance therapy is slowly being recognized in the Philippines, dance is still largely known as a leisure activity that promotes good well-being. There has been no such published study yet in the country that focuses on its acceptance. Moreover, the study design in this research is unique as administration of a pre/post questionnaires were administered so

variables like enthusiasm changes were measured after the class.

A before-after model of therapy has shown improvements in physical functions [6] [7] and may even help in body image perception [8] and as an expressive therapy [5]. In a health-based organization like De La Salle Health Sciences Institute (DLSHSI), most respondents view dance therapy as a CAM and its practitioners as a health professional. Although there is no significant difference in enthusiasm of the enthusiasts after the wellness class, it appears that understanding and promotion are significantly increased which is adequate for a single session.

## 2. Methodology

The study design is cross-sectional. It also uses a before-after model where questionnaires that are validated and tested for reliability were administered accordingly based on routine methods.

### 2.1. The Wellness Class

The dance therapy session was conducted at the De La Salle Villarosa Convention Hall, DLSHSI, Dasmariñas, Cavite, Philippines last January 29, 2016 from 8 AM to 12 NN as part of the La Sallian Days Institutional Wellness Activity for the annual La Sallian Days celebration. It was sponsored and organized by the Guidance and Counseling Service Unit under the Office of the Student Services.

The dance therapist conducting the class was a well-trained specialist who studied mind and body therapy in India, Indonesia, UK and USA and has been conducting workshops for the therapy for the different companies/institutions in the Philippines, India and Hong Kong. The class started with a lecture on the basics of dance therapy then its instructional part. Lastly, the dance therapy session took place.

The wellness class was attended by the employees of DLSHSI, healthcare academic arm of De La Salle and DLSUMC (De La Salle University Medical Center), the health services arm of DLSHSI. Student participants make up the bulk of the attendees and they are from the different programs - pharmacy, medical technology, occupational therapy, physical therapy, biochemistry, medicine, nursing, radiation technology and language pathology.

Two different sets of questionnaires were given, one before the wellness class started and one after the wellness class.

### 2.2. The Before-After Questionnaire

There were 2 questionnaires given to the dance therapy participants based on the study design, one was given prior to the wellness class with the actual dance therapy session and one after the dance therapy class, this is to measure the improvements gained from the class, if any [6] [7].

The Before questionnaire is composed of 5 sections. The first section is composed of demographic information (age, gender and employee profession/student course). The second section is composed of the acceptance questions asking if the respondent considers dance therapy as CAM and the dance therapist as a healthcare professional. A question if the respondent is a dance enthusiast has also been added where options for all these section questions are yes, no and no idea. The third section of the before questionnaire is composed of varied questions on dance therapy which includes the respondents interest to dance therapy, perception on understanding and benefit of dance therapy, promotion, support, conduct of research on dance therapy as well as the knowledge where to refer people needing the therapy. These questions were answered through a Likert scale from 1 to 5, 1 lowest while 5 is the highest. The 4<sup>th</sup> section is about the mind and body therapies tried by the respondents where other forms of CAM were provided as option - prayer, music, recreational, yoga, poetry, art and an 'other' option for the other therapies not provided in the option. The last section is about the mind and body therapies that the respondents would like to try providing the same options.

The After questionnaire only involves the 3<sup>rd</sup> section so as to compare the changes of the main research variables which are in the interest, understanding, perception of benefit, attitude towards promotion, research and support as well as the knowledge where to refer people for dance therapy/ the After questionnaire also uses the same scale as the Before questionnaire.

### 2.3. Data Analysis

Statistical analysis was conducted at the Clinical Epidemiology Unit of the Angelo King Research Center of DLSHSI. Acceptance variables were measured using McNemar’s test, dance enthusiasm variables before and after the wellness class were measured using Kruskal Walli’s test while the Mind-body therapies variables utilized Sign’s test.

**3. RESULTS**

**3.1. Demographics**

There are 54 participants who completed the questionnaires after the wellness class. Forty three of which are students from the different programs at DLSHSI – pharmacy, OT, PT, biochemistry, medicine, nursing, radiation technology and language pathology while none from the medical technology completed the questionnaires. Ten are faculty or staff from CHS, CMRT, Admin, DLSUMC laboratory, medicare, nursing department and clerical department while one respondent did not disclose his/her affiliation. Out of the respondents, 77.78% (42) are female while 22.22% (14) are male.

**3.2. Acceptance**

In general, 70% of the respondents consider dance therapists as healthcare professionals and dance therapy as CAM. Upon looking at each of the variables 85.45% of the respondents consider dance therapy as complementary medicine while 83.64% consider it as alternative medicine, 81.82% on the other hand, consider dance therapists as health care professionals.

**3.3. Dance Enthusiasm**

The dance enthusiasm among enthusiasts increased after the wellness class at a ranking scale of 7 the minimum and 35 the maximum. The improvement is significant that the difference between “yes” and “no” responses are already not significant after the wellness class among those who completed the questionnaires (see Table 1).

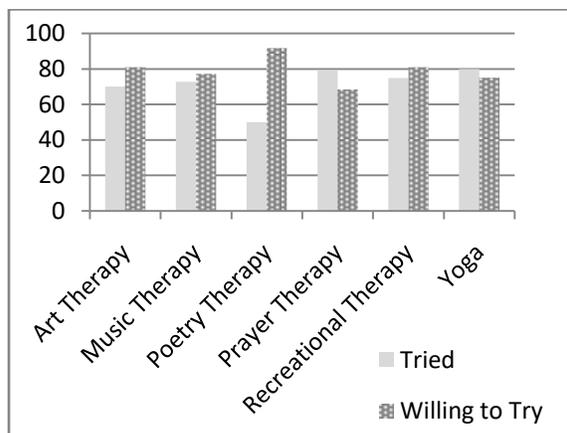
**Table 1: Dance Enthusiasm Before & After Wellness Class**

Before			
Dance Enthusiasts	n	Mean Score	(SD)
Yes	34	26.21	5.84
No	12	22.42	5.43
No Idea	6	29.33	5.13
After			
Dance Enthusiasts	n	Mean Score	(SD)
Yes	34	29	3.31
No	12	25.57	6.02
No Idea	6	33	4

**Kruskal Wallis P-value <0.010**

Among the dance enthusiasts the mostly tried CAM are yoga (80%), prayer therapy (78.95%), recreational therapy (75%), music therapy (72.73%), art therapy (70%) and poetry therapy (50%). These dance enthusiasts though would like to try poetry therapy (91.67%), art and recreational therapies (80.95% each), music therapy (77.27%), yoga (75%) and prayer therapy (68.42%) as shown in Figure 1 below where the Y axis is the percentage of respondents and the X axis is the CAM tried and CAM of interest among the respondents.

**Figure 1: CAM Tried & CAM of Interest Among Respondents**



**3.4. Before-After**

The overall before-after result on Sign's test is not significant at  $p$ -value = 0.072 with 0.05 level of significance. Looking at each of the variables though, there is significance in the understanding of dance therapy ( $<0.001$ ) before and after wellness class and in promotion of dance therapy (0.019) also before and after class.

#### 4. DISCUSSION

In this research, dance therapy is generally accepted by the respondents and that the dance enthusiasm is evidently increased after the wellness class. Although generally, there is no significant difference on the before and after variables, it can be observed that few of the variables which are understanding and promotion of the dance therapy significantly increased. The results from this study however on the acceptance may be attributed to the fact that this study was conducted in a healthcare institution with health oriented people and that the acceptance may follow due to the naturally high knowledge on CAM in this environment. From the list of other CAM in this study, it can also be suggested that other additional wellness activities in the future may be poetry [9] and recreational [10] therapies as high inclination to these therapies are evident in this study. Most importantly, the wellness class is only introductory and was only done once, if further development is desired in this form of CAM within the institution, a series of classes is recommended as a single class may only successfully increase understanding and promotion in dance therapy.

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#### Competing Interest

The authors declare that there is no conflict of interest

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