

COMPETENCIES

Dance Movement Therapy Competency Framework

This document aims to unify Dunphy et al's competency standards, European Qualification Framework (EQF) 7, and Bloom's Taxonomy of educational targets for learning in action (pedagogical framework of Cognitive, Affective & Psychomotor domains), with the EADMT Training Standards (TS) Criteria (2017). Dunphy et.al.(2020) aims:

- to offer a platform for definition of learning outcomes for DMT training, supporting consistency of content and assessment benchmarks
- define the requirements for effective workplace performance of DM therapists
- support and guide the ongoing training and capacity building of DM therapists.

EQF 7

Competency Standards that meet the EQF 7 Second Cycle Higher Education (Masters) must address:

- Knowledge: Highly specialised knowledge, some of which is at the forefront of knowledge in a field of work or study, as the basis for original thinking and/or research
- Skills-1: Critical awareness of knowledge issues in a field and at the interface between different fields
- Skills-2: Specialised problem-solving skills required in research and/or innovation in order to develop new knowledge and procedures and to integrate knowledge from different fields
- Competence-1: Manage and transform work or study contexts that are complex, unpredictable and require new strategic approaches
- Competence-2: Take responsibility for contributing to professional knowledge and practice and/or for reviewing the strategic performance of teams.

https://en.wikipedia.org/wiki/European_Qualifications_Framework

NB: The authors of this document consider that:

- Knowledge includes cognitive and embodied knowledge
- Skills includes cognitive, affective and psychomotor/embodied skills (reference Bloom's taxonomy)
- Competence includes the practical application, professional, and research-based development of DMT Knowledge and Skills

Bloom's Taxonomy

'A set of three hierarchical models used for classification of educational learning objectives into levels of complexity and specificity. The three lists cover the learning objectives in cognitive, affective and psychomotor domains. The cognitive domain list has been the primary focus of most traditional education and is frequently used to structure curriculum learning objectives, assessments and activities.'

https://en.wikipedia.org/wiki/Bloom%27s_taxonomy

NB In recognition that DMT training programmes are taught through an embodied and creative process while engaging the cognitive brain, Bloom's taxonomy might be a useful taxonomy to refer to when designing a module, creating a lesson plan etc.

EADMT Training Standards Criteria (2017)

Units of Competences:

Elements necessary to perform as a professional DMT

1. Dance movement therapy – body of knowledge

Cluster 1 + 3

- a) Knowledge of how the DMT pioneers across the globe have shaped the development of the profession today
- b) Knowledge of how ethnic, indigenous, traditional, local and national dance and dance healing practices influence the profession today

- c) Knowledge of psychotherapeutic theories that inform DMT practice
- d) Knowledge of psychopathology
- e) Knowledge of the connections of DMT with other arts therapies
- f) Knowledge of anatomy, physiology, biomechanics, human developmental movement to inform safe and therapeutic practice
- g) Knowledge of Laban/Bartenieff Movement System (LBMS), Kestenberg Movement Profile (KMP), and other movement observation, awareness, and analysis tools

2.1 Technical Skills - Dance and Body Movement **Cluster 1.1, 1.3, 2**

- a) Use dance movement to stimulate creativity and expressivity
- b) Use skills in movement improvisation to support therapeutic practice
- c) Utilise somatic practices grounded in body awareness
- d) Utilise systems of developmental and neurological movement patterns e.g., LBMS, KMP etc.to enhance movement functionality
- e) Use LBMS, KMP and other tools to document, describe and communicate observations of body patterns

3. Therapeutic knowledge and skills

Cluster 2, 3.1

3.1. Theory supporting DMT practice

- a) Understanding the concepts of family systems, group dynamics, person-centred, psychodynamic etc. theories
- b) Knowledge of cognitive and psycho-social developmental theories
- c) Knowledge of the relationship between movement, memory, symbolic thought, and narratives
- d) Knowledge of theoretical constructs that inform the therapist's role as participant/observer, witness, and leader
- e) Knowledge of current neuroscientific theory and its application to DMT
- f) Knowledge of trauma-informed practice to advance therapeutic outcomes

3.2 Skills that support DMT practice. Supervision, Internship, Personal Therapy

Clusters 1,2,3

- a) Understands the role of empathy and attunement in building relationships with clients
- b) Understands the components of a DMT programme of interventions
- c) Understands how shared movement experiences facilitate self-expression and promote insight and integration
- d) Articulates why and how verbal interventions support the integration and meaning-making of nonverbal learning and experiences
- e) Utilise constructs to inform the role of participant/observer, witness, and/or leader

4. Dance movement therapy in practice.

Cluster 1.1, 1.4 ?, 4 (case presentation), Supervision

4.1 Assessment in the therapeutic process

- a) Utilise awareness of aspects of human diversity from demographic data, for effective assessment, including any contra-indication
- b) Application of systematic and comprehensive assessment that guides treatment planning and interventions
- c) Creates, reviews, and revises movement and corresponding bio-psycho-social-cognitive goals and objectives informed by formal and informal ongoing assessment

4.2 Planning & therapeutic development

Cluster 1.1, 1.4 ?, 4 (case presentation), Supervision

- a) Develops evidenced-informed long and short-term movement goals and objectives including case conceptualization (formulation) b)
- Ensures intended outcomes are appropriate for the client population and context
- c) Monitors and reviews and assesses clients' progress against DMT plan
 - d) Reviews treatment planning with allied professionals where appropriate and possible
 - e) Undertakes reflective discussions and seeks input about client progress with the client, treatment team, and family or significant others for whom informed consent has been provided

4.3 Dance and movement interventions

Clusters 1 & 2

- a) Utilise dance and movement interventions to promote and maintain therapeutic relationships
- b) Utilise functional and expressive movement repertoire to kinaesthetically attune to clients
- c) Adopt principles of inclusivity and respect to foster a therapeutic relationship

- d) Create an environment that invites clients to use movement to express and explore aspects of self
- e) Offer sensory movement experiences and imagery to enrich clients' expressive movement capacity and insights
- f) Offer aesthetically enriching experiences
- g) Creates developmentally appropriate interventions
- h) Facilitates use of symbols, imagery, and metaphor in movement
- i) Facilitates improvisation, spontaneity, and creativity to enhance self-expression
- j) Promotes movement that supports clients' emotional expression, communication and wellbeing
- k) Facilitates a themed movement practice that supports clients' meaning making
- l) Selects choreographic structures, props, music and other art forms to support clients' strengths and needs
- m) Maintains the flow of a session including smooth and timely transitions, and a clear beginning, middle and end

4.4 Facilitating dance movement therapy groups Cluster 1.1, 1.3 & 2.1

- a) Builds empathic connection with and between clients through group work
- b) Facilitates physical and emotional warm-up to establish group cohesion
- c) Facilitates cooperation, mutual support and trust between clients
- d) Develops themes to enhance group process
- e) Demonstrates understanding of group dynamics and group process
- f) Addresses differing needs of clients within the group

e) Facilitates group closure and integration of experiences

5. Understanding the role of research in DMT practice

Cluster 4

- a) Utilise published evidence to inform practice
- b) Ability to interpret and apply knowledge from current relevant research literature to enhance client care and professional development

6. Implementing professionalism in practice

Cluster 1.3 & 1.4

- a) Understanding of clinical limitations and necessary supervision as needed
- b) Promotes collegial relationships with other professionals
- c) Managing information and records securely and maintaining confidentiality (GDPR)
- d) Maximises client safety in the physical environment
- e) Ensures access to first aid support and awareness of emergency procedures
- f) Operates within DMT professional bodies' Code of Ethics and Rules of Professional Conduct
- g) Understanding of reportable conduct and mandatory reporting requirements and other relevant legislation related to safeguarding clients
- h) Understanding of requirements for regular clinical supervision as appropriate to workplace guidelines and Professional Associations' Supervision Guidelines

References

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