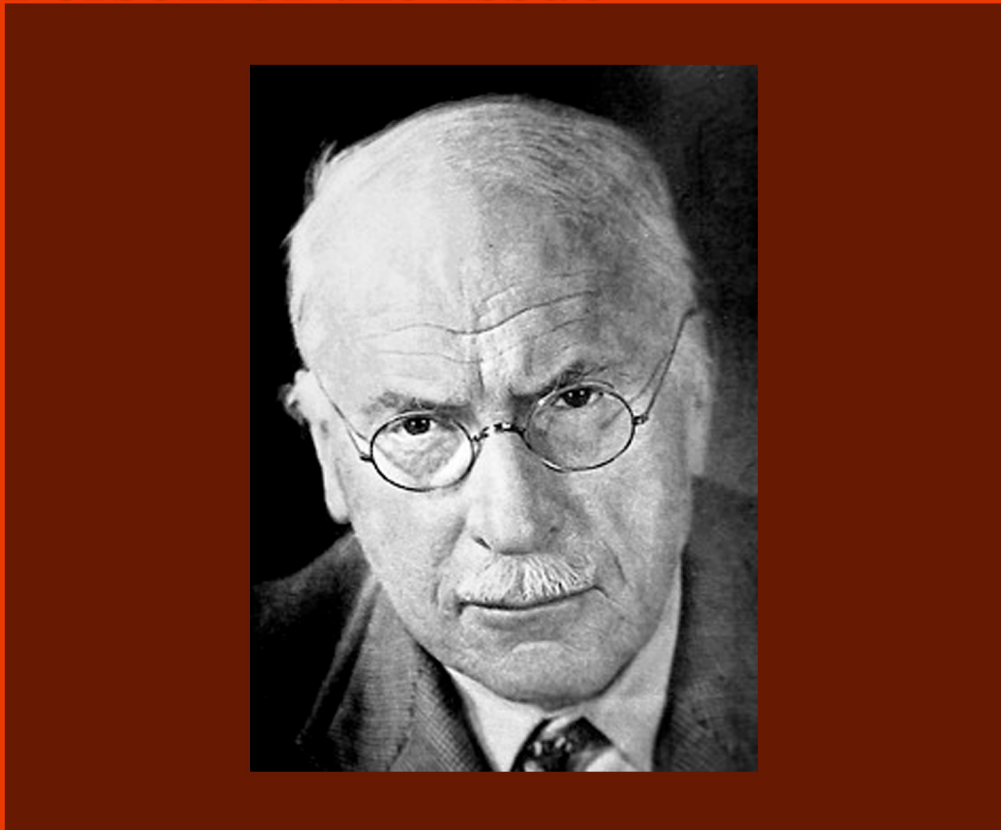




The International Journal of
INDIAN PSYCHOLOGY

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Dance Therapy as a Treatment Modality for Autistic Children in Social Interaction

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ABSTRACT:

The current research topic “Dance movement therapy, as a treatment modality of autistic children in social interaction” includes five autistic children majorly having significant language delays with echolalia and video dialoguing restricted social communication and limited engagement in socially reciprocal activities, repetitive play patterns, resistance to change and difficulty in emotional responsiveness. The main aim of the study is to assess the effect of Dance Movement Therapy in social interaction of children with Autism Spectrum Disorder. The methodology used is Pre and Post design, in Pre-Intervention Phase, Childhood Autism Rating Scale (CARS) was administered; then as an intervention dance therapy was given and in Post Intervention Phase, Childhood Autism Rating Scale (CARS) was re-administered. The main focus of the study is considering social interaction deficits by providing the intervention of Dance Movement Therapy.

Keywords: *Dance Therapy, Social Interaction, Treatment Modality, Autistic Children*

Dance therapy concentrates on development conduct as it develops helpful relationship. Dance movement therapy uses body movement, as the center segment of dance, to give the method for evaluation and the mode of mediation for treatment. The therapy has remarkable capacity to take into consideration better comprehensions which help in reflecting and extending nonverbal articulations. By using a method called "reflection" that includes mirroring the autistic body rhythms, movements, and vocalizations, the dance movement therapist can support the beginning in starting the methodology of relationship development in autistic children. The main purpose of the CARS2-ST examines clinical diagnosis of an autism spectrum disorder. The main focus of this paper is social interaction in autistic children by taking parameters from Childhood Autism Rating Scales (CARS) relating to social interaction, namely: item 1-relating to people, item 3-emotional response, and item 7-visual response, item 8-listening response, item 11-verbal communication, and item 12-nonverbal communication. CARS-ST was used for both pre-intervention and post-intervention i.e. before and after receiving dance movement therapy.

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REVIEW OF LITERATURE:

The case study on “Move to the Music: Autism Sees Benefits of Dance Therapy” in the year 2014 given by Tamar Najarian. Dance is an astonishing treatment style that has profited all, from the obese children to those with autism. It makes the child get up, move the body, appreciate the activity and make new companions. Dance has long been the medium for human connections, from the excellent waltz to the cutting edge hip-jump and R&B. For quite a long time, movement turned into an individual treatment, from Bollywood to hip twirling. Movement didn't simply make itself the ideal treatment but it has helped numerous children no matter how someone looks at it, including autism population. Autism in itself is an intriguing issue, however one which could get to be problematic inside a standard day's schedules. It is a hereditary issue which is regularly accentuated by ecological variables, incorporating air contamination found in the bigger urban areas. Considering autistic individual practice the slightest among the issue, tuning in movement for its restorative perspectives may be an extraordinary thought. While dance movement in itself is amazingly useful, it may be a smart thought to likewise incorporate music in the blend. Autistic children usually have music knowledge, with their staggering memories regarding pitch and notes. One specific study specified in the past article said research on musically untrained autistic children between the ages of 7 and 13. Both short- and long haul memory were tried, and it was observed that those on the range exhibited vastly improved contribute separation capacities such a path, to the point that could comprehend and bring up the right tune in everything from a solitary note to an entire melody, and in addition indicating unrivaled long haul memory for song. They are likewise known for being contribute impeccable memory.

Sara M. Scharoun, Nicole J. Reinders, Pamela J. Bryden, and Paula C. Fletcher gave their research on the topic of “Dance/Movement Therapy as an Intervention for Children with Autism Spectrum Disorders” in the year 2014. Autism Spectrum Disorder (ASD) is a standout amongst the most widely recognized types of formative inabilities of children, established in atypical language and social improvement, in conjunction with monotonous and designed practices. It is additionally proposed that horrible and fine engine impedances are a center peculiarity of ASD, are more pervasive in correlation to the overall public, and may be further misrepresented because of lessened interest in physical action. As mindfulness for ASD has expanded, so have the quantity of helpful methodologies; nonetheless, no single mediation has demonstrated valuable in lightening the cardinal indications of ASD. Hence the best treatment or mix of medicines stays uncertain. Imaginative movement and dance is a pragmatic and practical choice for children with ASD. On the other hand, there exists a shortage of writing assessing dance movement therapy (DMT) for children with ASD, notwithstanding giving both physical and mental profits for children with ASD. This article intends to perform a story survey of the writing.

Dance Therapy as a Treatment Modality for Autistic Children in Social Interaction

The study "Fixing the mirrors: A feasibility study of the effects of dance movement therapy on young adults with autism spectrum disorder" was given by Koch SC, Mehl L, Sobanski E, Sieber M, Fuchs T in 2014. From the 1970s on, research endeavors reported the viability of helpful therapeutic mirroring in movement with young adults with autism spectrum disorder. In this possibility study, it was tried dance movement therapy to help mirroring focused around reflecting in movement in a populace of 31 adolescent grown-ups with autism spectrum disorder (mostly advanced and Asperger's disorder) with the mean to build body mindfulness, social abilities, other toward oneself refinement, compassion, and prosperity. The studies have utilized a manualized dance movement therapy help intervention executed in hourly sessions once a week for 7 weeks. The treatment bunch (n = 16) and the no-intervention control bunch (n = 15) were matched by sex, age, and manifestation seriousness. Members did not take part in whatever other treatments for the span of the study. After the treatment, members in the intervention gathering reported enhanced prosperity, enhanced body mindfulness, enhanced other toward oneself qualification, and expanded social aptitudes. The dance movement therapy based reflecting methodology appeared to address more essential formative parts of a mental imbalance than the without further ado predominating hypothesis of-psyche methodology. Results propose that dance movement therapy help can be a viable and achievable treatment approach for an autism spectrum disorder, while future randomized control trials with greater examples are required.

In 2009 research on "Autism Movement Therapy - Wake up the Brain" was given by "Joanne Lara". This study states that the mind is a data handling marvel. People with autism experience issues getting to and recovering data in both long and/or transient memory banks. Either the pathway does not exist or the transmitters are weakened. This makes adapting particularly troublesome for them. The similarity is that of a child's brain capacity like a library where none of the data is put away in any composed, sorted way. The uplifting news is that researchers now know that an individual can regularly jolt weakened instructive pathways or even make new pathways through a procedure called cognitive redirection. This "awakening mind" is the center of Autism Movement Therapy which enable tactile relationship procedure that join both the left and right halves of the globe of the cerebrum (interhemispheric joining) by consolidating designing, visual development estimation, audile open preparing, beat and sequencing into an "entire cerebrum" cognitive intuition approach that can essentially enhance behavioral, passionate, scholastic, social and speech and language skills. The essential objective of Autism Movement Therapy is that following 12 -14 weeks of a few 12 moment sessions a week, the child will be more consistent when asked to finish on-assignment exercises, will communicate with regular general training companions all the more regularly, and will be utilizing both sides of his mind for transforming. Expanded general determination toward oneself mindfulness, alongside healthier, enhanced respect toward oneself is a definitive objective. Children with autism has issues with the left and the right side of the brain, that are usually not corresponding with one another. The left (investigative) or consistent half of the globe of the cerebrum is: verbal, reacts to word importance, is consecutive, forms data straightly, reacts to rationale and

Dance Therapy as a Treatment Modality for Autistic Children in Social Interaction

plans ahead, reviews individuals' names, talks with few motions, is reliable, inclines toward formal study outline, lean towards splendid lights while mulling over. The privilege (worldwide) or imaginative side of the equator is: visual, reacts to manner of speaking, is irregular and courses of action data in shifted request, reacts to feeling, is rash, reviews individuals' confronts, motions when talking, is less dependable, inclines toward sound or music out of sight while considering and lean towards continuous portability while examining. AMT is intended to cognitively divert or re-outline mind. It utilizes reiteration of development examples and successions to secure honest to goodness pathways or parkways for the data to go along. This helps children with autism in preparing, putting away and recovering data in a more proficient and compelling way. The contrast between preparing the right data and/or falsehood is reliant on the negative or positive elucidation of the data. The therapy transform through sound, visual and characteristic signs, which thusly get to be triggers. A visual picture can be a trigger and sound or sound data, and ordinarily both get to be triggers for the recovery data process. Autism movement therapy uses these distinctive types of data transforming and triggers in remapping the cerebrum. It obliges that children use responsive dialect to hear the music, visual handling to see the physical picture and horrible engine aptitudes to duplicate what they see. AMT is fun, including music and move that speaks to all ages. AMT is partitioned into three levels that take roughly 12-15 minutes to finish, with a fun Hip Hop level toward the end. Each of the three levels is further separated into five sub-segments: A warm-up, stationary development, headway development, ad lib and unwinding or chill off. All the more critically, each of the three levels are intended to framework on the level in the past segment, 3 on 2, and 2 on 1. The understudy starts with Level 1 and through reiteration and consistency moves to the following level when he has beaten the development grouping and examples, rhythm and cadence in the current area. Autism Movement Therapy empowers the cerebrum and awakens that is torpid. Anyhow, in the same way as life, it's a methodology and no two children react in precisely the same way

METHODOLOGY:

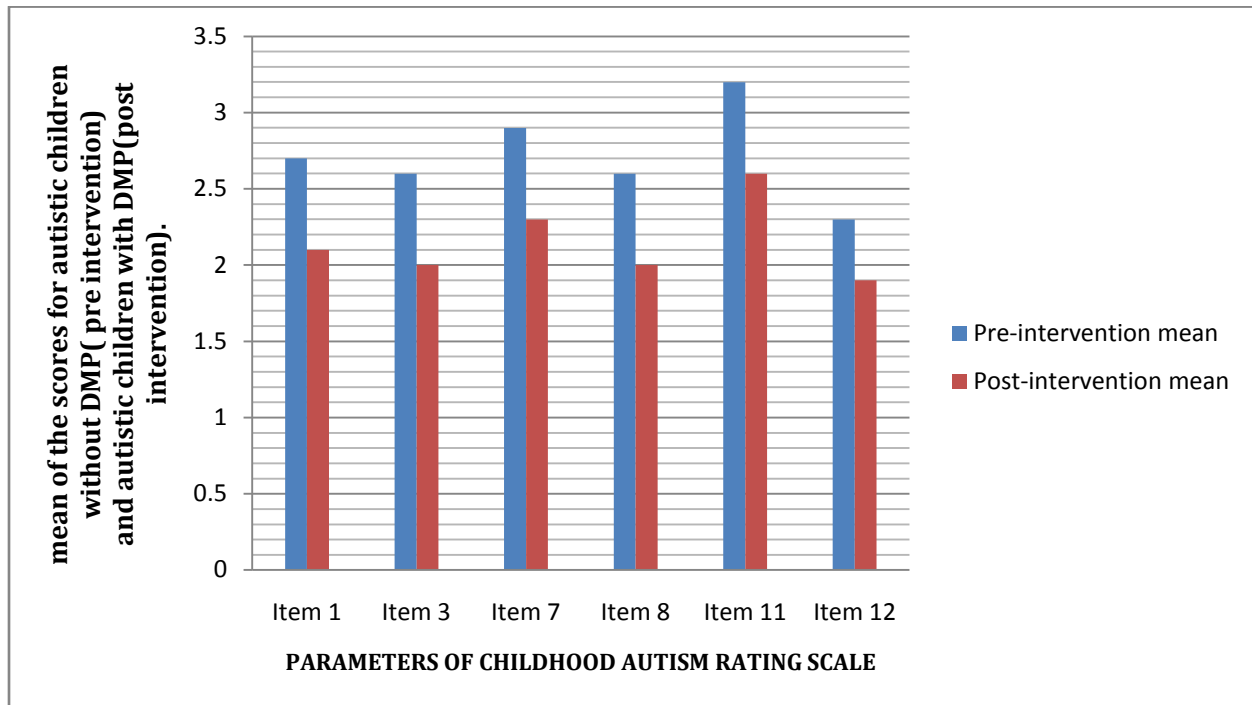
With an aim of qualitative research, 5 samples were studied in detailed on which pre and post assessment is done as a comparative study including age group from 2-10 years old children with autism (i.e. detailed pre-intervention and post-intervention, before and after receiving dance movement therapy study was conducted). The independent variable was autistic children and dependent variable being dance movement therapy. The hypothesis that was formulated on the basis of the objectives of the present study and the obtained findings that were analyzed by using T-test, statistical analysis.

RESULTS AND IMPLICATIONS:

The study obtained findings in the form of results which shows that Autistic children show significant improvement in social interaction after receiving Dance Movement Therapy. Thus, there is a positive relationship reported between dance movement therapy and autism. The dance movement therapy approach increases attention to self as well as other individual, adapting skills, and the capacity to structure connections with the world around the individual.

Dance Therapy as a Treatment Modality for Autistic Children in Social Interaction

Bar diagram showing a comparison between autistic children before dance movement therapy (DMT) and autistic children after dance movement therapy (DMP).



CONCLUSION:

For the purpose of the study, a sample of 5 autistic children was taken (i.e. detailed pre-intervention and post-intervention, before and after receiving dance movement therapy study was conducted). The independent variable was autistic children. Dependent variable being dance movement therapy.

The objective of the study was to assess the effect of Dance Movement Therapy in social interaction of children with Autism Spectrum Disorder. The methodology used is Pre and Post design, in Pre-Intervention Phase, Childhood Autism Rating Scale (CARS) would be administered; then as an intervention dance therapy would be given and in Post Intervention Phase, Childhood Autism Rating Scale (CARS) would be re-administered. The main focus of the study is considering social interaction deficits by providing the intervention of Dance Movement Therapy.

The hypothesis that was formulated on the basis of the objectives of the present study and the obtained findings that were analyzed by using T-test, statistical analysis. Thus, the obtained findings in the form of results show that Autistic children show improvement in social interaction after receiving Dance Movement Therapy.

Dance Therapy as a Treatment Modality for Autistic Children in Social Interaction

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