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Dance as drug, dance as medicine

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The aim of this cross-cultural field study is to reveal the health-related contents of contemporary folk and popular dances. When comparing dances with different cultural contexts and different kinesic "grammar" such as free improvisatory solo or group dances (disco, rave), one can also trace differences, from the medical anthropological point of view, regarding issues of health, risks and healing.

As these dances may form different "body-speech" communities explorable by social anthropological methods, dance communities are examples of universal medical anthropological problems such as embodiment of cultural values regarding health and risk, coping with problems of a lifestyle with less physical activity and more emotional distress, or daily hassles. Distorted coping styles such as drug use in dance communities is discussed, involving the "drug role" of dance in altering mood and consciousness too.

Exploring the narratives of our informants, dance is revealed to have a role in creating better moods, joy, fitness, better living and social support, all of which are health promoters.

Health psychology has proved that joy, happiness, fun and a positive mood are important in health protection (e.g. positive psychoimmune effects, protection of cardiovascular status), so dance is a source of health. On the other hand, some forms of dance are attached to a particular lifestyle and the coping distortion, like drug use, smoking and drinking, may not promote health, as is the case of some youth subcultures (chemical generation, acid rave etc).

Dance may be medicine too. We examine dance therapy in its psychiatric context by means of field study and interviews with therapists.

Although folk and popular dances have an important relation to health, they are not part of the general practice of dance therapy. Unlike mind/body centering, or dance and movement therapy, which are supported by

psychoanalytic developmental theory and by the diagnostic/analytic tools provided by the Kerstenberg Movement Profile (KMP), popular and folk dances have no such analytical background and cannot be considered to be a theoretic interface to biomedicine. Psychophysiological, etic analysis may provide these missing elements. The medical anthropological interpretation may help to bring dance closer to the medical discourse.

In the Cartesian Gulf: what is medical in the anthropology of dance?

Medical anthropology has to contend with the problems of the Cartesian mind/body dualism in its dealings with symbolic healing, psychosomatic phenomena and the anthropology of the body. Dance has important in its own right in this framework because it has a multilevel, biocultural adaptive role as a social practice. The fact that dance has induced limited interest among social scientists may reflect the extent of this Cartesian gulf between verbal culture and physical culture that involves non verbal communicative systems (Polhemus 1993). This prompts us to reconsider our exclusive logocentrism, and the reintegration of the "bodily logos" (Sheets Johnstone 1983).

On the other hand, references to dance can be found throughout the history of anthropological literature: for example, from Spencer (1857), Marret (1914), Radcliffe-Brown (1922), Evans-Pritchard (1928), Franziska Boas (1944) and Mead and Bateson (1942) up to Blacking, Lomax, Williams, Lange, Hanna and Thomas and other contemporary anthropologists.

However, the health aspects of dance are not represented as a main theme in the mainstream discourses of dance research. Giurchescu and Torpe compared continental European choreological and American anthropological perspectives on dance, emphasizing that the anthropological approach concentrates on "dancing people", while European choreology deals with comparative research, systematisation and classification of the observed dances. After the Second World War, folklore theories in Europe were directed towards studying "dance reality" in its social and artistic dimensions (Giurgechscu and Torpe 1998), while Alan Lomax's cross-cultural Choreometrics Project extended American anthropology. It is obvious that the hidden "biocultural" functions of dance are even less articulated in these monographs. In addition, less attention is directed towards the health aspects of folk and popular dances, and other non ritual everyday dance and musical social practices.

To reveal the health related aspects of dances we need the "tales of dancers", and the experiences of those who learn, teach, research dances or even heal by dance. The personal experiences of the observer with these dances are just as important as the reports of others.

Should we base the study of dance on earlier anthropological interpretations? Dance can be seen as a kind of catharsis, or release. Maybe the first anthropological concept of dance also had a covert health psychological framework. Spencer (1857) called dance a «safety valve for releasing emotional steam». This concept of tension release or repression appears in other anthropological concepts such as «release from children's rigorous repression and subordination» in Mead's (1928) interpretation, in a kind of «relief from the burden of actuality» (Langer 1953), in «release of tension following a period of economic anxiety» in Gluckman's view (1959; cited by Spencer P. 1985). Dance as stress releaser, modifier of mood, source of joy, and preserver of physical fitness on a personal level may gain health related importance.

Dance builds a bridge over the Cartesian gulf as embodied social interaction, bodily language synthesising rational and emotional messages and intentions, and fills the human organism with social and cultural content, thus making the body human. The etymology of emotion makes it obvious that psychical states are experienced through bodily processes too; motions are emotional and the emotions arouse different postures and gestures deeply imbedded in the bodily logos. The intentional relaxation of the muscle system may reconfigure chronic psycho-physiological and emotional states, inducing change in the psychosomatic disease process. This can also be experienced during dancing, which directs medical anthropological interest towards the body as a bypass for solving mental and psychic problems.

Dance incorporates a wide range of evolutionary selected skills: sense of rhythm, symbolic capability, skills of innovation and variation, kinetic abilities and so on. Through dance one can gain control over one's body, develop physical fitness and transform emotions and instincts into "linguistically patterned forms". This skill of expression takes place at a level that is deeper than verbal exploration. This deeper bodily process of "access and reframe" may acquire psychotherapeutic meaning and importance. Health psychology has proved that joy, happiness, fun and a positive mood are important in health protection (positive psycho-immune effects and protection of cardiovascular status), so dance has become a health promoter. These clinical facts lend medical importance to dance it. Dance may be medicine.

Medical anthropological research into dance may involve health protecting aspects, health risks and healing processes by means of traditional dances and therapies as well. The medical anthropological analysis of the health aspects of dance requires a special "hermeneutic shift", a sort of "medicalisation" of the subject.

In the same way, that medicalisation turns implicit cultural health contents into explicit institutional and instrumental forms, cultural issues whose health-related content has adaptive functions may be the object of "anthropologisation" too.

As Ward reveals, «functionalist analyses are archetypically rationalist» when they give rational explanations of irrational or non rational phenomena. When we state that «dance reinforces community, it regulates, controls, constrains and conditions behaviour» or that «dance is a convention of courtship, dating and sexual bargaining», we point towards the functionalist anthropological tradition. This "etic" approach can be extended to health psychological issues such as stress management, locus of control, social support, overcoming lack of physical movement, relaxation, trauma disclosure and psychology of gender. This vocabulary may be transferred to the dance experience.

Dance as remedy for the social body

The individual bodily benefits and psychological gains may be obvious, but dance is also an important regulator of the "social body", as it can help to teach social skills, gender roles accepted by a particular society, empathy, and co operativity. Its important sociotherapeutical effect is that it strengthens the "we" feeling. Dance is a sort of body language that certainly has an important role in shaping regulated social behaviour. In traditional societies, the dialects of dance lend a cultural personality or identity to communities living together.

The cultural, social and physiological aspects of dance can be examples of bio-cultural adaptation. Hanna discusses the adaptive pattern of dance regarding mating strategy. Sometimes, according to the reports of our informants, dance can help to overcome barriers created by social rank in mate selection. Nevertheless, beyond reproductive success, dance offers other health protective advances at a personal and social level that are open to medical anthropological discourse.

Dance as cultural behaviour involves people's values, attitudes and beliefs as well. In the wider sense, the anthropology of dance and music reveals

various functions such as aesthetic enjoyment, entertainment, communication, symbolic representation, physical response, enforcing conformity to social norms, validation of social institutions and religious rituals, contribution to the continuity and stability of culture, and integration into society (Merriam 1964).

In a socio-psycho-physiologic framework, dance may also mean coping with socially induced tensions and frustrations. These barriers may be overcome by the communicative function of dance, which gains political significance via the articulation of political attitudes and values. It offers a dimension of control in the otherwise submissive status of being a minority. It is more important in cases of muted verbalisation of personal or social frustrations. Anthropological analyses of narratives may help to reveal these covert functions of dance.

The grammar of dance: communication as source of healing

As Williams writes: «Dancing is essentially the termination, through action, of a certain kind of symbolic transformation of experience.» (Williams 1973 cit. Hanna 1979:23). This definition suggests that the linguistic function of dance is a «repetitious, redundant and formally organised system of body communication present in the culture» (Lomax 1968: 223). The semiotic and semantic aspects of human dance help to draw parallels between language and dance. We can explore the set of kinematic units as signs, the syntax and grammar of these "sentences" of motions, gestures and kinetic events. Compared with non-human verbal communication, human dance shows a sharp, qualitative difference mainly in its emotional transformative content, intentional rhythm and its free choice regarding psycho-biologically based rhythms. As an open productive system of movement, it is different in its semantic, syntactic, and learned arbitrary forms, while non-human non-verbal communication is a relatively simple system with limited interspecies variation. The personal experiences that dance expresses have therapeutic potential as a release of psychic tensions. This function of dance, with its cognitive and affective dimensions, is imbedded in the socio-psychological context.

Kinetic analysis may disclose "dance" to be the synchronisation of movement between people in communication. If these phenomena are part of a communication process, they may acquire an important role in forming effective and compliant Doctor-patient relationships. The video analysis of psychiatric rapport provides insight into this non-verbal dimension. As

far as the definitions of dance mentioned above are concerned, however, this contact-sensitive, non-intentional, "non-purposeful" body language can not be considered to be dance. Dance as an expressive way of human communication has language-like properties. Dance structure analysis itself is a sort of disclosure of an implicit grammar of dance idioms (Martin 1982).

Ray Birdwhistell comments these features as follows: «Humans move and belong to movement communities just as they speak and belong to speech communities», «there are kinesic (body motion) 'languages' and 'dialects' which are learned by culture members just as speech is learned» (Birdwhistell in Hanna, 1979: 5). Dance is a physical and embodied form of interpersonal communication with its intensive physiological processes, and psychological concomitants.

The lost functions of changing dance practice and social activity may be conquered by health psychological activity or even by medical efforts. In my fieldwork, I am searching for these functional aspects of non-ritual popular dances in everyday life, analysing the practice, traditions and narratives of dancers. As singing is tightly attached to dancing, the researcher's interest must extend to singing as self-healing and self-expression with latent coping functions too.

In fieldwork, I have paid particular attention to the environment of dances and their cultural-bounds. These dance fashions may form different "body-speech" communities to be explored by social anthropological methods. Dance communities are examples of universal medical anthropological problems like embodiment of cultural values regarding health and risk, coping with problems of life style poor in physical activity, fitness, emotional distress, or daily hassles. Distorted coping styles such as drug use among dance communities is discussed involving the "drug role" of dance in altering mood, and consciousness.

Our medical anthropological approach can be extended to the level of the social body, to deal with dance and cultural bereavement in the case of emigrants and ethnic minorities, difficulties of mating behaviour in urban setting, shyness, and sociophobia. Social support is thought to be a crucial factor in health protection, which is sustained, by being member of emotional communities like religious groups and dancing communities. As traditional children's games and couple dances are useful in developing social skills, it is not surprising that we find that they are used to educate mentally retarded children and even to rehabilitate depressed or schizophrenic patients.

Methodology

This multi site fieldwork research was carried out between March and August 2000 to compare traditional, structured couple of dances like salsa and folk dances of the *táncház* (dance-house) movement in different cultural contexts. The research on Salsa took place in Oxford and San José. The research on Hungarian folk dances took place in London at a *Dance House* held by British dancers familiar with Hungarian folk dances in Spring 2000; in Hungary, in the *Dance House Festival*, March 2000 and in consecutive summer dance camps: in the Jánosi Ensemble's Village Camp at Bodajk; and at dance camps in Kalotaszentkirály (Sincrai) and Válaszút (Reascruci), Transylvania, Romania. Interviews and fieldwork regarding dance therapy were carried out in Bristol, Budapest and Szeged.

Further fieldwork was based on self-analysis, short visits, focus groups, interviews and video documentation of dance practice and the environment. The research contained experience gained by participating in the life of the dancers living together throughout the duration of the camp.

Although it is usual to make video recordings of the performances at these camps, permission for the research was always sought from the organisers and, of course, from all the informants. The interviews were taped using an Olympus Pearlcorder S710 and the dances and environment were documented using a Panasonic SVHS handycam, as a source of photographs as well as grabber and computer technology. Participant observer behaviour included the learning and practice of dance as self experience. We asked people for their permission to interview them on every occasion; permission to tape was refused in two cases.

The analysis of dancers' narratives enabled us to compare different dance experiences in different cultural contexts and settings. The categorical-content reading (Lieblich 1999) of the transcript interviews supported our hypothesis about the health-related contents of dance (see Appendix).

Dance with drugs

Music and styled youth cultures are collective expressions of generations. The lifestyles surrounding these dances can be niches in which drugs are consumed. The leisure rituals attached to different subcultural groups carry risks of drug use, or dependence on other forms of coping distortions such as plug in drugs among those who seek adventure at home, thus developing dependence on electronic or video games, and video screens. The health

risks of drug abuse and lifestyles, which lack essential body training, are obvious and well documented. It is important to consider whether these dance and music centred lifestyles offer protection from these health risks, or whether they generate other risks as well.

Some forms of trance or drug use often accompany ritual forms of dances. In this sense, the dance fashions of the sixties showed neo-primitive features. Psychedelic drugs like LSD, or mood modifiers like marijuana, came into fashion in the sixties and were used during dancing activities.

Our subject can be classified as one of the music and style centred youth cultures attached to given social spaces (Bennett 2000). We may compare the so called *táncház* (Dance House) movement and the salsa dance fashion to other «music and dance worlds» such as the set dance revival (O'Connor 1997) or contemporary dance (Finnegan 1989) in lifestyle frameworks containing health issue features.

In Hungarian youth subcultures, shaped and differentiated by the music they select, drugs of some kind are not rare even among secondary-school students. Magda Szapu (2000) conducted research at schools in Kaposvár, and she differentiated seven music based subcultures: rock based groups like skins, metal rockers, rappers, punks, disco fans, ravers, and house fans. The dance of each of these groups has something common with that of the others.

As Ward (1993) describes, these dances have lost their couple pattern. The traditional grammar of dance-language has vanished. It started with the mods in the late 1960s, but the same features are also typical of the punks, skinheads, and heavy metal rockers. Taylor writes: «Skinheads are great dancers ... but never with a girl, always either alone or with other skins.»

The heavy metal "idiot dancers" always dance together; punk dancer couples are the same sex without physical contact (Ward 1993). The techno and acid rave dances are solitary or which is the same thing mass group dancing forms. In disco dancing, neither sex is required to guide the other in a specific sequence of steps.

Magda Szapu has explored some of the differences in drug use among these groups. Skins refuse drugs that cause addiction, but use alcohol (beer) for mood modifying. Rockers accept the use of marijuana, while punks inhale cheap organic solvents. In the subcultures based on pop music, it is striking that girls are heavy alcohol consumers, something which induces more explicit, challenging sexual behaviour. The rappers imitate the Harlem ghetto lifestyle, and use drugs and alcohol. The techno rave orientation is accompanied by the use of Ecstasy. Speed drugs are always available on the

market. The source of drugs is mainly The Netherlands and the subcultural drug dealers work in wide networks. The subculture based on the "house" style is thought to be the most exclusive; among its members, it is not rare to use cocaine. It is very interesting that although there are two professional folk dance groups in the town (the Kapos and the Somogy dance group), they were unable to form a working *táncház* in the schools of Kaposvár.

An issue of class gender, education, income, and civic status influence lifestyles, but the orientation towards entertainment seems to be determining. The audience for acid rave techno music acquired the title "chemical generation", signifying a more contested uses of drugs. As Bennett writes: «The ensuing association of house music with Ecstasy resulted in the coining of the term acid house by media journalists who immediately saw comparisons with the psychedelic movement» (Bennett 2000). As mentioned in Szapu's research, this techno house, DJ-based music and dance music reached Hungarian youth cultures in the 1990s.

The acid rave dance and the house culture create a sharp contrast, a counter-culture compared with the practice of the *táncház* (dance-house) folk revival movement. The typology of ravers includes high-tech dependence, use of Ecstasy, altered states of consciousness, "being on the edge", freestyle undifferentiated dance, cult of madness and cyborgian, and undifferentiated mass like sociality instead of couple relationships. On the other hand, according to our interviews, the *dancehousers* prefer "natural", folk fashion clothing; traditional structured couple of dances and men's dances, rejection of drugs, heterosexual couple of relationships, and a small-scale social setting. The *táncház* movement has some similarities with the almost 20-year old movement for revitalized Irish rural dances, which resemble set dances (O'Connor 1997). We will explore how revitalisers of the tradition have hidden access to the psychological help and bodily support offered by revitalised culture as a homeostatic system.

«To fly with easy body to the Promised Land without dying» Dance as drug: addiction to salsa and csárdás

The Guarani Indians describe dance as flying to the Promised Land. It is an expression of the altered state of consciousness induced by dance.

Even dance without drugs can be a means of achieving a trance, promoting dissociation and causing a pleasant experience leading to autohypnosis and ecstasy (Lange 1975). The experience of shamans in ritual dances is

usually exaggerated by the use of drugs or psychedelic substances, such as peyotl among Mexican Indians and some of the North Asian peoples (Rouhier 1927).

Salsa is part of the global dance culture as a kind of antithesis to the less structured, individual dances. Salsa is a sort of lingua franca in Central America, as a Caribbean dance of Cuban origin, while Costa Rica's national dance is the *merengue*. Most of the Costa Rican youth do learn salsa, one-third in dance schools, the others through imitation and collective learning. The basis of salsa clubs is formed by little groups of these trained dancers. Every couple has their own style during the dance. The real dance fanatics dance all night. Those people who join for a few hours are not considered real *salseros*. The organisation of movement is an improvisatory variation of a wide range of rolling and turning with the expressive rhythmical movement of the hips built up on the basic salsa steps.

Elena, a 21-year-old student, talks about the meaning of salsa in her life in San Jose. She goes out with the young manager of a little hotel in the city centre. According to her, *salseros* never use drugs, but salsa may be a drug itself, if somebody takes it in "big-enough" doses. She can dance all night, leave the dance floor and go to work. She considers herself a real salsa addict, but salsa is not only a drug, but also a medicine for her. When she has a bad mood or depressing thoughts, dance can help. Dancing is a real therapy. She can cope with difficulties by dancing, not drinking or smoking. Dancing improves her self-esteem; it is a kind of security and support and of course makes her physically fit as well. When she goes dancing, she forgets about everything.

If she cannot dance, it is a terrible feeling, and she gets desperate. If dance were forbidden she says – she would kill herself. She doesn't like to dance only a few hours, she prefers bigger doses: a whole night. Dance for her is really like sex. After a whole night's dancing, she lies in bed and feels that she is in paradise. She couldn't live without dance, and she thinks it is the same for most young people.

This feeling is not expressed or emphasized in precisely this way by the Oxford students, but they also support the view that salsa is good for the health.

Rebecca, a 19-year-old student says:

> *«You feel quite happy at the end of the dance. Salsa is a nice break from anything academic at all.»*

However, as a non-regular dancer, really a beginner who is not properly fit she feels stiffer than relaxed next morning. If she is not allowed to dance,

she soon gets uptight. Marco Antonio, a student from a Latin family background, helped the Japanese dance teacher to teach Salsa. He emphasizes that dance is his life. Salsa is a basic physiological need.

Turning our attention towards the Hungarian folk dances that have been revitalized in the Dance-house movement, we can also hear positive reports about the health maintenance and mood modifier functions of dance. These dances are traditional couple dances in suitable settings with slow and fast forms, a wide range of self-expressivity and a rich communicative "vocabulary".

Even these traditional couple dances can be sources for altering consciousness. Bodo 48, the German male dancer from Hamburg, told me in the Válaszút camp that the "palatkai dances"of the Mezség region could induce a kind of meditative state. These data are supported by other observations that dancing can lead to an altered state of consciousness (with changed physiological patterns in the frequency of brain waves, adrenaline and blood sugar) and hence to altered social action. (Hanna 1987, 1988)

Mónika is a student, aged 21, studying at the Vilmos Apor Catholic Teacher-Training College. The dialogue was recorded at the Válaszút Dance Camp in Transylvania.

> *«If somebody forbade dance, I would certainly die. I can not imagine life without dance*,» she says. «*I can dance a whole night without feeling tired. There must be physiological reasons.*»
>
> «*You can see the healing effect of dance on the smiling, happy faces. The other benefical effect of folk dances is exerted on the posture of the dancers. Their bodies express pride, happiness, and self-esteem. The melancholy is extinguished from their faces and from their bodies when the joy of dancing fills their souls*.»

If dance induces dependence and addiction, it may be called a drug. However, another contributor to the discussion, Barna, points out: «Dance is a drug if water is a drug too. Clean water is a basic need, too, accompanied by dependence.»

It is worth citing some opinions from a focus group session that took place in the Válaszút camp with a Canadian dance group from Calgary consisting of second generation youngsters with a partly Hungarian family background. They hold a "dancehouse" for Hungarian folk dances every second month. They all had the same blue shirt with an amusing inscription with some ironic medical anthropological relevance to it: «Our drinking group has dancing problems.» They revealed the mental health content and the social psychological gains, as these dances can heal alienation and loneliness, stop the feeling of isolation.

One girl in the group said:

> *«I think dance just gives people something else to do instead of – you know – going out with their friends and doing drugs or whatever. It gives you some kind of different togetherness.»*

They consider dance an alternative to drug uses. She describes her dependence with the phrase *«itching to dance»*; when she feels it, she even dances in her kitchen.

Some members of the *Tánckör* agree with the concept that dance shares properties with drugs, too. *«Yes, dance is a drug, and if somebody becomes accustomed to it, and feels what its effect is, she cannot stop.»* However, it is a social drug.

The members of the *Tánckör* use the metaphors «up», «elevate», and «to go upwards to spiritual dimensions». In their judgement the main difference between their kind of dance and disco dance is that disco dance doesn't elevate the soul; rather it pushes it down to selfish narcissistic existence and to the instinctual.

They deny that there is an analogy between house or acid-rave dances and the dance of shamans, because the shaman uses drugs and dance for the sake of the community. They consider house parties to be rather a covert market for drug dealers – the more dancers, the potential consumers. Dance and music may represent the same destructive force. The house or acid-rave dancers – according to the opinion of *táncház* dancers – dance for themselves without seeing, hearing or touching the other person, the partner. These *táncház* fans reject techno music as something, which plays a role in deconstructing the social and spiritual content of the dance, while folk dances elevate and enrich.

Members of the Vadrózsa group consider that learning several Hungarian folk dances is a kind of psychic progress. It is worth citing some opinions from a focus group session with a Canadian dance group from Calgary. They are second-generation youngsters with a partly Hungarian family background made in the Válaszút camp:

> *«You have a motivation there to strive to be better. Therefore, you can improve yourself by coming to a dance camp and learning how to do a specific style better. And I guess it is itself a drug when you strive to do better.»*

There is another psychological aspect of variety. There is a large repertoire of dances. They don't think that drinking and dancing are incompatible. Both drinking and dancing are social things.

Dancing, helping and healing

Dance is a way of communication, which can bridge the borders built up by verbal incongruence. For mentally retarded children and adults, music and dance can offer ways for social integration.

In the Bodajk dance camp run by the Jánosi ensemble, there are whole families. Many children participate in the children's plays in the evening, singing, dancing, and being happy together. One thing is striking: a third of them are mentally retarded; there are autistic children and sick children. Nevertheless, they play together. While the band is performing, a young man plays in line with the musicians. He is retarded too, but plays the same way on his toy violin made by his teacher.

These groups of mentally retarded children from the Martonvásár Institute return year after year to the Bodajk camp. The teacher of the mentally retarded children says:

> *«In the second and third year, the healthy families greeted these children as if they were their very old friends. This was expressed in the children's dance. In the first year these children only danced with each other. However, at the end of the second year they became brave enough to dance with "healthy" children, too. This year as it became obvious in the evening they opted for their healthy friends more frequently. The distance was deconstructed, and the healthy friends began to feel compassionate without feeling sorry for them.*
>
> *The natural music, the rhythm and the pulsating, renewing life of the camp, the plays and the work are very beneficial for these mentally retarded children. What I learn here is really transferable to my work in the Institution.»*

These children learn the elementary forms of working; they like the natural materials. During my fieldwork, I met other experts applying folk dances in their work. Szilvia Szke, mother of two children, attended the Válaszút camp with her sons and her husband, who is a surgeon. She worked as a teacher with mentally retarded children in Tata. Of the 120 pupils more than 10 per cent (15 20 children), mainly girls, attended her fun folk dance programme. The decision to join the programme was either theirs or their parents. At the beginning most of the pupils were 6 8 years old, after 5 years some of them remained faithful to the course, so the number of older pupils grew.

After some years musical skills, singing ability, gestures, posture were examined by tests, which proved that folk dance had an effect on the education of these mentally retarded children. She taught the children plays, games, circle dances with rhymes, and later simple dances, mainly the Dunántúl Jumping Dance (*Ugrós*).

The games and circle dances improved the community; co-operative skills diminished aggression and shyness, improved assertiveness, and enhanced

sense of control over personal behaviour. Children with slight retardation responded better.

After some initial resistance to the old-style language, the children were influenced by the texts of the folk songs and began to love their poetry. They sometimes even used the words and idioms.

She thinks that co-operative skills and empathy – as a hidden presence in the dance – developed in some of the retarded children. Obviously – she says – the longer she taught a child, the greater the effect. She is very proud of the fact that after 7 8 years pupils still remembered her dance courses with enthusiasm.

I met Ágnes Tálas in the Kalotaszentkirály (Sincrai) dance camp. She talked about her experience of teaching children's games and folk dances among retarded children. She worked with young children in the School for Mentally Retarded Children at Száraznád street, Budapest, and older children (between 14-20) at the ÉNO (Day School for Retarded Children). As she remembers, the results were excellent. The games and dances were really sources of joy with immediate effect. The teachers of other subjects spoke of the good effect they had on the children's openness and development.

The Calgary Vadrózsa group mentioned their experiences of performing in a hospital setting and in several old folks' homes. They danced in the Alberta children's hospitals, and other such places.

> *«In an old folks home sometimes this is the only excitement they get. This is sad. When we arrive, they are so happy, because they can experience excitement and joy. Sometimes someone comes up to us, saying – as they are Hungarian they used to dance these dances when they were young and they are so happy that we are keeping the tradition alive.*
>
> *When we perform in a hospital, we do the same as we do in an old folk's home. We introduce the dances and do a couple of dances and then take a walk around and talk to the kids in the hospital. You just spend time with them in the costumes. It gives them a chance to see something totally different they've never seen before. Lots of kids are in the hospital because they are very sick, or terminally ill or something like that. So it's very nice for them, it makes them happy.*
>
> *They cannot participate, most of them are in wheelchairs, or some of them are bound to machines. [...] The fact that we are invited back year after year says a lot about the effect. Moreover, we see their smiling faces. The children feel joy.»*

Dance as medicine, dance as therapy

Éva Kun, wife of a member of Muzsikás folk group, mentioned that a decade ago, in Bristol, in an alternative cancer therapy centre some Muzsikás music had been used for the therapy of oncological patients. At that time,

Beata Bishop, a Hungarian psychologist, had worked with some of the employees of the centre.

Márta Sebestyén confirmed this when I asked her in London, at her Concert at the Hungarian Cultural Centre in Maiden Lane. Unfortunately when we visited this Bristol Centre we could not find those who had applied folk music in therapy, but on the menu of advised alternative therapies we found advertisements for dance groups and the Biodanca programme as well.

Dance and movement can be used as a medium for diagnosis, treatment and intervention, bridging creative expression with psychological theories. This form of psychotherapy uses movement as the medium of interaction and personality change grounded in the healing processes of dance (Schmais 1985).

According to Chace's definition, dance therapy is «a specific use of rhythmic bodily action employed as a tool in the rehabilitation of patients». The dance therapist combines verbal and non-verbal communication to enable a patient to express feeling, to participate in human relationships, to develop empathy, to increase personal self-esteem, to develop a more realistic concept of his body image, and to achieve some feeling of relaxation and enjoyment (Chace 1975:144). The key in this therapy is that personality is reflected in movement, and the larger one's movement repertoire, the more options individuals will have for coping with their own needs and the demands of the environment (Lewis 1972). The Kerstenberg Movement Profile (KMP) offers a comprehensive tool for movement analysis and diagnosis and treatment planning as it synthesizes non-verbal behaviour with psychological theory and interpretation (Merman 1990). KMP describes an individual's status of developmental functioning, movement preferences, areas of psychological harmony and conflict and ways of relating to others. It is the key for the analytic approach when dealing with human dance and movement.

However, KMP is also a sensitive system of notation, which can describe the non-verbal aspects of human interrelationships.

Hungarian dance therapist, Márta Merényi emphasizes the importance of bodily consciousness, and imaginative kinematic improvisations in the therapeutic process (Merényi 2001). Her explanatory model integrates biopsychophysiological, psychoanalytical and cognitive factors in a psychological framework. The theoretical interest turns towards the transition from the holistic complex, non-verbal experience to the verbal, conscious interpretation. The distortion of space perception may be an important symptom of anxiety, and neurosis, especially in phobic forms. Dance therapy

can transform and regulate the client's space experience, which induces the intrapsychic processes as well.

Psychiatrist Éva Madarász, 35, works at St. Imre Hospital, and has had experiences both with folk dances of the *Táncház* movement and dance therapy.

> *«I attended a course called "body-mind centering", a meditative therapeutic method with enhanced interoception, sensing one's body, respiration, body temperature. Based on this you try to express your feelings. Unlike gesture therapy this is a very unstructured, improvisatory thing. There is music, you are given some examples, and then you can do it freely. We worked in groups. With your eyes closed you had to feel how the others moved, it developed a sort of kinesic empathy. But I gave it up after a year, because there was no feedback. After a year I felt lonely, just the opposite to my dance-house experience. In Táncház I felt a sort of "a priori" acceptance.»*

> *«It is hard to explain, but from the very beginning you feel you belong to the community, and you can feel the effect of music and dance on many different levels. Visceral, acoustic and social, personal and collective.»*

In Éva's narrative the acceptance of the person and the "we" experience of community feeling gains importance.

> *«This aspect of acceptance is very important in Rogers' psychotherapy, mainly for those who have a basic trauma in their mother-child relationship with deeply anxious contents. These people gain by this community experience of acceptance. It is better for them to strengthen their Self in community experience, and later they may become enough strong to start individual therapy. The Táncház experience offers this. The mind-body centering course had a different logic and I lacked the trust at group level.»*

> *«The folk dances are very disciplined emotionally, and rich, just the opposite of the libertine freedom of disco dances. Working up destructive forces, or coping with the aggression, can be preliminary to building up the personality. Folk dances may help in this too. I don't know whether the female dances do it, but the males' dance is an obvious framework for this. Sometimes shouting rhymes and turning around faster and faster can be an outlet for the girls, too.»*

> *«The patriarchal asymmetry between genders in folk dances performed in the world of gestures, postures, and choreography may be a source of a hidden need of behaving in traditional ways, which doesn't hurt the everyday constraints and expectations towards dominating gender roles. It can be complimentary or compensatory as well.»*

> *«In dance I was not a person to be led, maybe because of my dominant style as a Doctor, or emancipated woman. However, I wanted to be led, to be directed and I was happy to see that it is possible. If it works, it can work in me too. It helped me to be more spontaneous.»*

Generally, folk dances are not part of the circle of dance therapies, although they have therapeutical value. Like the symbolic healing of primitive cultures, folk dance cannot be medicalized easily. For therapeutical use, you must extract the content, like you do with ethnopharmaceuticals.

There is no need for rituals or beliefs, just for chemical content.

Psychiatry uses progressive relaxation, sociodrama, catharsis therapy, and trauma disclosure, encounter training, kinetic elements. Although folk dances provide some of these, they resist medicalization. It seems that medicalisation needs an analytic framework to create an interface between dance and medical explanatory models. KMP does it for dance/movement therapy.

According to Éva Madarász, folk dances *may be part of group psychotherapy, as a complex cultural process in healing groups of drug patients.* There is an exceptional example of healing with folk dances, which proves the value of this suggestion.

Zoltán Pet, head of the Institute of Neuropsychiatric Rehabilitation at Szeged University gives an overview of the healing function of folk dances practised in therapeutic groups of depressive, schizophrenic and other psychiatric patients. The archaic rhythms and elements of the folk dances help to solve psychomotor inhibition and develop communicative skills. Dr. Pet emphasizes the emotional influence and collective functions of folk dances in healing while dance and movement therapy offers rather individual and cognitive means.

Closed, inhibited emotionality can be opened, and emotional resonance can be developed by therapy based on folk dances. Dance therapy enhances the ability of listening, and improves disciplined behaviour. The sociotherapeutic content of folk dance therapy includes effective group forming, the enhancement of the "we" experience. Dance therapy is part of a wider art-therapy based on a folklore heritage that includes weaving, sewing and painting. Some of the patients' artistic products can be seen on the walls of the room that is 10 × 8 meters big. A big three-piece mirror helps to give patients an idea about their own movements and dance skills. The dance session is scheduled on Tuesdays, Thursdays and Fridays from 11 to 12 am. Participation is not compulsory, but every participant is involved in common dance. The number of patients varies from 12 to 25.

The session starts with relaxing gymnastics and attainment to the music. As Edith, the dance therapist describes the patients dance in circles. It is impressive how blind patients happily dance with the others. Marika, a patient suffering from deep major depression, showed elementary response to dance therapy. She sat for a little while, then joined the circle. Her transformation was striking. She said at the end of the session. I haven't listened to music for a long time but now that it has come to my ears, I can hear it again. The whole group showed compassionate joy when they heard

Marika's words. The patients have proved the effectivity of folk dance therapy, because it has now been practised for more than six years.

Concluding remarks

Exploring the narratives of our informants, we can reveal the role of dance in creating better mood, joy, fitness, better living and social support, all of which are health promoters. On the other hand, some forms of dance are attached to special lifestyles and distortions like drug use, smoking and drinking and may be clustered in some youth subcultures.

The embodied and lived culture mediated by dancing creates movement communities that are not bounded to their language-limited communities. The transcultural attraction of these dances can be discussed because of their adaptive value. The cultural experiences of gender, community, health, coping with stress and emotional strains and way of life, all embodied in folk dances and in salsa, may gain medical anthropological significance.

Dance is a way of expression, self-experience and communication, which can bridge the Cartesian gap between embodied and logocentric representation of the social and cultural environment, and offer insight with healing potential.

Although folk and popular dances have health-related importance, they are not generally part of dance therapy because there is no analytic theoretical interface with biomedicine unlike mind/body centering, or dance and movement therapy. These dance therapies have their background in psychoanalytic developmental theory, and have a diagnostic/analytic tool in the Kerstenberg Movement Profile. Cognitive theory and psychophysiological frameworks may be integrated into this approach too. The psychophysiological, etic analysis of contemporary or traditional couple dances may substitute these missing theoretical elements. The social and cognitive psychological aspects offer further insight.

The personal experiences and the exceptional therapeutic use of folk dances described above prove the health-related effects and the medical applicability of couple dances. The medical anthropological approach can explore the process of medicalising cultural topics like dance, on the one hand, and help bring dance closer to medical discourse, on the other.

Appendix

Narrative analysis in categorical-content perspective

Health-related cluster

Principal sentences	***Category***	**Comments**
«In song it's not the voice but the soul that stretches its limbs.»	*emotional outlet*	the singer is conscious of the psychic functions of singing
«Under the beautiful sweeps of song tension, we don't feel that the soul is struggling, that singing is coping but that the heart is growing lighter and freer.»	*release*	consciousness of choice
«With these songs it's not tradition that we cultivate, but ourselves.»	*not only cultural, but psychic needs*	consciousness of self-help increases during singing
«Music and song were not just aesthetic values, but human and even bodily values too.»	*embodiment of culture*	Kodály expressed his experiences while he collected folk songs
«Why did God give melody and song to Man? To put us in a good mood and not to be sad. Because if we're sad nothing will come of it, we may just fall ill.»	*emotional coping*	implies tacit knowledge
«I sing more in my grief than in my joy.»	*emotional coping*	self reflexivity regarding coping
«People sing to push their sorrow away.»	*emotional coping*	
«Song: I forget sorrow and fill my heart with joy. I fall into a dance and cry out in happiness.»	*emotional expression*	
«Song is love of the soul. Song is like a health tonic.»	*emotional coping*	
«Singing is a comfort to the body.»	*self-regulation*	expressions of bodily experience
«You open your mouth, lift up your hands, and tell of your life in song.»	*trauma disclosure*	realised connections between life events and expressions
«Dance helps to release of tensions.»	*Release of tension*	
«It is a source of joy and good moods, which itself is a health promoter.»	*mood modifier*	
«Experiencing destructive force, or coping with aggression can be preliminary to building up personality. Folk dances may help in this too.»	*coping with aggression*	psychiatric aspects of dance expressive behaviour
«It is recreation in the noblest sense. Recreation sounds like games and sports, but this elevates us more.»	*recreation*	

Segue

Gender-related cluster

Principal sentences	*Category*	Comments
«But soon I realised that in these groups the men were more man-like and the girls more girl-like.»	*socialisation of gender roles*	contesting traditional gender roles
«It is the experience of being a woman 100 years ago.»	*tension between changes in gender roles of society and tradition*	awareness of conflict
«Dancing folk dances was very important to become a woman. I started to feel the real meaning of being a woman after experiencing it in dance relationships.»	*socialisation of gender roles*	Implicit contest of traditional femininity
«These roles are still not deconstructed. It is clear what the task of a boy is and what task of a girl is, what is playful, serious or enriching.»	*socialisation of gender roles*	contested patriarchal conservativeness regarding gender roles

Ethnicity-related cluster

Principal sentences	*Category*	Comments
«The táncház dances made me really Hungarian»	*dancing and singing as*	Ethnic socialisation
«We'll be Hungarian as long as we sing and dance Hungarian»	*creators of identity*	Dance as therapy for cultural bereavement

Drug-related cluster

Principal sentences	*Category*	Comments
«My wife said that mez? ségi dances may induce a kind of meditative state.»	*dance as inducer of ASC*	
«Dance is a drug if water is a drug too. Both create dependence.»	*dance as a vital need*	denying the drug role of dance
«Yes, dance is a drug, and if somebody becomes accustomed to it, and feels what its effect is, she cannot stop.»	*quasi-drug effect of dance*	acceptance of the metaphor regarding the drug role of dance
«Salseros never use drugs, but salsa may be a drug itself.»		

Therapy-related cluster

Principal sentences	*Category*	Comments
«The natural music, rhythm and the pulsating, renewing life of the camp, the plays and the work are very beneficial for these mentally retarded children.»	*therapy of mentally retarded children*	pedagogy as therapy
«Rural work exhausted the people physically in a way which had to balanced by another physical activity.»	*physiotherapy*	extended view of therapy
«Working curved the countryman's spine, dance straightened it out.»		

Segue

Principal sentences	*Category*	Comments
«Moving heals problems caused by other kinds of moving, just as in medicine, where the stiff parts of the body are healed by physiotherapy.»		
«A lot of kids are in the hospital because they are very sick, or terminally ill or something like that. So it's very nice for them, it makes them happy. »	*mood modifier role of dance as healing*	
«When drug patients need a whole cultural alternative, folk dances can heal.»	*dance as cultural therapy*	

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