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Our new dilemmas column



BAD KIDS

Turning lives around

PLUS...

Irina Baronova – stories from a life
Ballet in a box
Edmund White on Nijinsky
Did Harlequin abolish slavery?

ROYAL ACADEMY OF
DANCE



In this issue...

The Royal Academy of Dance® exists to promote knowledge, understanding and practice of dance internationally. Our 13,500 Members around the world are the lifeblood of the Academy and enable us to carry out our mission.

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ROYAL ACADEMY OF
DANCE

What were you like as a child? A treasure, a handful, or a liability? I was always a quiet kid – sitting with a book in the corner, too shy to get into trouble. Quiet isn't always an option: many children don't have the chance to flourish as they would wish, and struggle at home or school. Astonishingly, dance – even strict classical ballet – can come to the rescue, and our cover feature explores its inspiring impact on complex behavioural issues.

The ballerina Irina Baronova had an equally remarkable childhood: just read our extracts from her autobiography. We introduce a packed membership section called 'Your Academy,' and I'm thrilled that you have sent us more letters and emails than ever before. *dance gazette* wants to be part of your conversation, so come and speak to us. (I'm the quiet kid in the corner...)

David Jays
Editor

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Anders Porter reports on a pioneering Swedish study helping hyperactive boys through dance therapy

Wild child no more

Bardi Jonsson was first made aware of the possibility that his son might suffer from Attention Deficit Hyperactivity Disorder (ADHD) when the boy was in pre-school. 'One of the staff members mentioned to me that Oskar was exhibiting behaviour that she had previously seen when working with children at special-needs schools,' recalls Jonsson. If Oskar wasn't running around the room, or sitting under a table, he was fighting with the other children. He could not sit still and had extreme difficulty in group situations.

For guidance, Jonsson turned to the division of Swedish social services that focuses on psychiatric assistance for children and adolescents (Barn-och Ungdoms-Psykiatri, or BUP). To his surprise, dance therapy was suggested as a possible treatment. 'BUP admitted not knowing much about it,' he says, 'but they recognised the potential of dance therapy as a treatment for boys with ADHD and thought that Oskar could benefit from it.'

Meanwhile, Erna Grönlund and Barbro Renck were screening boys and looking for participants in what would be a groundbreaking study. Grönlund, a professor at the University College of Dance in Stockholm, and Renck, a senior lecturer at Karlstad University, were in the planning stages of a research project that would aim to highlight and document the possible benefits of dance/movement therapy for boys diagnosed with ADHD. The two ardent academics met several years ago after a lecture that Grönlund gave. Within minutes, they were eagerly discussing the fact that, although dance therapy had been used worldwide to help children with other physical and emotional handicaps, its effectiveness as a treatment for children with ADHD had not been tested or documented. Now it has.

Oskar is one of six boys who took part in the study, conducted at the Child Guidance Clinic of Karlstad, in central Sweden. The boys ranged in age from four to seven and had all been diagnosed with ADHD. Oskar's therapy lasted a total of three school terms. 'I started with dance therapy because I needed to run around a bit,' recalls Oskar, now 11. 'I also had a hard time focusing in school – I was falling behind and couldn't catch up.'

About 50% of children who suffer from ADHD have some sort of motor dysfunction (according to Russell A Barkley, a leading authority on ADHD). The study conducted by Grönlund and Renck suggests that this



On the way to success... left to right, Oskar Jonsson and researchers Barbro Renck and Erna Grönlund
Photos: Anders Porter

dysfunction can be potentially alleviated and reduced through regulated, structured dance therapy. The sessions were held once a week and were led by two certified dance therapists. Each meeting consisted of an assortment of dance exercises and movement games. These activities were adjusted and altered regularly in order to meet the changing dispositions of the participants. 'Dance therapy works so well because the sessions are customised to suit the needs of the patient,' explains Renck. 'The whole process is goal-oriented.'

I started with dance therapy because I needed to run around

The exercises were designed to encourage and build self-control and self-esteem, as well as develop and enforce better motor skills. 'Many children with ADHD have a poor self-image, often something tied very closely to weak motor skills and a sense of awkwardness,' says Grönlund. 'They don't get to play with others and don't even want to try. They are afraid of failure.' Dance therapy works to strengthen this sense of self-image by encouraging patients to try. 'Every time a child tries and succeeds, his sense of self improves,' states Grönlund. 'He also benefits greatly from failing while on the way to success.'

To help to introduce a sense of structure and familiarity, each dance therapy session began and ended in the same way, even if the activities in between were varied. 'As diagnosed, the behaviour includes fear and chaos, which is why regular, ritualistic movement is so beneficial,' says Grönlund. 'As the children became more and more

comfortable, their desires and actions tended to steer the course of activities, but not the start or the finish of each session. Those remained unchanged and therefore recognisable to the children.'

Each day ended by reading a story while the participants received a back and shoulder massage. This was always followed by a period of reflection and discussion, when the children were encouraged to openly examine their feelings and bring up any problems that they might be experiencing. 'I really liked the quiet time at the end,' Oskar mentions. 'It was nice to have a relaxing time after running around and dancing.'

Oskar was proud that he had his own thing. Dance therapy was his time

Whether working with only one or two children (Grönlund and Renck deliberately kept the groups small in order to provide more than adequate attention), the same two dance therapists were always present. This assured that the children and the therapists would get to know each other well and that the children would feel comfortable expressing themselves, whether through movement or words. This closeness seemed to create an optimal environment for expression and growth. Oskar recalls, 'it was easy to get to know the dance therapists. It did not take so much time, and their words have stayed with me. I miss them very much.'

Establishing a sense of confidentiality for each session helped develop self-esteem and pride. Parents were not allowed to watch or take part, and participants were assured that their dance therapy time was private, that it

was their own. Only when the study concluded were parents shown video clips of the sessions. Bardi Jonsson remembers that he did not discuss the sessions with his son. 'Oskar was proud of the fact that he had his own thing, his own secret,' he says. 'He was doing better in school and at home, so we didn't talk about it. Dance therapy was his time, and we honoured that.'

The two researchers were obviously not only interested in results from the process, as expressed through video observation or interviews with the boys and their parents and teachers, but in the quantitative findings as well. In addition to using an original self-designed socio-demographic questionnaire, Grönlund and Renck implemented the Strength and Difficulties Questionnaire (SDQ) and the Movement ABC Motor Test (ABC). These tests were given to the subjects before therapy started and again at the end of the study.

The SDQ is a behaviour screening questionnaire that helps measure attention deficiencies and hyperactivity. The boys showed improvements in one or more of the test sections for four of the six subjects. The ABC test is used to judge motor skill and function in children between the ages of four and 12, using activities requiring manual dexterity, ball skills and balance. All of the boys showed improvements in this test.

One very important aspect of the study is that Grönlund and Renck are careful not to suggest that dance therapy can or should always be used as a stand-alone treatment for boys who suffer from ADHD. While the effects of dance therapy on the subjects were positive, the complexities of the disorder often require a well-structured combination of treatment methods in order to make significant progress. 'Dance therapy is not necessarily meant as a substitute for other treatment methods, but as a possible complement to them. Each case is very different and prescribed treatment should be well-thought out and should cater to the specific needs of the patient,' says Renck.

Some children benefit from dance therapy more than other treatment – even school

As far as long-term results are concerned, follow-up contact with parents suggested that continuing dance therapy, even if on a less regular basis, might have been in the best interests of some of the boys. Grönlund and Renck conducted interviews with the parents one year after therapy ended. For the most part, while the parents had noticed a significant reduction and/or manageability of ADHD symptoms, some lack of concentration and social problems had begun to resurface.



Quiet time... Oskar Jonsson
Photo: Anders Porter

Now, two years after Oskar completed dance therapy, he has again started to exhibit classic signs of ADHD and began taking a mild amphetamine preparation. His behaviour does sway slightly – one moment he pulls shyly at his t-shirt as he attempts to formulate his answers, and the next he stands to attention, singing a song that he recently performed solo in front of his entire school. While the medication helps to curb Oskar's hyperactive tendencies and wild emotional impulses, his father is quick to voice his support for dance therapy.

'The best thing for us would have been if Oskar could have continued with dance therapy, even if just now and then,' says Jonsson. 'Some children, and Oskar is one of them, benefit from programmes like dance therapy more than they do from other treatment methods, or even school. His up and down swings these days are far less dramatic than they once were, and I attribute that to his participation in this study.'

Dance therapy is good for children like me – they can learn what I've learned

Grönlund and Renck are hopeful that this study will spark enthusiasm in mental health professionals about the benefits of dance therapy. 'We look forward to the possibilities of conducting similar international studies in the future together with other European countries,' says Renck.

Oskar cocks his head thoughtfully and squints a little as he reflects on what this process has meant to him. He recognises and appreciates the impact that dance has had on him, and wishes that other children might have the same opportunity. 'I think dance therapy would be good for other children like me, because they could learn what I have learned. I have learned to calm down and I know better how to start and stop. I am not as wild as I was before.'

Jenny Jones offers her top tips for working with disruptive pupils

Choose your battles

- Choose your battles. If you fight every infraction of the rules you will always be in conflict. Fight the important and winnable ones.
- Praise good behaviour in them and in their peers. For some pupils praise comes as quite a shock but almost everyone loves being praised eventually.
- Find something about them that is interesting. Perhaps they are passionate supporters of a football team or a specific band, or maybe they are a budding fashion designer. Be interested, but don't ever pretend to know about something you don't – they will catch you out.
- Treat every day as a fresh start. Don't come to a pupil expecting bad attitude or conflict. If you are already on the defensive they will sense it.
- Know your weaknesses and be aware of things that may cause you to overreact. Pupils enjoy a big reaction and can be very adept at finding the right buttons to push.
- Avoid confrontation in front of other students. A crowd may cause them to act up to avoid losing face in front of their peers. Try to discuss problems with them individually to give them space for manoeuvre.

Jenny Jones is Manager of the Reading FC Study Support Centre

Have you ever taught so-called 'difficult' students? Did dance turn your life around? Tell us all about it.

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