

INSTITUTE OF ART STUDIES - BAS



ILIANA GEORGIEVA PETROVA SALAZAR

**EUROPEAN CHOREOGRAPHERS ORIENTATED IN
DANCE THERAPY AND ITS APPLICATION IN THE XX
AND XXI CENTURY**

AUTHOR'S SUMMARY

OF A THESIS PAPER FOR OBTAINING PHD DEGREE

**IN MUSICOLOGY AND MUSICAL ART,
8.3. *MUSICAL AND DANCE ART***

**SUPERVISOR:
Prof. ANELIA YANEVA, DSc**

Sofia 2020

The PhD thesis has been discussed and approved for public defense on a Musical Theatre Research Group meeting held on May 26, 2020.

The PhD thesis volume is **272** pages and consists: an introduction with common characteristics on the PhD work, 3 chapters, conclusion, two applications – templates, and authors publications. The PhD cited literature and bibliographic sources include: 202 bibliographic titles. Among them Or 149 titles in Latin, 2 – in Russian language, 50 titles in Bulgarian language, 12 PhD works. In general there are 162 article and reports, from which: 137 in Latin language, 3 – in Russian language, 22 – in Bulgarian language. There are 438 internet sources: 10 electronic editions, encyclopedias and dictionaries, 161 official websites of management and educative units, 82 selfsustained web sources and 10 title of video and audio materials, including 263 other internet sources.

The Public defense will be held on 08.10.2020 at 11:00 AM at hall 1 of the Institute of Art Studies at a meeting of members of scientific committee: Prof. Kristina Yapova, DSc, Institute of Art Studies – BAS; Prof. Joanna Spassova-Dikova, PhD, Institute of Art Studies – BAS; Prof. Ventsislav Dimov, DSc, Institute of Art Studies – BAS; Prof. Neva Krusteva, PhD, National Academy of Music “Pancho Vladigerov”; Prof. Simo Lazarov, PhD, New Bulgarian University, Prof. Violeta Gorcheva, PhD, National Academy of Music “Pancho Vladigerov”, Prof. Velimir Velev, PhD, National Academy of Theater and Film Arts “Krastyo Sarafov”.

Materials are available for those who might be interested in the Administrative Services Department of the Institute of Art Studies on 21 Krakra Str., Sofia.

CONTENT OF THE DISSERTATION

FORWORD.....	6
Actuality of the topic.....	6
Goals and tasks of the disertation.....	8
Scope and framework of the study	9
Methodology.....	10
Structure.....	10
Terminological clarifications.....	11
Qualifiers.....	14

Section I. DANCE AS A FORM OF TREATMENT IN ANCIENT TIMES

Chapter 1. Dance as a ritual practice.....	15
Introduction.....	15
I.1.1. The dance in the concept of the bipolar model of creation Cosmos-Chaos	15
I.1.2. The ritual as a form of psychophysical impact.....	20
I.1.3 The dance in the ritual.....	23
Chapter 2. Dance in the antiquity as a preventive and healing tool.....	25
I.2.1. Dance in an inseparable connection between physics, psyche and spirit.....	25
I.2.2. Dance practices for connection with the deities	31
• Trance dance	
• Ecstatic dance	
I.2.3. Healing dance-ritual practices.....	35
• Shamanic healing practices	
• Preventive and curative ritual dances	
I.2.4. Shamans/Dancing healers	48

Section II. THE IDEA OF DANCE AS THERAPY (XX CENTURY IN EUROPE)

Chapter 1. Prerequisites for the revival of dance as a therapy in the XX century.....	52
II.1.1. The changes.....	52
II.1.2. The new wave of psychological theories in the twentieth century influenced the concept of dance and movement.....	56
Chapter 2. Choreographers related to the idea of dance as therapy (second half of the XIX century - the middle of the XX century)	59
II.2.1. Introduction.....	59
II.2.2. Choreography in European spiritual-practical schools preceding dance therapy.....	60
• Beinsá Dounó – Panevritmia.....	61
• Rudolf Steiner – Evritmia.....	71
• Georgy I.Gurdjieff – sacred Gurdjieff dances.....	78
Accents.....	82
II.2.3. Choreography in secular events preceding dance therapy.....	83
2.3.1. Non-Europeans who worked in Europe.....	83
• Isadora Duncan	83
• Dr. Bess Mensendieck	85
• Katherine Dunham.....	87
• F.M.Alexander.....	89

2.3.2. European author’s systems that brought to the fore the symbiosis between rhythm and movement.....	91
•Francois Delsart.....	91
•Emile Jaque-Dalcroze.....	95
•Dorotee Gunter	98
2.3.3. Choreographers, creators of expressive dance language.....	102
•Rudolf von Laban.....	103
•Mary Wigman	108
•Gertrud Bodenwieser	111
Accents.....	113
Chapter 3. Choreographers using dance as therapy (mid-20th - early 21st century).....	114
Introduction.....	114
II. 3.1. American choreographers who influenced dance therapy in Europe.....	115
II. 3.2. European choreographers and their dance therapy methods developed in the USA...117	
•Liljan Espenak.....	118
•Elisabeth Polk	124
•Irmgard Bartenieff.....	127
•Trudy Shoop	131
II. 3.3.European choreographers and their dance-therapeutic methods developed in Europe..136	
• Gertrud Falke-Heller.....	136
• Gerda Alexander.....	138
•Elsa Lindenberg.....	143
•Hilde Holger.....	145
•Fe Reichelt.....	149
•Veronica Shellbourn.....	152
•Dennis Puttock.....	153
II. 3.4. European choreographers and their dance-therapeutic methods, influenced by classical / modern / exercise.....157	
•Margarret Morris.....	157
•Maria Teresa Leon-Fritch / Maite Leon/.....	162
•Annemari Autere	167
Accents.....	170
SECTION III. Application of Dance Therapy (XXI).....176	
Chapter 1. Institutionalization of Dance Therapy.....176	
3.1.1Dance therapy organizations in Europe	179
3.1.2. Dance therapy education in Europe.....	182
3.1.3. About the profession “ <i>dance therapist</i> ”	192
Chapter 2. Dance therapy areas in the XXI century.....199	
3.2.1. Dance therapy and its connection with dance (according to the classifications for types of dance).....	201
•Classical ballet.....	201
•Latin-American and ballroom dances.....	201
•Argentine tango.....	202
•Oriental dances.....	203
•Traditional and folk dances.....	204

•Ancient practices adapted to the contemporaneity.....	205
•Integrative dance and therapeutic choreographic performance.....	207
3.2.2.Dance therapy and its connection with therapy (interdisciplinary aspects)...	208
• Dance therapy and psychology.....	209
• Dance therapy and anthropology.....	212
• Dance therapy and medicine.....	214
• Dance therapy and neuroscience.....	216
• Dance therapy and robotics.....	218
• CERN and dance opera.....	218
Accents.....	219
3.2.3. The Bulgarian trace in Dance therapy.....	223
CONCLUSION.....	228
Application.....	235
Table 1 - Institutions and educational programs in dance therapy in Europe (in chronology of their creation).....	235
BIBLIOGRAPHY.....	243
CONTRIBUTIONS OF THE RESEARCH.....	270
LIST OF PUBLICATIONS from Iliana Petrova Salazar.....	271

CONTENT OF THE SUMMARY

FORWARD.....	6
SECTION I. DANCE AS A FORM OF TREATMENT IN ANCIENT TIMES	13
SECTION II. THE IDEA OF DANCE AS THERAPY (XX CENTURY IN EUROPE)...	16
SECTION III. Application of Dance Therapy (XXI).....	23
CONCLUSION.....	33
CONTRIBUTIONS OF THE RESEARCH	39
LIST OF PUBLICATIONS from Iliana Petrova Salazar.....	40

FORWORD

The present dissertation is devoted to dance in its therapeutic functions - or as it is accepted as a term *Dance therapy*¹ (DT). Undoubtedly, healing and psychophysical renewal through dance is an ancient practice spread in societies and cultures around the world (Katz², Sachs³, Sorell⁴, Espenak⁵, and others), but the Dance therapy (DT) is apparently new scientific direction. At the end of the 19th and the beginning of the 20th century, the possibilities of dance for psychophysical impact and healing method were rediscovered. With these functions, dance enters as an accompanying post-therapeutic practice in health and social centers in Europe and the United States. It is logical to assume that this process begins thanks to the choreographers⁶ and dance and stage movement specialists, observed or felt in their practice the healthy impact of dance and conscious rhythmic movement, far beyond the performative framework.

In the United States, the beginning was officially set around the 1940s by choreographer Marian Chase at the St. Elizabeth, Washington. And in Europe, data from various researches (Weathered⁷, 1963; Nemetz⁸, 2006 и мн.др.) point out some names with undeniable contributions such as Francois Delsart, Rudolf von Laban and Emile Jacques-Dalcroze, but do not exhaust the question of their and subsequent generations of choreographers and artists who have contributed to the establishment of Dance therapy. The use of dance as a therapeutic tool by representatives of the art of dance and its contemporary application primarily in Europe is the focus of this dissertation.

ACTUALITY OF THE TOPIC

In recent decades, the necessary interest in dance compositional methods applicable in the teaching and research of modern therapeutic areas in interdisciplinary science - psychology, medicine and microbiology, quantum and applied physics, neuroscience, bioenergy and others. It is no coincidence that some of the world's leading research bases, such as CERN and NASA, are expanding their research into the field of structural and action forms of dance and choreography, and the International Organization for Dance Science and Medicine (IADMS) promotes collaboration between dance and medical professionals.

Specialists and researchers from various scientific fields such as psychology, medicine, anthropology and others (Chodorow, 1991; Bernstein and Singer, 1982; Meekums, 2002; Levy, 1988; Scott-Billman, 2015) help to rediscover the therapeutic potential of dance and give their views on the problem. They explore the differences obtained during the metamorphosis of dance from the stage to the social and clinical environment and the moments of overlap between theory and practice, forming concepts such as "therapeutic dance", "Dance therapy" and "Dance-movement therapy"

¹ „Dance therapy“ - according to the American Dance Therapy Association (AADT), this is a "psychotherapeutic use of movement" that promotes the "emotional, social, cognitive, and physical integration of the individual." See at: <https://adta.org/faqs/>

² Katz, Richard. The Straight Path of the Spirit: Ancestral Wisdom and Healing Traditions in Fiji. US, 1999

³ Sachs. Curt/ Curt Sachs (also seen like Kurt Sachs/ Curth Satchs in German language - Curt Sachs).

⁴ Sorell/ Walter (also seen as Volter/ in original Walter Sorell/ - world famous American writer and dance critic born in Austria.

⁵ Espenak, Liljan in original *Liljan Espenak* / - Norway choreographer, pioneer in Dance therapy.

⁶ Such as: Rudolf von Laban, Mary Wigman, Gertrud Bodenweisser, Liljan Espenak, Hilde Holger, Trudy Shoop, Margaret Morris, and others.

⁷ Weathered, Audrey G. The History of Dance Therapy in England. Ment Health (Lond). Jun (1963): Vol. 22. No.2, 68–69: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5083348/pdf/menthealthlond70789-0022.pdf>

⁸ Nemetz, L.D. Moving with meaning: The historical progression of dance/movement therapy. S.L., 2006.

(Meekums, 2002). In these aspects, the information and research⁹ in our country is relatively little, which determines the relevance of the topic in the Bulgarian scientific and cultural space.

The therapeutic effect of dance is also the subject of research in a number of the above scientific fields and disciplines. But in its interdisciplinary study, dance is divided into its structural elements according to the professional orientation of the respective specialists. Thus, the idea of dance as a basis on which dance therapy is built remains, but in practice the focus shifts to its constituent elements: movement, rhythm, positions, dance pattern, etc. ; on its functions - communicative, integrative, meditative, relaxing, psychotherapeutic, etc. or types and styles of character: ballet, tango, salsa, folk and ballroom dances, etc. As a result, new forms and directions are obtained, such as: dance-movement psychotherapy (DMPT¹⁰); *Expressive-Relational Dance Movement Therapy* (DMT-ER¹¹), Psychomotor-Dance-Therapy-Intervention (DANCIN¹², 2016), etc.

In this "fragmentation" of dance, however, the focus changes - the impact of body-oriented psychotherapy and motor therapy increases, "forgetting" the techniques and instruments of dance art, although they should be the basis of TT. In her study¹³, Carol Bruno reported on researchers and specialists in the field (Koch, 1984; Boris, 1986; Bruno, 1990; Nekrug, 2015), also concerned about the fact that dance, which is the "heart" and "soul" of the new scientific direction "Dance therapy" is increasingly fading against the background of therapeutic interventions used in psychotherapy, motor and body-oriented therapy and others.

In a personal interview¹⁴, the delegate of the English Association for Dance-Movement Psychotherapy Richard Coaten¹⁵, as a specialist and dance-movement psychotherapist, shared the opinion that "Dance is at the center of dance therapy, but there is no choreography or choreographic process. So there is no choreography in dance therapy ... But if someone dances in connection with a process, then it could be said that it is choreography and that people do their own dance in connection with something that encourages you to express yourself."¹⁶ (Coaten, 2019).

Based on my own research, professional position and experience as a choreographer, I am not only inclined to agree with the opinion of Mr.Coaten on the lack of choreography in contemporary dance therapy, but I have serious considerations to say that dance in its original sense of higher art of movement with a musical character (Ellis, Katz, Abrashev, etc.) is in danger of disappearing from Dance therapy. Moreover, with the shift of focus from dance itself to its building blocks - types of movements and their psychic impulses, dance and choreography began to be seen

⁹During an inspection with the help of employees of the CB of the Bulgarian Academy of Sciences, the National Library "St. Cyril and Methodius" and NACID I found that at the moment in Bulgaria there are only: one edition on the problem: "Dance therapy. Theory, methodology, practice" of Greenland, Hovhannisyann, Natalia, located in the National Library "Ivan Vazov" in Plovdiv; partially affected in the work of Popov, Theodor: "Therapy and prevention through art" and in some of the works offered in the paid list of 77 titles on the topic of Dance therapy in the library of NBU; a dissertation: "Dance-movement therapy as a preventive and restorative means of psycho-physical capabilities of man" by Nikolova-Haina, Galena V., 2017, (to which there is no access).

¹⁰ <https://admp.org.uk/dance-movement-psychotherapy/what-is-dance-movement-psychotherapy/>

¹¹ Cristina Martines - Expressive-Relational Dance Movement Therapy (DMT-ER®)

<https://www.kokorodanse.com/>

¹² Виж: [https://www.semanticscholar.org/paper/Psychomotor-Dance-Therapy-Intervention-\(DANCIN\)-for-Guzm%C3%A1n-Freeston/a60d5c2c2b37a1fb05573a18d53e7dedecfd523e](https://www.semanticscholar.org/paper/Psychomotor-Dance-Therapy-Intervention-(DANCIN)-for-Guzm%C3%A1n-Freeston/a60d5c2c2b37a1fb05573a18d53e7dedecfd523e)

¹³ Bruno, Carol. Maintaining A Concept of the Dance in Dance/Movement therapy. American Journal of Dance Therapy, Vol. 12, No.2, 1990, 101–113/ p.101-102 [Accessed 01 June 2016].

¹⁴ Petrova Salazar, Iliana. Interview about Dance therapy with the specialists from the Coaten family. Sofia, 05.05. 2019 [unpublished]. The interview is edited and approved personally by Richard and Mary Coaten.

¹⁵ Richard Coaten https://www.researchgate.net/profile/Richard_Coaten

¹⁶ Petrova Salazar, Iliana. Interview about Dance therapy with the specialists from the Coaten family. Sofia, 05.05. 2019.

as "techniques"¹⁷ of their own direction - Dance therapy, and in some places completely disappeared. For example, the English Institute of Arts in Therapy and Education presents the "Seven Arts" as "therapeutic conversations" in a section. It is noteworthy that the other arts are named after them: music, drama, poetry, sculpture, etc., while dance has already been displaced by its structural element movement and called "body work / movement"¹⁸ (IATE, 2019).

For the reasons listed above, the present dissertation deals with issues such as: with what and which European choreographers contribute to the creation of Dance therapy in Europe and which areas it serves today.

The raised issues became even more relevant after the attempts to institutionalize Dance therapy in Europe (after 1980), some of which continue today.

GOALS AND TASKS OF THE DISSERTATION

The main goal of the scientific work is to study European choreographers and artists of the twentieth century who influenced the revival of dance as a means of psychophysical impact and therapy.

On the one hand, this presupposes to review and analyze the main conceptual positions and methods on the problem from the point of view of the choreographic-compositional techniques used in them as a basis for Dance therapy. On the other hand, it requires to point out the influences and changes that have occurred on the way of professionalization of dance to the new scientific direction - Dance therapy and to consider its modern application in the XXI century.

According to its goals, the work is aimed to solve several main tasks:

- To highlight iconic ballet reformers and artists from Europe, who in the twentieth century rediscovered the possibilities of dance as a form of therapy;
- To study and derive basic choreographic-compositional approaches and methods used in Dance therapy (TT);
- To outline the path to professionalization of dance as a therapeutic tool in Europe;
- To analyze the modern socio-practical aspects of Dance therapy in Europe, its ways and areas of application in the XXI century;
- To enrich the available and provide new scientific information on the topic, which will lay the groundwork for further researches.

For the fulfillment of the set goals and tasks in the research the intersections of Dance therapy with other scientific directions are sought, which consider the possibilities of dance to upgrade beyond the limits of physical expression by having a therapeutic effect.

The selection of choreographers and artists emphasizes the importance of healing practices and dance in the European area. The study aims to highlight **the rediscovery of dance as a therapeutic method in the twentieth century in Europe**, without rejecting the influential "American model" of Marian Chase, considered as the "mother" of Dance therapy.

The objects of the research are the European choreographers and artists of the XX century, whose methods have contributed to the formation and development of Dance therapy. The attempt for theoretical analysis of their leading concepts and methodologies is motivated by the idea to distinguish basic choreographic-compositional techniques and to follow the changing over time

¹⁷ Look at: Bräuninger, Iris. Specific dance movement therapy interventions—Which are successful? An intervention and correlation study. *The Arts in Psychotherapy* Nov 1 (2014): Vol.41, No.5, 445-457.

¹⁸ <https://artspsychotherapy.org/iate-training/trainings-in-art-therapy-arts-psychotherapy-counselling-using-the-arts>

forms and ways of working with the instruments of dance art. Naturally, the subject of research is dance used as a therapeutic tool.

An accent in the research is given to two established choreographic-compositional approaches are under development: dance improvisation and choreographic structures. They compare the expressive (emotional) and semantic (mental) construction of the dance elements as a determining factor for the construction and use of dance as a therapeutic method.

The relationship dance - choreography - therapy is analyzed in accordance with the specifics of dance art. This is necessitated by the need to clarify the essentially mentioned and newly introduced concepts such as: Dance therapy, Dance-movement therapy, Dance medicine, therapeutic choreography, etc., as well as their use in a modern context. In this regard the study offers experience in building a terminological apparatus.

SCOPE OF THE RESEARCH

In the context of the overall development of dance used as therapeutic tool in Europe, the study goes back in time with parallels of iconic examples of dance rituals and healing practices in Europe and the rest of the world. It examines the concepts of European artists who revived the ideas of dance and rhythmic movement as a means of healing in the late nineteenth and early twentieth centuries. It covers the new psychological ideas and messages of the revolutionary modern and expressionist dance in post-war Europe and moves to the institutionalization of Dance therapy in the 1980s. Matching in the construction of dance therapy in Europe and the United States through the practices of choreographers of the twentieth century, which help to create and establish Dance therapy in the XXI century have also been sought. Regarding the situation in Bulgaria, some theoretical statements are considered, concerning the presence and development of dance as a healing method in general. Emphasis is placed on the *panevritmia*¹⁹ created just before the Second World War, as well as some modern practices concerning the healthy use of dance in Bulgaria.

METHODOLOGY

The used methodology combines the following research methods: historical, inductive, comparative, analytical, interdisciplinary.

To derive the general provisions regarding the ancient dance art, a comparative analysis of dance rituals and healing practices in Europe and the rest of the world was used. In ascertaining analytical approach for the examination of the separate European choreographers and artists in the indicated historical period the inductive method is mainly used. Their ideas, formulations, techniques and methods are analyzed, which need to be considered as a step forward in the scientific knowledge in the field of Dance therapy - a combination of dance with other therapeutic areas: psychotherapy, motor therapy and kinesitherapy, and others. To trace the stages of professionalization of Dance therapy in Europe in the XX and XXI century, a comparative and interdisciplinary approach was used, which refer to sources on the history and theory of Dance therapy, as well as the results of modern research and texts on Dance therapy, also psychology, medicine and sociocultural factors in art therapy (art therapy).

The methods are considered in this case as an upgrading system for gathering and synthesis of information sources on the problem. They also serve as a foundation for analysis and interpretation of events in their relationship with other scientific fields and historical and theoretical

¹⁹ The Panevritmia is a practical method created by the spiritual teacher Beinsá Dunó (with the secular name Peter K. Deunov) in Bulgaria. In the present research it is reviewed as a therapeutic choreographic construct.

formulations, which directly reflect on the perception and practice of dance as a therapeutic tool and its interdisciplinary application in the XXI century.

TERMINOLOGICAL SPECIFICATIONS

Here is the place to clarify **some basic conceptual positions and terms valid for the dance used as a therapeutic tool:**

Dance

In the Oxford Handbook of Dance and Wellbeing (2017): “*the word ‘dance’ refers to human behavior composed from the dancer’s point of view, of purposeful, deliberately rhythmic and culturally modeled sequences of non-verbal bodily movements other than ordinary motor activities made with effort in space.*” (Hannah, 1987/2017). In this regard, the Italian psychiatrist Beya argues that even outside experts clearly distinguish between ordinary movement and dance, believing that “*dance is the most complete form of movement*”²⁰.

It is important to clarify that movement is a basic structural element of dance, but this does not mean that every movement or series of movements can be called a dance. In my opinion, that movement, which is distinguished by its characteristic as bodily plasticity, reasonableness, expressiveness and pronounced musical character, can be called a dance movement. The so-called **elements of dance movement** (ETD) are used in the construction of a choreographic composition - they include the smallest independent movements of the individual parts of the body - limbs, body, head or combinations of them, e.g. steps, jumps, spins, claps, etc. The variety of dance movements stems from the harmonious connection and combinations between these elements, including their energy charge, musical and psycho-emotional saturation. Together they create this continuous fluid and dynamic environment in which the dance itself comes to life. It may have a different character (ritual, game, etc.), but its elements are always musically / rhythmically connected. In the concept of Puttock “*Unlike other art forms, dance does not require equipment or additional materials, there is no need for musical instruments, paints, or clay, only the human being - body, soul and spirit - inseparable and undisguised*”²¹.

Thus placed on the fundamental principle by which it acts, and exactly **through the syncretic connection between body, emotions and psyche** (Espenak, 1981; Levy, 2005; Puttock, 2016, etc.), it is indisputable that dance can harmonize space, matter and psyche to help its performers in and out of the performative dimensions, including as a means of therapy.

Therapy

Derived from Murdock's depth study²², “*therapy*” refers to the meaning of “*treatment,*” “*philosophy,*” or “*service.*” According to Murdock the earliest sources in which it occurs as „θεραπευο“ or „*therapeuo*” are presented in the Christian script, bound to Christ and his apostles as healers, in the ancient world - Egypt and ancient Greece as a kind of monastic society – the “*Therapeuts*”. The listed connotations are mainly related to auxiliary healing functions and activities aimed directly at man and society.

Dance therapy

The term **Dance therapy** (in English language „*dance therapy*” or „*dance/movement therapy*”; in German language “*Tanztherapie*”; in Russian language “*танцевальная терапия*”; in

²⁰ Cit. by Bella, V. See at his official web page: <http://www.danzaterapia-esprel.it/en/dmt-er-methodology>

²¹ Cit.by: Puttock, D. Hit the Timber, Let Yourself go. [online]1972, 48/ p.8 [Accessed 20 November 2017].

²² Murdock, D.M./Acharya S. Crist in Egypt- the Horus Jesus connection. US, 2009, 592, p.433.

Greek language: *Χοροθεραπεία* or *θεραπεία χορόβ*, etc.) refers to the use of dance for therapeutic purposes - it is used to treat various physical or mental ailments. However, the term has a double meaning and very often there is an overlap of concepts that use the same basis, such as: psycho, dance, motor, rhythm, body, therapy, which leads to questions and ambiguity. For example, in the definition of Dance therapy of the European Association for Dance and Movement Therapy (EADMT) there are not one, but several terminological combinations directly related to Dance therapy like *Dance Movement Therapy* (DMT), also known as *Dance Movement Psychotherapy* (DMP) or *Movement psychotherapy*.

In this particular case, this gives me reason to consider the concept in its synergistic union with dance as an object of therapeutic activity applied through the instruments of dance art.

In Germany and German-speaking countries, Dance therapy is an established "... *psychotherapeutic discipline in the field of art therapies. Free improvised dance serves for the individual expression, understanding and processing of feelings and relationships. Dance, like any movement with creative expression and communication, is a major element of Dance therapy that developed in the United States in the 1940s. Marian Chase, Trudy Shoop, Lilian Espenak and Mary C. Whitehouse are the main founders of various dance and therapeutic areas*"²³.

In Bulgaria, the term *танц-терапия*²⁴ (Dance therapy) is localized in the period after the introduction of dance in clinical practice around (40s of the last century), without a definitively established term.

Today "**Dance therapy**" is perceived as a direction of psychotherapy and art therapy. In favor of its explanation and in connection with the study itself, I will state the opinion about art therapy from a quote²⁵ by prof. P.Tsanev: "The emergence of art therapy was initially associated with the use of art as a way to obtain additional information that would allow more accurate diagnosis of diseases and facilitate their treatment. At the same time, the ability of art to form its own image of the disease serves for a fuller awareness and perception of the disease by the individual himself - a circumstance that may have its important therapeutic value"²⁶. "If in this context we assume that in the fine arts the mentioned "therapeutic information" is obtained, expressed and diagnosed through drawing, in music therapy through sound separation, sound extraction and sound perception, then in dance art the main informational tool will be the *body* and the *dance* - the rhythmic plastic bodymovement of human.

However, dance is present in the phrase "Dance therapy" not as an adjective, but as determining the type of therapy, its specific forms, therapeutic methods and interventions applied in various practices (clinical, psychotherapeutic, social, etc.). In this case I find similarities with the established neologistic spelling of the concept of art therapy²⁷.

For the listed above reasons, in this paper I introduce and will use the term "Dance therapy" (DT) as the closest in meaning and functional load with the original in English. Accordingly, in the present study I will accept the term "Dance therapy" as a basic concept, and the other connotations as Dance Movement Psychotherapy, Integrative Dance Therapy, and others, as its derivatives.

²³ Cite from: official website of German dance therapists: http://www.btd-tanztherapie.de/index/Definition_der_Tanztherapie (author's translation from German language) [Accessed at 11 November, 2008].

²⁴ Dance therapy as a concept is used in the Bulgarian scientific literature by T. Popov (2004) as "Dance therapy" (p.99), in an unpublished dissertation by GV Nikolova-Haina (2017) as "dance-movement therapy (In the title), but without etymological and terminological justification. In general, it occurs in different variants: dance therapy, dance therapy, integrative dance-movement therapy and others. In the present text, the term "dance therapy" is introduced and used as a neologism.

²⁵ Cit.by Popov, P., 2004, p.132.

²⁶ Tsanev, P. Art, psychopathological images and kids drawings. S., 2002, p.167.

²⁷ Look at: <http://www.arttherapyinstitute.bg/bg/kakvo-predstavlqva.html>

Other **more specific terms** used in the research are:

- **psychophysical** - the term is used in order to present dance as the core through which the connection between the human body and the psyche (psychosomatics) is made and / or illustrated. Emphasizing the psychophysical connection is a necessary prerequisite to consider dance as means of therapy (Sachs, Espenak, Shoop, Levi, Hanna, etc.). Otherwise, it will remain in its overly one-sided functional role of spectacular art for entertainment and artistic enjoyment, depriving it of the ability to penetrate and explore the depth of its overall psychophysical impact.
- **whole / wholeness** - in the present work refers to the relationship between the human microcosm, perceived as an integral part of nature and the macrocosm. It is also consistent with the accepted understandings of holism in modern psychosomatic medicine. (V. Ivanov, 2001).
- The meaning and justification of **specific terms** in which "psycho" is used, such as "psychomototics" and "psychogymnastics", etc. are given in the text itself.

According to the different transcriptions of foreign names, and due to their already existing and established spelling in Bulgaria, so that there are no contradictions with the original name in a foreign language, the first appearance of this name will indicate its original spelling in a footnote.

According to the holistic nature of the problem in the dissertation, specialists and practitioners from other scientific fields are affected, but not considered in detail. However, attention is paid to their research and development, which helped to prove and establish dance therapy as a new scientific field in dance and in European practice. Therefore, the work cannot claim to be exhaustive on the topic, but seeks to touch on and synthesize its main issues and problems.

SECTION I - DANCE AS A FORM OF TREATMENT IN ANCIENT TIMES – it is a cultural-historical overview of the application of dance in various healing practices. The dance of antiquity has been treated as a unifying medium, in which the rhythmic action of man as a microcosmos seeks to reproduce the harmonious structure of the macrocosmos and to master its chaos through various protective and healing patterns. Emblematic examples of ritual dance as a preventive and healing tool from antiquity to the Middle Ages are considered. From the perspective of the historical factual base, supported by scientific research on the healing effect of dance, general regularities that influenced the choreographic art are derived.

Chapter 1. considers the interrelationships between **dance-ritual-psychosomatic influence**. Basic conceptual positions are set regarding the specifics of dance composition as a carrier of fundamental principles for modern dance therapy, without which any attempt to address the problem is unthinkable. In this regard, a common point of view has been found of researchers of the art of dance such as Katz, Sachs, Sorel, who consider dance as a factor for the presence of a harmonious, ie. healthy and highly organized life in its rhythmic patterns (astronomical movement, natural and calendar cycles, harvesting, gathering herbs, important holiday, healing, initiation, etc.). In this cyclical framework, rhythmic patterns (dances, rituals, ceremonies) are followed as a catalyst for the existence and maintenance of a healthy balance of the human individual and community. In connection with these functions of dance here are derived three leading concepts of the study:

1. the concept of the bipolar model of Cosmos-Chaos creation
 2. dance as a factor for the presence of a harmonious and highly organized life
 3. the inseparable interrelation between body, psyche and spirit.
- (1) A scheme is presented to illustrate the creative action of two types of form-forming forces - **cosmos and chaos** - as a bipolar creative model, which helps to bring out the **two fundamental choreographic-compositional contrivances** sought in the research²⁸:

Dance improvisation - built on the expression of internal impulses. Logically follows the line of the dance expression in the direction from the inside out. It can include, for example, the ecstatic ritual dance, the free and expressive dances, created and recreating the purely psycho-emotional bodily expression, accompanied by a corresponding rhythm or musical accompaniment. The movements are more chaotic, flowing in different forms, often more expansive. The solo performance is typical.

Pre-prepared choreographic structures - inspired mainly by external forms, objects or subjects, but subsequently arranged in certain choreographic structures and follow the direction from the outside to the inside. Accordingly, the movements are more orderly and semantically precise, for example in temple, prayer or ritual trans dances, etc. They pay more attention to the dance steps performed in a certain direction or the dance drawing follows the relevant geometric figures, consistent with the qualitative and quantitative resource of the performers - their mental and vital energy force. In order for this to happen, it is necessary to have a choreographer - the person who unites and embodies the knowledge of the dance movement, its symbolism, developed in appropriate space-time forms. They have a characteristic ensemble form.

The stated **choreographic-compositional contrivances** are fundamental to the study, as they serve as distinguishing factors necessary for the structuring of dance and movement in space in general: **internal - psycho-emotional and external - everyday, social**. Accordingly, they help to trace the changes in the choreography and the specification of dance-compositional models and methods for the impact of dance and dance art.

(2) **Dance, as a factor for the existence of a harmonious and highly organized life**, is the second considered concept, which reveals the essence, specifics and goals of the ritual, respectively the ritual dance as a form of psychophysical influence. He studies the "dancing man" as a multidimensional organism through which the above-mentioned choreographic techniques are realized in practice and with a specific purpose. In this chapter, ritual dance is distinguished by the same parameters, namely when it is used purposefully to change the state of mind or body in order to influence, overcome or prevent physical and mental ailments.

(3) An important issue regarding **the relationship body-psyche-spirit** is solved by the presentation of non-dancing psychological factors - **faith**²⁹ and **altered states of consciousness**, related to the achievement of purposeful psychosomatic impact.

Undoubtedly, in the space of the **indivisible whole human-nature-cosmos**, in which our ancestors were perceived as its rational quintessence, their healing dance-ritual practices are organized according to their beliefs about what exists in this space. In this case, the factor "faith" and the ability

²⁸ See: Blom, L. A., Tarin Chaplin, L. The Intimate Act of Choreography. US, 1982.

²⁹ taken not as religious phenomenon but as a concentrated psychic (mental) power.

to change thinking through rhythmic movements, are in support of the basic effective model for targeted psychosomatic impact, which is based on Dance therapy.

Chapter 2 put an accent mainly on the primary sources of Dance therapy and the third presented concept - dance and rhythmic movement of man as a harmonious manifestation of the **unified system - body, psyche and spirit**. It is presented through dance examples in the research of scientists from different generations (Sisi Georg, Keenley, etc.), pointing to the belief in "mental illness" as the cause of physical, put on a scientific basis in the XIX century by American psychologist William James. Models of the term "dance medicine", attested by K. Sachs in his "World History of Dance" (1933) through various shamanic dance practices for healing, are also explained. Practices from antiquity are discussed, in which dance is part of the ritual, driven by the belief that through rhythmic movement a person realizes, achieves and regulates the connection with his own superpowers, with natural and divine beings. Thus it affects the **body and psyche, treated as a whole**.

Without literally overlapping with the above divisions, the dances are also classified according to the dualistic model as:

a) **expressive / ecstatic ritual dances** built on an intuitive emotional level, acting on the principle of dance improvisation, which aim at liberation and catharsis through dance expression;

b) **harmonious ritual dances** created through the conscious thoughtful action, recreating the rational movement in a certain order (cosmic, psychological, etc.). In these cases, of particular order are the ensemble performances, which allow people to experience physically the unity and connection with each other; directing the psychic energy to a certain place, experiencing itself as an integral part of nature, the cosmos and the Divine.

The connections with dance are considered as the sacred path of man to a higher benevolence - natural and divine beings, uniting spirit and matter in a common rhythmic impulse with the harmony of the universe. This implies a distinction between basic dance techniques - also in two main directions:

- **trans dance** - a conscious change in the psychophysical state of the performer
- **ecstatic dance** - sensory psychosomatic change with a leading cathartic effect.

As dance structures, they are directly related to the main choreographic techniques sought in the study, and lead to clarification of their specific purpose in healing dance-ritual practices. Following the changes in the choreography, two directions in the ritual dance are brought out:

- **ritual dances with a protective / preventive purpose**, which have a collective character and are performed by certain groups (mummer's dance games) or by the whole community. They achieve a physical and / or mental sense of protection, purification and harmonization, social and spiritual reunion (North American sun dancing or "choreographed prayer");
- **ritual dances for healing purposes**, which are charged with a specific therapeutic purpose and used in cases where there is already a physical or mental illness (African healing dance "vimbuza", rusalijski / kalusharski dance). Unlike ritual dances with a preventive purpose, there is often a leading figure - a choreographer / dancing healer, who determines the purpose and development of the ritual dance (healing devil dances).

Section I ends with a historical look at the performers of the considered healing ritual dances and practices known in the world dance culture - **shamans and dancing healers**. Their abilities as transforming mediums as healers dedicated to the "art of the higher movement" have been recognized. Their dance formulas (techniques and choreography) are presented, through which certain psychosomatic states are achieved, activating internal and external transformational processes.

The focus on dancing healers is important for deriving psychosomatic practices registered in the world and European heritage. The study reveals the existence of highly streamlined models for the healthy use of dance, practiced in Europe (and also in Bulgaria), which are applied by dedicated supporters of the mysteries, perceiving dance as a higher art of movement (Orpheus, Lucian, Pythagoras, Plato, Socrates, Boyan Magesnik, among others).

The paradox in this case is that precisely these "practices" were considered dangerous, demonically charlatan and, accordingly, stigmatized in the Middle Ages. Thus, for several centuries, dance in Europe developed either as a stage art (in aesthetic-performative incarnations) or in a strictly limited occult environment (as in Thracian, Eleusinian, wolf mysteries). With the development of dance as a stage (performative) art (from the Renaissance onwards), the knowledge of the healing abilities of dance is encapsulated in occult societies and schools, as a sure way to their survival.

SECTION II - THE IDEA OF DANCE AS THERAPY (XX CENTURY IN EUROPE) - presents the changes in physical, moral and spiritual culture that occurred in the period from the end of the XIX century to the end of the XX century, which led to the **rediscovery** of the healing possibilities of dance. He focuses on iconic choreographers and artists mainly from Western Europe, who contributed to the development of these ideas and the formation of the new scientific direction of **Dance therapy**.

Chapter 1 - "Prerequisites for the revival of dance as a therapy in the twentieth century" - traces the changes that occurred with the emergence of dance as a spectacular art and how in the late nineteenth century and especially in the twentieth century opened new horizons for rethinking dance as a healing method. Researchers and specialists in the field (Levy, 1995; Weather, 1963 and many others) consider the period 1840-1940 in Europe and the United States as the beginning of the revival and shaping of dance as a kind of therapeutic tool. This chapter focuses on the events that took place around this period, and in particular:

- A focus in the education and health sectors on **physical culture, dance and rhythmic motor practices**. This is evidenced by the numerous educational programs, lecture courses, institutes and organizations created in the period throughout Western Europe and some parts of Northern and Eastern Europe. They promote the need for psycho-bodily awareness, freedom of expression and a complete rethinking of physical culture (sports, gymnastics, martial arts and rehabilitation practices) achieved through dance or other motor practices. Famous in Western Europe are the "Institute for Physical Training" (Institute of Physical Training), founded by Joseph Kohn in London, 1901, where dancers from different European countries are trained; the German movement „Koerperkultur“ from the 20 's of XX century, oriented towards understanding the physiological, anatomical and psychological relationships, etc. The new systems for gymnastic exercises in combination with various eastern techniques of breathing and rhythmic movement or psychomotor pedagogical practices have a strong influence on the dance and motor practices in the period. Leading figures in this direction for Europe are Hedwig Kallmeyer, Elsa Gindler and others listed in the introductory part of the Section.
- **new psychological theories** of the XX century, influenced by the concept of dance and movement, postulated by Z. Freud, K.G. Jung, A. Adler, W. Reich, J. Morenno, W. Wundt and others. Some terminological innovations such as psychogymnastics and psychomotor skills, which are important for clarifying the terminological apparatus of the research, are also distinguished.

Reforms in the scientific and cultural-educational circles directly affect the conceptual orientation in the search for artists. In the early twentieth century, choreographers and researchers of rhythm and movement made the first attempts to change the concept of dance and stage movement, understanding it as a medium and creative-transformative force beyond its aesthetic-performative

functions. European choreographers and artists who have worked in this direction are represented by:

- short biographical reference and professional realization;
- orientation to certain principles and methods of work;
- applied contributions in Dance therapy.

In **Chapter 2 - Choreographers associated with the idea of dance as therapy (second half of the XIX century - mid-twentieth century)** – gives comments on European choreographers and artists who revived the idea of dance as a kind of therapeutic tool mainly in their own pedagogical or creative practices. The new concepts of dance and rhythmic movement as a type of therapy are traced, which repeat but also rationalize the ancient concept of physical, psycho-emotional and spiritual relationship - the inseparable connection between body and psyche, where healthy mind, psyche and body exist in a harmonious whole. In this regard, several ideological principles of dance and choreography used for healing purposes are considered.

On first place, the **spiritual and philosophical ideas** sought in three European schools and teachings of the period under consideration, which also materialize in choreographic constructs: Beinsá Dounó's **paneurythmy**; Rudolf Steiner's **eurythmy**; **sacred Gurdjieff dances** by Georgi I. Gurdjieff. They are seen as a kind of bridge between the ancient knowledge of dance and the new cultural and creative wave of the twentieth century. Some general aspects in the choreographic-compositional frameworks, principles and laws of movement are also sought. For example:

Awareness of human as a part of the whole and his return to primary nature, expressed by:

- in *paneuritmia* as an application of universal Divine and cosmic principles of movement with music and choreography in direct and healthy contact with nature (PANEVRITMIA, 1938);
- in *eurythmy* as a “living speech” in the new performing arts in terms of the mental-sensory perceptions of man, whence the healing eurythmy is derived (Dr. Bertelsen, 2018);
- in *Gurdjieff's dance fragments* as an awareness of the human being in the space of the "here and now" (Sunder, 2016).

They have common indicators:

The **principle of Rhythm** as the main common feature between them, which merges the elements into a harmonious choreographic construct. This construct is realized both in relation to the motion and sensation of the human being, and in relation to the universal laws of motion of the celestial bodies. And while Gurdjieff modernizes sacred ritual practices into a strict rational structure of self-consciousness, and Steiner deepens his self-perception and sensitivity to the invisible etheric worlds of eurythmy, Beinsá Dounó unites them under the higher cosmic rhythm of *paneuritmia*. Applied in musically organized structures where choreography, music and the spiritual-scientific idea of awareness, renewal and unity predisposes to the creation of a new culture and art, which are in constant creative and harmonious interaction.

Breathing (the respiratory system), derived as a life-giving factor of human health, is leading in the manifestation of movement and spirit in their dance constructs. They, in turn, rely on conscious movement and psychological expression, striving to restore the connection between body and psyche, the respiratory process as a basis for life, really placed in the rhythmic area of the human body.

The most important thing that stands out in the researched spiritual-practical methods is **the new rhythmic culture**, coded in their dance-compositional structures. Through them the authors derive their philosophical ideas and renew the inseparable connection between body, psyche and spirit.

Thus, the development of dance in the first decades of the twentieth century led to new physical and sensory psycho-emotional spaces, and the ancient healing ritual began to be rationalized in the spirit of rhythm and conscious movement as a potential opportunity for psychophysical impact.

Significant personalities who help to reconsider dance as a therapeutic tool are also presented. The artists who formed schools and / or worked together with composers, psychologists and medical people were awarded. Specific ways and models of action are also considered:

The influence of **non-Europeans** such as **Isadora Duncan** ("free dance"), **F.M. Alexander** (the "Alexander" technique), **Dr. Bess Menzendieck** (with an awareness of the psychological rhythm in her "body culture for women"), **Katherine Dunham** and the dance-anthropological connection with the modern dance-therapeutic method "primitive expression" (according to Duplan, Scott-Billman). What unites them is the primary movement. They have such a large-scale influence and spread among Western European cultural circles that they give a strong impetus to the development of many dance and motor methods of therapy.

Prominent European artists who have brought to the fore **the symbiosis between rhythmic movement, dance and music** have also been studied. These are the trinity system of "Applied Aesthetics and" Laws of Harmonious Movement "by **Francois Delsart**," the rhythmic musical structures or eurhythm of **Emile Jacques-Dalcroze** and the creative-pedagogical union between the choreographer **Dorothee Günther** and the composer C. Orff. These choreographers, in whose author's works the synergistic principle of the creative interaction between dance and music elements is present, are considered and studied to this day as basic for **Dance therapy** in Europe. The following choreographers and artists have been trained by them or have developed their scientifically based systems in the field of Dance therapy.

In other models, leading choreographers create their own **expressive dance language**. **Rudolf von Laban** developed his large-scale choreographic construct - motor choirs and a system for recording and analyzing dance "Laban Motor Analysis (LMA). **Mary Wigmann** led the German expressionist dance with her "individual inner rhythm", and Gertrud Bodenwieser developed self-knowledge and "intelligent" dance expression. They turn their dance language into a modern "ritual", through which they connect equally well with nature, with the environment and the kinesthetic space, with the dance expression and the general impulse.

Choreographers and artists who have reached the realization of their ideas for psychosomatic impact are beginning to observe more deeply the health changes in themselves and their graduates, dance troupes or even in society in the performance of mass motor practices. Unifying for the period is the desire for **self-knowledge, natural expression, awareness and freedom of bodily expression**. For those artists who subsequently focus specifically on the healing possibilities of dance, rethinking occurs in several layouts:

- The first layout is related to the **stage practice** - the choreographer (often a performer) of the dance work begins to dance not only the "role", but also himself - his personal feelings about war, grief, love, prohibition, modernization, etc. Through the new dance expression, emotions are released, personal messages are conveyed and states are transformed. The stage begins to influence as a healing (cleansing) way not only the performers, but also the audience that watches and is involved in this process.

- Another layout refers to the **dance pedagogical practice**, where different breathing techniques, ways of movement and self-knowledge enter, styles are mixed and the connections between the internal psychological and external shared space, the reactions of the body under different stimuli are studied. The awareness of movement is studied - from the smallest moving particle of the body to the largest impact structure (the ensemble dance).

Rethinking the possibilities for improving dance, choreographers expand their knowledge of anatomy and physiology, psychology, philosophy, biology, basic sciences through additional qualifications. Thus, several health factors are brought out - **breathing** (as a manifestation of life and mastery of internal and external space), **expression** (as a way of bodily expression and release of emotions) and **rhythm** (as a factor for the presence of mental and physical organization and good health).

And while choreographers and artists of the first half of the century draw the lines and directions in this "new culture", those of the second half (most often students and followers of the first) delve into its movements and forms in relation to the interrelationships in human psychosomatics. specifically for therapeutic purposes realized through dance.

Chapter 3 - Choreographers using dance as therapy (mid-20th - early 21st century) - is focused on dance professionals who develop their own dance therapeutic methods (mainly in the education and health sectors). They lay the foundations of Dance therapy in Europe. One of the first European choreographers employed as dance therapists and their innovative approaches, which contributed to the application of Dance therapy as a new aspect of contemporary dance art, were studied. The point of view of the choreographer, creator of dance and movement structures, striving to reveal their therapeutic aspects is presented. Through the sequential parameters for each choreographer mentioned above (biographical reference, principles and methods of work, etc.) in this chapter the research answers its original questions: whether and who are the European choreographers and artists who contributed to the development of Dance therapy in Europe, by whom they are influenced, to what extent and how the instruments of dance art are used in this direction.

Significant American choreographers in dance therapy (Marian Chase, Mary C. Whitehouse, Francisco Boaz, etc.) from the period are distinguished, in consider with the official beginning of Dance therapy in the United States (in 1940-1942) at the Federal Hospital "St. "Elizabeth", Washington). The appointment of these specialists brings to the fore the formation of an "American model" in Dance therapy. The influence and contribution of the open American system is emphasized, where the "European model"³⁰ of DT is largely beginning to be realized.

The second half of the twentieth century saw the reverse process - leading **European choreographers** - Liljan Espenak, Trudy Shoop, Irmgang Bartenieff, Elizabeth Polk - with a significant contribution to the formation of dance as a means of therapy for both American and the European model. Their methods are partly influenced by the new psychotherapeutic concepts of K.G.Jung, A. Adler and others, giving more freedom in the creative and research work of artists.. This helps to develop their full potential in the field of Dance therapy and puts them among the first officially registered dance therapists in the world. They are also among the first European choreographers to develop their own methods of Dance therapy and motor therapy, such as:

- Diagnostic tests of the movement of **L.Espenak**, who examines the connections between the psychological and physiological laws of movement (according to A. Adler);

³⁰ The pointed "American and European" models are only conditionally distinguished, as Dance therapy is a new discipline that still seeks stability and categorization.

- dance-therapeutic model for working with people with mental problems (schizophrenia, psychosis, etc.) by **T. Shoop**, which combines dance, pantomime, comedy theater;
- The foundations of Bartenieff by **I. Bartenieff** as a system for observation, analysis and correction of movements (daily, dance, pathological);
- dance therapeutic model with creative dance for working with deaf-mute and "antisocial" children of **E.Polk**.

These choreographers build the bridge between American and European Dance therapy practice. Some of them periodically return to Europe to exchange and share their experiences. Leading this endeavor were Espenak and Bartenieff. In this way, they set the beginnings of DT education on the Old continent.

Leading presence in Europe have choreographers who worked in complete counterpoint to American conditions - limited military and postwar environment, the Nazi regime and the persecution of entire dance troupes and schools and more. Some of them - Gertrude Falke-Heller, Gerda Alexander, Elsa Lindenberg, Hilde Holger, Fe Reischelt, Veronica Shelborn, Dennis Puttock - develop their methods in the described environment. Through internal self-observation and transformation, they create their own healing methods:

- **G. Alexander** and eutonia (good tone) as a principle of economic movement;
- **G. Falke-Heller** does not develop his own method, but a whole creative-pedagogical system for contact and "total awareness" of the body and dance performance;
- **E. Lindenberg** combines Reich's psychoanalysis and vegetative therapy with dance expression in the concept of the performer's intention;
- **H. Holger** is the author of the "inclusive dance", later developed as an integrative dance therapy;
- **Fe Reichelt** invents the "breathing circle" as a dance expression for positive change;
- **W. Shelborn** handles a "developing movement" for various "special groups" of children with physical and mental disabilities;
- **D. Puttock** combines several methods (creative dance, Laban's analyzes, etc.) in "Joy dance", supporting equal access to the art of dance.

A common feature of them is the developed self-control and awareness of the needs of people of all ages and health conditions. Therefore, leading here is the provision of equal access to the art of dance as a healthy method for all.

Leading European choreographers, influenced by classical / modern / exercise are the professional dancers and choreographers **Margaret Morris**, **Maite Leon**, **Annemari Autere**. Their methods are based on specific dance styles, which they develop as creative-pedagogical, social and health services. For example, in the field of dance and physical education, the **Margaret Morris Movement** is developing, linking subjects to rhythmic and physical education. And in the field of classical ballet, the methods of "psycho-ballet"³¹ by Maite Leon and "ballet body logic" by Autere were developed.

On the one hand, the therapeutic effect is based on the classical dance and ballet exercise, focused on healthy physical changes - upright posture and spine, joint and muscle connections and their conscious and painless use for the performer. On the other hand, the idea of equal access to dance and ballet art has been realized for both professional ballet dancers and amateurs, including people with mental and physical disabilities. In this way the social inclusion in both the pedagogical and the creative

³¹ The term "psycho-ballet" has disputed origins and co-exist in Cuba.

performative process is equalized. This allows the passage through all levels of development of a dance composition, including its stage realization.

It is important to note that they themselves move from the stage to the clinical conditions, working together with psychologists, motor and medical and other specialists. If in the first half of the XX century German-speaking choreographers prevailed, as well as students and followers of Delsart, Jacques-Dalcroze and Laban, then in the second half of the XX century the realization of the ideas of the previous period took place mainly in England and the USA. In their dance systems and developments, choreographers are able to systematize some of the changes observed in this direction (physical and mental), pointing out the main pillars of Dance therapy: **dance off stage, dance for personal change, dance for integration** (off and on stage).

Dance off stage acquires a collective character and is mainly engaged in the education and change of motor habits of the individual or group in order to strengthen the physical health of the performers. The focus is on the expressive instrument of dance - the body, but in its anatomical staging and construction of the motor elements in space. The dance takes place in specially designed structures (Espenak, Bartenieff, Alexander, Autere, etc.), which lead to a number of physical improvements: straightening of the spine and skeletal structure, movement and support of various muscle groups, posture and body movement, force center of movement, breathing techniques and other functional forces of the body and body tone. They are used mainly in clinical settings for people with physical disabilities as a post-therapeutic dance practice and an opportunity to strengthen the physical strength of performers. In practice, it is found that the generated physical force relevantly strengthens the psyche of the performer, especially when there is a group performance.

Dance for personal change has a predominantly individual focus and leads on the path to acceptance, expression and transformation. Accepting dance as their expressive instrument, many dance professionals experience a personal catharsis that leads them to emotional liberation as a healthy path, realized not in a ritual but in a psychotherapeutic environment. For example, prominent choreographers in the psychotherapeutic field of dance - L. Espenak, E. Lindenberg and T. Shoop share the view that therapeutic change depends on the free expression of non-verbal communication through dance form. Choreographers distinguish basic psychological paths: *provoked dance improvisation* as an indicator of a person's mental and physical condition (physical engagement of the body, mastery of emotional and psychological control); *associative and figurative thinking* as a technique for stimulating motor expression and dance movements. They place dance in a psychotherapeutic environment and use dance improvisational language as a stimulus for the manifestation of the real mental and physical state of man. This gives them direct access to personal codes to healthy paths of change that they use to construct short dance forms.

Dance for integration examines the relationship between body and mind through the holistic possibilities of the art of dance provided to people with various physical and mental ailments. In the second half of the XX century, after many years of work and research in this direction, choreographers came to the conclusion that these people have a sufficient set of personal motor repertoire, which can be developed for individual awareness and human transformation, as well as for inclusion. in a collective stage performance with a "suitable" choreographic composition (Holger, Maite Leon, Puttock, etc.). Of course, in a wide range of health issues the use of props (balls, ribbons, ropes, etc.) is the main crutch along the way, but in general, specialists solve the same tasks:

- to encourage communication and expression of movements, decision-making, self-acceptance and self-confidence, release of positive and negative emotions in a safe and non-judgmental environment, sharing creative impulses through dance plastic;

- to provide access to creative participation, full continuity in dance education, trainings supporting all kinds of dance techniques, dances with social orientation, general dance-theater performances, etc.

In practice, dance specialists find that going through this process has a significant benefit for the health of both future dance artists and physically and mentally ill people. Many of the studied choreographers work with such people, and some include them in their stage performances. Among the first such examples in Europe were *Towards the Light* (1968), choreography by Hilde Holger, music by Edward Greig, or the dance show *Pollution* (1982), choreographed by Maite Leon. In reality, they perform the entire dance therapeutic path discussed above and develop Dance therapy to a complete dance integrative form.

The emphasis in the choreographers of the second half of the XX century is the interrelation telos - psyche, but already brought out in harmonious dance therapeutic frameworks and methodological systems. With their long-term work, the choreographers clearly prove the inseparability of this process - when there is a change in the body, such a change is found in the psyche and vice versa. This allows to explain the physiological processes in the "ecstatic dance" and the changing states of consciousness. (ASC).

As a result of the studied theoretical and practical work of the choreographers, the study identified three starting points in Dance therapy - psychotherapy, physical / motor therapy and integrative therapy. Thus, in Dance therapy, to the initially noted two choreographic-compositional techniques, another one is added:

- ***dance improvisation*** - expression and reproduction of chaos in the psychoemotional world. Directly related to the problems of psychological sciences and psychotherapy - This explains why choreographers and their dance therapeutic methods developed in the United States advocate some new psychological and psychoanalytic techniques created in the twentieth century (Jung, Adler, Reich, etc.). In their dance therapeutic techniques the individual approach to the client (Espenak, Shoop), work with dance improvisation, expression, associative models is distinguished. They are based on the psycho-emotional expression of the client, his natural reactions and movements, which are psychoanalytic and diagnostic basis;
- **ready choreographic structures** - the cosmic order that puts things in place and explains the natural physical and other paths of movement. Directly related to physical / motor therapy here, the choreographic methods are influenced by certain dance styles, folk and ethnic dances, classical / modern / exercise. There is mainly a use of rhythmic motor models and choreographic structures (Bartenieff, Alexander, Autere). Leading in them is the physiological knowledge of the instrument of dance - the body, from which a connection is made with the psycho-emotional life and health improvement of human;
- ***integrative dance*** - a combination of the previous two choreographic techniques with other therapeutic and artistic methods and techniques. It refers to choreographers who include in their dance therapeutic methods the integrative approach and most often work with people of all ages and with various physical and mental disorders. They use mostly creative dance and various props. The emphasis is evenly on the training and pedagogical process, as well as on the artistic and stage reproduction of the dance as a final part of the general therapeutic process (Holger, Polk, Maite Leon, Puttock, etc.). Their main task is to provide an opportunity for dance performance to all people, regardless of physical, philosophical, racial and other differences.

With their methods, European choreographers and artists of the twentieth century derive the basic principles, models and directions in **Dance therapy** - presented as a finished product of dance art, it can be introduced into European educational and scientific practice.

SECTION III - APPLICATION OF DANCE THERAPY (XXI CENTURY) - traces the establishment and institutionalization of dance therapy as a method of analysis, diagnosis, integration and resocialization, which entered Europe at the end of the XX century and the beginning of the XXI century. The focus is on the intersections between dance and therapy. In this regard, specific examples and studies with clearly distinguished useful for human health qualities of dance are indicated, which predispose people (specialists and those in need) to prefer it to other psychological and body-oriented methods. The ways and areas of application of dance therapy in a modern interdisciplinary context and on a European scale (including in Bulgaria) are outlined.

Chapter 1. Institutionalizing of Dance therapy - During the second half of the XX century and the beginning of the XXI century many therapeutic methods and alternative medical practices were created. The functions of art and its application for therapeutic purposes are also expanded through the newly introduced art therapy. The beginning of the so-called therapy through expressive arts (expressive art therapy) is set, to which dance therapy also belongs. In chronological order, some of the first centers of European art therapy and expressive art therapy are considered. Dance therapy oriented professionals are beginning to group interests and seek their place between psychotherapeutic and art-therapeutic practices. Gradually, Dance therapy began to enter as an accompanying practice in medical institutions in Western Europe - England, Germany, France, etc., and subsequently as a psychotherapeutic or art-therapeutic direction in Europe and the world: Belgium, Sweden, Spain, Japan, Brazil, Greece, Israel, China, Mexico, Norway, Russia, Serbia, Romania, India, South Africa and others.

European organizations for Dance therapy and the established institutional units for Dance therapy in Europe are examined. Leading among them are England and Germany.

In **England**, research on the joint possibilities between dance and psychotherapy began to develop in the second half of the last century (1960-1970). Influenced to some extent by the "American model", the English Dance / Motor Therapy Association (ADMT) later became dance-motor psychotherapy (DMP) in 1982 and was renamed the Dance-Motor Psychotherapy Association (ADMP) in 2008. In this form, it continues to develop successfully to this day, providing a wealth of researches and trainings.

In **Germany**, around the 1970s, the Union of German Dance Therapists, now known as the Professional Association of Dance Therapists in Germany (BTD), began to form. According to the official website of the German Academy of Music Therapy and Dance Therapy, the "Scientific Society for Art Therapies" or the "Association of Art Therapies" (BKT) was established in Germany in the early 1980s.

At the beginning of the XXI century, many more associations, independent and professional organizations and institutes of dance therapy (TT) or dance-movement therapy (TDT) were established. The European Consortium for Arts Therapies Education (ECArTE) was founded in 1991. The first conference of the European Association for Dance and Movement Therapy (EADMT), held in Berlin in 1994, was attended by five countries. Member States, and statistics

from the association's official website show that by 2010 the number of member states has increased by another fourteen. **EADMT** is the organization under whose umbrella are united almost all national associations of dance and movement therapy in Europe. In 2012 in Athens, the Director of the World Dance Council at UNESCO, Prof. Dr. Alkis Raftis, organized an International Dance Congress dedicated entirely to Dance therapy and brought together experts in the field of countries from around the world. Among them are representatives from over 25 European countries.

This marked the beginning of the institutionalization of dance as a psychotherapeutic method and laid the foundations of Dance therapy in scientific and educational circles in Europe.

In the parallel made between organizations in art therapy and psychotherapy, one can trace their development, which contributed to the drastic increase in interest in dance therapy. This parallel shows that psychotherapy is at the heart of the institutionalization of Dance therapy in Europe. In this regard, the national and international associations in psychotherapy, motor therapy, behavioral therapy, etc., established in the second half of the twentieth century in Europe, are pointed out. Thus, according to (**ECArTE**), **EADMT** and the International Dance Congress in Athens (2012), a **chronological table** was compiled (see Table 1 at the end of the text) with data on Dance therapy **training programs**, accompanying courses and schools in the respective European countries. The smooth transition to the professionalization of dance therapy in Europe has been followed. Leading figures who have contributed significantly to this process, both from abroad and from Europe, have been awarded. On closer inspection, most of them are not choreographers or dance professionals, but their students and supporters or body-oriented professionals from other fields.

It is important to note that **the focus is gradually shifting from dance to its smaller structural components** - elements of dance movement (**EDM**), understandable and accessible to professionals in other fields. They begin to refract dance through established therapeutic prisms and mainly through psychotherapy. With some important exceptions, the process is particularly strong in the leading countries in the region - England and Germany. Along with this, a variety of terms are beginning to be added to the basic concept of dance therapy, indicating the specific field or practice to which the therapy itself is directed. Over the years, several "types" of Dance therapy have emerged:

- dance / movement psychotherapy (Payne, 1982)
- inclusive / integrative dance and integrative dance therapy (Benjamin, 2002)
- artistic dance therapy (Bertolaso, 2004)
- clinical dance / movement therapy (Goodill, 2006).

We can say that among them the closest to the foundation of Dance therapy (as a dance used in syncretic connection with the art of music) is the artistic dance therapy. As the specialist in this field, Prof. Bertolaso, claims that: "musicality, creativity and imagination are the main components of professional dance therapy. Artistic dance therapy can be distinguished from speech therapy or movement therapy, exercise, physiotherapy, psychomotor and free improvisation or pure action."³²

³² Cit.by: Bertolaso, Yolanda. Look at the International Scientific Magazine for Art " Musik, Tanz und Kunsttherapie" in: Anforderungen an universitäre Tanztherapieausbildung. [Online article] Musik-, Tanz- und Kunsttherapie, 7 April (20018): <http://tanztherapie.kuenstlerischetherapien.de/anforderungen-an-universitaere-tanztherapieausbildung/>also in: Bertolaso, Yolanda. Wege eben zur SelbstakepTanz, Bd. 9 (Pädagogik und Therapie) Musik-, Tanz- & Kunsttherapie. Paroli, 2000, 180, <http://www.yolanda-bertolaso.de/schriften.htm>

Here, in my opinion, with the "artistic" definition placed before the formula of **Dance therapy**, Prof. Bertolasso emphasizes the fact that dance in the first place is an art, and "art of the higher movement", which is syncretically connected with music and the creative component. However, such distinctions are not so clearly stated in connection with the art of dance in other dance therapeutic areas, which do not proceed from the creative or choreographic compositional laws and principles of dance as an art form. As a result, not only the dance, but its main distinguishing feature - the musical character of the movement - gradually fade, and in places completely disappear. Thus, the new direction of dance of the XX century - Dance therapy - in the XXI century is becoming increasingly difficult to distinguish among other motor and body-oriented psychotherapies, and its choreographic specifics are displaced or completely eliminated at the expense of psychotherapeutic ones. The study also cites such examples.

On the other hand, it is clear that European dance therapy organizations act in accordance with national health policies, standards and codes of ethics regarding psychotherapeutic and art-therapeutic practices adopted in the respective European country.

At the beginning of the 21st century, some countries in Europe already have government-approved professional development programs in the field of Dance therapy, some of which are represented in universities with scientific accreditation. Today, Dance therapy training programs necessarily include subjects such as physiology, psychology, pathology, history, movement analysis, etc., but not necessarily, but "recommended"³³ requirement for professional training in dance and choreography - in addition to two years of experience³⁴ (without specifying in what field) of the art of dance and passed classes in a freely chosen dance style or form. Therefore, specialists outside the dance can not take into account the presence of choreography in Dance therapy.

It has not been done enough to master the ready dance therapeutic methods and diagnostic models submitted by European choreographers of the 20th century. The gaps in the new training programs are more and more visible not only regarding the lack of the necessary practical (dance) experience, but also about the knowledge about the functional features and specifics of the choreographic art applied in *Dance therapy*.

An important clarification in this direction is also that in most European countries neither art therapy and expressive art therapy³⁵, nor Dance therapy, are officially recognized by governments and in official medical practice. However, probably due to its practical orientation, *Dance therapy* is gaining supporters who want to train and develop professionally in this area is very fast.

The new **profession of "dance therapist"** clarifies the need to introduce dance therapy specialists in modern formal therapeutic practice. The differences in the perception and practice of Dance therapy by choreographers and other specialists are pointed out.

The emphasis is on clarifying some essential provisions valid for the perception and application of the profession of dance therapist. The necessary qualities of the dance therapist are formulated - both according to the established ethical and health norms, and according to the subject of the research - the European choreographers, who gave the prototype of the profession.

³³ See the requirements for educational degree and qualifications USA: <https://adta.org/faqs/>

³⁴ See the requirements for educational degree and qualifications USA: <https://nationalcareers.service.gov.uk/job-profiles/dance-movement-psychotherapist>

³⁵ In the statistical data during the research, the continuity towards the professionalization of music therapy by the European educational centers, health and social policies is impressive. Therefore, an exception in this case may be music therapy, which has established its professional position in Europe since the middle of the last century. See the official website of the Bulgarian Music Therapy Association <http://bulgarianmusictherapy.com/>, researches and reports by Liliya Ahtarova, Angel Tomov, Neva Krasteva, Daniela Naidenova, also in the study by T. Popov (2004).

Important clarifications in the direction of the **choreographic view on the profession** are made by personalities such as Espenak, Shoop and Morris. They have definite requirements in the first place for the personality of the dance therapist - "*the future therapist must also be a dancer*" (Espenak, 1981) and to have "*the ability to distinguish functional from non-functional postures and movements; a body that is able to demonstrate everything it wants to teach.*" (Shoop, 1974). The majority of choreographers remind that every therapist is also a creative person, who in the process of work inevitably influences with his psychic energy (faith), creative attitudes, his real experience and abilities. Accordingly, he must be ready to overcome his personal biases and to have developed both professional dance and pedagogical skills, as well as impartial human feelings. Therefore, it is necessary to have an appropriate choreographic / creative, therapeutic and humanistic base on which to form dance therapeutic sessions.

As a profession built on the foundations of the art of dance, iconic choreographers put the **need for experience and knowledge in the field of dance, choreographic pedagogy and composition**, related to psychotherapeutic and physiological features, at the forefront.

In more modern conditions, the professional directions in *Dance therapy* become more extensive in relation to the requirements for knowledge of "body language" as a dance and choreographic art, but the psychotherapeutic and humane line of the profession is strictly observed.

According to the established **ethical and health norms of the profession**, there are certain requirements: "*the dance therapist establishes contact, plans treatment and evaluates on the basis of integrated knowledge of movement, dance and psychotherapy*".³⁶ They are complied with strict medical and occupational standards, which define the accepted occupational health, social and educational standards and codes of ethics in the country concerned, as well as its national and international policy on the matter. Due to the existing exchange of staff and experience in the broad therapeutic field of psychotherapy and body-oriented therapies, professional standards are dictated on the one hand by the aforementioned German Association of Dance Therapists (**BTN**) and on the other by the Certification Board of Dance / Motor Therapy (**DMTCB**) and the Academy of Registered Dance Therapists (**ADTR**) of the American Dance Therapy Association (**ADTA**).

Not only the fact that the examples help to highlight some important features of the qualities of the dance therapist, but the made parallels also highlight a kind of paradox, which is of paramount importance for the present study:

- The founders of dance as therapeutic use are choreographers and dance pedagogues;
- choreographers and dance pedagogues set the methodological basis of Dance therapy in joint cooperation with specialists from other fields;
 - The founders of dance as a means of therapy are choreographers and dance pedagogues;
 - choreographers and dance pedagogues set the methodological basis of Dance therapy in joint cooperation with specialists from other fields;
 - Subsequently, specialists from other fields derive the ethical codes in Dance therapy, "bypassing" the requirements of choreographers and dance teachers.

³⁶ Cit.from: Chaiklin, Sharon, Wengrower, Hilda. 2009, p.18.

Today, **the predominant contingent of specialists** in the field of Dance therapy are specialists in psychological, psychotherapeutic and social sciences, which are officially outside the field of dance and choreography. It is these specialists who significantly contribute to the establishment and institutionalization of Dance therapy by introducing it into their therapeutic developments and practices. And although they are not specialists in the field of dance art (as were the European choreographers before the institutionalization of Dance therapy), they set the official standards for training and application of Dance therapy throughout Europe.

It remains unclear why the German standards³⁷ are not related to the German Academy of Music Therapy and Dance Therapy (**MTK-Akademie**), but are coordinated with the American Dance Therapy Association (**AADT**). As well as why, after the requirements set by the choreographers-founders of Dance therapy, there are discrepancies in the ethical codes of the countries and basic factors for dance such as musicality, creative imagination, etc. are omitted. (Bertolasso).

The profession of dance therapist is multidisciplinary and applicable in various public and private centers, but Dance therapy still remains mainly in the non-governmental sector and depends on established European and international standards (**ECARTE or EADMP**), without being officially recognized by government and medical institutions.

Chapter 2. - Dance therapy and its connection with dance (according to the classifications for types of dance) - considers the applied aspects of dance as a means of therapy, its possible areas for implementation in both socio-cultural and scientific practice of the XXI century. With the development of science and the introduction of Dance therapy in the educational system, the interest in dance therapy increases. The number of dissertations and research in this direction is also growing. For example, the dissertation (2016) of Painter³⁸ includes detailed research on the role of circular dance in helping people suffering from dementia, and Schweizer³⁹ (2011) presents developments on the new "*choreography of consciousness*" and "*impulse entelechy*". Useful information for researching and teaching different styles and types of dance for people with disabilities can be found in Hill's study: "Dance for People with Disabilities. Handbook for teaching ballroom, quadrille and folk dances for people using wheelchairs and crutches." (1976), and many others.

At the beginning of the XXI century, innovative engineering and spatial thinking and the emergence of a new type of communication - digital, wireless, virtual and others. inevitably reflected in modern human life. They penetrate not only the environment, but also into the mental and physical orbits of man as a being serving his own inventions. As a result, innovative practices began to develop far beyond conventional models such as "metagenomics", "metapsychotherapy", "psychocybernetics", fully aware of the missing link - the movement and its connection with the human psyche. Thus, Dance therapy, at the beginning of the XXI century, began to become one of the preferred therapeutic tools mainly due to its musical expression and direct contact between people, much needed among the alienating virtual spaces of the new century.

More and more researchers (Hervey, 2009; Meekums, 2010; etc.) are turning to the therapeutic effects of dance and movement techniques (dance, pantomime, martial arts, yoga, relaxation,

³⁷ Look at: <http://www.tanzwissenschaft.de/tanzth-historie.htm>

³⁸ Painter, Claire Dance for progressive Neurological Diseases: therapy or therapeutic? DCH 320, (PhD), 2016.

³⁹ Schweizer, Jean A. The New Choreography of Consciousness: New Evolutionary Movements Creating a Quantum Leap, Attaining our Highest Human Potential. (PhD), USA: AuthorHouse, 2011.

gymnastics, etc.). In Europe, there is a revival of spiritual and harmonizing practices and dances of the past, but adapted to the modern Western European environment and standard of living - such as Reiki healing dance or Yoga Dance Therapy - a method of therapeutic choreography by Soraya Franco, etc., which enrich the modern look of Dance therapy.

In this direction are sought new interdisciplinary methods and techniques in Dance therapy from the XXI century, which bring to the fore the **relationships between Dance therapy and other dance styles** such as: classical dance (ballet), tango, Oriental dances, traditional and folk dances, Latin American and ballroom dancing, ancient practices and dance adapted to modernity, integrative dance. These combinations are supported by examples from modern research, in which the listed types and styles of dance are developed and scientifically tested as a specific dance-therapeutic practice (as in the above-mentioned "*psychoballet*" or "*ballet body logic*").

It has been found that Argentine tango is most often used successfully in the therapeutic practice of cardiovascular diseases and especially the beneficial effect on patients with Parkinson's disease (Mackie, Hackney) (2013); Garreto (2013).

Studies developed in a dance therapeutic context have shown that of the Latin American dances and ballroom dancing, waltz has the strongest impact on patients with chronic heart failure (2008). Ballroom dancing is also used for therapy for Alzheimer's disease (Cape and Cale, 2012), and the "Dance for Health" system by Carolyn Smith helps women with breast cancer, applied in Bulgaria (2019) and many others.

No less effective are considered traditional and folk dances, which according to research unite personal, social and national self-consciousness (Capello, 2007). They maintain both physical and traditional dance culture in a healthy balance (Shannon, 2012).

Today, fragments and choreographic series of oriental dance and "white dance" have been successfully applied as a Dance therapy practice for recovery of women - victims of sexual violence, for generating sexual energy or for prenatal preparation of the mother (Leon, 2006; Moe, 2013).

The restoration of ancient practices and dance as a healing method (trans dance, ecstatic and traditional dances or dance improvisation techniques) mainly helps to release psycho-emotional blockages and transformation of energies ("The 5 rhythms" of G.Roth) and the application of rhythmic motor structures ("The Dance of the Spiral" by D. Krastev), adapted to the environment and the needs of modern man.

The integrative dance is also distinguished, which combines different types and styles of dance, aimed at social integration, health improvement and personal development of people with "special needs". Integrative dance is the basis of the so-called *inclusive* (Holger) or *adaptive dance programs*⁴⁰. It also includes dance performances considered as a method of prevention or building a therapeutic environment through a choreographic work (Gates, 2006).

The results of the studied dance practices show that in certain training periods dance can have a variety of health effects on:

- improving the balance and coordination of movement, which reduces the risk of falls and body fractures, strengthens the vestibular apparatus;
- the correct posture, self-acceptance, self-perception and free expression of the performer;
- increases the feeling of confidence, tenderness, joy, passion, libido, social significance;
- reduces or overcomes the feelings of isolation, depression, neurosis, impaired coordination, limited movements; the modern scourge of immobility and obesity;

⁴⁰ See more at: <https://kidsdanceoutreach.org/adaptive-dance/>;
<https://www.bostonballet.org/Home/Education/Resources/For-Educators/Adaptive-Dance-Training>

Regarding **the application of Dance therapy as a scientific discipline in XXI**, another important explanation has been made - **the relationship between Dance therapy and therapy**. They present the results of the fruitful joint work between professionals and specialists outside the dance, with an emphasis on how the instruments of dance art are used and applied. And if so far the research focuses mainly on the work of choreographers, influenced by the revolutionary achievements of science, here the issue is considered from the opposite side - the contribution to Dance therapy of psychologists, anthropologists, physicians and scientists from various scientific fields.

The 21st century marks the successful cooperation between Dance therapy and various scientific fields such as: psychology (Lovatt⁴¹, Serlin⁴²), quantum and applied physics (Kumaravel⁴³, Tilev⁴⁴), anthropology (Hanna⁴⁵, Scott-Billman⁴⁶), a combination of video recording and Dance therapy (Allegranti). 2009) and others. Together with them, innovative methods are developed based on new research evidence. For example:

Neuroscientific discoveries about mirror brain neurons and their application in dance therapeutic intervention (Duong, 2012). Repetitive movements (ie repetitive and therefore traceable ones) and the method of "mirroring" or "reflection" (someone's movements) are strongly represented, which according to experts activates the feeling of empathy and empathy through imitative dance, considered a "cornerstone of Dance therapy." (Berol⁴⁷, 2006).

In **molecular biomedicine**, the behavior of various molecular mechanisms responsible for the work of cells and more precisely their choreographic structuring and restructuring (the study "Choreography of AIDS-1 proteolytic processing and collection of virions" - Lee, Potempa and Swanstorm (2012) By tracing the "dance pattern and choreographic patterns of movement" of certain cells, specialists found that the healthy between them have a rhythmically repetitive rotation, called "healthy rotation" (after M. Bissel⁴⁸). And those cells that have lost their backs move chaotically and can "heal" when they regain their successive rotations (according to W. Solheim⁴⁹). This brings us back to the bipolar model of creation, where the ordered repetitive structures of space and the multidirectional movements of chaos are in constant creative interaction.

One of the latest research on Dance therapy in an interdisciplinary plan is in connection with the development of **Dance therapy robots** (Suzuki, Lee and Rudovik, 2017), which support therapeutic sessions with children through coded performance choreographic algorithms.

⁴¹ Lovatt, Peter. This is why we dance. Article, BBC Science Focus. Dec (2016): Issue 302, 62-67.

⁴² Serlin, I. Root Images of Healing in Dance Therapy. (1993).

⁴³ Kumaravel S. The Sub Atomic Particle Dance and Its Relationship to the Study of Charge. *Conduction While Monitoring Bone Fracture-Healing*. RJPBCS, October (2014): Vol.5.No.5, 125-130.

⁴⁴ Tilev, Tilio. Energy impacts of the Paneurhythmy. [online] <http://panevrhythmia.bg.org/paneurhythmy/?lang=bg&go=viewpoints&auth=03&paper=tilyo-tilev> [Accessed 12 March 2017].

⁴⁵ Hanna, Judith. Anthropological perspectives for dance/movement therapy. *American Journal of Dance Therapy* Sept (1990): Vol.12, No.2, 115-126.

https://www.researchgate.net/publication/239310665Anthropological_perspectives_for_dancemovementtherapy [Accessed at 11 March 2017].

⁴⁶ Schott-Billmann, France. Primitive Expression and Dance Therapy (Explorations in Mental Health).(2016).

⁴⁷ Berrol, Cynthia F. The Arts in Psychotherapy Neuroscience meets dance/movement therapy: Mirror neurons, the therapeutic process and empathy. Elsevier 21 June (2006):

<https://www.sciencedirect.com/science/article/abs/pii/S0197455606000438>

<https://www.the-scientist.com/profile/location-location-location-31724>

⁴⁹ Check about Valerie Solheim at: <https://www.healingbees.org/about-me--sessions.html>

Today, psychobiology and robotics look at patterns of behavior between biological systems and the psychological content and behavior of man as a whole - spirit, psyche, mind and body, which for centuries has been the basis of dance, used as a means of therapy. It is no coincidence that specialists in the field of professional dance focus on working with restorative health programs and physical therapy together with the International Organization for Dance Science and Medicine (**IADMS**), and the National Institute for Health and Clinical Development (**NICE**) Dance therapy is a recommended means of intervention in people with level 1 and 2 of schizophrenia.

Important clarifications have been made about the differences between Dance therapy, therapeutic dance and Dance Movement Therapy. Attention is paid to the dance therapeutic detail:

- **components:** movement, rhythm, positions, repeatable dance motif,
- **shape and path of movement** - sacred geometry, dance drawing and figures;
- **functions** - communicative, integrative, meditative, relaxing, psychotherapeutic, social, etc.

Research unequivocally shows that for socially oriented and psychological disciplines the most important is the cognitive factor - most often sought through dance improvisation and expression, contributing to psychological relief through sharing. While in the exact sciences (physics, nanotechnology, etc.) the choreographic structure is considered, considered in space-time development and potential for transformation.

Among most of these studies, there is something very significant in Dance therapy - unlike all other motor active (athletes, athletes and motor practitioners) - is that dance practitioners are better prepared both physically and mentally. This makes the art of dance highly preferred as a means of therapy (Berol, 2006; Hegenduurn, 2003/2009 and many others).

In this regard, the present study repeatedly emphasizes that, unlike external dance specialists, the ability to return the movement to a dance composition or to use it as a material for building dance and choreography belongs to the dance specialists. They pursue one goal - to overcome the physical and mental disorders of people through the instruments of dance art. For this reason, when dance forms and structures are used for therapeutic purposes by foreign specialists, two situations are most often reached: either it is necessary to work with a choreographer, or many of the dance instruments and techniques remain at the level of movement / motor expression, and some completely disappear. The issue remains unresolved and insufficiently studied, especially with regard to the connections of Dance therapy with the art of dance and choreography.

At the end of the study, **the Bulgarian trace in Dance therapy** was sought and presented in its entire palette of different dance styles (Bulgarian folk dances) and new proven or not therapeutic practices (self-regulatory practice - "Dance of the Universe" by Sisi Georg, dance neurotraining - "Rhythmflow" - by P. Ivanov, etc.). There are two positions: On the one hand in Bulgaria the matter is unknown, and the concept of dance therapy is not an established term. There is a serious lack of specialists, information and knowledge on the problem. On the other hand, among the therapeutic and scientific circles in Bulgaria, the "panevrhythmia" is beginning to establish as a renewal and healing method of national importance. It is no coincidence that the Bulgarian physicist T. Tilev teaches a 5-year program "Fundamentals of Panevrhythmia" at NASA and the method is practiced by thousands of people in Bulgaria and around the world. However, up to this date the "panevrhythmia" has not been considered a therapeutic choreographic construct. For these reasons, I believe that in comparison with Western European countries, and in our Balkan neighbors, the issue of choreographic art and Dance therapy in Bulgaria is still at the dawn of its scientific development.

CONCLUSION

Although modern as a term and conscious orientation, the Dance therapy is rooted in ancient dance-ritual practices based on the belief in animism (the existence of the soul) and the inseparable connection man-nature-space. On this basis, concepts such as *healing dance*, *dance medicine*, *shaking medicine* and others, acquire their external expression and value in the face of ritual dance (ecstatic and trance dance). Dance becomes the outward expression of healing faith, beliefs and self-convictions. Supported by no less influential psychosomatic training, music, speech, costumes, herbs and paraphernalia, it began to function as a separate type of dance - healing. And through the use of appropriate dance techniques and techniques (improvisational or pre-structured), this type of dance has become a real art, used for centuries along with therapeutic purposes.

Examples from dance therapy in the dissertation can highlight several important points.

On the one hand, the fact is confirmed that in the history of European dance culture (and in the world as well) there are healing dance practices. There are two types of them - *preventive*, which are more expressive and curative, which are more structured.

In antiquity, European models were highly rationalized and occult - developed mainly in mystery dance practices, many of which were created and practiced on Bulgarian soil. While in Eastern cultures the knowledge of dance as a healing art is preserved and developed into ceremonial practices and preserved as an object of national and cultural wealth, in Europe there is a significant difference.

After the official entry of Christianity, the dance was condemned. It is here that the psychophysical connection is broken - the church engages in spiritual mediation, taking the soul away from the dance (which it treats as a carnal act). And the state and more precisely the military power deals with the development of the physical body through physical exercises, gymnastics, tactics and order, turning its back on the possibility of spiritual experience. Dance is forced to exist between the carnal and the emotionally religious world, where its possibilities are used for training and performative purposes without connection with the spirit.

Psychophysical disunity becomes even more visible when the dance is performed on stage. Then its healing possibilities completely move away from people (both in the mental and in the physical space) and dance becomes a spectacular and secular art, with a purely aesthetic impact. In Europe, the process of modifying dance into a stage product began with the formation of ancient Greek theater, when dance became an "ornament" for theatrical action. It was revived during the Renaissance and continued in the following centuries, until it reached a complete rupture in psychophysical unity in the twentieth century. Paradoxically, it is the defeats of this disunity that push humanity to rethink the age-old principles of the relationship between body, psyche and spirit. This also leads to a rediscovery of dance in its higher spiritual essence.

In Europe, successful attempts to revive psychophysical unity, achieved through dance and rhythmic movement, have been made in some spiritual and practical teachings (by Beinsá Dunó, Rudolf Steiner and Georgi I. Gurdjieff). The main achievement in their methods I find in the practical dance-composition models created by them for awareness and renewal of the connection between the body and the soul; between nature and spirit; between nature and the spirit (focusing – the fait).

The paradox is that, mainly for this reason, they are still not officially accepted and considered as healthy methods by the church and other authorities, nor by science and even in professional dance circles. That is, off-stage dance practices are still considered "charlatan."

In the first half of the XX century, in parallel with the dance revolution (in the face of modern dance, German expressionist dance, free dance, psychological rhythm, etc.), a change in the thinking and practice of dance art as a way of psychophysical impact was registered. And his direct "intermediaries" - choreographers and dance educators, theorists of natural ways of movement (mostly from Western Europe) are beginning to rethink it as a healthy and therapeutic usage. This happens in several planes - on stage, in the creative, rehearsal and training process. The dance becomes visible and strongly influential both for the audience (Wigman's *expressive dance*, Bodenwieser's *creative dance*, etc.) and for the inclusion of people in mass performances for health (the *movement choirs* for amateurs from Laban), *harmonic gymnastics and dance* (Dr. Menzendeck, Morris).

As with the spiritual-practical methods, after a number of creative experiments and author's developments, the dance is reborn into a new choreographic product - realized on another level of experience and sharing. And if in Europe for one reason or another this does not happen through spiritual-practical methods, then in the middle of the XX century it began to be realized through its intermediaries - choreographers and dance specialists. Two main choreographic compositional techniques are distinguished from the derived principles and methods of the European choreographers and artists - *dance improvisation* and *ready choreographic structures*. In the first case the feeling, that is, the emotional impulse, acts, and in the second the ratio - the contemplation and awareness of the impulse and the action.

In both cases, the use of dance as a therapeutic method requires the intervention of the choreographer - both in terms of dance expression and composition, and in the selection and systematization of dance instruments (movements, music, spatial and aesthetic form, place of performance, etc. .n.). For this reason, I find significant the contribution of European choreographers in the development of basic choreographic techniques as a means of communication, psycho-emotional liberation, integration, diagnosis and systematic correction of physical and mental disorders through dance. European choreographers perform their methods based on movement and dance (individually and in a group) and unlike all other arts used for therapeutic purposes, dance encompasses and affects in its entirety - it uses the capacity of the body, emotion and psyche. In this way, not only the psycho-emotional state of the performers (and probably the observers) is influenced and transformed, but through certain dance structures the space in which the dance is performed is influenced and reorganized.

On the other hand, it allows to look for a connection between choreography for a stage (as a stage product) and choreography for therapy. This task is solved by the choreographers Holger, Polk, Maite Leon, etc., who have applied their integrative models when working with people of different ages in disadvantaged social situations or with physical and mental disorders.

The "first wave" of dance therapists and their methods confirm the main thesis of the development - the beginning of Dance therapy in Europe was set by choreographers and dance artists. They come to the conclusion that dancing is the therapy itself and advise their clients (patients) and like-minded people not to stop dancing.

For this reason, it can be assumed that both in theological schools and in the newly created dance therapeutic structures, the dance of the XX century began to cultivate a new psychosomatic culture. And most importantly - it is recognized by people and becomes accessible, because through dance they begin to learn how to move, get to know and connect with themselves - with their desires and emotions, with others and nature, with the Divine.

Thus, with the help of choreographers, dance in the XX century began to regain its medium function - whether on stage, in nature or in a clinical environment, dance becomes food for the soul and health for the body. In this regard, the study recalls that in the art of dance, choreographers and dance educators and professionals are the ones who have the necessary skills to make and nurture this medium connection. They do this all their lives, intuitively or consciously following the desired movement and dance form⁵⁰. In the twentieth century, with the revival of the synergy between the body and the psyche, choreographers helped turn dance into therapy.

And by rediscovering dance as a therapeutic tool, the choreographers and dance educators upgrade their professional stage and pedagogical experience with additional training in psychotherapy, motor therapy, physical therapy and more. They study the relationships between human physiology and psyche, bringing them into their dance-therapeutic methods. And although psychotherapy, motor, physical, gestalt and other therapies already existed around the middle of the twentieth century, the models derived by choreographers acquired the significance of a new type of therapy, which began to be called *Dance therapy*.

In contrast to the institutionalization of dance therapy in Europe, in the last decades of the XX century the opposite has been observed - the dominance of specialists in psychotherapy and body-oriented therapeutic practices, but not of choreographers. In this regard, there are at least a **few trends**.

First, in the institutionalization of dance therapy, the ethical codes and professional requirements are in the foreground, which are formed as for future psychotherapists and other therapists, and not for dance specialists who will upgrade their professional experience, oriented in the therapeutic direction. The same is observed in educational structures. Mostly psychotherapeutic and motor models for therapy are studied, but not as a product of dance and choreographic art. And while dance therapy is viewed from such a position, it is impossible to expect foreign dance specialists to recognize dance and its choreographic techniques. In this direction, the institutionalization of Dance therapy by specialists outside the dance really poses a serious danger - the dance to drop out of Dance therapy. To avoid this, it is necessary to know the instruments of dance art, its choreographic-compositional techniques and relationships with music. The presented choreographic solutions and methods suggest something very important - that dance and music should be placed in a closely linked scientific and educational framework (as in the revival of dance therapy - Delsart, Jacques-Dalcroze, Laban, Gunther, etc.). It is no coincidence that in the history of dance therapy in Europe, Hornmann emphasizes that dance-movement psychotherapists and others are not officially recognized in Germany, as they do not meet the requirements of the academic community for dance skills - requirements adopted and developed by the Conservatory of Music.

There is another disturbing trend - in contrast to Dance therapy, in expressive therapies with art in Europe, Music therapy enjoys a far greater "professionalization" - among specialists in Music

⁵⁰ Probably that is why most of the studied European choreographers have a deep faith and a long life.

therapy, music art specialists predominate. For comparison - in Dance therapy instead of choreographers and dance specialists, "body-oriented" psychotherapists, music therapists, art therapists and others predominate. Why? And why is music therapy studied in state educational structures, and Dance therapy stays only in organizations at the level of the non-governmental sector?

Indeed, psychologists, psychotherapists, anthropologists, and all other non-dance professionals who have studied and / or tried the healing properties of dance have made a significant contribution to proving the psychosomatic relationship and the possibility of dance and movement therapy. They have no less faith than the dance professionals involved in this endeavor in Europe. But in fact they are much more, which earns and gives impetus to the "*second wave*" of *Dance therapy* in Europe. Therefore, although most of them are not choreographers or dance professionals, they have made a significant contribution to the institutionalization of dance therapy in Europe.

But aren't the attempts to institutionalize Dance therapy in Europe are actually a ways to shift dance from therapy to what the above specialists know better?

According to the current European requirements for practicing the profession of dance therapist, it turns out that despite their knowledge of dance and choreography, they must first become psychotherapists and then dance therapists. And to know the techniques and instruments of dance art is recommended, but in general - not mandatory. For me, as a representative of the dance art, this is like practicing Music therapy without understanding the laws and principles of music. It seems that the generally practiced European model gives preference not to choreographers, but to specialists foreign to dance, the majority of whom today perceive Dance therapy unambiguously with Dance Movement Therapy, Dance Movement Psychotherapy. From a choreographic point of view, this shows ignorance and neglect of the matter. Is dance, as the higher art of the musical movement, too "high level" to be mastered and used as a kind of therapeutic art? And is it still unclear in the rational and psychoanalytic approach in the Western European understanding of the relationship between the body and the psyche what dance and choreography are?

In this case, the question is not only about mediating desires of church and other authorities, but in general about the perception, attitude and culture of the modern Europe about the art of dance, its representatives and opportunities - there should be answers. Unfortunately, there are currently no adequate answers.

Then what distinguishes the choreographers and why are they are needed, if all the above factors are already present? Whether the choreographer himself influences with his presence and belief in dance as a therapeutic method – it is not a sufficiently studied field. But it is a fact that dance professionals master and use the art of dance as a way to the most complete impact on a person physically, psycho-emotionally and spiritually. They work with the human body, music and musically plastic expression, rhythm, stage movement, etc. With this they achieve spatial orientation, psychosomatic balance, influential psycho-emotional expression, conscious and harmonious movement, self-acceptance and self-knowledge, communication, social and other integration, stage realization, participation in a dance work. Through these examples and studies, the present study shows that these are in fact consciously sought-after therapeutic factors in Dance therapy.

In this direction, the current work takes a step forward. Represents iconic European choreographers and artists - their principles and deeds that helped revive dance as a form of therapy. Then, the

consideration of choreographers and artists, who gave the prototype of Dance therapy as a scientific field in Europe, helps to clarify the basic principles and techniques applied by choreographers in Dance therapy. For this reason, the study of European choreographers gives a new look at the formation and application of a **“European model” of Dance therapy** - considered from the standpoint of choreographic art.

The results of the influence of choreography as aesthetics and the search for Dance therapy in an interdisciplinary plan remain visible. In this direction, the study clarifies how choreography, dance and science can and do work together for the well-being of humanity in key areas of life such as: creativity, culture, education, science, social and intercultural relationships, but also specifically for the benefit of personal and social health.

Based on the historical-theoretical review of the existing factors and the indicated accents can be made the following conclusions:

- ✓ First of all, in order to talk about Dance therapy, its essential model must be fulfilled - achieving and maintaining a balanced connection between body, psyche and spirit as a single functioning system.
- ✓ There is a need to reconsider this connection through the techniques and instruments of dance and choreography. Otherwise, it will probably be another type of therapy. That is why the derived choreographic principles and methods, which served as the basis of Dance therapy as a scientific basis in the XX century, are important.
- ✓ The revival of Dance therapy is the work of choreographers, dance professionals and artists who know and apply the laws of harmonious movement and dance.
- ✓ In Europe, Dance therapy is institutionalized and professionalized thanks to the collaboration between the constellation of European choreographers and other professionals in the field of psychological, medical and social sciences, but subsequently significantly reduces the participation of dance professionals.
- ✓ At present in Europe it is difficult to talk about Dance therapy without it being clarified terminologically, essentially and functionally. Therefore, it is necessary for the healing possibilities of dance and the existing therapeutic models to be reconsidered and included as a basis for Dance therapy, both at the conceptual level and in practice.
- ✓ In order to be called Dance therapy, and not psychomotor, rhythmic, motor or other therapy, the presence and use of mainly dance, **choreographic compositional techniques and instruments (dance exercise, dance expression, music, etc.)** is required, which is not denies the necessary knowledge in the field of psychological, anatomical and physiological sciences.

Dance and choreographic compositional techniques in Dance therapy illustrate a complete symbiosis between internal psycho-emotional ideas and visual, sensory, motor-motor and spatial visualization. Therefore, the practice of dance as maintaining the health of the person in individual or group activity creates real and integrative conditions for performing therapeutic activities. This makes it applicable in a wide range of areas such as psychology and psychotherapy (mental disorders and serious mental disorders - Down, Alzheimer's, etc.), medicine (geriatrics, rehabilitation, oncology, etc.), physical therapy, kinesitherapy, social therapy, art therapy, body oriented therapy, etc.

In Bulgaria, information regarding the healing potential of dance is scarce. Not only psychotherapists, but also choreographers and dance educators are not taken seriously and with confidence by people in terms of their health and treatment through dance. More information, studies and researches in this area are needed, including with regard to the method - *panevritmia*.

The possible conclusion is that dance, used as a healing tool, manifests itself in relation to the level of progress in man and society (evolutionary, physiological, mental, sociocultural, spiritual). Therefore, like the American and European models of Dance therapy, it is still working out its mental and psychological modalities, ie. still standing in the rasion. However, this can be seen as progress, as the problem is being worked on and sooner or later the all-encompassing dance art will be brought back to life. Accordingly, it will naturally lead to the merging of the two models - psychological and physical through choreography.

Based on this, the Dance therapy in Europe will continue to develop its creative and interdisciplinary character, but already as a product of choreographic thought and art and in collaboration with other therapeutic models, defending its original musical and plastic movement essence. In this way, Dance therapy will again be perceived as a higher form of therapy, which through the tools of dance art successfully combines psychotherapy, art therapy, movement therapy and more.

CONTRIBUTIONS OF THE RESEARCH

- 1.The dissertation examines through the prism of choreographic art a little studied field, both in European practice and in Bulgarian science - *Dance therapy*.
- 2.Provides comprehensive information on several generations of European choreographers and artists who have contributed to the revival of dance as therapy. It considers the conditions for their development in the European space and the development of Dance therapy as a product of dance art.
- 3.This is the first research in Bulgaria, and as far as I know in Europe, which examines iconic European choreographers, who put the beginning of Dance therapy and its formation as a scientific field.
- 4.Distinguishes and gives meaning to **dance improvisation and pre-prepared choreographic structures** as **two main choreographic compositional techniques** in Dance therapy and in the methodology of European choreographers.
- 5.Presents and comments on the use of basic choreographic methods as an important prerequisite for increasing and developing choreographic knowledge not only in the field of stage dance, but also on the application of dance as therapy.
- 6.Clarifies the basic requirements for the profession of dance therapist, based on European professional qualification standards and European prototypes in the profession – the choreographers.
- 7.The study also gives a new look at the formation and application of an **European model of dance therapy** - considered from the standpoint of choreographic art.
- 8.Builds up an information bridge between the European and American dance therapeutic model.
- 9.Shows the differences in the perception and practice of Dance therapy by choreographers and other professionals.
- 10.Indicates the ways and areas of application of Dance therapy in scientific, educational, extracurricular and health forms and the ways in which it is associated with psychology, psychotherapy, art therapy, motor therapy, kinesitherapy, social and medical sciences, oriented to psychosomatic relationships and therapy.
- 11.The study reminds of the existing healing dance practices in the Bulgarian lands; analyzes the *pancevritmia* as a therapeutic choreographic construct; points out the Bulgarian participation in the development of dance as a kind of therapy; offers information about contemporary healing dance practices in Bulgaria.
- 12.The dissertation provides basic information that would be of interest for future research not only by specialists in the field of dance art and Dance therapy, but also in other fields such as art therapy or psychology, psychiatry, psychotherapy, medicine, biomedicine and quality of life, anthropology, neuroscience, biomechanics, European intangible cultural heritage, etc., in a transnational and interdisciplinary context, which makes it relevant today.

LIST OF PUBLICATIONS from Iliana Petrova Salazar:

1. **Petrova Salazar, Iliana.** Choreography structures with a healing impact in European practical spiritual teachings – focused on the method “Panevritmia” in Bulgaria. [Lecture - demonstration] The 54th World Congress of Dance Research, CID UNESCO, Athens, 26-30 June, 2019.
2. **Petrova Salazar, Iliana.** The healing possibilities of dance: Synergistic relationships. Lecture, 7th Hello, Health Festival. Plovdiv, 16-17 April, 2016.
3. **Petrova Salazar, Iliana.** Dance and rhythm in healing psychophysical practices. Synergistic interconnections. Proceedings - First Interdisciplinary Doctoral Forum of BAS, April 6-7, Sofia, 2016, 69/ p.37.
4. **Petrova Salazar, Iliana.** Dance Therapeutic methods and ancient ritual practices: PRACTICES: RELATIONS AND PERSPECTIVES. Art Readings, Sofia, 2017, 367-380/ DANCE THERAPEUTIC METHODS AND ANCIENT RITUAL PRACTICES: RELATIONS AND PERSPECTIVES 15th International Conference on Art Studies Readings, APR 02-05, 2017, Ed. by: Nikolova, K; Bozhikova, M; Georgieva, M; Marinchevska, N; Penevska, V, in MARGINALIA, 2018, 367-380/ Web of Science: http://apps.webofknowledge.com/Search.do?product=UA&SID=E47b1kL8pYZwKzoTvY&search_mode=GeneralSearch&prID=e0cf5f3c-9bc9-41f0-8f2a-28ab25316acf
5. **Petrova Salazar, Iliana.** Dance rhythmic compositions with healing effect from the XX century in Europe as an example of synergistic work between dance and music in a therapeutic direction. Collection of materials. Doctoral readings from a scientific meeting of PhD students at the National Academy of Music "Prof. Pancho Vladigerov", 16-17 MAY, 2018, 199-209.
6. **Petrova Salazar, Iliana.** An overview on the Panevritmia of Beinsá Dounó as a dance therapeutic choreography from the first half of the XX century. Proceedings, FOURTH NATIONAL CONFERENCE "PETAR DANOV, THE TEACHER, IN THE CULTURAL SPACE OF BULGARIA", Varna, 14-16.09, 2018, 215-227.
7. **Petrova Salazar, Iliana.** WORKSHOP "Gurdjieff Sacred Dances for Awareness" Here and Now ", conducted by Jivan Sunder. [online article] Arts Platform, (2017): http://artstudies.bg/platforma/?p=950#_ftn1
8. **Petrova Salazar, Iliana.** Integrative dance - essence, dance-composition techniques and methods, stage adaptation. Sofia: Art Readings, 2019, pp. 403-411.
9. **Petrova Salazar, Iliana.** „The movement choruses“ of Rudolf von Laban - ideas that reflected on Dance therapy. Collection of materials. Doctoral readings from a scientific meeting of PhD students at the National Academy of Music "Prof. Pancho Vladigerov", Sofia, April 2-3, 2019 (forthcoming publication).
10. **Petrova Salazar, Iliana.** Panevritmia – an angel dance or a therapeutic choreographic method. Lecture demonstration, 3d Edition of the festival “Hello, Health”, Teteven, 15-16 June, (2019):
11. **Petrova Salazar, Iliana.** Synergistic aspects in Dance therapy from the XXI century. Proceedings - Second Interdisciplinary Doctoral Forum of BAS, dedicated to the 150th anniversary of BAS, Borovets, August 29-31, 2019, 148 / p.42.
12. **Petrova Salazar, Iliana.** Interview about Dance therapy with the specialists from Coaten’s family. 05.05.2019. Edited and approved personally by Richard and Mary Coaten (forthcoming publication in English language).