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Teacher Attunement to Kestenberg Movement Profile Tension Flow Attributes in Preschool Transition Planning

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TEACHER ATTUNEMENT TO
KESTENBERG MOVEMENT PROFILE
TENSION FLOW ATTRIBUTES
IN PRESCHOOL TRANSITION PLANNING

A Thesis
Presented to
The Faculty of the
Dance/Movement Therapy & Counseling Department
Columbia College Chicago

In Partial Fulfillment of the
Requirements for the
Masters of Arts Degree in Dance/Movement Therapy & Counseling

by
Anna Carolyn O'Connell, GLCMA

August, 2010

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ABSTRACT

Using the action research methodology, the purpose of my project was to develop transition tools based on the Kestenberg Movement Profile (KMP) tension flow attributes (TFA) that could improve the working relationship between preschool children and their teachers during specific transition times in their daily routine. The data collection, via videotape, written observation, discussions with the teachers, and the data analysis was an ongoing process from the beginning of the study until each plan had been put into practice for a few weeks. I analyzed each of the videotapes, my written observations, and the ideas discussed in meetings with the other two teachers. The teachers and I collaborated to create new transition plans for the transitions from lunch to nap and from play to clean-up. Then we implemented them into the daily classroom schedule. The results of the new transition plans are presented in a separate film documentary illustrating the sequence of events. The film includes a visual representation of TFA, a re-enactment of pre and post research project, and some tips on how to recreate this project if so desired. In conclusion there is a brief description of how this project is relevant to the field of dance/movement therapy and counseling and the field of early childhood education.

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It is most likely true that the more attentive a person is to a child, the more that child will feel cared for and accepted. -Gallagher and Mayer, 2008

CHAPTER 1: INTRODUCTION

Teacher-Child Relationship and Nonverbal Communication

The teacher/ therapist-child relationship is one of the most important relationships that a child might ever have. As professional caregivers, we want the best for each child we teach. This can be a challenge with some children because their nonverbal cues may be difficult to understand. As Riggott (2009) discovered in her research, the teacher's nonverbal cues could have a negative impact on the teacher-child relationship when they are unaware of how their nonverbal behaviors influence the children. Therefore, it would be beneficial for teachers and therapists alike to have the training necessary to facilitate the most positive relationship possible. This might include observational training, *attunement* training, or nonverbal communication training.

As a teacher assistant in a preschool, I find myself using my movement analysis, dance/movement therapy (DMT) techniques and intuition to inform me in finding effective ways to help children struggling with taking a nap, self-regulation, or participating in classroom activities. I sometimes talk with teachers about the techniques I am using and, while they seem interested, they can have trouble understanding why I do the things I do. This might be because of the movement observation language and the complexity of each aspect of the method I use, which is based in DMT and movement analysis techniques. I believe that teachers can learn how to be more aware of their movements and to become more attuned to the children's movements as well.

Attunement

Attunement to the genuine movements of a client is one aspect of being a dance/movement therapist. I believe there is a need for childcare professionals to have a deeper understanding of how their movements affect the children they interact with daily. Awareness of children's nonverbal communication as well as the teacher being aware of their own behaviors is an important part of attunement (Kranz & Ostler, 1976). It is crucial for therapists and teachers to understand the nonverbal communication style of the children they care for in order to increase the quality of their relationships (Leipzig, 1990). In my experience, when early childhood educators are aware of children's nonverbal communication style and movement behaviors, they can effectively run a safe caring classroom.

Education vs. Therapy

Therapy and education have overlapping roles but there are major differences between them. Therapists have many analytical theories and frameworks to choose from such as, Freudian, psychoanalysis, client-centered or expressive arts therapies. Early childhood educators also have plenty of teaching/educational techniques and different schools of thought to pick from such as, Waldorf, constructivism, Montessori or *traditional education*. One defining thought within the traditional educational system that I have personally experienced, as a student and a teacher, is that children are in school to learn facts about math, science, art and social studies, but not to talk about feelings or discuss social matters. In contrast, the purpose of therapy is entirely about discussing feelings and social matters. I have noticed over the years of being in the various school systems that alternative educational methods and theories are becoming more established.

There seems to be a shift from the traditional educational model to one that is more holistic or natural, maybe even therapeutic in a way. These educational models are being put into practice to meet the needs of the children. These alternative forms of education help create a safe environment for various learning styles, a way to bring more art or cultural awareness, and lastly these forms of education are based on general developmental knowledge about how children learn about the world around them.

The concept of bringing a natural approach to teaching is reflected in the Montessori method, which was founded on Maria Montessori's research with children labeled as retarded and inner city children in Italy. "Her observations led her to conclude that children learn best in environments that respect and support their individual development" (Cohen, 1990, p.1). Maria Montessori envisioned that her educational method would foster the child through the sixth grade level and that it would enable "social and emotional growth as well as cognitive competence" (Cohen, p. 1).

From this foundation, other types of holistic education methods have been able to get their foot in the door, such as the newly established Chicago-based Namaste charter school. The use of movement and nutrition is the main focus in the Namaste charter school. "Namaste integrates physical fitness and nutrition as core components of its rigorous academic curriculum" (Namaste, 2010).

Knowing that there are people in the education field working to make developmentally appropriate curriculum, physically, mentally and emotionally gives hope to those students who would otherwise be lost in the traditional education system. I have seen the traditional educational model educate many different types of learning styles and people are able to learn a great deal within it. However, there seem to be several holes in

the system that plenty of children fall through, which causes them to drop out and/or become labeled as troublemakers.

As a preschool teacher assistant, I tend to integrate some concepts under what I think most would call “traditional” education. I do a lot of repetition of the topic we are covering because I feel that repetition is a valuable way to actually retain new information. I also test children to see if they are really understanding and retaining the information I present. I am aware that children learn in different ways and at different speeds. I happen to be a little slower when it comes to grasping intangible concepts and mathematical theories. In that light, I have a hands-on, “try it yourself on your own time” approach to education. I have them try to tie their own shoes until they have tried enough times and then I will help them when they ask for it. When I am teaching the alphabet, I take many approaches to introduce the letters to the children. I have the children make letters with their bodies. We sometimes play “Alphabet Island,” which requires the children to recognize each letter and know the sound it makes in order to get to the “boat.” We also sing songs that have many words with the one letter we are learning in them. Just as I use a variety of educational approaches in my teaching, I also utilize a combination of counseling theories in my clinical work.

Clinical Theoretical Framework

My clinical theoretical framework is one that combines person-centered theory and practice with the principles of the Ways of Seeing (Tortora, 2006) method with children. *Person-centered therapy* was formed by the practice of Carl Rogers. He proposed that, “persons have a basically positive direction” (Rogers, 1961, p. 26). Rogers believed that as a therapist if he could “provide a certain type of relationship, the other

person will discover within himself the capacity to use that relationship for growth, and change and personal development will occur” (p. 33). The individual is able to take charge of his/her life and make decisions that influence the world positively. Rogers believed that it was extremely important to be “real” in relationship with another person but especially with clients. I try to see each of my clients for who they believe they are and understand where they are in life when they walk through the door. From there, I hope they will trust or come to believe that my intention is to know who they are as a whole, genuine person.

In addition to person-centered concepts, I found that the core principles of the *Ways of Seeing approach* developed by Tortora (2006), a dance movement therapist herself, is a fundamental theory for how I approach therapy with children; not only in a therapeutic setting but also in the preschool where I work. To get a better understanding of how precise and invested the Ways of Seeing approach to therapy is, the core principles are as follows:

Our moving bodies tell stories, which speak of our experiences. All people, even children, create their own personal nonverbal movement styles composed of a unique combination of movement qualities. These movement qualities are their expressive communicative styles- regardless of how conventional or atypical these styles might be. Children’s skills and developmental levels are best looked at within the context of qualities of their nonverbal behaviors. Even severe movement limitations have a qualitative element-whether in the muscular tension level, the habitual body position, or the frequency or infrequency of eye contact. How these qualities are expressed creates a sensation, an attitude, or a response

from the mover to those in the environment. In return, observers of these behaviors have reactions to these expressions based on their own personal experiences. It is this action-reaction that influences developing social emotional relationships and affects therapeutic and educational interventions. Interventions are relationship-based, with the strength of emotional bonds being paramount and supporting all other areas of development. (p. 63)

Transitions for children, whether it is from one activity to the next during the day or from one stage of development to another, would benefit from the Ways of Seeing approach to therapy. The Ways of Seeing is a dance/movement therapy approach that focuses on the person's developmental movement experiences and relationship to objects and others around them (Tortora, 2006). Tortora's concept is especially relevant when working with children because it requires the caretaker to know how to observe the child's nonverbal behaviors to get a better understanding of how they are experiencing the world they live in.

Transitions

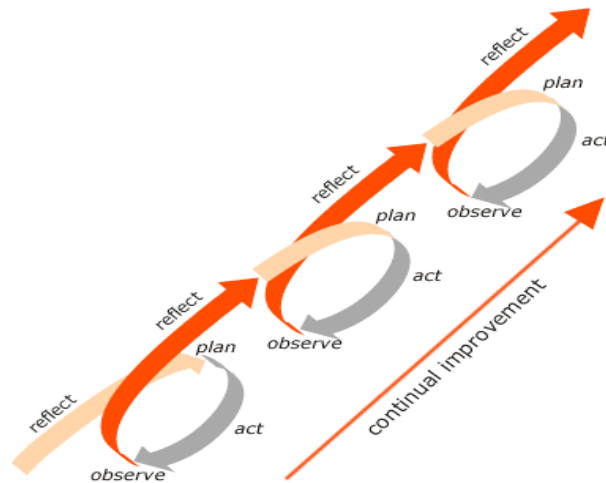
A *daily transition* is any movement from one area in the room to another, around the building, from inside to outside, or a shift in a daily activity. The transition from a child arriving in the morning into the classroom to the time they start to play with their peers is one daily transition. Another example would be the transition from snack time to circle time. Transitions can be difficult for both children and teachers. I cannot express the amount of stress relieved when each transition is planned before it happens. They can be chaotic and unsafe if they are not well planned and carefully practiced. In the video that accompanies this document, the head teacher described the lunch to nap transition,

prior to our modifications, as a “very stressful” time of the day. When I was doing my initial observations for this project, I noticed that the daily transitions worked best if the teachers and the students knew what was happening and the responsibilities of each were explicitly stated. In the next section I will discuss the type of research methodology I chose to use and how it was implemented with the two daily transitions we focused on for the project.

Research Methodology

For my thesis project I decided to use the concepts of *the Kestenberg Movement Profile* (KMP) to create more effective daily transition plans for the classroom I work in. The type of research methodology I used in my thesis project is known as *action research*. Borgia and Schuler (1996) stated, “action research is a positive, supportive, proactive resource for change” (p. 1). It is focused on a cycle of action that is guided by the researcher and the participants. The researcher formulates the initial plan in relation to the participants’ needs. The plan is implemented, observed, and then reflected upon by researcher and participants. Data is collected by the researcher and analyzed with the participants. Based on observations, an adjusted plan is put into place and the cycle continues (Borgia & Schuler).

The diagram below illustrates the process of action research:



(Action Research diagrams, Teaching Resource Exchange, Hospitality, Leisure, Sport and Tourism Network, 2010)

From this diagram, it is apparent that in action research there is a definite sequence of action that pushes the outcome to improve as each new plan is put into practice.

Borgia and Schuler (1996) listed some benefits of action research in the educational field which include:

Teachers taking a closer look at what children actually do and what they themselves do; teachers develop a deeper understanding of children, and of the teacher-learning process; teachers are viewed as equal partners with their collaborators in deciding what works best in their situation; solutions are arrived at cooperatively; action research is an ongoing process, rather than a program, and its principles can be applied elsewhere. (p. 1)

In my research at the preschool, we “reflected” on my observations and the other teacher’s suggestions about how to improve the daily transitions. We considered the flow of the movement through the room and also the environmental factors specific to the

classroom and created a new “plan”. We put the new plan into “action” and then “observed” what parts worked or did not work. After several different plans and reflections, we agreed upon two plans that seemed to work the best for each of the two transitions. These are the transition plans you will see in the ‘after’ section of the video project.

Thesis Project

The purpose of my project was to develop transition tools based on the Kestenberg Movement Profile (KMP) tension flow attributes (TFA) that might improve the working relationship between preschool children and their teachers during certain transition times in their daily routine. The theory that I explored in the preschool classroom where I work involved creating more effective daily transitions based on the *tension flow attributes* (TFA) of children. The idea is that if the TFA of the children are observed accurately during a transition, the teachers can then use that information to create more effective transition plans. In the Ways of Seeing approach Tortora (2006) stated that the action of the child and the reaction of the observer “influences developing social emotional relationships and affects therapeutic and educational interventions” (p. 63). Amighi, Loman, Lewis and Sossin (1999) stated that TFA “introduce a measure of control or regulation over the expression of needs through the influence of feelings and temperament” (p. 73). From this information I wondered if I created transition plans based on TFA, would it help improve the children’s emotional regulation. Now that the transitions are more organized around the children’s needs, the children appear to feel safer and more secure which affects their self-regulatory abilities. The Ways of Seeing approach is clear about interventions being relationship-based and that the most

important aspect during an intervention is the emotional bond between caregiver and child being able to support all other areas of development (Tortora). This atmosphere of a structured sequence of events provided exactly that for the children and also affected the teacher's ability to self-regulate, which in turn was a great model for the children to attune to during the transition.

Video

In addition to this document, I created a video to visually demonstrate the concepts being explored in the project. I wanted to give the readers of my thesis a more detailed and informed understanding of the TFA and what a daily transition looks like in a preschool setting. The concepts are much more vivid and the process more tangible in the form of a video. The video illustrates the transitions as they were before the intervention and it shows how they appear with the new plan in practice. I also intended the video to act as a helpful tool for those who might want to try the concept of planning transitions around TFA.

The video begins with an overview of the preschool classroom's daily schedule and the need for the intervention during the two transitions. There are clips of the children demonstrating the six tension flow attributes in everyday activities. Next there is a demonstration of the before and after sequence of each transition, featuring the children who actually went through the process of learning the new transition sequences.

The intended audience of the video is early childhood educators and dance movement therapists. It is an educational tool for those who might want to use the idea of creating transition plans based on TFA for their clientele. It could be helpful for anyone who might benefit from knowing how to plan effective transitions. It is also a tool that

might help early childhood educators become more aware of the possibilities
dance/movement therapy has to offer their students, their classrooms and themselves.

CHAPTER 2: LITERATURE REVIEW

In *early childhood education*, the teacher-child relationship is a crucial aspect of every classroom. I will focus on previous literature about nonverbal communication in the teacher-child relationship and how the relationship is affected by the teachers' knowledge and awareness of both their own and the children's nonverbal communication. With the idea that transitions are some of the most crucial times of a preschooler's daily routine, I will discuss what others have said about techniques they find helpful in planning and implementing transitions. Since my thesis project was based on techniques of dance/movement therapy (DMT), I will describe what DMT is and more specifically the use of DMT with children. Under the umbrella of DMT, I will define and include information about the Kestenberg Movement Profile (KMP) with a focus on the tension flow attributes. I will also describe how the KMP concepts are important to child development. Finally, I will discuss various studies and theories on the topic of attunement.

Quality Preschool

Early childhood education is a broad term that covers most educational programs serving children birth through eight years of age (CPS, 2010). Under that broad term are preschool programs, which include children age three to five. In the following section I will discuss the various elements that help to create a quality preschool environment.

As a teacher assistant in a preschool I have had the privilege of working with an organized, caring, intentional and very engaged teacher. The children have a sense of safety created by the consistency of the daily schedule. This type of consistency allows the children to know when to expect daily changes and what will happen during that time.

As a result, most of the children in our room have been able to internalize *self-regulation* techniques, which allows them to learn new information and have a good relationship with the teachers because their needs are being met emotionally, physically and cognitively.

One priority that is universal for most parents is the quality of care their child receives at preschool. According to the Chicago Public Schools Early Childhood Education website (2010) the requirements for a quality preschool classroom include:

Caring - promotes children's positive relationship with teachers and other children. Organized - establishes routines and schedules so children, teachers, and parents know what to expect and when. Intentional - provides a curriculum that promotes school readiness by aligning content with early learning standards and area schools. Engaged - insures that children are engaged in the activities provided so that they can learn from them (CPS Early Childhood Education FAQ, 2010).

Caring

Here is a closer look at what each of these criterion mean. Having positive teacher-child relationships makes for a pleasant atmosphere and a safe, comfortable environment for learning. The teacher is also required to teach pro-social behavior skills in order to foster caring peer relationships.

Organization

Organization is very important in the planning of transitions and activities at any level of education. Siegel (1999) pointed out that, “experiences early in life have a tremendously important impact on the developing mind” (p. 14). It is crucial for teachers

to be organized with the youngest children because they are not only looking to the teacher for knowledge, they are depending on them to help their emotional and psychological organization. Another aspect that young children are dependent on their teachers for is self-regulation or ways to contain their emotions during the difficult times of the day (Siegel, 1999). One approach to help this successfully along is by having a well-organized classroom and consistent daily routine.

Intentional

Intention can be seen in many ways. In the case of the requirements for a quality preschool classroom, CPS (2010) is referring to curriculum planning. However the youngest children need their teachers to be intentional through movement as well as with the words they communicate to their students. This intention will increase the likelihood of the child being able to internalize their world more clearly because they are able to attune to an adult who is moving and speaking with consistency and direction (Siegel, 1999).

Engagement

Engagement, in this case, involves making sure the children are focused on an activity so they can learn the lesson. Another way to think about engagement is in the way the teachers engage in their teacher-child relationships. It is critical for teachers to be aware of what they are doing or feeling as well as what their students are doing or feeling (Balazs, 1977). It is not the traditional approach to teaching but as I will describe later, it has been used by Balazs in a special education high school classroom. Balazs' way of incorporating teacher engagement into the school day can increase the quality of

education immensely because the focus is on the student-teacher relationship during the learning process.

Needs of a Child

Maslow's (1970) hierarchy of needs, in order of importance are: safety, love, affection, belonging, self-esteem, and self-actualization. Roffey and O'Reirdan (1997) stated that, "some children have difficulties coping with the demands of school because their basic needs are not being met elsewhere" (p. 66). That being said, it is important to fulfill each of these needs for the children before the teacher can expect them to learn any additional information. Once a child feels his/her needs are being met there should be a consistent structure for them to rely on to keep that sense of safety. This can be achieved in simple ways; the teacher can put up the daily schedule and go over it with the kids every day, and work with the children to create safe ways to travel through the school building (Roffey & O'Reirdan, 1997).

Nonverbal Communication

Teacher-Child Relationship

A study conducted by Gallagher and Mayer (2008) on the teacher-child relationship showed that having a responsive teacher creates the highest quality of care for children. They stated that it is most likely true that the more attentive a person is to a child the more that child will feel cared for and accepted. Gallagher and Mayer reviewed various studies on teacher-child relationships and found that the way the teacher acted and the words they used mattered significantly in a child's development. In her discussion of her research findings Riggott (2009) stated, "Teachers need to communicate verbally and 'hear' what their children are saying through their bodies and movement.

Children function primarily on a nonverbal level; it is crucial that we tune in” (p. 80). Not only does the nonverbal behavior of the teacher influence the children but also the teacher’s awareness to the children’s nonverbal cues is greatly significant in building a positive teacher-child relationship (Riggott).

Modeling

The way a teacher moves around their students and how they model interactions with others can have a positive or negative impact on the children observing. Amighi et al. (1999) explained modeling in terms of the development of kinesthetic mirroring, "gradually, kinesthetic mirroring becomes supplemented by visually-induced mirroring of facial expressions and body movements which help the child to empathize and understand the emotions of others" (p. 124). This means that while the child develops their social/communication skills they can use their teacher's nonverbal communication skills to help self-regulate their own emotions while interacting with peers or adults.

Roffey and O’Reirdan (1997) explained that the teacher is to model good communication skills, keeping awareness to the child’s body language while also being aware of their own body language and what that may convey to the child. “Some children will pay more attention to body language than words” (p. 91). They also mentioned that on the other hand they might also misinterpret it, which is why they gave a few tips on how to increase body awareness and facial expressions by role-playing and drawing pictures. These activities are to help the children gain a better understanding of and more language for nonverbal communication (Roffey & O’Reirdan). The more a teacher models desired behavior during difficult situations the more choices the child has to choose from when they become frustrated or unhappy. The teacher is giving them ways

of interacting that will help them develop positive relationships with peers and future teachers.

There is a need for caregivers to model healthy emotional behavior before the child can begin to practice it. Meekums (2008) performed a study on the effectiveness of DMT groups on the development of emotional literacy and the capacity to understand and produce appropriate nonverbal/emotional signals. They found that the children involved had to learn how to read emotional signals before they could write them. As a caregiver I am always hoping that the children will be responsive to my suggestions or signals on how to react to a specific situation. Eshel, Landau, Daniely, and Ben-Aaron (2000) found that if a child is responsive, it indicates that the child gains pleasure from accepting the caregiver's plan, and involvement represents attempts to gain the caregiver's audience and make them an active member of the child's activities. The majority of the time, a child will express him/herself nonverbally. Some caregivers miss or misinterpret these subtle signs, which could be the child's only form of communication.

Misconceptions of Nonverbal Communication

To clear up some misconceptions about nonverbal communication Leipzig (1990) included some myths about nonverbal communication and how it pertains to the teacher-child relationship. As an educator it is helpful to be aware of each aspect of nonverbal communication and how it can affect the teacher-child relationship.

The first myth Leipzig (1990) covered is that nonverbal communication stems from a natural process. He stated that current research actually leans more towards it being a learned process through observation of significant others' nonverbal

communication. He also explained that it comes from right brain processing, meaning it is more *analogical* than verbal communication, which means it is learned through *induction* versus *deduction*. This has implications for teacher-child relationships because it shows that modeling appropriate nonverbal communication can help children learn effective communication.

Another myth is that if the nonverbal communication is not intended for the person viewing it, then it should not be considered communicative. Leipzig's response, nonverbal communication whether intentional or not is communication if the recipient ascribes meaning to the action. This is especially important for caregivers to become more aware of their own actions around the children and what they might unintentionally be telling them (Leipzig, 1990).

After this review of myths Leipzig (1990) went on to describe in great detail each of the various dimensions of nonverbal communication which are: chronemics (how time is used and perceived), proxemics (the space between people and objects, artifacts, objects or environmental factors), kinesics (bodily gestures /facial expressions), vocalics (vocalized nonverbal aspects of verbalization-how we say the words), haptic (the intent behind touch), and olfactory (gustatory or sense of smell). He explained that each aspect must be considered to achieve effective integration of nonverbal communication.

Awareness to nonverbal communication and intention of behavior from the teacher can help to create a better classroom atmosphere. With this type of intention the integration of the various aspects of nonverbal communication should be considered in the planning of the daily schedule, which includes transitions.

Teacher Training

On the topic of teachers' actions effecting a child's development, Kranz and Ostler (1976) stated that awareness and training in nonverbal communication would serve teacher-child communication and facilitate a better learning environment. Along the same lines, Loman (1994) made a ploy for caregivers to understand children's movement development and stated, "adults who understand the various stages in movement development of the young children in their care are better able to support these children's creative, self-expressive mastery of developmental tasks" (p. 26).

The concepts that teachers use to observe and interpret nonverbal communication are sometimes implicit and not always intentional but may feel innate to them. In their very detailed study involving explicit and implicit dimensions of adult-child interactions Kugelmass and Ross-Bernstein (2000) looked at one teacher's interactions with the children in her classroom and how her nonverbal cues influenced the type of care the child received. The results showed that it is important for the early childhood educator to integrate critical reflection into preparation and development of everyday interaction. The study also helped that teacher examine her own assumptions, beliefs, and theories about caring for children and how this same practice can help others.

Transitions

The classroom can be a distracting and sometimes confusing place for young children. Therefore it is important for educators to be prepared to make it easier to foster a peaceful learning environment. Some of the most important daily activities that most teachers overlook are each transition between the learning activities. Henthorne, Larson, and Chvojicek (2000) stated, "of all the daily routines and activities in an early childhood

classroom, transitions are the most critical” and that “daily routines, whether in the toddler room or with preschoolers, will take place smoothly when you are prepared” (p.1). Baker (1992) defined transition as “a change or passing from one condition, place, thing, activity or topic to another” (p. 3). Even in her article on classroom management Crosser (1992) believes that transitions need to be scheduled and planned. She described the B.A.S.I.C.’s of classroom management as: before school begins, arrival and departure times, schedule transitions, interactions with equipment and materials, and conflict management.

Types of Transitions

In their own technique and vocabulary, Henthorne, Larson, and Chvojicek (2000) identified a large comprehensive list of eight kinds of transitions that might happen during the day: routine changes: a change in routine or activity that is signaled by a sensory cue; settlers: techniques used to gather children together and prepare and quiet them for the upcoming group time; attention grabbers: interesting objects or brief activities designed to get and focus children’s attention; stretchers: exercises that get children and staff moving and stretching; extenders: activities that extend the time when you have a few minutes to fill or expand children’s knowledge about a current or a previously learned topic; magic carpet activities: learning activities that take place in a designated magic carpet place for those waiting for others to finish a task; magical moments: times when a group of children are between activities; on the move or out of the room, and excusers: methods used to dismiss children from a group time and transition them to another activity (Henthorne, Larson, & Chvojicek). All of these

transitions have a significant impact on the atmosphere of the classroom. It is important that the teacher pre-plans for each type of transition.

Planning Transitions

Baker (1992) listed some criteria to consider when planning a transition. Teachers should make sure they are transitioning for a reason and calculate how long the transition will be. Be aware of what activities will occur before and after the transition. Have materials needed for the transition prepared. Note the space available that the transition will take place in. Be prepared for the amount of teacher direction needed. Prepare the physical setting in order for the transition to run well (Baker). Baker stated, “direction should be clearly stated for the children” (p. 5). If the children know where they are supposed to be and what they should be doing during the transition then the teacher will be able to observe the transition from further back instead of be in the midst of it directing traffic.

Henthorne, Larson, and Chvojicek (2000) gave some guidelines for creating successful transitions which include: make them developmentally appropriate, ones that reflect the children’s strengths and interests, have them reflect the cultural and social differences of the children, and generally anticipate the children’s needs. They suggested connecting transitions with the curriculum of the day for further learning and to change transition techniques when they are no longer effective.

Alger (1984) utilized a teacher modeling-not manipulating approach to transitions and classroom management; the main idea or goal being a slow shift from teachers running every aspect of the classroom to children learning self-control and responsibility. She emphasized the importance of planning the whole day and allowing children to give

input into rules and solutions to daily problems. Alger was very clear about what manipulative techniques might look like and was specifically appalled at the idea of flipping the lights off to get the children's attention. Crosser (1992), on the other hand, stated that flipping the lights off is a very appropriate technique to use to get the children's attention. These are examples of transitions and are effective on a case-by-case basis. Therefore what works for one class or age group may not be effective for another.

Self-regulation

Whichever approach is used in transition planning, there is an important aspect that should not go unnoticed. This being the ability of the actual planned sequence of events to help the children and the teachers regulate their own behavior and emotions during the transition. Henthorne, Larson, and Chvojicek (2000) made the observation that, "when transitions are effective, children will 'magically' move to the next daily routine without even recognizing what is happening" (p. 8). The magic that happens is the sense of ease the teacher gets when the children are able to go through a difficult time of the day with little to no guidance from them. This concept corresponds to one previously stated by Alger (1984) in that the transition process should allow the responsibility of getting through the transition to shift from the teachers job towards the children. A smooth transition is due in part to the consistency of routine but even a consistent routine can be dis-regulating and chaotic at times.

Consider this example: A preschool teacher has just announced to the class that they will be going outside. She tells them to put their coats on, go to the bathroom and get in line. The teacher and the children are going to be overwhelmed by the traffic in the room if that teacher lets all her students get up at the same time. The disorganized

movement might increase the teacher's anxiety about the safety of the children and the time spent in transition will affect the amount of time they can spend outside. The children might become restless waiting for the teacher to let them outside. Since this may happen everyday the teacher most likely has accepted the normalcy of the stress.

Siegel (1999) stated that as a child is attuning to their caregiver they would not only attune to the body language but also to the caregivers mental state. The mental state of the teacher during this scenario may be disorganized or distracted which in return creates a chaotic atmosphere for the children and ultimately an unsafe, stressful transition. If the teacher were to create a more organized transition plan that allowed for children to travel in smaller groups as they go to pre-determined areas at a specified times, it might help the teacher self-regulate her own emotions and behaviors more effectively. This in turn might aid the children to attune to the teacher's organized mental state and be more self-regulated themselves.

The Use of Music

Some have shown the use of music to be an effective way to transition. Baker (1992) made a few suggestions for the transition between playing and cleaning up: listen to music, have teams for different centers, and have a helper chart. Register and Humpal (2007) outlined three case studies done with three different groups of children: one toddler class (inclusive, meaning there are children with a-typical developmental disorders with typical developing children in the same classroom), one kindergarten class (Title I, for students at risk of failure and living at/or near poverty), and one preschool class (early intervention, for children with a possible a-typical developmental disorder). They all were able to experience 30 minutes of group music therapy a week. Music

therapy in the study included the use of musical instruments and singing songs. The study showed that transitions seemed to take place more easily when music was utilized (Register & Humpal). The study results illustrated the ability of music to cue a specific desired behavioral response with a greater deal of success than without the music cue. Most children love to listen to music and some like to even sing along. The use of music during a transition appears to help the children attune to the rhythm of the music in the moment, which creates a safer atmosphere cushioning them as they move into their next daily activity.

It is essential to understand the importance of transitions, how they work and how they can aid in building a safer, more secure environment for the young children in early education. Along with early education, dance/movement therapy is also a way to help foster a mindful and integrated way of caring for young children. In the following section I will discuss what DMT is and how it is helpful for children and some ways it has been used in the classroom setting.

Dance/Movement Therapy

Dance/movement therapy (DMT) is defined by the American Dance Therapy Association (ADTA) as “the psychotherapeutic use of movement as a process which furthers the emotional, cognitive, social and physical integration of the individual” (ADTA, 2010). Koch (n.d.) described DMT as a therapeutic process that starts at the body, “assuming that changes on the body level will cause or bring with them changes on the cognitive and emotional levels” (p. 109). The use of this technique is based on the assumption that, “when traumatic events or obstacles impede the normal growth process, maladaptive experiences get stored in the body and are reflected in body movement”

(Loman & Foley, 1996, p. 341). The implication of these experiences being stored in the body not only influence the individual's movements but also their cognitive processes and emotional regulation. In DMT, the main process for healing is the creative process, which requires the integration of emotional, cognitive, and physical components (Koch, n.d). The use of movement metaphors offers the DMT client an opportunity to express their feelings when language is inadequate (Meekums, 2008). DMT is also used as a form of preventative health and wellness, such as: yoga, meditation, and can be used to relieve daily stress and tension. In the next section, I will discuss how the methods of DMT are used with children in clinical settings and educational settings.

DMT with Children

Why Would a Child Need DMT?

Tortora (1994) listed some reasons for a child to have a referral to a clinical DMT program: children showing signs of or diagnosed with failure to thrive, Autism, pervasive development disorders, children who have had continuous or complicated medical treatment, and parent/infant attachment difficulties.

Since children are primarily nonverbal and infants are exclusively nonverbal, trauma may stunt a child's psychological and/or emotional development because it can impair the child's ability to attune effectively to their caregivers' nonverbal cues (Tortora, 2006). Brazelton and Cramer (1990) discovered that there is a level of internal regulation and homeostasis required on the infant's part in order to develop the skills for effective nonverbal communication. Unfortunately, this means that infants who are unable to attain a level of internal regulation might be unable to develop the ability to effectively communicate nonverbally unless they are taught how to by their caregivers.

This type of nonverbal education requires some extra effort on the caregiver's part and possibly supplemental therapy. The trauma that a child encounters has a profound affect on the relationships they will have for the rest of their lives. As stated earlier, this trauma can manifest itself in the body movements of the child (Loman & Foley, 1996).

Observation and Intervention

In dance/movement therapy the therapist learns about children through careful observation of their movements and vocalizations. Tortora (1994) stated, “for the raw materials of our trade are non-verbal communications. The first technique tool we use is observation the second, sensory awareness and stimulation” (p. 3). Therapists are attentive to the child’s nonverbal cues. Tortora stated that the body is the first tool we have for containing and processing individual experiences. “This place where verbalization has no meaning is where dance therapists may enter, especially when working with the youngest children” (Tortora, p. 3).

To plan an intervention the “therapist looks at the child within the context of expression of self (their movement) in relation to their interaction with others (space)” (Tortora, p. 2). Tortora explained:

In dance/movement therapy, body movement simultaneously provides the means of assessment and the mode of intervention...not with the goal of helping children accomplish a task...but rather to develop a socially, emotionally supportive relationship as a way to hear what the child wants and needs to say about his or her experience in the world and what is problematic about this experience. (p. 3)

Ways of Seeing Approach

One model for practicing DMT with children developed by Tortora (2006) is the Ways of Seeing approach to therapy which she described as a “philosophy and a method of relating”(p. 65). The approach emphasizes the importance of observation, and the literal way of seeing and also the metaphorical way of being known and witnessed without prejudice. She stated, “when an adult observes a child by witnessing, kinesthetic seeing, and kinesthetic empathy, the child is truly ‘seen’” (Tortora, p. 236). The Ways of Seeing approach follows *authentic movement* and dance/movement therapy elements. It is different from these two forms of therapy because of how its materials are “organized into a full program that can be used as a bridge from observation and assessment to intervention and educational programming” (Tortora, p. 255). There is also a strong emphasis on the use of Laban Movement Analysis (LMA) as an observation tool. Tortora stated that this is because “although all dance movement therapists have some training in LMA, not all dance movement therapists integrate it as deeply into their work as was done in this program” (p. 255).

In the Ways of Seeing four-part therapeutic process there is a need for the therapist to skillfully navigate fluidly through each element. The four elements include: 1) matching, 2) dialogue, 3) explore and expand, and 4) nonverbal to verbal. Tortora (2006) stated, “it is by moving without encumbrance through each level of this four-part process that a deeper relationship is built over the course of time” (p. 267).

Matching is a use of attunement and mirroring in order to create an emotional connection with the child. “Attunement and mirroring both signify a therapist’s desire to meet a child on the child’s own terms by demonstrating an interest in learning what the

child may be experiencing” (Tortora, p. 260). The next step in the therapeutic process is to create a dialogue through the use of the movements that are familiar to the child. This occurs by using the same movements the child usually uses but the therapist starts to introduce them in a new interactive manor. The next element is to explore and expand the familiar movements of the child. The therapist starts “expanding the child’s repertoire of movements by introducing novel elements that encourage the child’s potential” (Tortora, 2006, p. 262). The final stage of the process is nonverbal to verbal, which can take shape in many ways. One way is for a therapist to verbalize the child’s movements and the possible intent behind them. To interpret a child’s movements verbally opens a new world of meaning and intentionality for the child. As the child becomes more acquainted with the concept they can begin to compare their actual intentions with the therapist’s interpretation (Tortora).

DMT in the Classroom

As stated above DMT with children does not always need to be clinical and the child does not need to have trauma or problems in their life to benefit from DMT. It is important to keep in mind that dance/movement therapy based concepts can be used in school settings with typically developing children. This can take many forms such as: taking breathing breaks during the day to help the children stay centered and calm; discussing personal space and how to be aware of one’s body in space; as well as allowing the children to explore different ways of moving, expanding their movement repertoire.

Balazs (1977) is one of the few that has accounts of using the methods and theories of DMT in a special education high school classroom as a model teaching

technique. Balazs wrote about how humanistic education is child-centered and emphasized the idea that a child's knowledge is just as important as their feelings and emotions. Dance/movement therapy is very similar with its client-centered therapeutic approach. Her idea for education involves a new movement for dance to be used as a "preventative and therapeutic medium to influence the behavioral development of the child" (Balazs, p. VII).

Dance/movement therapy in the schools according to Balazs (1977) impacts two main areas: 1) prevention or working toward the normal development of a child, and 2) as a modality for changing behavior by helping children who have difficulty functioning in an educational setting. She stated, "dance-therapy in the school is not a therapy per se, but a technique that facilitates self-awareness and sensitivity. It is a process that provides experiences to help the child to internalize, integrate and learn" (Balazs, p. 4). She also mentioned that it is a way for the educator to understand the students' feelings and emotions better and thereby influence behavior.

Balazs' (1977) integrated DMT into the classroom with an absence of *achievement-oriented behavior*. The educator's role was different than traditional educators might expect, in that they did not grade, judge or discipline. It is the educator's job to create an environment of trust and openness so the students feel safe to explore and try new things. She placed emphasis on moving authentically in an improvisational manner where the student is able to transform internal experiences into outward forms. "In an atmosphere of trust the individual is encouraged to explore many ways of moving, that, in turn helps him to extend the range of his movement responses" (Balazs, p. 19). Just like the Ways of Seeing approach, Balazs stresses the idea of increasing one's

movement repertoire because it is a major principle of dance/movement therapy and can be a significant measure of success for a client.

More recently Kornblum (2002) created a comprehensive curriculum that employs the body and the mind in developing the skills necessary for creating a safe environment in the schools. It teaches protective and proactive behaviors tailored for the aggressors, the targets, and the witnesses of aggression. Kornblum stated “in order to make a significant impact in preventing violence, communities need to make a commitment to teach new skills, starting at the earliest school level” (p. 11). In order to disarm the playground Kornblum used dance/movement therapy techniques. She explained “professionals who teach prevention need to have an understanding of the roles of bullies and targets and the witnesses of bullying” (p. 11).

Starting with bullies, Kornblum (2002) defined bullying as “any form of behavior that causes physical or psychological distress” (p. 12). She stressed that it always involves an imbalance in power, whether physical or emotional. The target is the receiver of the bullying. The target can be a bully in one setting and the target in another. Kornblum emphasized the need for the child who has a dual role to be given the skills needed to feel empowered in a safe way as well as receive the empathy they need as targets of aggressive behavior. The witness role is important to go over with children because it gives those children who are watching a way to keep themselves safe and when to get an adult involved.

Kornblum (2002) gave practical and descriptive exercises to work with children in violence prevention. Through spatial awareness, self-control and stress management, awareness to tense situations, movement strategies for dealing with conflict, managing

anger and building empathy, she informed the reader of many ways to give children the ability to create a safer place to live.

Along with Tortora (2006), Loman (1994), Balazs (1977) and Kornblum (2002) there are other dance movement therapists in the field working with children utilizing most of the concepts and theories stated above. Another way of looking at therapy with children is through, what I like to call, the KMP lens. When a dance movement therapist works with a child they might use the Kestenberg Movement Profile to help guide their evaluations and interventions.

Kestenberg Movement Profile

KMP History

The Kestenberg Movement Profile (KMP) is a developmentally focused extension of Rudolf Laban's system of movement analysis. The introduction of Laban Movement Analysis (LMA) by Ingard Bartinieff to the USA and the use of it by Schmais and White as a dance/movement therapy tool for training therapists helped the dance therapist to make the transition from internal kinesthetic sense to an intricate cognitive understanding of movement behavior (Levy, 2005). Dr. Judith Kestenberg and her colleagues organized concepts and expanded on the work of Rudolf Laban and Warren Lamb into a theory of development (Levy). Although she trained dance movement therapists in her theories and methods she did not call herself a dance therapist. Instead she referred to herself as a movement "re-trainer" (Levy).

Basing her ideas on the theoretical formulations of Laban and Lamb, Kestenberg "added subsystems of movement patterns to effort/shape patterns and correlated all movement characteristics with psychological phenomena, creating a developmentally

psychologically coherent profile” (Levy, 2005, p. 127). Martha Soodak, Penny Lewis, and Susan Loman are some of the original pioneers of the KMP who worked personally with Kestenberg and used it in their therapeutic practices as dance movement therapists (Levy). Loman and Merman (1996) stated, “the KMP provides dance movement therapists with an in-depth tool for observing, assessing, and working with the nonverbal language of clients” (p. 213)

KMP

The Kestenberg Movement Profile is a “system of movement analysis, which describes predictable movement phases of development through variations in muscle tension and changes in bodily shapes which can be noted and catalogued” (Loman, 1994, p. 20). The ideas presented in the KMP offer several intervention possibilities, which are based on dance/movement therapy and developmentally psychological theoretical understanding (Loman & Merman, 1996). The KMP was also designed as a way to observe the mother-infant interaction systematically (Coulter and Loughlin, 1999). The KMP views “minute variations of movement patterns, rhythms and preferences with regard to their relevance to psychosexual stages of development, affects, defenses, adaptive functioning and self and object representations” (Levy, 2005, p. 127).

The KMP contains four movement clusters that have been derived from Laban’s description of efforts. Here they are, along with the possible psychological implications: tension flow rhythms (which reflect unconscious needs); tension flow attributes (which reflect temperament and affects); pre-efforts (which reflect immature ways of coping, often used in learning and defensive behaviors); and efforts (used in coping with space, weight, and time elements) (Amighi et al., 1999). Of these four movement clusters, I will

focus on the six tension flow attributes (TFA) because they are the premise of my project done in the preschool classroom.

Tension Flow Attributes

Loman and Merman (1996) stated that tension flow attributes “reflect early needs, drives, feelings, and specific developmental issues and achievements; attributes of tension flow reflect affective states and temperament” (p. 214). Tension flow attributes reflect a presence of regulatory ability or control of the expression of needs and drives through the influence of emotions and temperament and “tension flow in movers can be recognized through the process of kinesthetic attunement” (Amighi et al., 1999, p. 73). This act of attunement is how a dance movement therapist may begin to build a therapeutic relationship with their clients. It also helps them become aware of a child’s feelings or needs during a session or possibly in the child’s daily life. “Ideally the dance movement therapist would have awareness of and access to all of the attributes so that she could relate to whatever feeling state the child presents” (Loman & Merman, 1996, p. 220).

Lewis (2003) states that TFA function as “affective need regulatory mechanisms” (p. 32-33). They can help with survival during childhood but they can become “detrimental” later in life (Lewis, 2003, p. 32-33). For example, a child may need to have abrupt movements to keep out of harm’s way in their home. If they continue to use those abrupt movements as they get older in different areas of their life where abrupt movement is not necessary they could end up harming their relationships; such as leaving friendships without warning, or moving too fast in a romantic relationship. If this person were to go to a dance movement therapist for treatment, the therapist might take the time

to observe the individual's TFA to assess which treatment goals would be most beneficial for that individual. Here is a more in-depth look at the six tension flow attributes.

Even Flow

The first TFA is even flow, which “consists of evenly held levels of tension” (Amighi et al., 1999, p. 65). Even flow has more of a fighting quality to it and can be short and fleeting or sustained using a longer duration of time. Some common movements that require the use of even flow include a long pinch or bite, concentrating on a task or the act of pressing. It helps perpetuate a mood or feeling which can take the form of an infant being calm and quiet for a long period of time staring at an object. Or it can be used to create the long agonizing screams of a child in distress.

Flow Adjustment

Flow adjustment has an indulging quality to it and “consists of small adjustments in tension flow which reflect and create subtle changes in feelings and moods” (Amighi et al., 1999, p. 66). Some infants may use flow adjustment to snuggle with a caregiver or they may use it to adjust away from discomfort. “A person with a high frequency of flow adjustments rarely sustains a single feeling for a long time, but rather is more apt to be emotionally variable” (Amighi et al., p. 66).

High Intensity

High intensity uses the fighting elements of movement thus it “consists of extreme levels of intensity of tension flow” (Amighi et al., 1999, p. 67). Some movements children use with high intensity are jumping or an infant lying on its stomach straining to raise their head off the floor. When combined with free flow high intensity

movements can be exuberant and uncontrolled like a temper tantrum. When combined with bound flow the movements might look more strained to an observer.

Low Intensity

Low intensity is an indulging quality that “consists of low levels of intensity of tension flow” (Amighi et al., 1999, p. 67). The types of movements that use low intensity are mild, quiet, shy behavior. When combined with free flow it gives a relaxed feeling. When combined with bound flow it creates a feeling of mild caution or limitation. With the presence of low intensity the ability to accept easily is available to that individual.

Abruptness

Abruptness is a fighting quality and “consists of swiftly changing levels of intensity” (Amighi et al., 1999, 68). If someone uses a high frequency of abruptness in his or her movements it reflects impulsivity, impatience or alertness (Loman, 1994).

Graduality

Graduality is an indulging quality and “consists of gradual changes in tension flow” (Amighi et al., 1999, p. 69). It is characteristic of people who take a long time to shift moods or feelings and who take their time moving through activities or transitioning from one activity to the next. It “reflects patience, endurance and taking the time to feel intensely” (Loman, 1994, p. 21).

Movement Analysis

As a certified movement analyst, I am able to see the everyday movements of the children I work with in a way that other educators might not. This is due in part to the intensive years I spent learning how to observe movement and analyzing the meaning behind it. Moore and Yamamoto (1988) explained that the act of movement observation

and analysis can be seen as a process of four phases: 1) relaxation, 2) attunement, 3) point of concentration, and 4) recuperation.

They elaborated on these four phases; Relaxation is the preparation for what is to come; it involves centering oneself and keeping a calm state throughout the process of observation. Moore and Yamamoto (1988) stated that, “attuning allows us to use our senses of sight, hearing, touch, and kinesthesia to establish contact with what we see thus warming us up for more demanding tasks to come” (p. 212). The point of concentration means to literally pick one aspect of the movement and study that element only. This helps the observer not become overwhelmed, and keeps the experience simpler. Recuperation is an active and positive recharging of energy and should be used throughout the process of observation (Moore & Yamamoto).

Moore and Yamamoto (1988) described the structure of observation starting with “why are we observing?” and five other elements that need to be considered (p. 214). The first thing to consider is the role of the observer, whether they are to be a bystander or participant observer. Second, the duration of the observation will influence the kind of results found. Third, the selection of movement parameters for observation will guide the results and data gained. Fourth is the mode chosen for recording impressions, and it depends on the intent of the observation process. Finally, the process of making sense and drawing conclusions means the observer would make an interpretation in relation to the original question of why we are observing and attempt to make a conclusion.

This way of looking at movement and placing meaning to it is complicated and can be very difficult for someone who has not had any training in the area of movement observation. When I am working with the children in the preschool I do utilize my

dance/movement therapy and movement analysis skills. I have a specific way of observing my own and the children's nonverbal communication. I make every effort to move with clear intent and stay explicitly aware of why I am using the movements I choose. Moving on to the topic of attunement, I will discuss in detail about the formation of the caregiver-child relationship and the implications it has for the child's cognitive, emotional and physical development.

Attunement

Attunement Between Child and Caregiver

Attunement happens when a child and caregiver are "in sync" so to speak. According to Loman and Merman (1996) attunement is "the process of responsively duplicating changes in muscle tension" between a child and caregiver and is based on mutual empathy (p. 214). Loman (1994) stated that, "attunement or nonverbal empathy is the basis of the early parent-child bonding process" (p. 21). This body-to-body connection gives the child a feeling of being known deeply and a strong bond is created between the dyad. They have a two-way nonverbal or verbal communication continuously going and the caregiver understands the infant or child's cues, and the child in return understands their caregiver's unique cues. "During attunement the therapist (attuner) responds to the mover's physical needs and feelings" (Loman & Merman, 1996, p. 214). Attunement is critical for a child and caregiver to have a healthy relationship. A caregiver in this respect is anyone who cares for a child for the majority of the day; they could be a biological mother, adopted parent, a teacher, or an extended family member. Regardless of who they are, the quality of that relationship will shape the cognitive, emotional and social development of that child (Siegel, 1999).

Mental State Alignment

Siegel's (1999) ingredients that he identified to attain attunement between caregiver and child include: "contingent, collaborative communication that involves sensitivity to signals, reflection on the importance of mental states, and the nonverbal attunement of states of mind" (p. 86). When this happens it means the two individuals' states of mind are in alignment, or they have achieved *mental state alignment*. Therefore there is a place for *mental state resonance*. Mental state resonance means that, "each person's state both influences and is influenced by that of the other" (Siegel, p. 70). Once there is alignment within the dyad, the child can then use the caregiver's mental state to help regulate and guide his own mental processes. For example, as a teacher is walking through a chaotic hallway during a fire drill the children behind her can see from the way she walks, smiles and talks to them that they can also be calm and get through the hallway in an orderly manor and not be scared by the noise and the commotion. "Attunement involves the alignment of states of mind in moments of engagement, during which affect is communicated with facial expressions, vocalizations, body gestures, and eye contact" (Siegel, p. 88). There is a need for caregivers to be aware of the constant engagement and disengagement within the dyad (Siegel). Hackney (2002) wrote about how a child literally yields into their caregiver and then pushes away from their caregiver. This form of being with and separating can lead to more autonomy and confidence within the child, and in turn may increase the caregiver's potential to be supportive of the child and give them healthy guidance.

Embodied Attunement

Mirror neurons. As the importance of nonverbal attunement is becoming a clear indicator of a healthy relationship between a caregiver and child, it is encouraging to have empirical evidence of a biological form of attunement in the human brain. Research has been done to examine the neurology of movement and how humans perceive others' movement. Meekums (2008) stated that, "embodied empathy is, in part, genetically programmed through the existence of so-called mirror neurons"(p. 96). What has been discovered about these mirror neurons is that they are automatically activated in the same area of the brain and body of an observer as the mover's brain and body (Gallese, 2006). This means that when anyone observes someone jumping, as long as they have seen it before, their mirror neurons are activated in the same area of the brain as the jumper. Gallese also stated, "to perceive an action is equivalent to internally simulating it" (p. 49). This mirror neuron matching system is, "somatotopically organized, with distinct cortical regions within the premotor and posterior parietal cortices being activated by the observation/execution of mouth-, hand-, and foot-related actions" (Gallese, p. 48). It has been shown that the mirror neuron system is in charge of the perception of communicative actions, in processing action related sentences, in imitation, and basic forms of mind reading (Gallese).

This information not only applies to movement, emotions and sensations are also included. Gallese stated the following:

We do not just "see" an action, an emotion, or a sensation. Side by side with the sensory description of the observed social stimuli, internal representations of the body states associated with these actions, emotions, and sensations are evoked in

the observer, “as if” he or she were performing a similar action or experiencing a similar emotion or sensation. (p. 54)

The discovery of mirror neurons is exciting news for teachers and therapists. These amazing neurons can and do help children learn how to walk, crawl, run, skip, jump, climb, etc. They also enable the children to feel emotions in others, via facial expressions. If a child feels sad because their friend hit them, as a teacher I would ask the hitter how she thinks her friend feels. This makes her have to look at her sad friend’s face and almost every time as she verbally recognizes the feeling, she also imitates the expression on her own face. This shows that her mirror neurons are working to help her learn how to have empathy for others. It is also great news for dance movement therapists that have clients who appear to not to be participating. If they are in the room and watching the activity, thanks to mirror neurons, they are still a part of the group process and have the potential to attune to those around them. In a way mirror neurons could help to increase a child’s physical, emotional and psychological development.

Various forms of embodied attunement. Along with mirror neurons, there are several other ways to observe and experience the embodied attunement between two people in relationship with each other. Amighi et al. (1999) defined basic attunement as, “the blending or adapting of rhythms to those of another person” (p. 29). Loman and Foley (1996) used Kestenberg’s term complete attunement, which involves, “mutual empathy, similarity between partners, and a synchronization in rhythms” (p. 345). Some other ways of attuning include, visual attunement; attuning to the mover by looking at but not touching the mover, touch attunement; includes components of visual attunement meaning the attuner moves in the same rhythm and degree of tension as the mover, and

intermodal attunement; includes visual/touch/verbal and auditory attunement when necessary (Loman & Foley). Both embodied and verbal ways of matching the intensities of the other can create a sense of mutuality between, a caregiver and a child (Loman & Foley).

Merging and Clashing

Merging can occur if the mother and infant attune too well and there is not enough differentiation between the individual rhythms of the child and caregiver. Amighi et al. (1999) stated that this could occur when a mother has an "above average ability to regress to early rhythms both empathetically and in motor performance" (p.31). The mother with this skill may have trouble allowing the child to become independent later on. Also a child could be skilled at adapting to the caregiver's needs and the environmental changes, which may seem like they are easy going. This could be a problem later on in life when they need to think of their own needs rather than others (Amighi et al.).

Tortora (2006) explained that the "dance" between a child and caregiver is a dialog of their nonverbal interactive behavior. In dance/movement therapy the therapist can use movement analysis to determine whether their individual movement styles are similar, complimentary or incompatible to that of the child they are working with. This dance evolves over time and the *clashing* that may occur might be necessary for a child to experience in order to learn other ways of attempting to communicate. Amighi et al. (1999) explained that the "clashing of rhythms indicates differentiation between self and other, and may be stimulating or foster creativity" (p. 31). They warned however, that if the clashing continues it could reinforce or create "dysfunctional patterns both in

relationships with people and with the material environment" (Amighi et al. p. 31).

Again as previously highlighted, it is important for caregivers to be aware of their own nonverbal style of relating and the impact it has on the children they care for.

Loman (1994) stated that clashing is a way for the child to inform their caregiver that they are about to enter into a new developmental phase and their needs will be changing. For example, when a young girl usually takes a nap in the middle of the day her mother will be use to having some time to herself. But eventually that child will not go to sleep during nap time and this will frustrate the mother and create a bit of a distance between her and her child because she is not able to have her alone time. The child is probably not intending to frustrate her mother. She is merely responding to a bodily change that is telling her that she is not tired in the middle of the day any longer. She has entered a new phase of her life that does not require a nap, which her mother will need to adjust her routine around. Once this adjustment settles in they will be able to get back to a familiar flow or rhythm and continue to develop their unique bond. Attunement is a critical part of the caregiver-child relationship, which includes teachers and their students.

Conclusion

As stated by the Chicago Public School (2010) system, a quality preschool classroom is lead by a teacher who is caring, organized, intentional, knowledgeable and engaged. From the literature presented by Loman (1994), Siegel (1999), and Gallagher and Mayer (2008), it can be inferred that nonverbal communication affects the teacher-child relationship by influencing a child's social, emotional and psychological growth. At the heart of the Ways of Seeing approach (Tortora, 2006) is the belief that all

multisensory, somatic, and nonverbal early childhood experiences play a role in a child's development.

Through the modeling of appropriate nonverbal communication skills and attuning to nonverbal cues, the implementation of DMT concepts in the classroom could greatly benefit the next generation of children in early childhood education. One reason Balazs (1977) used DMT in the classroom was she believed it could increase student's self-awareness, sensitivity to others, and the ability to internalize, integrate and learn about the self. She thought it might improve their ability to learn academic material as well.

When a child attunes to a caregiver/teacher there is a body-to-body connection that may be noticed in the form of nonverbal behavior, i.e. the child sees her caregiver is happy and it brings a smile to the girl's face. When a caregiver/teacher attunes to a child, a sense of being "seen" is created, which can form a bond or relationship between the two. The girl is very involved in her Lego play and the teacher is able to follow her complex and choppy story about what she is building, this gives the child a sense of being heard and understood. This relationship can be fostered even further by careful observation of the child during difficult times, such as transitions. The child can use the positive teacher-child relationship to help self-regulate her emotions and behaviors, which allows her body to peacefully transition to the next activity. Through attuning to the teacher's organized mental state the child will hopefully learn over time how to move independently through much more difficult emotional times or life changing transitions.

Therefore, it follows that if a child feels safe enough to attune to an adult who is modeling a self-regulated mental and physical state of mind during a tough time of the

day, the child will essentially be able to self-regulate for that part of their day. This would then hopefully be applicable to other areas of life, creating a pattern; observation of nonverbal behavior, attunement to or matching the adult's modeled nonverbal behavior, then hopefully internalization of self-regulation. With that in mind the question of my thesis project was: how might the use of tension flow attribute matching in the context of creating transition plans affect self-regulation for children and teachers in a preschool classroom?

CHAPTER 3: RELEVANCE TO THE FIELD

Thesis Project

The idea that TFA reflect unconscious needs (Loman, 1994) led me to try to use attunement to the children's TFA in the process of creating new transition plans and to see if it might improve the quality of the teacher-child relationships during that time of day. Using the action research model, the purpose of my project was to develop transition tools based on the Kestenberg Movement Profile (KMP) tension flow attributes (TFA) that might improve the working relationship between preschool children and their teachers during certain transition times in their daily routine.

I met with the teachers to identify the most difficult transitions of the day. We chose two specific transitions: 1) lunch to nap and 2) play to clean-up. Lunch to nap was chosen because it was a stressful, potentially unsafe, chaotic time of the day for both teachers and the children. Play to clean-up was chosen because of the disorganization of the original transition. The disorganization of the transition made it difficult for the children to stay on task. The teachers had to give many direct instructions in order to get the room clean.

My initial idea was for the teachers to identify the children having the most difficulty during the transitions and attune to those children's TFA during the transition. However, the original plan quickly evolved into a more practical way of attunement. It was very apparent that the teachers would be overwhelmed if I were to require them to learn the six TFA, learn how to observe them in the children, attune with the children who were having the most trouble and also be able to contain the rest of the children during the transition. Recognizing the reality of the situation I altered my idea.

Instead, the other two teachers and I decided to create *new* transition plans that allowed the children to display more effective TFA for the tasks needing to be accomplished. The tension flow attributes that I identified to be most effective for the children were dependent on the type of transition and the children who were present during that transition. An effective TFA for moving to reading time for example, would be a child displaying even flow in her movements instead of an ineffective TFA such as high intensity.

Following the research methodology of action research, here is a brief overview of our research process. I first recorded data in the form of notes of my observations and videotapes of the original transitions. The other teachers and I brainstormed how to form a new strategy for each of the transitions based on TFA the children presented. We implemented the new plan for each transition for a few weeks. After re-evaluation of each plan, we made revisions in minor ways to accommodate specific issues more effectively. What we noticed was that once the transition plan had been established as routine, the shift in the children's TFA was tremendously successful. The children were able to understand the sequence of events, they were where they needed to be, and able to perform the tasks needing to be completed. This is evidenced in the video by the children's TFA they presented during the 'after' clips of the lunch to nap transition. For example: after brushing their teeth they had some abrupt movements which they channeled into the next task of going to the bathroom. The transition from the classroom to the hallway gave them direction because they had to remember to get their face card and put it into the green basket, which allowed their body to go into even flow and graduality.

I attribute the children's success in learning these transitions and performing them so well to the possibility that the new transition plans, over time, actually allowed them to internalize self-regulation skills they needed to perform the transition sequence. They most likely internalized the ability to self-regulate during the transitions because the plan of action was consistent, the teacher's voices and body posture's were calmer than before, and the sequence of events was designed to include those TFA that were most effective for the tasks needing to be accomplished. This altered the children's TFA in such a way that allowed their bodies to become more organized. Since tension flow attributes are possible reflections of needs, creating transition plans based on their TFA hopefully gave the children exactly what they needed for those specific times of the day.

Self-regulation

The idea that transition planning can help a child learn self-regulation is a key component of this thesis. One of the main goals that most therapists recommend for children in DMT is to internalize self-regulation techniques (Tortora, 2006). TFA that the children presented within the very first observations were high intensity and abrupt movements, which created a type of chaotic atmosphere in the room from lunch to nap. In the case of play to clean up, the TFA the children presented were of low intensity with gradual movements, which created a lull in the atmosphere where there needed to be a boost of energy. Therefore in the process of this project, the teachers and the students went through a gradual shift into self-regulation. This is evidenced by a shift in their movements from the 'before' clips to the 'after' clips. You can observe the change in their TFA when you look at the way they interact with each other and with the teachers. You can see, in the 'after' clips of lunch to nap that their TFA are actually working for

them and not against them while they wait to brush their teeth and when they are coming back from the bathroom. In the after clips of play to clean up the TFA they present with are much more enthusiastic and focused compared to the 'before' clips. The head teacher discusses the amazing transformation that happened since the new plans have been in place: "when we were filming for this video ... as hard as they wanted to try and do the things they used to do that drove us all bonkers, and made that time so crazy, they couldn't do it, because they just knew the things they needed to do."

As a result of planning transitions around the children's TFA, the teachers were able to feel more regulated during the transitions, and their modeling of calm behavior gave the children the ability to follow directions. The other assistant teacher is shown in the video talking about how she used to dread the transition of lunch to nap as she said in the video, "now I love to have the transition time." Since her attitude has changed around this time of day the children were able to shift their behaviors and follow her example. If the teacher can model an effective way to clean up an area or a calm attitude in a time of chaos, then the children can emulate the teacher's movements and behaviors. As described in the literature review, mirror neurons allow children to simulate the movements they see and integrate those movements and states of being into their own body (Gallese, 2006). This phenomenon makes the child capable of accomplishing a task at which he/she would otherwise be less skilled or unable to finish. This type of attunement might be able to extend to other times of the day or more difficult trials of growing up. Siegel (1999) wrote about the relationship between a caregiver and child actually being the vehicle to allow that child's brain to develop in a healthy manor, including emotional regulation and behavioral management. Therefore when children are

able to attune to caregivers during novel experiences it might allow them to become more independent and capable of adapting and regulating their own emotions, thoughts and behaviors as they face new challenges on their own.

NAEYC Accreditation

The early childhood education facility I work for was applying for accreditation by the *National Association for the Education of Young Children* (NAEYC) during the process of my project. The NAEYC representative who came to observe the preschool classrooms was randomly assigned to come observe the transition from lunch to nap in the classroom where I work. The new transition had been in place for a few weeks when she observed it and she was aware that research was in process. I heard she was very impressed with the “flow” of the structure of the transition. There are many factors that go into an early childhood education organization becoming NAEYC accredited. I think the transition helped get accreditation because the representative was able to clearly see the amount of organization that went into the transition, the calm behavior of the children, and the light, friendly atmosphere of the teachers during the most difficult time of the day. Since I was not present when the representative was evaluating the transition, I would like to give credit to the team of teachers I work with for aiding our organization in becoming approved! Becoming NAEYC accredited is a huge success and it is a great honor to be able to be given official credit for the quality of care we give the children and families we serve.

Video Project

The video project was not part of my original plan. The idea came to me when I tried to describe the project to interested friends and family members. I decided that I

would need a visual representation of what was going on in the classroom to bring justice to the essence of the project's progress. In addition to having a tangible demonstration of the before and after progress, I wanted it to be educational for those interested in the topic of creating transition plans with TFA. Those who might be interested in this video could be early childhood educators, dance movement therapists, or anyone who is interested in creating transitions for their own life.

The video includes: a visual representation of the six tension flow attributes, the issues surrounding the two transitions that were picked, and the before and after demonstrations of each of the two transitions, lunch to nap and play to clean up. Interwoven between the clips of the children are clips of the other two teachers talking about their experience of being part of the project.

I do not consider this video to be a training tool as it does not have specific instructions and this particular project has only been done once, with one group of children, in one particular preschool. I do give some very basic tips for recreating this particular project at the end of the video that I learned in the process. Here are those tips: be consistent, keep everyone on the same page, model the desired TFA, and be flexible with the plan.

Being consistent helps the children learn the sequence of events so that the transition can be performed without too much teacher direction. Informing the children of the new plan and what their role will be helps keep everyone on the same page, which makes the transition easier to learn and practice. Modeling the desired TFA provides a way for the children to see what type of movements are required for the tasks that need to be accomplished during the transition. For example, if the desired TFA is even flow the

teacher could show that as calm, predictable movement. Being flexible with the plan is good to keep in mind when the plan in practice does not seem to be working out. Having the ability to change little parts of the plan or being willing to try a completely different strategy is important in order to get the right transition for whichever population the transition is being made for. It is important to note that planning a transition around TFA will produce many different plans for different populations and will depend on the students present during that day and the type of day those students are having. This means that it would be beneficial to observe the classroom for a few weeks and then put a plan into practice. Once the plan is in place it will be easy to see what is and is not working.

Clinical Setting

The principles explored in this project could be applied to clinical settings where children and their therapist are involved in a therapeutic process. Using the KMP and TFA could be one way to create effective therapeutic transitions for clients who need the extra help with self-regulation. Since I have been trained to create dance/movement therapy treatment plans and interventions based on some type of movement analysis, it fits that I would use such a method to create transitions within the clinical setting. This could be in a therapeutic day school, at a school for physically and mentally handicapped individuals where there is an occupational therapist, speech therapist and/or physical therapist on the treatment team, in a residence hall, or in a hospital on a psychiatric hall. The most crucial times this could be used are when the therapist comes to pick clients up to start a session and when they are getting ready to end the session and take them back to their next activity. The transitions into and out of therapy are significant and would

benefit from an intentionally planned course of action based on the individual client's TFA.

Consider this scenario: I am going to pick up a young man at a therapeutic day school for a movement therapy session. I know that he has anxiety about schedule changes during his day. I would probably observe some hesitation in the form of the TFA of even flow and high intensity in his movements. Before I went to pick him up I would ask the teacher to warn him a few minutes beforehand. When I go to pick him up I would probably keep my movements in even flow and low intensity and I would stay in the room for a few minutes to give him time to adjust to the idea of coming to therapy. I would gradually add in some flow adjustment to my movements in order to prepare him for moving down the hall. Depending on his type of timing preferences I may ask him if he was ready to go. If he said yes, I would lead him out of the room with slightly more intensity than I had when I was in the room so that he could follow. Walking down the hall I might notice which TFA were present. If they were lower intensity than before with flow adjustment I may ask what he would like to do in the therapy session that day. This would begin to prepare him for the next step, the beginning of the therapy session. The observation of TFA and application process would continue throughout the session until I brought him back to his room.

The concept of creating transitions based on TFA could also benefit typical functioning adults who go to therapy. As adults we understand that transitions and changes are hard at any age. Typical functioning adults are probably not very aware of their own movement preference. That is why a dance movement therapist with the knowledge to illuminate that part of their client's movement profile would benefit them

greatly. A dance movement therapist who works with adults could collaborate with their client on ways to create more effective transitions. Whether it is a daily transition or life altering transition having dance/movement therapy would make adults more aware of their own movement and give them ideas about what they would benefit from if they were having difficulties with transitions.

Nonverbal Clients

Along with typical functioning adults, those clients who are considered nonverbal would benefit from the concepts of DMT and transitions based on TFA. If viewed from the relational aspect, a teacher could be negatively influencing their relationship with a child and not even notice if they are unaware of the student's nonverbal communication and how their own movements might be affecting the students. Not only that, but the way in which a teacher places meaning or believes in myths or theories about various nonverbal actions of their students can have a profound impact on how they respond to their students nonverbal behavior (Leipzig, 1990).

In addition to preciously stated clinical settings, creating transitions around TFA may benefit those working in any environment with infants, children who cannot communicate verbally, and those clients with severe cognitive or physical impairments. For example, imagine a ten-year-old boy who is nonverbal. The teacher can understand him only through his movements within the context of the school day activities. In one scenario he is jumping, squeezing the teacher's hand, and biting his arm during a transition from the classroom to the large group activity. He might be trying to tell the teacher that he was not ready to transition or that he is nervous about something coming up. To make this transition more manageable for him, the teacher could notice his rise in

intensity and then adjust her plan accordingly. This might include giving warnings before the transition, or finding a self-soothing object for the boy to hold while the class transitions. This might help him stay in lower intensity, thus making the transition smoother for all parties.

Limitations

The following are some foreseeable limitations that might hinder the application of using TFA to create transition plans: time, training, clientele, and the skill set of the planner. I will elaborate on these limitations by using my experience doing my thesis project for examples. The first is the amount of time it took for me to record my observations of the transitions. I took video clips and transcribed them while also looking for TFA present in the children. In addition, having time to meet with the teachers to educate them on what TFA were and how to observe them was difficult to organize. We set aside time for discussion but it never seemed to be enough. It was difficult to demonstrate how to observe TFA in the children during the transitions because it would be hard for the teachers to pick them out in such a complex environment while also keeping the class in order.

This prevented the project from going as I had originally intended. I changed my mind after realizing it would be too much of a burden to expect the teachers to use a newly acquired skill to observe TFA in one child while also keeping the classroom from becoming chaotic. Instead, I observed the children's TFA as a group and presented my findings to the teachers. We decided if they seemed accurate or not and proceeded with planning the new transitions. This made the process much more clear and gave the

teachers the ability to make crucial decisions about the plans without becoming exhausted or frustrated.

Training

If the process of observing TFA of clients in DMT sessions, and students in early childhood education could be taught effectively to therapists, teachers, and interested parents the potential for children to internalize self-regulation during daily transitions could benefit children and their caregivers. This however is unlikely to happen. It really would be unfair to expect teachers, therapists and/or parents to be interested enough in movement observation to all want to be certified in it. That is why this type of procedure would be best left for those who are already trained. Someone certified in movement analysis would be needed to observe and identify the tension flow attributes desired for the transition. A dance movement therapist would be necessary to work with the teachers, therapists and parents to apply the data with attunement to the children and show how to model the TFA. What this means is that early childhood educators and/or parents interested in having well constructed transition plans should consider employing the services of trained movement analysts and dance movement therapists to improve children's quality of care.

Conclusion

To review, my thesis question was, how might the use of tension flow attribute matching in the context of creating transition plans, affect self-regulation for children and teachers in a preschool classroom? The purpose of my study was to develop transition tools based on the Kestenberg Movement Profile (KMP) tension flow attributes (TFA)

that might improve the working relationship between preschool children and their teachers during certain transition times in their daily routine.

The results of the project showed that careful observation by a movement analyst and dance movement therapist, that same individual working with the teachers to create new daily transitions, and consistent implementation of the plan created calm, organized daily transitions. One aspect of this project that struck me as very important was the concept of a well-planned transition being the vehicle to actually help the children and the teachers self-regulate their emotions and behaviors during the transitions. This is evidenced by the video during the 'after' clips, the children seem to be more organized than before. In addition, the TFA they present with during the transitions are much more effective for the tasks that need to be accomplished. This might be a result of the transition plan being purposefully organized and the ability of the teachers to be more relaxed during the transitions.

Unfortunately, I am unable to give valid quantitative results on whether or not the teacher-child relationship was improved. Since I did not choose to focus on how much or how little the teacher-child relationship improved I cannot give any number as to how the transition affected the relationship. I can state that the teachers seemed to be more pleasant during the transitions; they have said they feel less stressed. The children seemed more relaxed and organized in their movements. The atmosphere in the room during the transitions was lighter and friendlier. All these factors lead me to believe that there is potential for improvement in all relationships in the room during the transitions.

As the children go through the transition sequence they are looking to the teacher to help them self-regulate. Since the teachers are able to have a clear mental state of mind

and calm physical appearance, the children are able to as well. The transition plan met the children's needs and supported organization and self-regulation necessary to complete the tasks of the transition. As a result, the transition now runs smoothly, without stress to the teachers or safety issues for the children and the day can continue as scheduled.

From what I have observed and concluded from the findings of my project, using the KMP methods of observing the tension flow attributes, teachers and therapists could integrate new knowledge about children's nonverbal behavior and create organized transitions based on the needs of the children. The use of DMT enabled this project to foster a relational environment and skill building opportunities for the children and the teachers. The concepts of DMT allowed a way for the teachers to connect, or empathize with the children's needs during the transitions through nonverbal, movement-based interventions. Well-planned transitions might be a successful way for teachers to allow children to learn self-regulation during difficult times of the day and might be an aid in creating mutually respectful teacher-child relationships. Furthermore, since the transition plans based on TFA have attunement and self-regulative side effects, the implications would show that well planned transitions might foster further psychological, emotional, and social growth.

Further Research

If there is ever a time to obtain more evidence of the usefulness of DMT in the schools it would be now. The education system is in need of alternative ways to teach those students who do not seem to "thrive" in the traditional education system; and there are plenty of students who need a little extra help now and then. This is addressed to those dance movement therapists out in the field working in therapeutic day schools,

residential homes, and other forms of educational institutions. Based on the limited publication on the use of DMT in the school systems there is a great need for dance movement therapists to continue sharing about what they are doing in their school setting. This area of the professional DMT community needs more voices and more evidence-based practice studies to back up the immense amount of progress and growth seen in the students exposed to this unique approach to teaching and learning.

I have created a few more questions to ponder based on the original question asked in my research project. Some are related in some ways to the concept of using TFA to plan transitions and some are more general thoughts to consider.

First, thinking about Loman's (1994) comment that TFA are reflections of needs based on a child's temperament, I wonder if looking at TFA of the children during transitions is giving us an accurate idea of what they need in that moment? Or are we observing a glimpse of their temperament that is thought to be more long lasting? I wonder if observing the prior transition compared with the post transitions might give a more accurate observation of their needs being met?

Second, I have already alluded to this being a possibility in a clinical setting, but I wonder how TFA attunement when planning transitions could be useful in other settings besides a preschool? It might be great to use in a therapeutic day school with students who have trouble with emotional regulation, or maybe in a school for cognitively and/or physically impaired individuals who depend completely on their caregivers/teachers to provide a safe, secure, regulated environment at all times.

Third, I was thinking about nonverbal communication and how important it is for teachers to be aware of their own movement around children. We know that it affects the

child's development but I wonder what areas of the children's development: cognitive, emotional, physical? And how much of an impact does it have on those different areas? Also could teacher's increased awareness to their own nonverbal movement help prevent burn out or improve team teaching cohesiveness?

Finally, since we know that a child experiences the world during their early childhood years somatically, and they also express what they are feeling/thinking nonverbally, would it be beneficial for caregivers of all types to be trained in movement observation? By "trained" I mean require it to be part of education courses for early childhood educators and therapists. Also, there could be workshops for those who are currently working in the field. If there could be training for teachers in movement observation, who would be best to facilitate the training: a dance/movement therapist, a nonverbal communications expert, a dance movement therapist with a background in early childhood education?

I will leave you with one final image. Imagine a group of younger children with a confident looking teacher leading them down the hallway singing and moving all in time with the teacher's movements and song. The children seem content to be next to the person they are holding hands with. They are not running, not shoving each other, not bickering about this or that, they are happy to be where they are and are unaware of the amount of effort put forth by their teacher to be able to walk down the hall without a care in the world. This does not happen naturally but it can begin to feel natural to the students and teachers if each part of their daily routine is planned and created for that classroom's unique needs.

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Appendix A

Definition of Terms

Achievement-oriented behavior

A term used by Balazs (1977) to describe a form of student behavior that is geared towards getting good marks and achieving a particular goal. Balazs stressed the opposite would be more beneficial, that the educator's role is to create an environment of trust and openness so the students feel safe to explore and try new things.

Action research methodology

A type of research methodology focused on a cycle of action that is guided by the researcher and the participants. The researcher formulates the initial plan in relation to the participants' needs. The plan is implemented, observed, and then reflected upon by researcher and participants. Data is collected by the researcher and analyzed with the participants. Based on observations an adjusted plan is put into place and the cycle continues (Borgia & Schuler, 1996).

Analogical

An analogy is an inference or an argument from one particular to another particular, as opposed to deduction, induction, and abduction, where at least one of the premises or the conclusion is general.

Attunement

Loman (1994) stated that, “attunement or nonverbal empathy is the basis of the early parent-child bonding process” (p. 21). This body-to-body connection gives the child a feeling of being known deeply and a strong bond is created between the dyad.

Attunement is critical for a child and caregiver to have a healthy relationship because that relationship will shape the cognitive, emotional and social development of that child (Siegel, 1999).

Authentic movement

Movement that comes from within the body, it is organic and spontaneous rather than directed by thoughts: not planned.

Clashing

Clashing is the lack of attunement in a child-caregiver dyad (pair). It can be caused by an incompatibility between the rhythms of the child and caregiver, may be a signal of a shift in the developmental phase for the child, or it could indicate that the caregiver is unable to attune to the child's rhythms (Amighi, Loman, Lewis, & Sossin, 1999).

Daily transition

Any movement from one area to another within the room, around the building, from inside to outside, or a shift in a daily activity. Baker (1992) defined transition as “a change or passing from one condition, place, thing, activity or topic to another” (p. 3).

Early Childhood Education

Early childhood education is a broad term that covers most programs serving children birth through eight years of age.

Induction vs. deduction

Induction is a type of reasoning that involves moving from a set of specific facts to a general conclusion. Deductive reasoning is a way of using a general premise to draw a logical conclusion.

Mental state alignment

Siegel (1999) wrote that a caregiver and child can have mental state alignment if these three things are active, “sensitivity to signals, reflection on the importance of mental states, and the nonverbal attunement of states of mind” (p. 86). This means that if a caregiver and child are both aware of each other’s nonverbal signals, and the caregiver is reflecting on both of their states of mind then there can be mental state alignment.

Mental state resonance

Mental state resonance means that, “each person’s state both influences and is influenced by that of the other” (Siegel, 1999, p. 70). This means that if the caregiver is feeling sad, the child will begin to feel sad as well. If the child is getting upset and fussy the caregiver might begin to get frustrated and flustered as well.

Merging

Merging might occur if the mother and infant attune too much and there is not enough differentiation between the individual rhythms of the child and caregiver (Amighi et al., 1999). If a mother is very good at going back to young developmental rhythms to match her infant, she may have trouble allowing the child to become independent later on.

National Association for Education for Young Children

“Since 1985, NAEYC has offered a national, voluntary accreditation system to set professional standards for early childhood education programs, and to help families identify high-quality programs. Today, NAEYC Accreditation represents the mark of quality in early childhood education. Over 7,000 childcare programs, preschools, early learning centers, and other center- or school-based early childhood education programs are currently NAEYC-accredited. These programs provide high quality care and education to nearly one million young children in the United States, its territories, and programs affiliated with the United States Department of Defense.” (NAEYC, 2010).

Person-centered therapy

A type of therapeutic practice that is founded on Rogerian thought. Carl Rogers believed that as a therapist if he could “provide a certain type of relationship, the other person will discover within himself the capacity to use that relationship for growth, and change and personal development will occur” (Rogers, 1961, p. 33). The individual is able to take charge of their life and make decisions that influence the world positively.

Self-regulation

Self-regulation according to Siegel (1999) is “the manner in which the process called the ‘self’ comes to regulate its own processes –consists in part of the regulation of emotion” (p. 156). He stated, “emotional regulation is initially developed from within the interpersonal experiences in a process that establishes self-organizational abilities” (p. 8). It is a process of modulating internal emotions that begins to develop within early interpersonal relationships.

Tension flow attributes

Tension flow attributes reflect a presence of regulatory ability or control of the expression of needs and drives through the influence of emotions and temperament and “tension flow in movers can be recognized through the process of kinesthetic attunement” (Amighi et al., 1999, p. 73).

The Kestenberg Movement Profile

The KMP is a “system of movement analysis, which describes predictable movement phases of development through variations in muscle tension and changes in bodily shapes which can be noted and catalogued” (Loman, 1994, p. 20).

Traditional education

For this thesis the concept of traditional education is compared to more alternative approaches to educating children. The traditional model being one that makes children sit at desks and learn facts and numbers with the teacher as the rule maker and enforcer.

These rules would be enforced without consideration of the individual learning styles of each child.

Ways of Seeing approach

The Ways of Seeing approach follows authentic movement and dance/movement therapy elements. Tortora (2006) explained it is a “philosophy and a method of relating”(p. 65).

The approach emphasizes the importance of observation and the literal way of seeing and also the metaphorical way of being known and witnessed without prejudice.