



Research Proposal: Exploring Phenomenological Change and Improving Attunement Through the Use of Dance/Rhythmic Movements

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Abstract

A description of a proposed research study is provided and feedback is welcomed. The research aim is described as an exploration of whether dance, defined here as movement of the body in a rhythmic way, can become a tool for a practitioner to use with clients within a model of the sub-symbolic communication. A literature review beginning with psychoanalysis and coming up-to-date with trained dancers working with dementia includes references to a range of TA materials. The author emphasises the need for self-reflection, ethical considerations and cultural implications. The article also includes an initial draft of the research methodology to be used, initially by the author, and how it might then be used by colleagues.

Key Words

dance, phenomenology, intersubjectivity, somatic, gestures, focusing, movement, subsymbolic, symbolic, attunement, transactional analysis, relationality

Introduction

This article is by way of an introduction to a research study. Feedback on the content is therefore welcomed by the author. Note also that, although the proposed research will be conducted within the context of transactional analysis (TA) psychotherapy, the results may well become just as relevant to developmental TA applications.

With much appreciation for feedback from IJTARP Reviewers and a group of peer reviewers, let me begin by acknowledging that this is not yet a formal study protocol. I am aware that what I am considering is multi-layered and multidimensional, I am sure that as I move through the research process, I will be accessing more relevant literature about what others have done, and developing a more extensive research methodology. I will particularly be giving

considerable attention to how I will need to make decisions about which variables are being investigated, and how, and whether, I will be able to establish cause-and-effect, or connections between antecedents and consequences.

The proposed research will introduce dance as a self-supervisory technique that could support transactional analysts to have a more embodied relationship with their clients. For the purposes of this proposal, dance is understood as the integration and expression of the human body, its action, space, time, and energy, and without the necessity for music. The research aim is to enable the potential for a deeper understanding of attunement within a relational psychotherapeutic context, and to extend transactional analysis (TA) theory through what Cornell called the "awareness of the meanings of somatic reactions and patterns, and the [therapist's] capacity to move and act as well as to think." (Cornell and Landaiche III, 2007, p.260).

The literature review below therefore addresses the wide range of sources, from psychoanalysis through object relations and into gestalt and TA before linking into research into bodily sensations within therapy. There is much emphasis on materials that address multiple channels of communication, expression and understanding of emotions, and how choreography through gestures can capture unconsciously conveyed experiences.

Hence, the research aims to show the effects of dance, described as movements of the body in rhythmic ways, as a tool for a practitioner. The author has been working with a Movement Psychotherapist and intends to provide the TA community with ways of working that provide access to bodily sense of knowing within a relational context.

The phases of research are detailed and include the researcher developing and using a model for a

period of time before then involving colleagues who will conduct the same processes with their own clients. A thematic analysis approach will be used to analyse in-depth interviews of experiences when using dance-based movements and gestures.

The article also covers how there will need to be much attention paid to contracting, confidentiality and cultural implications because it is recognised that there are different attitudes and beliefs about the body. A self-supervisory methodology will also be developed, and there are some ideas about future researches.

Literature Review

The act of perception through which one experiences other people inherently involves activation of one's own motoric, sensory, and somatic systems. (Jordan, 2009, p. 129).

Psychoanalytic theory, object relations theory, and affect theory all have strong references to bodily 'being'. Our psychological conditioning is shaped by our physical needs and how these were met or not by our parenting environment. It is notable, however, that within Freud's theory of psychoanalysis, his definition of the unconscious privileges language, meaning the metaphorical or symbolised body, over the physical body, which is viewed as primitive or 'unlanguage'd' (Klopstech, 2009). Likewise, the schools of psychotherapy which developed in Freud's wake give little room to body-oriented ways of working or interventions.

During the post-war period, psychoanalysts who involved the body were marginalised. An example was Wilhelm Reich (1972), although his approach has become more appreciated over time. Reich's method involved talk therapy combined with bodywork procedures, including breathing exercises and physical manipulation. These were designed to release tension and enable access to repressed feelings and emotions. Reich's belief was that through involving the body therapeutically there was a greater chance of overcoming unconscious discord and achieving meaningful psychological change. Reich's work is problematic regarding the unhealthy power dynamics that could occur when the therapist's physicality, perceived hierarchy and frame of reference confronts the traumatised body without informed consent. A relational alliance, which seeks to enable a secure psychological and physical environment between clinician and client, is also missing from Reich's methodology.

Gestalt therapy and TA, which emerged in the 1950s, attempted to strike a balance between spoken language and body-based forms of communication. Those approaches recognised the body as both an experience and as a 'communicati-

ng agent' (Klopstech, 2009). Eric Berne (1977), the founder of TA, describes in the book of his early essays his time working in the US Army Medical Corps as a psychiatrist, from 1943 to 1946. Berne's writings describe his process of attuning to his clients via an awareness of pre-verbal unconscious or preconscious bodily movements.

Berne's theory that the clinician intuits based upon continual intrapsychic scanning within the somatic (the body) was fundamental to his later theories of subjectivity and communication. His advice to "think sphincter" (Berne, 1975, p.319) as a way to feel ego states reflects the importance he gives to the interrelationship between physical and psychological being. Subsymbolic sensory, somatic, and motoric representations and processes (Bucci, 2021) are in many of Berne's theories, such as the development of ego states, strokes, hungers, and protocol. Berne describes his observations of body posture in relation to ego state diagnosis, and of somatic systems emerging out of script (Lammers, 1992). Similarly, David Steere (1981) studied client bodily expressions and postures with the aim of visually codifying ego states to further clinical treatment.

Other TA theories like drivers (Kahler, 1975) and personality adaptations (Joines and Stewart, 2002) describe classification systems therapists can use for connecting the physical to the psychological. As with Berne's view of the somatic through the lens of ego states and script, driver and personality adaptations potentially empower practitioner and client, but run the risk of shaming and/or pathologising bodies by potentially removing their cultural context or imposing limiting structures.

Classical Bernian TA perceives the client's body through a phenomenological prism, with the practitioner as an intuitive receptor who uses symbolic interpretation (language) to aid understanding (Berne, 1977). By this method however, the potential for a dyad between client and practitioner, defined in two-person psychology as including both self-understanding and co-creative meaning, is limited (Stark, 2000).

By the late 1960s, this limitation was becoming more understood, leading to a new theory of Relationality, which came out of the British Object Relations school (Bowlby, 1969) and the American Interpersonal tradition. Its key concepts included: subjectivity and intersubjectivity - acknowledging both one's own and the client's subjective states; mutuality - the correlative influence within the therapeutic relationship; co-creation of experience and meaning; two-person psychology - emphasising both practitioner and client as co-creating individuals; and enactment - the intermingling of unconscious experiences (Klopstech, 2009). A succinct definition

is “the relational approach is based on the idea of the practitioner holding, containing, and receiving the mind of the client” (Hargaden, 2019, website).

Somatic dimensions, especially those that belong to both client and practitioner, are seen in relational therapy as a co-created and embodied experience. William Cornell's (2007) work emphasises this, making the case that therapy is not just a cognitive or verbal exchange, but an embodied and interactive process involving two enquiring bodies. It is at this point where my research idea begins. A relational way of working, and the observation and generation of bodily responses which may occur within it, reveal information on unconscious processes and dynamics which might otherwise remain out of Adult awareness (Lammers, 1992). It is important to state that it is the cognitive aspects of this process in collaboration with the somatic dimensions that allow for the associative thinking which facilitates regulation and stabilisation, as they have a calming effect on limbic arousal (Dunlea, 2019).

A precursor to this proposed research is psychologist Janet Eigner's (1976) paper. Eigner, who is also a poet and dancer, writes about a workshop where she invited practitioners to interpret and improvise with TA models, such as the egogram (Dusay, 1972), miniscript (Kahler and Capers, 1974), and drama triangle (Karpman, 1968), using their own physicality and movement. In Eigner's workshop, practitioners were asked to involve their bodies to feel the underlying emotions that underpin these theoretical concepts. What is significant about Eigner's paper is the sense of creativity and subjective underpinnings of these experiments, and how they encapsulate the phrase 'embodied knowledge'.

In Eigner's work I can see the influence of the humanistic psychology movement of the mid-20th century, and in particular Eugene Gendlin's (1982) research into the role of bodily sensations in the therapeutic process. Gendlin outlines the steps of his 'focusing' process and provides examples of how it could be used in therapy. His work defines the concept of 'experiencing' as a pre-verbal, bodily sense of knowing that underlies our conscious thoughts and feelings - the 'client within the client'. He believed that by attending to and working with this inner felt sense, clients could gain deeper insights into their own emotional and psychological experiences and move towards greater clarity and resolution.

Mary Goodman (2007) looks at focusing from a TA perspective, describing it as a tool from which transactional analysts can potentially access a 'bodily felt sense'. Goodman contextualises the use of body sensing and attunement in TA terms, citing

Berne's maxim 'think Martian' (Berne, 1975, p.100), using it as a means of evoking positive ego state development, clarification of impasse and decontaminating Adult. Focusing provides an invaluable skill set for the moment-to-moment quality of attention and attunement. She writes that clinicians can discover new information about a client's situation by paying attention to their own embodied experience. My research proposal acknowledges Goodman's ideas and seeks to extend how we as practitioners may provide opportunities for ourselves within clinical encounters, so that we may to some extent trust our capacity to be Martian-like, whilst maintaining a helpful sense of ourselves.

A further link to my research proposal is Wilma Bucci's (1994) work in developing multiple code theory (MCT), a model that describes how people use multiple channels of communication, including verbal and nonverbal, to express their thoughts and feelings. MCT emphasises the importance of bodily experiences and movements in the process of psychotherapy and in the expression and understanding of emotions. It is also underpinned by a scientific perspective, and the evidence through modern brain imaging techniques to connect thought to phenomenology. By recognising and attending to bodily cues, practitioners using the MCT model can gain a deeper understanding of the client's emotional world and help them to work through unconscious conflicts.

Professor Beatrice Allegranti is a trauma-informed dance movement and somatic psychotherapist who draws from creative processes informed by her training as a dancer/choreographer, as well as her interest in neuroscience. Allegranti's workshops and research publications have a somatic feminist perspective, critiquing notions of the body and the way in which society claims ownership of it through spoken language. Allegranti's dance company, *Moving Kinship*, creates projects that collaborate with audiences to challenge notions of participation and inclusion. In one such piece, focused on Rare Young Onset Dementia (Allegranti, 2020), her company of trained dancers worked with individuals with dementia to devise biographical studies. These were choreographed through an exploration of idiosyncratic gestures which captured vital parts of the participants' unconsciously conveyed experiences. In some respects, Allegranti's research is distinct from the concerns of mine' which seeks to maintain the therapeutic container rather than question its validity. However, Allegranti's consideration of how our intersectional 'body politics' informs therapeutic relationship, and implicit/unconscious bias and its impact, are of influence on

the creative, ethical, and methodological dimensions of my research proposal.

The core of my research proposal is the relational lens through which my clinical practice is orientated. The integration of relationality into clinical work provides me with a greater repertoire of body-oriented ways of working. This allows subjective and intersubjective experiences to manifest in support of efficacy, challenge, and change, which I believe to be possible through the use of interpersonal relatedness within a position of containment. I also acknowledge a political viewpoint for questioning the hegemony of an assumed objectivity on the part of the practitioner, which relates to my artistic practice and intersectionality.

Research Considerations

The main research question is: can more deeply embodied and attuned ways of relating with clients be made accessible to TA psychotherapists, through the use of dance as a tool of experimentation and self-reflection.

This research aims to show the effects of dance as a tool to the TA practitioner, and how using it might improve attunement. Dance is defined here as movement of the body in a rhythmic way, for the purpose of expressing an idea, feeling or emotion. This creativity will feed back into sessions, assessing the potential for more connected 'phenomenological explorations' of the body, and indeed for the practitioner using them to be a more potent intuiting and potentially healing catalyst.

I perceive that the use of dance in this way can allow practitioners to develop new and more effective conceptual models of the subsymbolic communication happening between themselves and their clients. As Cornell (2018) writes when reflecting on Christopher Bollas' ways of being informed by a client's way of being, this enables the state of "being with and informed by a client's way of living such that we know it keenly from inside our own bodies" (p.168).

In the past two years of my developing private practice, I have studied the subsymbolic communication of certain clients using dance. The results of this were several works that, with client permission and participation, informed both the clinical relationship and the client's capacity to mobilise to overcome an impasse (Goulding and Goulding, 1976). Each work involved initially recording a client in session (in-person work recorded on video or online through Zoom) and identifying an unconscious gesture I felt was meaningful to the client's script process. Then, outside of session time I would tune into, rendering

(not mimicking) these gestures, through repetition, extension, compression, into a movement phrase.

The work's initial aim was to establish a relationship with my own soma. The movement phrases I made were shared in supervision with a Movement Psychotherapist who supported my interest in learning how to integrate my regard for moving bodies safely and purposefully into the psychotherapeutic arena. We developed a thematic narrative for me to access and root myself within the work, involving both TA and non-TA ideas, such as protocol (Berne, 1961) and subsymbolic states (Bucci, 2021). This later helped in part to construct ethically robust contracts and treatment plans to justify client participation.

Based on my notes from this time, it was apparent that using dance had enabled a more insightful view into my clients' somatic experience. I discovered a positive circularity in the way that dance expanded my understanding of client phenomenology, improving my capacity for attunement, and in turn positively informing the phenomenological change happening within the client. I found that my own and the client's body "entered into awareness and gained a right of existence" (Klopstech, 2009, p.13). Dance served as a form of reflexive and critical self-analysis that was akin to supervision, involving as it did both my clients and my own subsymbolic communication. This work has a relationship to somatic countertransference but exists and seeks to understand the nuance of bodily communication from a more conscious level. I grew curious about the possibilities that this way of working may support research and involve other TA practitioners.

This research aims, therefore, to improve understanding within the TA community on ways of working that involve direct, phenomenological 'experiencing' by practitioners. The literature review outlines the breadth of theory on using intuitive, embodied ways of 'feeling' the client and attuning to them, notably in Berne's early writings and in the relational TA approach (Cornell and Hargaden, 2005) where the practitioner's own body is a key part of the therapeutic process. These are the foundational methods on which I can build this research.

In the writing of Eigner and Goodman, I found examples of TA theorists who describe a process of accessing a bodily sense of knowing within a relational context. Significantly they used an interdisciplinary approach which was performative and creative. As with my own research aim, they attempted to describe methods for a potentially deeper understanding of attunement through embodied connection. This approach is counter to

more analytical ways of codifying the body in TA, such as drivers and personality adaptations, which

were also investigated, and found to be limited in the sense of describing the state of being 'in movement' rather than 'within movement'. Bucci and Allegranti's research asked questions about the appropriation of the body by spoken and written language and challenged the frames of reference in which ideas about the body exist. Both clinicians use dance to discuss and validate unconscious gestures in and out of therapeutic settings.

This research will extend the literature review through the way 'dance' is used to self-critically regard one's own authentic bodily relationship to the client. A way in which this could be contextualised is as a form of 'self-supervision'. Cornell and Zalzman (1984) wrote about self-supervision as a 'useful container' and as a tool to 'think theoretically' and to stimulate professional attitudes and learning that continue beyond traditional supervisory relationships. Hawkins and Shohet (2012) discuss supervision as "a joint endeavour in which the practitioner attends to both their clients and to themselves" (p.60), whilst also examining the wider systemic and ethical contexts. Self-supervision is integral to my research methodology. As an intrinsic part of the inquiry and development for responsible and ethical practitioners, my research could provide an accessible way to cultivate self-enquiry and therefore a greater understanding of process.

Methodology

Phase 1

The first phase of the research will involve my own private practice. The work at this stage will involve discussing the proposal with clients with whom I have an established relationship. I will then discuss contracting to work on the proposal with them, in a way that does not risk detrimentally imposing itself on the therapeutic aims. Subject to permission being granted, I will then make video recordings of myself re-enacting client gestures and expressions using dance that involves repetition, extension, and compression to distil movements into a highly specific language. I will also make video recordings of clients in session if/when I need to understand certain movements more accurately. My objective will be to experience elements of a client's subsymbolic state through dialogic dance, in a way that allows space for my own bodily awareness and history. My skills and experience as a visual and performing artist will be invaluable in creating and documenting these recordings, which will be experimental in nature.

As I start to document my use of the model with my own clients, I will gauge its effectiveness and work to

structure it in such a way so that it could potentially be used by other TA practitioners. It needs to be

explicitly documented that the model is intended to be used 'post-session' and is to be approached by practitioners as a form of 'self-supervision'. I will explore the ways in which using these techniques changes the way I experience my clients relationally, and what the implications are for a deeper identification with a client's phenomenological change.

The model will need to have been in use by myself for an estimated 6 months, to produce a substantial variety of material from different clients, and to allow for sufficiently detailed documentation. This phase of the research will be informed by a TA supervisor, as well as a Movement Psychotherapist with whom I collaborated on the movement-phrase experiments discussed above. This is to maintain the various professional TA ethical codes of practice (UK Association for Transactional Analysis, 2019), (UK Council for Psychotherapy, 2019), (European Association for Transactional Analysis, 2023), (International Transactional Analysis Association, 2014), (British Association of Counselling and Psychotherapy, 2018) whilst considering the context of this proposed research study.

Phase 2

The second phase of the study will be conducted using a sample consisting of three practitioners who have completed at least four years of formal training in TA and are established in private practice, reflecting my experience and working environment. Attention will be given to the inclusion of any applicants who are curious and committed to the participation and development of this research. Selection will not be dependent on fitness levels or ranges of physical movement traditionally associated with having an 'abled body' and/or dance training background.

When practitioners have been selected and contracted with, and have gone through some training on the implications of using the model, each practitioner will be encouraged to use the somatic movements that are within their comfortable scope. They will be encouraged to have this evolve in line with their energy, tolerance, and development of the material. As a reminder, the term 'the body' refers to the physical and sensory experiences of an individual: their bodily sensations, movements, posture, and physiological reactions.

Additionally, it is crucial that the practitioners keep a journal or record of their experiences and observations while implementing the model. This will provide valuable insight into its effectiveness and will allow for my written review of their experiences to be

conducted, which will aid in further understanding the potential benefits of this model for other practitioners.

Each participant of the study will be given a pack with the following documentation:

- Contract (including requirement of participants insurance/indemnity cover);
- A summary of the research aims and information regarding the model of study to be followed;
- A summary of the applicable professional TA and non-TA ethical codes of practices relating to the researcher, the practitioners and their clients;
- A contract template for the practitioners' clients to complete;
- A list of equipment and resources the study will require: a device suitable for recording video/audio; exercise mat; outdoor/movement friendly clothing; stationery; travel funds; additional supervision funds;
- A written and diagrammed list of general/accessible 'warm up' movement exercises;
- My contact details;
- List of relevant support details including: familiarisation with relevant recording media, study-advocate scheme and specialist supervisors;
- Recommended reading and viewing for interested parties.

Data Collection from Phase 2

In-depth interviews will be conducted using a semi-structured format, with open-ended questions, with mark making and gesture to be included, designed to elicit rich, detailed responses from the practitioners. The interviews will explore the practitioners' experiences of using dance-based movement to potentially enhance attunement, including the challenges and successes they have encountered, and the ways in which this approach has impacted the therapeutic relationship.

Data Analysis from Phase 2

Data from the interviews will be analysed using a thematic analysis approach (Braun and Clarke, 2021) with a focus on identifying common themes and patterns in the practitioners' experiences of using dance-based movement to potentially enhance attunement. Data which incorporates physical moves and gestures will need the clarification of written language, to support the conveyance of communication and its subjective expression.

Ethical Considerations

Some participants may experience encounters with themselves that confront feelings of vulnerability and challenge. Psychotherapists who are not body-

oriented may struggle to overcome their discomfort and fear of the body, or specific bodily expression of emotion could provoke trigger responses, such as survival/stress response (Ogden, Minton and Pain, 2006), heart rate variability, digestive disturbance and underlying trauma symptoms such as dysregulation, withdrawal/dissociation, maladaptation, and related emotional/feelings of dis-ease (Ogden and Fisher, 2015). In anticipation of this, contracting with participants will involve a clear explanation of the risks involved, with consultation time given to questions regarding aspects of concern. Transparency about the commitment required needs to be paramount, with an option to withdraw.

I will create an assessment of need, a care plan, and stabilisation practices for practitioners to use. An online and in-person study-advocate scheme will be available to those who prefer to learn and process through peer systems. Such considerations will be offered and run throughout the practitioner's engagement with the study, and for a duration of 6 months post write up.

Practitioners who take part in the research will also be invited to incorporate personal therapy and seek independent self-developmental practices to run prior to and alongside the research. This will be a means of physically and psychologically processing the experiences safely and at a pace deemed helpful to the practitioner; intended to foster autonomy and self-advocacy. The information pack will include details on specialist supervisors to enable further professional inquiry into the integration of this research within clinical engagement and subsequent treatment plans. Supervisors who take part in the research could also be impacted, and will need to have access to all information, and consent to all areas of the research methodology.

Confidentiality

This research will no doubt require confidential material belonging to the clinical realm to be processed, circulated, and explored. This will require a transparent consultation with the relevant clients, with confidentiality and data protection policies and laws agreed and adhered to as one's professional organisations stipulate. Consent for material belonging to all parties, including participating practitioners, relating clients and the researcher, will be used to create a written publication, hence clear information pertaining to this intention will be conveyed.

Cultural Implications

Cultural differences can also play a role in how practitioners may respond to discussions about the body in therapy. For example, some cultures-have

different attitudes or beliefs about the body. It is important for me as a researcher and for participant practitioners to be aware of these cultural differences and to approach the topic with sensitivity and curiosity. Research has shown that, for example, in some Asian and African cultures there may be a greater emphasis on the collective rather than the individual, which may impact on how people view and talk about bodies. In these cultures, there may be less emphasis on the importance of self-expression and self-disclosure in therapy, and therefore practitioners and clients alike may be reticent to discuss their bodies or experiences of trauma (Tseng and Streltzer, 2008). As researcher I intend to be aware of the impact of cultures, including racism and marginalisation, on the experiences and perspectives of those from such communities, as these experiences can impact their relationship to their bodies and relating experiences (Tseng and Streltzer, 2008).

There may also be an unconscious bias in both the kind of practitioner who chooses to take part in the research, and in terms of which clients a practitioner may choose to ask to participate. The consequence of these unconscious biases would be a limiting or somewhat diluted and homogeneous pool of participants, which will limit the depth and validity of this research. The research project documentation must encourage, support, and challenge this issue. To accommodate the prospect of my own unconscious bias, during the final write up of this research a separate section will be included within the collation of research material, which will account for my personal reflections.

Within the culture of TA, it is necessary to consider the way technology is incorporated within TA practice. EATA and ITAA appear to use different approaches to whether online practice and supervision is acceptable. Early in 2023 EATA placed significant limitations on the use of online working, although some of these have since been reversed. It is important to note that there may be future limitations regarding the involvement of technology in the provision of TA services, which may impact the conduct and scope of the research.

Conclusion

Part of my developmental process as a TA practitioner concerns learning to perceive the bodily countertransference reactions I have to clients. These often contain crucial messages that have not yet been recognised cognitively or articulated. My use of dance as a self-reflexive and self-analytical tool has already proven beneficial in this regard, having used it experimentally to understand certain psychotherapeutic processes. Dancing is a way of 'tuning in' to the direct bodily experience of being

with a client, and therefore is a relational way of working. I have used this method to experience clients' stuckness and to reveal the points when movement creates change to mobilise impasse.

I have experienced something shift in therapy because of using dance, even though the client in many cases is only indirectly aware of my movement practices, as they happen outside of session. I am particularly interested in the concept of physis (Berne, 1961) and have found that by doing what Klopstech calls "pairing up enactment and embodiment" (Klopstech, 2009, p.10) via dance, I have learned more about what change 'feels' like and how to invite it in a truly embodied sense. For me to fully embody and comprehend the complex matrix of analytical theory that TA has contained since its inception, physical movement needs to be included, as it brings relational and body-oriented concepts together given their shared 'habituation of the inarticulate' (Klopstech, 2009, p.10)

This research proposal will also provide a self-supervisory methodology that will help certain practitioners with this process. As Goodman (2007) writes: "... even listening to the nonverbal clues, we might limit ourselves to some codified interpretation of "body language" if we are not tuned in to our own bodily felt sense of the moment. As the clinician, I can arrive at fresh new information about the client's situation by paying attention to my own embodied experience at the same time that I am attending to the client's gestalt, verbal and nonverbal." (Goodman, 2007, p.282-3)

By exploring the experiences of practitioners who use this approach in their practice through an ethical, qualitative piece of research, I hope to contribute to the understanding of different ways in which the relational body can be used to improve attunement, and to make TA practice more effective. What I am proposing with this research is self-reflective/reflexive, but also invites practitioners to gently trust their own capacities and allows them (and therefore their clients) to recognise change as a direct physical experience. This experience of change is, I believe, just as effective a tool as spoken language. The profound intention of this research does not only involve tuning into the client, but tuning in to a way that will be transformative by its very nature.

Future considerations

Further research would be beneficial in terms of developing the efficacy of this work, with considerations for how the study could be replicated with slight modifications, refinements, and different perspectives. Additional research could explore how this model of working compares across psychological needs, and, for instance, qualitatively

assess if the model works across areas such as neurodivergence, trauma, and bereavement.

To assist in this, a series of workshops would take the form of a piece of live research to gather information for a second article looking at how I could incorporate the skills and creative possibilities of dance. The research will focus on workshop participants, both trainee and qualified TA practitioners, who have an interest in dance and attunement. The answers and comments of participants in the workshops will be audio-recorded and transcribed from the responses. The resulting material used in the subsequent article will be interpreted and documented from a TA perspective.

Future research could also focus on the participants' point of view when using recording technology. Research frameworks that support the examination of how material is framed/shot would enable opportunities for unconscious bias to become revelatory in the self-supervisory process. This could enrich debate on incorporating technology within the self-supervisory process and may implicitly challenge orthodoxies.

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Because this article describes research that is yet to be conducted, Zara will welcome feedback, suggestions, and possible involvement.

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