

DEVELOPINGA

DANCE FOR HEALTH PROJECT: CONSIDERATIONS

AIMS:

- What are the aims and objectives of my dance for health project?
- What specific areas of health and wellbeing do I want my classes to address?
- Do I need any complementary (self) study or training to deliver this project?



PARTICIPANTS:

- Who are the participants (i.e., target population)?
- Is the group the same throughout the project, or will there be new intake or a participant changeover?
- How experienced are the participants in relation to the type of dance I would deliver?



CONTENT:

- What are the participants' goals and specific needs and how will my class content address them?
- How might participants be given voice and agency within the process of developing content and within the classes themselves (think "no decision about them without them")?
- What sort of dance will the project offer (e.g. specific dance style, physiotherapy-based, partnering, creative, improvisational)?
- Are there any physical or mental/cognitive/developmental challenges among my participants that I need to be aware of when designing the project and planning content?



STRUCTURE:

- Over how many weeks, months or years will my project run? For example, 12 weeks or 12 months?
- What will the duration (e.g. how long?), frequency (e.g. how many times per week?) and intensity (e.g. how difficult?) of the classes be? Where possible refer to previous research and consider what might be ideal in helping achieve the health objectives.
- How should my classes be most effectively delivered (e.g. in small groups, in studio or other setting, music/no music, seated/standing)?
- How will the classes be structured (e.g. warmingup, exploring different themes, creative tasks, cooling down)?

ORGANISATION:

- Are my classes accessible and inclusive, in terms of publicity, communication, environment and creative content? (consider who is not accessing my class)?
- What sort of support or assistance do I need to manage the project effectively? What sort of training do I need to provide to volunteers or assistants?
- Where do I position myself during class for optimal teaching or viewing?
- When working in collaboration with a health care provider what are the roles and responsibilities of the different stakeholders (criteria for participation, number of participants, freedom of artistic content, pedagogy in line with the values of the institution, degree of participation of a clinical assistant, meeting updates, etc.)?
- How do I account for the different perspectives of stakeholders, when assessing the effectiveness of the classes?



CONDUCTING RESEARCH IN PARALLEL:

- What research questions are most important to me?
 What do I want to capture? How could I involve my participants in the research process / in devising the methodology?
- What additional assistance do I need to undertake research (e.g. an experienced researcher or support from an academic institution)
- Does the type of research I want to undertake require ethical approval?
- How will I capture affect (e.g. video recording or questionnaires), and present outcomes (e.g. a written report, photographic or film output, live presentation)?
- When writing up the methodology section of a research paper it is important to describe the dance intervention in detail reflecting on some of the points above. This is so that other practitioners and researchers can understand as fully as possible what sort of intervention took place and help them extend and develop this work, building the evidence base.

DEFINITION:

"Dance for Health provides holistic, evidence-based activities for the individual to manage and adapt to physical, mental and social health challenges. In Dance for Health sessions, trained teaching artists engage people as dancers, rather than patients, in joyful, interactive, artistic practice."

REMEMBER...

- ...to listen, observe and respond to participants and adapt creative content and teaching approach as necessary.
- ...to share the joy of dance as an umbrella priority throughout.

Created by the IADMS Dance for Health Committee Design: Beth Ackroyd and Megan Drabant