

A top-down view of several hands reaching towards the center, touching a large, flowing fabric that transitions from bright pink to orange and red. The hands are positioned around the perimeter, creating a sense of unity and connection. The fabric has a shimmering, iridescent quality.

from
where
you
are.

A special thank you.

Thank you to all the children, young people and their families who took part in this project.

From Where You Are was part of a wider programme of arts activities at the hospital organised by Arts Coordinator, Vicky Charnock and supported by Alder Hey Arts Chair and Consultant, Dr Jane Ratcliffe.

We thank them and Julie Sellers, Helen Traynor, Caroline Bibby and Phillipa Bradshaw (Play Specialists) and Sue Ashley (Teacher) for their commitment, support and enthusiasm.

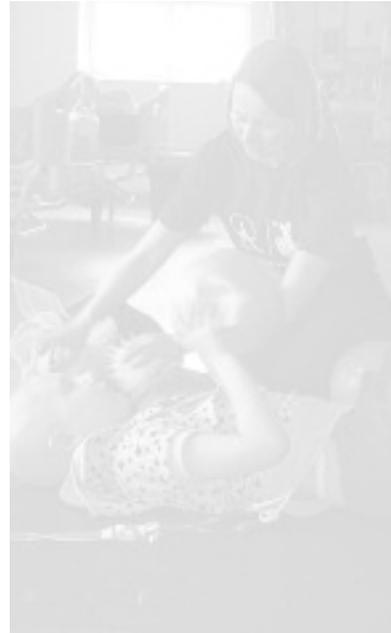
The names of patients and families included here have been changed.



“The session with Lisa calmed and soothed Laura, who had been previously upset. Her movement improved during the movement session with brushes and she smiled a lot.

She was also very keen to interact.”

Student nurse.





The project

The 'small things' dance collective From Where You Are project took place at Alder Hey Children's NHS Foundation Trust, The Liverpool Improvisation Collective studio at the Bluecoat, Liverpool and Edge Hill University, Ormskirk from October 2008 to September 2009. Lisa Dowler began developing movement and dance work at Alder Hey in 2006 while working as Community Dance Artist for Merseyside Dance Initiative an Alder Hey Cultural Champion. This project was related to The Invest to Save Arts in Health Programme.

When Lisa Dowler became a Senior Lecturer in Dance at Edge Hill University in 2007 she continued her already established work on the neuromedical ward as research. Cath Hawkins began working at the hospital for MDI later that year as an Independent Dance Artist, on the Oncology ward, then also on Urology, General Surgical and the Dewi Jones Unit.

From Where You Are evolved out of a desire to research and develop what was not only an interesting and new area of work yet movement and dance practice that patients, families and staff were responding positively to and which the hospital was describing as "groundbreaking". Alder Hey Children's NHS Foundation Trust and Edge Hill University were hugely supportive and funding from the National Lottery through Awards for All made this project possible. This has been the most successful project 'small things' has experienced.

Participants have found it hugely valuable to have the opportunity to begin to develop beneficial movement and dance work with acute hospital patients. 'small things' hope to develop and expand this project in the future.

In October 2008, the movement and dance work won Alder Hey Children's Foundation Trust the North West Public Health Award for Art and Culture. Jane Kennedy MP, Jean Stapleton, Councillor for Birkenhead and Tranmere and Helen Buller from the Big Lottery visited the project in 2009. The project also featured in Issue 2 of the National Lottery's Big Magazine and twice in 'Alder Hey's patient newsletter'. Lisa presented a paper about her work on the neuromedical ward at 'Inspiring Transformations, an international conference on Applied Arts and Health' at The University of Northampton in September 2009 and wrote an article that was included in the Winter 2010 edition of 'Animated' the Foundation for Community Dance's (FCD) Magazine. Lisa has also been invited by the National College for Community Dance to lead, with other established practitioners, an intermediate course for Professional Artists on Dance, Health and Wellbeing.

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Cath's story

I remember a number of pivotal experiences that have led me to seek and develop projects like From Where You Are. As a student at Dartington College of Arts in the late nineteen eighties I took part in a movement workshop, led by Steve Paxton, for visually impaired and sighted participants. It was an early Touchdown workshop and I was intrigued, moved by working with touch, contact improvisation alongside people who perceived it differently.

I wanted to explore dance more and continued my training at the Laban Centre. After completing a degree I felt I had experienced many things, forms of dance that did not fit me. I had really enjoyed being a volunteer for a creative dance group for learning disabled adults and doing sessions for a friends Parent and Toddler group. It was this kind of work I thought I would seek on returning to the North West.

I have worked in education, yet mostly in the wider community and what is now referred to as health, as an Independent Dance Artists for sixteen years. I had no desire to be a dancer on leaving Laban, yet being creative, devising new work was something I was drawn to. I also soon returned to practicing and training in improvisation and contact improvisation, locally, nationally and internationally.

Ten years ago I began to follow an interest in evolving movement work in environments and objects, small things. I began to take on the developing of performance projects and attempted to work collaboratively with artists working in different forms. I also discovered and began to practice the

work of Susan Klein and Barbara Mahler around this time. It is working creatively in Early Years, with the Learning Disabled and Elderly that I have been interested in developing and have been involved in projects and training that have enabled me to do this. I have always been interested in creative work led by the needs or desires of the participants and my approach, influenced by a practice of movement improvisation has supported and enriched this.

This past year has been different. A back injury has caused me to change my thinking about my moving body and dance artist self. This has been hugely enriched by a personal research and development project, supported by the National Lottery through Arts Council England, the Lisa Ullmann Travelling Scholarship Fund and The Rebecca Skelton Fund that enabled me to spend a month in late 2009 taking class with Susan Klein and Barbara Mahler in New York City and to begin the eight-month, Movement Training in Non-stylised and Environmental Movement with Helen Poynor.

In December last year I returned to sessions on the Oncology ward at Alder Hey amazed at how much easier I could move around hospital beds, responding to the needs of patients, after I had experienced intensive movement practice with Klein and Mahler, whose work seeks to enable the individual to achieve their movement potential. Helen Poynor's work continues to offer me challenges and insights into my movement practice, which has moved outdoors, where I hope it can grow, flourish and continue to inform my work in health.







My journey to Alder Hey

This is part of a series of photographs, a visual narrative of my regular journey too Alder Hey. It was used to support discussion, as I sought to give the Dance & Health workshop participants some insight into my experience.

I was finding it challenging to begin to talk to a group about the important, emotional and personal aspects of this work. It was inspired by the visual narratives, often employed to communicate and give value to, the experiences of young children in the pre-schools of Reggio Emilia, Italy.

“Before the session Chrissey was apprehensive and didn’t really enjoy physio, so didn’t want to take part in the session. She is embarrassed that she has the weakness and she is very frustrated with her limbs that do not work in the way they did before. During the session she needed to leave for her hydro, she did not want to leave, she was having a good time.

This was emotionally good for her as she has been depressed since she moved to the ward. Lisa was very adaptable and listened to me as a parent when I asked her to encourage certain movements. She was very approachable and friendly with the children, Chrissey can’t wait to see her next week!”

Mother of Chrissey aged 12, who has Cranial Malformation resulting in severe weakness in the left side of her body.



"Andrew's condition at the moment makes him very agitated, this can be extreme or mild. During his time with Lisa he becomes very calm and has on a number of occasions fell asleep. After every session he is always more relaxed. He always looks forward to Lisa coming to see him."

Father of Andrew, aged 13 who has Choreoathetoid Cerebral Palsy

"I really enjoy making the dances up!"

Sarah aged 10, has Arnold Chiari Malformation and Osteoporosis and was at the hospital for 7 months.

"Laura was looking forward to Lisa's visit and was visibly enthusiastic, lifted and more co-operative. During the sessions she is very relaxed and clearly enjoying herself."

Julie Sellers, Senior Play Specialist

Lisa's story

When I graduated in 1994 with a BA in Politics and Sociology, I wasn't sure where my career path would lead. I knew I wanted to work with people in some kind of supportive role, perhaps social work. I hadn't considered combining my love of dance, which I'd pursued as a hobby from the age of 2, with working with people who were having difficulty in their lives. I suppose my thinking at that time was very much within the paradigm of mind body dualism. We made a difference and achieved something by using our minds, our bodies were for fun, physical activity, dancing through the night...

By chance that summer, I came across an article written by a dance therapist, working at an orphanage in India, I see this as a key moment, a shift for me, into wanting to work with the body and dance. I was moved to tears by what I read, I had never heard of this profession, so I sought out more information. This led me to go back to college to gain a vocational qualification in Dance, a HND which would be necessary in order to do an MA in Dance Therapy. I never followed up with that MA, I enjoyed so much dancing each day when I left I sought opportunities to teach in the Community and perform. The summer I left in 1996 there was another eureka moment when I met Mary Prestidge and was introduced to Contact Improvisation. I was wholly



inspired by Mary's embodied knowledge and her teaching and she continues to offer her encouragement and support to this day. Finding Contact Improvisation for me was like coming home. As an inclusive form which develops our ability to listen and respond through our body to another, it is the foundation upon which my approach to working with dance in built and is especially appropriate in the hospital. This way of working gives value to individual expression, whatever the scope may be, and journeys the landscape of the body-mind exploring potential.

As I became more interested in the therapeutic aspects of dance and healing I also trained in Swedish Massage, Aromatherapy and Reiki and much of my work as a facilitator in the community was related to health in some way. I worked for the Youth Service for five years in socially and economically deprived areas, setting up projects with young people who were hanging around on the streets. These included work around sexual health, building confidence and self-esteem and improving relations between local communities and asylum seekers.

As Community Dance Artist for MDI, I developed work with older people, pregnant women, disabled children as well as

leading adult classes that were open to dancers and non-dancers. My work became more and more about the interconnectedness of bodymind and I became interested more directly in the experiential anatomy of Body Mind Centering (BMC) when I had my daughter in 2005.

My studies in BMC and particularly the focus on embryology and developmental movement, together with the experience of being a mother and witnessing how we perceive and learn through movement, has fed my work at the hospital immensely. In 2007 I completed my MA in Dance and my research was focused on improvisation, composition and creating film and performance work with my one year old daughter, in a way which gave her space to lead and create.

My passion for improvisation and the joy of connecting with another human being at a cellular level and finding a shared dance can happen in any context. For me that is the beauty of the work, it is life, it is not something that I do, it is who I am. And life is a process a fluid evolution of perception and experience and my challenge is to be open to each moment, so that I can receive the gifts that are my learning and share them with others.

"I always give Cath an update on the children, what treatments they've had that day, their general health, how they are feeling. Sometimes they say that they don't want to do something then they surprise you and have a go."

Caroline Bibby, Play Specialist oncology In-patients

"Trying to get him to do something is so hard. He's becoming institutionalised and he's not very chatty. For me to see him enjoying himself is fantastic. He's struggling at the moment, as his mouth is full of ulcers, which is one of the side effects of the treatment, so to see him smile is wonderful."

Mum of oncology patient aged seven.

"Matthew was not feeling great and not very enthusiastic, but once the balls came out and the stretchy cloth, he really enjoyed throwing, pulling and tugging. Cath really got him involved and moving about and smiling. Just the simplicity of the balloons made all the difference, not just for Matthew but for me too!"

Mum of patient aged seven with Osteosarcoma on right tibia which affects his mobility.

"That was really good fun, it was cool!"

Patient above.

"Nathan really enjoyed the session and was glad of the opportunity for light, relaxing exercise. He would appreciate more sessions."

Mum of child aged ten years with Rhabdomyosarcoma

"It is something different to normal activities and she always looks forward to it."

Mum of patient aged two-and-a-half with Rhabdomyosarcoma.

"Alan was very willing.... listened to Cath as she spoke and worked with her through the relaxation and movement."

Caroline Bibby, Play Specialist observing Cath working with patient aged eighteen.

"Alan said that he would need to hold on to his pain button as we worked. Yet I did not see him press it. He responds well to relaxation and always appears to fall asleep. Our routine is for me to creep out of the cubicle quietly."

"Dad said that Alan was in a lot of pain as his pancreas is swelled. I gently lifted, by tiny degrees his legs to address his stomach pain, did brushes down his arms and talked about warm, yellow light moving into his chest, stomach and face with his breath. Today he was in a cubicle so we could dim the lights and have relaxing music playing. Alan is usually in too much pain when I see him to fill in an observation sheet. Yet once I spoke to him when he was leaving the ward and he made a point of saying that he does, especially the shoulder exercises I have done with him at home. He said, "You don't know how tense you are until you begin to do relaxation"."

Cath and Alan.

Space

The neuromedical ward is essentially a rehabilitation ward. I see children with acquired brain injury undergoing rehabilitation; children with complex and multiple learning disabilities including chromosomal, genetic and neuromuscular disorders. The children Cath works with on Oncology are undergoing treatment for Cancers and although they may be 'able bodied' their illness can be debilitating both emotionally and physically.

They are both very active wards, with hospital staff, parents and relatives coming and going. Within neuromedical I have the benefit of a sensory room; a physical space where we can move and play and be creative, almost another world to the rest of the ward. It can be a quiet space for gentle moving and bodywork or it can get very lively, with us making dances and moving more energetically. This depends on the child and I respond to them, their interest, and what they are comfortable with doing. There are no distractions, apart from nurses occasionally popping in to give the children their meds, it is a focused space.

Sometimes though a child may not be well enough to be moved and I work at their bedside. For Cath, on Oncology, all of her work is ward based, by the beds or in the spaces in between. Our challenge is to provide the same feeling of focus and attention within the ward which has a different dynamic to the sensory room or a studio. How can we support a child in exploring their movement and finding a sense of ease in their body within the hustle and bustle of the ward.

Both Cath and I take time to begin working with a child, to establish a connection, a meeting place for them and us. This isn't a physical place more a metaphysical space, where we may be touching through our bodies, but equally it is a place where our energies meet, where we can attune to each other, a two way process. Before this can happen, we, the artists, need to be perceptive to how we are arriving to this session, to ensure that we have a sense ease and comfort in ourselves to bring to another.

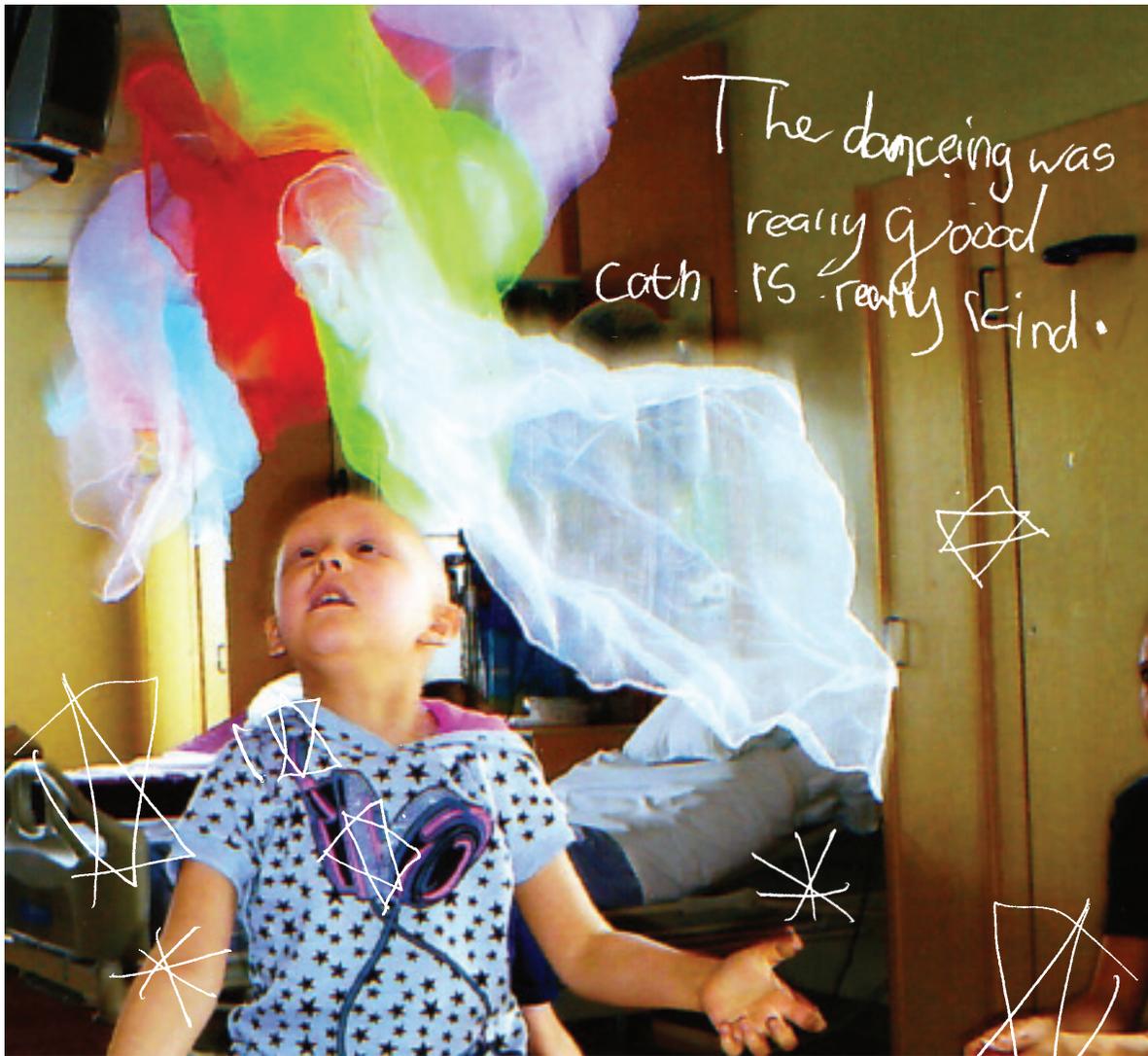
For me this is almost more important than the idea of a physical creative space. It is a space artists need to inhabit where we can be creative and imaginative and responsive to another.

We are not leading the session in the usual way an artist might, we are taking more of a companion role, supporting their experience and protecting the process. So it is this presence and attentiveness to oneself and another that holds and maintains the creative space, even if that is by a bedside.

In the last seven years the majority of small thing's performance work has been site sensitive, created in unusual spaces. Our experience of working in often remote or unused spaces, with improvisation and sensitivity we feel has been a resource for our work on the wards. The ability to tune in and connect with detail, no matter how small underpins our process in both contexts.



The dancing was
really good
Cath is really kind.





Lucy is seven and being treated for Ewing's Sarcoma (Cancer in her shoulder blade). She is having Chemotherapy and has worked with Cath once before.

"The treatment she's having at the moment is so strong she's really zapped. But the smile on her face says it all. The treatment is the last thing on her mind." Lucy's Grandma

"Mum and Grandma both said that it was really nice to see both of her arms moving. Lucy smiles, suggests movements and is very active during this session. The teacher, Sue said that Lucy had been quiet today. She was tired yet spoke a lot during our half-hour together."

"Mum said, and gave me permission to record that this, (working with the dance artist) may seem a small thing, yet it is a big thing for Mark. He finds it enjoyable and relaxing and would cry to express his feelings if this was not the case."

"He had a lot more wires attached to him yet the nurse encouraged me to work with him as soon as I arrived on the ward and another checked him over and said he was OK just before I began. Within minutes he was enjoying the soft ball being rolled over his torso and his hands being relaxed and stimulated by a very soft brush. He smiled, made baby talk, chewed his hands, gripped my finger and held the ball at one point. He is very ill yet as Mum says he really enjoys the movement session."

Cath writing Mums comments and her experience as she worked with four-month old oncology in-patient.

"When I first met Nathan, he was lying in bed, clasping his bed covers up to his chin, completely still after having his Chemotherapy treatment. This soon changed and he enjoyed throwing balls and tugging on the lycra. Mum was happy to see him enjoying himself as he had been so tired."

Cath on working with Nathan.

"I found Daniel and Mum in the corridor. He thought I was leaving without seeing him and so had got Mum to help him follow me off the ward. He seemed calm and happy today. We had lots of fun!"

Cath working with oncology patient aged five.

"Annie visibly relaxed and her painful upper torso became less tense. Mark relaxed also. He had requested something for his shoulders, which were sore, as he had been in bed for over a week with much sickness. He seemed quite down when I arrived, lying quietly on his bed. Both patients replied to my asking, if this had been relaxing, positively. They also, both smiled and said that they had enjoyed the experience."

Cath working with oncology in-patients aged twelve and seventeen years on the teenage ward.



"Ruthie has always been sat in bed, watching a DVD when I have seen her previously and it has been a challenge to encourage her to try any movement activity. Today she was in the playroom. Mum and Dad seemed happy that she enjoyed working with me. She is two yet does not walk as yet. I encouraged her to begin a wobbly crawl a number of times, as she reached for a small rainmaker. She seemed far more alert today and communicated to me clearly that she wanted to repeat this game. This has happened a number of times that the response I receive from a child is challenging. Then gradually or in this case suddenly, this changes, the child knows me, we have developed a relationship and things just happen, we move, dance and play easily."

Cath

Methodology

With our previous experience working at the hospital, which had been largely experimental and not oriented towards any outcome, we realised that whatever it was we were doing was working. Parents, children and staff were united in their support of our work, and the grant from Awards for All gave us the opportunity to be more reflective and developmental in our practice and share this with others, contributing to the growing field of arts and health research.

At this point however, we were not at the stage of wanting to study or test anything specific to generate quantifiable data. The effects of the work were as unique as the children we were working with and we wanted to celebrate and give a voice to each participant and witness. Researching through improvisation is in essence a phenomenological inquiry. A phenomenological paradigm sees the 'lived body' or embodied experience as a methodological starting point for research.

Therefore, the body is not an object of study but from where perception begins and small things acknowledge and value that each person involved in the process, whether child, parent, staff of artist exists in the world differently and that layering our observations offers a richer accumulation of discovery.

Therefore in agreement with Dr Matthew Peak, Director of Research we developed a protocol and focus for our enquiry, which was, 'An investigation of measures to

evaluate the practice of dance improvisation, on the neuromedical and oncology Wards of Alder Hey Children's Hospital.' Therefore we didn't set out with any particular aspiration in mind, rather giving space and support for participants and witnesses to communicate their personal experience.

Our approach is client led, responding to the needs of the children and empowering them in creating their own movement, rather than imposing movement on them. We believe non-stylised improvised dance is more appropriate in this setting as it is inclusive and centred on the present moment with a flexible and non-judgemental methodology. This process encompasses working with touch, movement, play, props, rest and music informed by the somatic practices of Body Mind Centering and Klein Technique.

The field of Somatics encompasses many methods, each of which share the same position, engaging with the whole person, celebrating health not illness. It seeks to connect with what is well and functioning healthily in a person as the basis for promoting further health and wellness.

During and after the movement sessions participants and witnesses are invited to write, speak or even draw their observations and experience from their own perspective. We have gathered this information and feel that it can stand alone without analysis by small things, but inviting the reader to layer their own meaning.

Dancing with the imagination

My observations of Cath Hawkins's session at Alder Hey

It was a very quiet afternoon on the oncology ward – a few children having treatment and the ones that were on the ward having recently come back from treatment, or lying quietly, one boy in pain.

We go in, Cath pulling along her little case of tricks, and enter this subdued atmosphere. We meet a girl who Cath has worked with before who is lying down and looking very tired having come back from some treatment. Her mother is there and Cath asks sensitively if she would like to do something. The answer is yes so Cath opens her case and gets out some big soft brushes.

She starts to stroke the girl's legs while telling a story about what she is doing brushing her with colours of the rainbow. Slowly but surely the girl begins to engage, first just lying still and looking as if she is relaxing just receiving the touch and then beginning to say some colours and move to sit up a bit. The story develops to the girl sitting on the top of a rainbow and jumping off into her mums arms. By this point her Mum has got involved in telling the story too.

Now her energy suddenly returns and she sits up and asks for her craft box and she makes her own rainbow brush with a feather and a straw and touches Cath and her Mum with it. Her tiredness has dissipated and her mood lightened. Soon after we take our leave and move on to another child. I found it a moving experience to see Cath step gently yet purposefully into these children's space to

offer something that can distract from their pain and transform their tired or fed up state, even when they looked like they were in a state not to connect with anyone. I was also moved to witness a shift in a child's mood from withdrawn, stressed and tired, to happier, motivated and with energy to create.

I saw benefits for the mother as well, in that she could be with her child in a different way in that time and have some input that was not medical into her child's well being. I can imagine it was a relief for her to have support on that level and to be part of but not initiating an imaginative journey that visibly shifted the state of her child. I also saw how this contact with Cath, this being seen and heard by someone in this way can support their healing. I saw how Cath was able to respond sensitively to children at whatever level of energy they were, and although I didn't see a more active session simply being given this creative attention must be a positive factor in the children's wellbeing, whether the session is more physical or more of a dance with the imagination and touch.

I believe these sessions have the potential to transform some children's experience of being ill and in pain to one where there are possibilities for lightness, relaxation, playfulness, expression and to provide some relief and emotional healing within the context of medical invasions and the monotony of hospital life.

Wendy Thomas, Dance and Shiatsu Practitioner

“Before hand Charlie was agitated and working hard whilst breathing. Afterwards he was completely relaxed in his muscles and breathing, and although the physio had been called earlier to give him chest physio, after the session he didn't need it.”

Mother of Charlie aged 2 who has Cerebral Palsy, Epilepsy and Chronic Lung Disease.

“Jake relaxes during the sessions reducing any agitation and high tone. He is focused on the gentle movements and aware of his legs being moved. He responds to the touch by moving his arms towards Lisa. His flexibility is increased with this methodology and I feel it compliments his physiotherapy beautifully.”

Mother of Jake, aged 2, who has acquired brain injury

“Jake had endured a serious head injury causing spasticity and dystonia. He was unable communicate verbally and it wasn't certain if he could see and hear. He also had movement of one arm that was jerky and disconnected from the rest of his body. I first connected with him through gentle touch, listening to his breath and movement through my hands. In response Jake's muscle tone softened, and he became more relaxed and his breathing easier. During the weeks following I continued this and began to offer other touch qualities. I worked with the naval radiation pattern that develops in utero, whereby the naval is the mouth and organizing centre of movement and supported Jake in connecting the movement he had in his extremity to his centre. He became much more relaxed and made beautiful sounds when we worked together”

Lisa on working with Jake

"During our sessions Lisa has an awesome ability to really help our daughter. Laura relaxes to an extreme effect. Normally she is really rigid although she does have two one hour sessions of physiotherapy a week, but compared to just a few minutes with Lisa she becomes really relaxed. In physiotherapy she is not anywhere near as relaxed as she is with Lisa, due to her severe Cerebral Palsy."

Mother of Laura, aged 12.



"Laura, 12, is a long-term patient. She has Cerebral Palsy (CP) and an undiagnosed condition and therefore cannot leave the hospital. She is fully cognitively aware and can sometimes feel depressed at her situation. Also due to her excessive muscle tone she can struggle with physiotherapy. I begin with touch and then allow her to guide the session. She responds by softening in her tissues and releasing her joints, allowing her to move more freely with a smoother quality uncharacteristic of someone with hypertonic CP. When she's more at ease I offer large make-up brushes with which to stroke her skin, which she enjoys very much."

Lisa on working with Laura





Jo Cork, 'small things' Dance and Health Workshop

The practical part of the project came to an end in September with a three-day Dance & Health workshop at Edge Hill University led by Miranda Tufnell, Lisa Dowler and Cath Hawkins. 'small things' alongside Miranda Tufnell, sought to share their individual experiences and approaches to working in health and the movement practices that underlie and support these. In doing this they hoped to encourage others to develop their own approach to working in unusual and challenging environments. The workshop was popular and in evaluations participants were very positive about their varied three-day experience, that included discussion, improvisation, paint and huge rolls of paper, Body Mind Centering and movement work in a nearby wood.

“I had expected the work to be more solely focused on what actually happens at the bedside for the children, but understanding the wider aspects of the work was, I think far more beneficial.”

“It was fantastic that everyday we were able to expose ourselves to the different approach of each facilitator. Not only could we hear their first hand experience but also we shared the bodily experience with them. I felt every moment was precious and unique.”

“Personally I feel the work 'small things' have been doing is amazing and inspiring. There really is a need for these workshops to expand to lot more places and to make people more aware of this work as this would be so successful within a lot more hospitals.”

Taking time up in the
Offering air

To the sky

Blowing back & forth.

quid splatting

wavering

Scrunching tape

pulling

tugging

stretchin

Squeezing tickles



Word play

Paula Hampson, Visual Artist and Dance Performer visited the project on the oncology ward as Cath Hawkins worked with a number of children.

As I encouraged and responded to children's tendency for play, movement and fun, even though they were poorly in hospital beds, I could feel Paula doing something with card and felt tips beside me. We were throwing soft balls, playing with materials and movement and Paula responded by sketching mostly words to capture the experience. I find the amount of movement, creativity and excitement she caught amazing as the experience, for me leaps of the paper!

“Sarah loved the session and is already asking when the next one is. Movement to music is fun and I don't think the children see it as 'therapy' although it is and therefore very beneficial in their rehabilitation”

Mother of Sarah, aged 10.

“Laura has had a very agitated morning and had been very tearful. Once Lisa started her session she became noticeably more relaxed, with decreased tone and was smiling.”

Helen Traynor, Play Specialist.

“Although Sarah can’t move her legs, she can move her arms and upper body. And she can now tell her friends that she goes to dance class.”

Mother of Sarah, aged 10.



“During Laura’s physiotherapy session today she was positioned in standing on the tilt table. A joint session was carried out with Lisa and Laura was distracted from standing. She participated in relaxation, upper limb activities and head control work, using different dance mediums ie. Scarf, brushes, ball. Laura co-operated well throughout the session for 20 minutes.”

Hospital physiotherapist.

“Like most ten year-old girls Sarah likes popular music and making up dances. The sessions give her opportunity to express her creativity and improve her confidence, while at the same time improving her movement and possibilities. By extending out through her upper limbs she connects with her core and lower limbs, mobilising an area that’s often compressed and quite static in her wheelchair. Therefore Sarah generates movement outside of her usual vocabulary, including moving her legs.”

Lisa on working with Sarah.

How to make the experience visible

These are some reflections on my experience of attempting to document when exploring movement work with patients and their families on the oncology ward. I felt the need to write because I found this different and on reflection, am beginning to understand that I am seeking to find new ways to capture experience in a new situation.

I write about what happened, to reflect on and to seek how to develop all the movement work I do. I have done this as long as I can remember and am now into my third notebook for the work I do at the hospital. I continued to do this on the observation sheets created for the From Where You Are project yet I wanted, needed to capture more the observations, the words and also the many languages of expression of others.

Movement and dance is transient, exists in a moment, is non-verbal, is felt then disappears. A document of it can hang on a wall, yet can it capture it? Documenting movement work is a challenge yet projects I have been involved in, inspired by the progressive system of

pre-school education in Reggio Emilia, Italy have offered me new, creative and imaginative ways to think about documenting.

In "Understanding the Reggio Approach", Thornton and Brunton state, "Documentation is not a technique, it is a way of guaranteeing that we are always reflective and valuing the other point of view." It requires "listening" and "sensitivity to different forms of expression and behaviour, observing with all of the senses".

I can relate this easily to my experience of improvised movement. The many layers of listening that take place as I work with patients on the oncology ward, take much of my whole body and mind attention and I often found making space for documentation within this a challenge. It was when I had other adults taking part, parents, artists, the arts co-ordinator that the dialogue around the giving of an observation sheet or consent sheet for the taking of photographs, happened more easily during the process.

On reflection I wonder how I could bring this “listening” in more to that already happening in the movement work the, “Photographs, videos, written notes, drawings, tape recordings and annotated charts.....2-D and 3-D examples of children’s work in progress as well as finished”, all used in Reggio to value, practice respect for a child’s experience.

Do I think of, try ways to involve the patients and parents more? I saw this happen in Reggio Emilia, have practiced this in Early Years settings and know how a child enjoys being given a chance to comment with a camera and can demonstrate high levels of technical and creative ability.

Why will learning how to do this be a process? The oncology in-patients ward is a sensitive situation to work in. Children are very poorly and parents are having a hard time. My listening is developing around this and so should, I think documentation.

Do I need to let those who I am working with take the lead? An observation I made early in the project may

suggest this, “When a patient or parent relaxes a little and begins to talk easily about what is happening being a good thing, the benefits they feel or how they have enjoyed working with me, and a dialogue begins, then I feel the observation sheet or camera can come out.”

During the project it was clear that artists, working directly with patients and families are those who are learning the skills of listening. It is us then who can truly observe, engage others in this, reflect and begin to attempt a theory or evaluation.

“Educators in Reggio are skilled in the art of photography, capturing the thinking and learning processes of children and adults using digital images and video” and for the practitioner documentation is, “a unique opportunity to reflect, to re-listen, re-see and re-visit, the events and process in which she played a part.” Then to evolve new ways of working and new ways of making it visible.

Reference: “Understanding the Reggio Approach”, Linda Thornton and Pat Brunton, David Fulton Publishers Ltd, London, 2005.

Professional Collaborations

My relationship with the Play Specialists on the neuromedical ward has been a constant support for me personally and the development of my practice at the hospital. Here are some reflections from Julie Sellers, Senior Play Specialist, on how my work has reinforced her activities and supports the broader objectives of the ward.

“Lisa’s sessions benefit the children and staff in many ways. As the children are engaging in active play and developmental activity they are meeting the Every Child Matter’s 5 outcomes. The sessions are specific to the child’s individual needs and can complement existing therapy aims.

The child is empowered to choose their level of activity and interaction during the session. This is important as in a health setting it is often the case that the child does not have a lot of choices and activities can be structured towards health needs. Here they have a choice of activity and level of engagement at their own pace.

From the point of view of staff, it can be a welcome change from a very structured way of working towards specific aims. As a quite relaxing activity, the sessions provide an opportunity to develop a less formal bond with the children, as they are not structured but fall into the children’s leadership.

This reverses the usual situation and empowers the child to have control. Also as play specialists and nurses are welcome, a less formal interaction is facilitated, offering further opportunities for staff to communicate with the children on a different level. For parents, the sessions are very popular, they have been known to literally queue outside the light-room waiting for a ‘turn’ for their child with Lisa. This highlights the way in which they perceive the benefits of movement for their child. Parents often join the sessions and are empowered in activities with their children. This is good quality time in a non-threatening activity at a time when they also feel quite helpless in what they can do for their children.”

Tribute

During a visit to Alder Hey, Right Honourable Jane Kennedy MP witnessed the effects From Where You Are can have in helping children make a full recovery.

Jane said: "This is a fantastic dance project which is making a real difference to the kids.

"It was a real privilege to witness the project in action and to see how enthusiastic and excited the children were.

"It showed in a very practical way how culture can help make life better."

Jane added: "It's a really exciting project and I hope that other hospitals will soon be taking note. It would be great to see music, dance and performance in a lot more hospitals helping patients back to health."



small things

dance
collective

The 'small things' dance collective was formed in 2002 to enable artists from different forms to explore creating performance in environments and to develop ways of including others within this process. Over eight years, long and short-term projects have taken place at The Lowry, Salford, Victoria Baths, Manchester, on the Walk the Plank Ship and Lewis's Department Store, Liverpool.

These projects have included dance, visual artists, film makers, actors and the forming of a young women's group in Wigan to take part in a performance, Salford Primary Schools, two groups of reception class children from Manchester, learning disabled adults from Salford, Warrington and Poland, a day centre for adults with additional needs and the Canal Boat Youth Project in Runcorn and young refugee and asylum seekers in Liverpool.

More recently From Where You Are also included the devising of a film and live performance installation, created by artists and their young children initially on the Lleyn Peninsula in North Wales. This toured to venues throughout the North West and Wales in 2009.





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