

interviews were conducted and the data gathered from the interviews was analysed by means of Interpretative Phenomenological Analysis (IPA). Four super-ordinate themes emerged: *The Therapist's World of Shame*, *Beholding Patients' Shame*; *A Shared Experience* and *The Island of Shame*. Participants described themselves as having a high propensity for feelings of shame and inadequacy, and referred to their cultural context as “a breeding ground for shame”. Multiple roles in the Maltese professional arena were perceived to augment these difficulties. The findings indicate that feelings of shame and inadequacy were frequently experienced by Maltese psychotherapists in various professional contexts, including clinical supervision. They also emphasise the importance of helping psychotherapists deconstruct and normalise feelings of shame and inadequacy by linking them to social and cultural dynamics. The lived experiences of shame emanating from these contexts are examined and the perceived impact of these dominant societal codes on the therapist's self and professional practice are considered. Implications for training and supervisory needs of trainee psychotherapists are discussed.

Keywords: *Shame, lived experience, psychotherapists, cultural context.*

DANCE MOVEMENT THERAPY PROCESSES AND INTERVENTIONS IN THE TREATMENT OF CHILDREN WITH ANXIETY DISORDERS DERIVED FROM TREATMENT THERAPY LOGS

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Abstract

Dance movement therapy (DMT) offers children a space to encounter strengths and experience a sense of vitality in order to increase their sense of confidence and self-awareness, thereby easing their anxiety and/or helping them achieve more adaptive emotion regulation. While previous studies indicate that DMT effectively reduces anxiety symptoms, such as stress, scant research focuses on the nature of the therapeutic interventions and how they assist in treating anxiety.

This study examined DMT techniques and interventions through their documentation in therapy logs tracking eight long-term treatments of children aged 8–11 coping with anxiety symptoms. Four intervention axes were identified: (1) action-promoting interventions (2) separation-promoting interventions; (3) interventions for strengthening the sense of self; and (4) integration-promoting interventions.

Based on the findings, a therapeutic model is proposed drawing on various “mirroring” interventions as the basis for forming the therapeutic relationship and additional therapeutic interventions involving movement. The model enables the child to explore their experience of the relationship, understand themselves in a new way, and create meaning.

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Keywords: *Processes and therapeutic interventions in dance and movement therapy, dance and movement therapy for children, anxiety disorders in children, treatment therapy logs, movement mirroring, the paper chase intervention model.*
