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# Tuzina, Tradition, and Therapy: A Case Study of Dance/Movement Therapy in Post-Conflict Northern Uganda

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**Tuzina, Tradition, and Therapy: A Case Study of Dance/Movement Therapy in  
Post-Conflict Northern Uganda**

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## **Chapter 1: Introduction to Dance/Movement Therapy**

Despite great advancement in recent decades, rehabilitation resources for post-conflict communities are often lacking within the humanitarian field. Antonio Donini (2010, p. S233) argues that because humanitarianism is self-defined by those who practice it with little or no consideration for alternative approaches, reinventing a globally accepted notion of 'humanitarianism' is a difficult task. Post-conflict rehabilitation is one of the fields most affected by this 'particularistic' style of humanitarian action, with Western-influenced techniques dominating the spectrum. According to Peter Salama (2004, p. 1810), though mental health is increasingly discussed in policy and research forums as an essential component of emergency programs; implementation remains constrained by a lack of both clear and feasible program strategies and sufficient field staff with expertise in these areas. Additionally, there is a fundamental conceptual disagreement among humanitarian actors between advocates of a more Western, psychiatric approach and those of a holistic, psychosocial approach. For example, programs that directly address psychosocial problems among children of war remain uncommon, whether in developed or undeveloped nations (Harris, 2007, p. 137).

A recently developed technique, dance/movement therapy, promises to act as a bridge between mental health techniques and cultural practice if utilized properly. The American Dance Therapy Association defines dance/movement therapy, hereafter referred to by its acronym DMT, as "the psychotherapeutic use of movement to further the emotional, cognitive, physical, and social integration of the individual" (ADTA). Fundamental to DMT practice is the belief that health and well-being are based on an integral connectedness of psyche and soma (Harris, 2007, p. 137). DMT can be used cross-culturally because it is

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founded upon the traditional origins of dance as a worldwide form of cultural expression based in its beginnings in celebratory ritual. Chi-Fang Chao argues that, “in addition to reflecting the ‘humanist’ traditions of early anthropology, research on dance partakes in collisions in the social sciences between mind and body, between experiencing the ‘other’ and self...and between ethnographic fact and representation” (2009, p. 14). He discusses this Cartesian dualistic view of the person, describing dance as empowering persons to engage kinetically in social and reflexive commentary since it is a cultural way of being human (2009, p. 18). DMT exercises seek to develop this commentary in creative and accessible ways. For example, ‘authentic movement’ is described as “the simple practice of freely moving from and following one’s inner impulses while being witnessed in a non-judgmental and empathetic way” (Embodied Psychotherapy). Such exercises allow even the least experienced patient to access movement as it intuitively springs into his or her body. Exploring his movement in this way enables him to experience dance without engaging in the years of specialized training traditionally required to be a “dancer.”

In recent years, the value of using dance in various ways has been recognized more than previously due to the evolution of practices such as DMT, both by academics and by dancers themselves. The world-renowned New York City Ballet, living up to its boast of being “one of the foremost dance companies in the world,” has developed its reputation based on training its dancers in a strict technique of unmannered classicism that takes many years to develop (NYCB). Yet during a class entitled “Black Traditions in American Dance,” students in the competitive Ailey/Fordham Dance BFA program listed their rather nontraditional definitions of what dance is and means to them (K. Clarke, class notes, January 20, 2012). For these pre-professionally trained dancers, dance remained much more

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an emotional form of expression rather than a physical pursuit requiring intense training. One defined it as the physicality of emotions; another, as an art form acting as an extension of oneself. Still another student described it as a conversation between cultures sharing stories about the past, present, and hopes for the future. Each of their responses demonstrates their belief in dance's underlying use as an artistic act connecting one's mental and emotional state and one's physical movements, a fact demonstrative also of the changing views of dance's capability to be experienced by a wide range of people with varying degrees of talent, physical characteristics, and technical competency.

Thus dance/movement therapy seeks to use this mind-body connection in order to provide a channel through which victims of trauma can gain deeper self-awareness, thereby getting in touch with their emotional responses to past experience. According to therapist Valerie Chu, "Trauma challenges one's view of safety and the basic assumptions of innate order in the world, which affects one's sense of self. This shaken belief brings about feelings of alienation from the rest of humanity, disrupts attachments and relationships, and negatively affects one's ability to trust others" (2010, p. 4). David Harris argues that dance therapy is effective due to the fact that movement reflects personality, thereby establishing a deeper relationship between the therapist and the patient. This movement relationship enables behavioral change for the patient that can affect significant changes in his or her total functioning, a process necessary for war victims to achieve full rehabilitation (2007, p. 137). By creating art, one is able to identify his personal strengths and creative attributes, often leading to a greater sense of self-confidence (Chu, 2010, p. 5). For ethnic groups such as the Yakama American Indians, dance is a method of internalizing positive messages about their indigenous identities, thereby enhancing their sense of cultural pride (Jacob, 2012, p. 466-

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467). Such attributes of dance therapy are highly beneficial for orphans, having lost the parental guidance, and displaced persons, having lost their geographical identity.

While these DMT concepts are wonderful in theory, they must be adjusted to work effectively within various cultures. For example, in Japanese aesthetic thought, the embodied self occupies the space of “here and now” and is expressed as such in performance art. Japanese artists emphasize the temporality of the individual and focus on the spatial dimension of human beings in their collective existence. As Chu points out, this is a concept of self that is alienated from Western techniques of the body, which focus on mind-body duality (2010, p. 22). David Harris explains, “Dissimilarities across cultures in idioms of health and disorder—as well as *trauma*—potentially challenge the capacity of Western psychology to respond meaningfully to the experiences of children from the developing world who are affected by war and organized violence” (2002, p. 137). What is described as a ‘traumatic’ experience here in the U.S. may not qualify as one according to other societies. This is true for the notion of what it means even to be a ‘child.’ David J. Francis explains that the Western construction of the identifier ‘child’ is influenced largely by the field of developmental psychology. This construction values the nurturing of any person under eighteen years of age as a child. Yet such a standard of childhood is not often the case—if not impossible—for many ‘children’ living in developing countries. Often children in Africa mark their rights of passage at the age of fourteen in a best-case scenario; in less fortunate circumstances, many are orphaned due to war and disease and are forced to act as the heads of their households (2007, p. 222-223). Examples like this could explain why, though the American Dance Therapy Association boasts of serving countries across the globe, nineteen of the thirty-three countries served are European while by contrast, only one African nation is

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served (ADTA). Though dance therapy can be used cross-culturally, it seems that there is yet much work to be done in order to fully adapt to the cultures in which it is used.

In this paper, I will examine the ability of dance therapy to successfully aid in the rehabilitation of the post-conflict communities of Gulu and Lukodi in Northern Uganda. As a region ravaged by conflict for over 20 years that is now in the process of rebuilding itself in the wake of a fragile state of peace, Northern Uganda presents a setting in which the majority of the population witnessed or was personally affected by violence during the war (Doom, 1999, p. 7). In 2012, I traveled to the region with a group of dancers and a filmmaker and worked in conjunction with ChildVoice International in order to take part in an arts exchange with local organizations using dance to empower their communities. Our group, known as Tuzina, taught classes in basic modern dance and ballet technique in addition to DMT exercises. In return, we learned traditional MDD from each of the six groups with whom we worked. Throughout the process, we filmed the classes and interviewed the leaders of each of the groups in order to gauge the effectiveness of using dance as therapy within Gulu and Lukodi.

Though the arts exchange was a focused case study of communities affected by the conflict with the Lord's Resistance Army, the results of our work hold larger implications for the effectiveness of dance therapy in post-conflict and displaced communities in other parts of Africa and the world. By applying our Western-influenced DMT techniques in a vastly different cultural scenario, we learned that doing so was largely ineffective compared to the successful results of collaborating with each group in their traditional dances. This paper will provide evidence, whether researched or experiential, demonstrating the necessity of adapting dance/movement therapy techniques to the culture in which it is conducted in order



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to effect the greatest amount of personal and collective rehabilitation within post-conflict communities.

### **Chapter 2: Ugandan History and Traditional Music, Drama, and Dance**

The conflict in northern Uganda received an unprecedented amount of media attention when the nonprofit Invisible Children launched a campaign entitled “Kony 2012.” The Southern California organization had been promoting social justice for children displaced by the Lord’s Resistance Army since 2003, but because they published their 2012 campaign on YouTube using an emotionally packed video, publicity of the conflict grew exponentially. The video went viral, with the amount of viewers surpassing 85 million people within the six days of its release (Perry, 2012, p. 1). Just as unprecedented as the exponential number of the film’s viewers was the vehemence of the debate surrounding its goals. One critic railed on the organization’s leaders for making it seem as if the conflict is ongoing in Northern Uganda today (Izama, 2012). Another descried Invisible Children’s use of social media to promote the idea that through viewers simply buying into the Kony 2012 campaign, the Joseph Kony “problem” would be fixed (Ruge, 2012). A third party noted that the film completely ignored the efforts of Ugandans to rehabilitate their communities, instead boosting the Western notion of “saving” the Ugandan victims in this scenario (Mackey, 2012).

The Kony 2012 debate impressed upon my mind the importance of acknowledging the agency of Ugandans in the rehabilitation process through our documentary. It also demonstrated the need to verify and understand the facts of Uganda’s historical and political background before embarking on a collaborative process with communities deeply affected by the conflict. An understanding of the circumstances surrounding the uprising of the Lord’s

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Resistance Army and its effects upon the community are crucial for the reader of this paper in order to gain an understanding of the trauma that much of Northern Uganda has witnessed. One of the main issues with the presentation of the conflict between the Ugandan government and the LRA is that it is not placed within the context the nation's complex political history, but is instead examined as a separate entity. In order to understand the root cause of the conflict, it must be traced throughout longstanding tensions between Northern and Southern Uganda. For the sake of brevity, I will introduce these tensions beginning with Uganda's postcolonial independence.

For centuries, the Buganda kingdom, known as the *Kabaka* and located in central and southeast Uganda, had exercised control of the surrounding regions of Uganda. Then Great Britain colonized Uganda following the Berlin Conference of 1884-85. The result of British colonization of Uganda was the preferential treatment of the leaders of the traditional kingdom of Buganda. This, in addition to many other negative effects of colonization, naturally angered citizens of the surrounding areas of Uganda. Milton Obote, a southerner from the Lango tribe, was elected Uganda's first president in 1962 after Britain allowed voting for independence as an option on the election ballot. By 1964, he had alienated many of his former supporters because his administration had no qualms over changing the nation's laws in order to promote specific political interests for their own personal aggrandizement. At the time, Idi Amin, a northerner who had served in the King's African Rifles (Britain's colonial African troops), was the top commander of Obote's army. Faced with increasing opposition, Obote ordered Amin to attack the Bugandan palace and oust the traditional leadership of the *Kabaka*. He abolished the once powerful Buganda kingdom and declared Uganda a republic in 1966 (Karugire, 1980, p. 195-7).

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This move enraged the Buganda tribe, and, coupled with Obote's abuse of power, bolstered the growing political movement against him. Amin capitalized on the resentment he sensed against Obote and used it to bolster his plan to overthrow the president. He drew popular support with his "18 Point Plan" in which he promised Ugandans security, equality in elections, economic progress, and lower prices and taxes. Idi Amin understood the frustration of Northerners who had endured centuries of socio-political inequality under the leadership of the South during both the colonial period and Obote's regime. While Obote was away in Singapore, Amin led a successful coup d'état in 1971 and declared himself president. He had only been in office for seven months, however, when workers began to strike in order to demand the rights he had promised. In retaliation, Amin suspended all political organization for the next two years. He began torturing and massacring anyone suspected of loyalty to Obote. Uganda became a military state and intimidation its rule of law (Mamdani, 1984, p. 37-40). Amin's regime has become infamous as one of the bloodiest in history (Ali, 1999, p. 20).

In 1986, a group known as the National Resistance Movement under the leadership of Yoweri Museveni took power following a successful five-year guerrilla struggle with the aid of Tanzanian forces. Museveni practiced "politics of inclusion" in which he sought to reconcile all Ugandan political parties together. He appointed representatives of different political tendencies to his cabinet and called for widespread participation in the drafting of a new constitution. He also promoted connections between the government and the populace by organizing People's Resistance Committees and allowing for political discourse. While Museveni's policies have seen many positive results, they were not successful in eradicating the divisions between the North and the South. For example, he incorporated all of Uganda's

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armed factions into the National Resistance Army (later the Ugandan People's Democratic Army), resulting in seriously weakened discipline because of its large size and lack of proper organization. Unruly members of Ugandan People's Democratic Army, or UPDA, often took part in lawlessness and revenge killings when situated in the North. This greatly alienated Northerners, particularly since they were already bitter over the fact that Museveni's regime resulted in a definite shift of power into the hands of Southerners. On the other hand, Southerners remained bitter toward Northerners for originally supporting Idi Amin (Ali, 1999, p. 18-27).

Out of this unrest grew the Holy Spirit Movement (or the HSM), created and led by Alice Lakwena. Lakwena claimed to have been possessed by a holy spirit in 1985 who revealed to her that the eve of total destruction was near. She claimed that achieving salvation for the Ugandan people required a new, supernatural Acholi force standing in opposition to Museveni's leadership. She and the HSM fighters fought the Ugandan People's Democratic Army (or UPDA) and gained a great following, even in Southern Uganda, after several successful battles. Ultimately, however, the HSM lost and returned home to Acholiland defeated (Doom, 1999, p. 17-19).

Lakwena's cousin Joseph Kony soon distinguished himself as her radical heir. Defining himself as "the mouthpiece of God," Kony formed a small army of followers in 1987 with the objective of "reinforcing the biblical Ten Commandments," though this supposedly entailed continued opposition to Museveni's leadership. In 1994, the Ugandan government attempted to conduct formal peace talks with the Lord's Resistance Army (or LRA), and at first the outcome appeared promising. However, Kony soon realized that there had been double-dealing on the part of some Acholi leaders during the process. As a result,

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he turned on his own people, the Acholi, and began a war against any who would not support him. Though many have called Kony a terrorist, he sees himself as a “freedom fighter,” fighting for “freedom” from Museveni’s dictatorship. He massacred entire villages and began abducting children to use as child soldiers, porters, and wives. He continues to wield the vicious weapon of terror. Kony allows at least one civilian to survive a massacre of his village so that he may report to surrounding areas the terrible atrocities he witnessed. Often he forces the children he abducts kill their own families. He cuts off the lips and noses of his captives as a warning to them that if they should ever escape, they had better not disclose his location. Though the Ugandan government was finally able to force him out of the country in 2006, he has remained a threat to the surrounding areas of the Central African Republic, South Sudan, and the Democratic Republic of the Congo for the past seven years (Doom, 1999, p. 20-28).

The effects of the LRA conflict are far-reaching, but have impacted no other group so greatly as children. Hundreds of children were forced to commute as many as ten miles a day in order to sleep in city centers to avoid abduction. 53% of children in Northern Uganda were orphaned as a result of the violence. 90% of the population in the Northern regions of Gulu, Kitgum, and Pader were displaced. In the displacement camps, many children were living without proper healthcare and food. The Ugandan army often took advantage of the large amount of women and girls gathered together by sneaking into the camps to rape them (UCRNN, 2007, p. 11). The rate of younger girls becoming pregnant and children infected with HIV/AIDS jumped drastically within these camps (UCRNN, 2007, p. 14-18). 50% of children interviewed in the affected areas had symptoms of Post Traumatic Stress Disorder and 82% had been exposed to traumatic events (UCRNN, 2007, p. 20). Over the course of

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the conflict, the LRA has abducted well over 30,000 children. Those who escape from the army face a high level of stigma from their families and communities. Some communities are revolted by the idea of the atrocities the child has committed, or fear that the child will continue to act violently. Thus many children are afraid to return home for fear of abandonment by their communities. Though each child responds differently to trauma, every former child soldier faces psychological turmoil, whether the effects of abuse, neglect, trauma, or poor physical health (UCRNN, 2007, p. 34-36).

Despite Uganda's recent history of political turmoil, dance remains an integral part of Ugandan cultural tradition. Ugandan Deborah Kyobula described music, drama, and dance by saying, "What you do, in your actions and the way you play on stage, takes you back to the old days" (Pier, 2011, p. 419). According to Nakaweesi Katongole, dance is a matter of pride for Ugandans. It is incorporated into every aspect of life, whether performed at weddings or rites of passages, in commemoration of a good harvest, or merely during an informal gathering (Personal Communication, March, 2013). English anthropologist E. E. Evans Pritchard was among the first to note the characteristics of African dance in his 1927 doctorate on the Azande people of the Nile, the region of the modern-day Democratic Republic of the Congo. Singing and instrumental accompaniments are necessary elements of traditional African dance. Pritchard says, "Any singing whether in a dance or not is inconceivable without correlated muscular reactions" (2008, p. 3). If the Azande people were inclined to move their bodies in time with any singing, it was the fact that they incorporated their full musculature in movement that delineated the action as dance. African dance often functions within various circular formations (2008, p. 4). Also peculiar to African dance is that it necessarily generates leadership since someone must organize participants into groups

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and direct them in movement (2008, p. 6). Pritchard notes, “To some degree the dancer is compelled to coordinate his actions with the actions of other dancers and this constrained coordination is pleasurable” (2008, p. 9). Thus, as Nakaweesi explained, dance represents a prominent social function within African communities (N. Katangole, Personal Communication, March, 2013).

Traditional music, drama, and dance, hereafter referred to as MDD, was formally instituted in the Ugandan primary school system under Milton Obote’s administration during the 1960’s. An annual MDD competition compels students to train each day to learn various regional dances in order to prove to their classmates and teachers that they should be allowed to compete at the Ugandan Amphitheater (Pier, 2011, p. 420). Nakaweesi recalls how though she learned these traditional dances casually at family gatherings like most other students, it was during primary school that she learned the dances of each of Uganda’s historical kingdoms with precision. Though the children have a choice about whether or not to train in MDD in order to compete, the majority choose to do so and take the extra-curricular activity very seriously. Indeed, they must take it seriously, for the primary school teachers are known for being strict—if a student messes up a step, he is asked to lay down and is then beaten with bamboo stick. Even as a 2<sup>nd</sup> grader, Nakaweesi was expected to retain the complicated dances and perform them with ease. Notwithstanding these pressures, she remembers the competition with fondness (Personal Communication, March, 2013).

Thus it is no surprise that several groups are already meshing DMT practices with traditional MDD or popular contemporary dance forms within post-conflict or suffering communities in Uganda. For example, In Movement: Art for Social Change provides arts education for disadvantaged youth in primary and secondary school. Currently working with

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approximately 360 students, the organization provides classes in contemporary dance, traditional African dance, and breakdance in addition to music, drama, creative writing, visual arts, and circus arts. They design their classes in order to achieve the goal of “promoting positive concepts such as: exploring the imagination, creative risk-taking, self-esteem, communication skills, empathy and acceptance, etc.” Additionally, they provide seminars for their students on relevant topics such as positive relationships, decision-making, and HIV/AIDS (In Movement, 2010).

The Portrait Home, an organization located in central Uganda, has established a directorate called “Sweet/Street Sound Steps” to facilitate dance mentorship and training for street children. The classes aim to enhance the connectedness of the kids’ minds and bodies in order to grow their physical, emotional, and spiritual health, achieving the effects similar to verbal therapies. Street Sound Steps implements a five-step process through which children audition, work with mentors, and finally take part in a “grand competition” (Kisitu, 2011).

A third program entitled Breakdance Project Uganda, was founded with the mission of “engaging young people in elements of the hip hop culture to build leadership skills and promote social responsibility.” It offers breakdancing classes at youth centers in both Kampala and Gulu and was featured in the documentary film *Bouncing Cats*. It partners with other local organizations to increase members’ access to education, vocational training, counseling, health testing, and advocacy training (Music Uganda, 2008).

HEALS Hip Hop Therapy Project provides classes in each of the areas listed in the acronym of its name: health, education, arts, literacy, and sports. Its aim is to create a safe environment for war-affected children to enjoy these after-school activities. After years of



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physical and social isolation due to the LRA conflict, HEALS goal is to help the children connect with the outside world and increase their self-esteem (Adams, 2008).

Each of the four groups mentioned above provides remarkable services for the community groups they serve. It bears pointing out that none of them have implemented DMT-certified techniques. Rather, each focuses on the ability of dance, in and of itself, to promote healing and rehabilitation in a therapeutic way.

### **Chapter 3: Cross-Cultural Dance Therapy Techniques**

The idea to use dance as a therapeutic practice entered my mind during the summer after my sophomore year in college. I had entered Fordham University as a major in Dance through The Ailey School's Bachelor of Fine Arts program. Over the course of my academic studies at Fordham, I developed a passionate interest in African Studies, particularly concentrated upon the regions of central and east Africa. Through researching conflicts and civil wars in the Democratic Republic of the Congo, Uganda, and Sudan and South Sudan, I realized I wanted to use my training in dance to aid communities recovering from such crises.

A project called Tuzina, a word meaning "we dance" in Lugandan, was birthed in my mind and soon after took physical shape when I formed a team of six fellow dancers in the Ailey/Fordham BFA Dance program. The dancers committed to traveling to northern Uganda during summer 2012 to take part in a dance exchange—we would teach dance technique and dance therapy classes to local groups and they would teach us their traditional Ugandan dances in return. Realizing the importance of documenting the process, a Film student at Columbia University was added to the team. Together we completed a Kickstarter campaign raising over \$20,000 in addition to three fundraising performances at prestigious theaters. Understanding that in-depth knowledge of Uganda's political, cultural, and historical

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background was imperative before embarking on the trip, I completed a semester-long independent study course focusing on these areas and shared the information I learned with the Tuzina team.

A pivotal component of our preparation was the dance therapy workshop we completed over the course of five sessions with Cara Gallo of Embodied Psychotherapy. During each session, we took part in DMT exercises and learned how to facilitate them for the other members of our team in preparation to teach them to groups in Uganda. We learned age-specific exercises so that we could introduce them to groups more effectively, such as exercises incorporating imagery of animals and colors for younger groups. Ms. Gallo introduced us to “authentic movement” techniques. She also taught us how to verbally lead participants through physical movement and ways to acknowledge their thought patterns in order to reveal their emotions more consciously. Based on the workshop, the Tuzina team structured classes for different age groups based on the appropriate exercises—DMT classes for children, teens, and adults respectively.

The dance/movement therapy model taught to us by Cara Gallo is one of two prevailing dance therapy models. The other, known as *expression primitive*, is based in shamanistic traditions. While dance/movement therapy was developed in America in the 1940s, *expression primitive* was developed in France in the 1980s. DMT is based in modern dance tradition and places on emphasis on improvisational dance. Using the term “primitive” is not acceptable in the U.S. due to its connotations of a European colonial mindset toward non-European countries. Yet the dance therapy model’s biggest proponent, Dr. France Schott-Billman, defends it. She explains that she chose the term to reflect “dances of trance and possession” associated with healing ritual practices in every part of the world

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(Panagiotopoulou, 2011, p. 92). The differences between these models are apparent in their structures, grouping, movement styles, and musical accompaniment. The following table presents these differences (Panagiotopoulou, 2011, p. 99).

**Table 1** Comparison between *Dance/Movement Therapy* and *Expression Primitive*

<i>Dance/Movement Therapy</i>	<i>Expression Primitive</i>
1 Modern dance	Common characteristics of the dances of 'indigenous societies'
2 Group or individual sessions	Group sessions
3 Movement which is spontaneous, creative, or authentic	The participants follow what is verbally or physically prescribed by dance therapist
4 With or without music	Music accompaniment with a drummer

Both models have proven effective, though the extent of their effectiveness in specific contexts must be assessed. As dance therapist Ethimia Panagiotopoulou notes, "Their differences exist due to the fact that each model evolved in different cultural contexts and therefore has a different ideology" (2011, p. 99). Additionally,

"There is a need for therapists to sense when the forms they are providing may be at odds with the participants' worldview values and beliefs and be able to modify and/or make 'corrective' shifts in these forms in order to make them more meaningful and relevant for the participants, without causing them undue cognitive dissonance and emotional stress" (Panagiotopoulou, 2011, p. 102).

Yet this need is difficult to fulfill, especially since cultural differences can be emotionally-charged; often, it is simply easier to ignore them (2011, p. 103).

Both Panagiotopoulou and David Harris provide examples of their dance therapy work in differing cultural contexts that demonstrate the effective use of the two modes of

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dance as therapy. Panagiotopoulou discusses her first introduction to dance therapy at a private school. As a dancer trained in traditional Greek music and dance, she expected that those forms would be a foundational aspect of the class since all of the other students were also Greek. Yet the focus of the class was centered on the modern-based understanding of dance therapy, or DMT. She recounts feeling dissatisfied by being compelled by the facilitator to move when she would have preferred to simply observe the others. She says,

“Since I belong to a cultural tradition with a collective self type, where dance is linked with music and song, the possibility of contact with the cultural ‘other’ was highly reduced for me in this dance therapy context. At this point of intercultural contact, I became aware that my own culture was different from that of others around me” (Panagiotopoulou, 2011, p. 104).

Thus cultural differences proved a stumbling block in Panagiotopoulou’s dance therapy process. Since she was uncomfortable with the facilitator’s direction, she was unable to participate fully in authentic movement.

David Alan Harris completed two case studies using each of the therapy forms. First he describes the Dinka Initiative to Empower and Restore (DIER), which he began to serve a community of unaccompanied refugee minors who had relocated to Pennsylvania from South Sudan. This project utilized traditional Dinka MDD to provide dance therapy for the group (Harris, 2007, p. 141). As the group’s facilitator, he appreciated the fact that dance and healing are essentially one in Dinka culture and therefore pursued the expression primitive mode of dance therapy in their exercises (2007, p. 142). Indeed, rather than facilitating dances for the group, he instead asked the participants to teach him their traditional dances. He states, “The project’s main objectives involved fostering resilience and healthy, adaptive development, rather than diagnosing or treating mental disorder in Western terms....[thereby] increasing chances of marginalization” (2007, p. 143).

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The results of this approach were positive. The young refugees enthusiastically collaborated to organize themselves for dancing and drumming groups. Being placed in the role of “expert” afforded them the opportunity to demonstrate their knowledge regarding Dinka culture. Harris notes two important effects of this approach. Because participants’ awareness of their cultural strengths was increased, this in turn enhanced their collective resilience. This self-confidence also bolstered their capacity to negotiate with the new culture in which they were living. For example, traditionally in South Sudan only males drum. Through the process of organizing Dinka dance patterns, however, some female refugees expressed interest in learning to drum and were allowed to do so by their male counterparts (Harris, 2007, p. 144-146).

Harris provides another example of cross-cultural dance therapy work, this time using the DMT approach. In 2006 a Minneapolis-based Center for Victims of Torture (CVT) in Sierra Leone established a therapeutic activities initiative in order to serve the community’s survivors of war trauma, a large percentage of whom were former child combatants. Thus the dance therapy group’s dozen members all had a history of active involvement in warfare by the age of thirteen, and displayed a range of psychological symptoms of trauma including anxiety, depression, and posttraumatic stress. Harris himself trained three other counselors in DMT fundamentals and worked with them to develop a “highly detailed group treatment schedule” (Harris, 2007, p. 149). They implemented a series of improvisatory movement exercises during the children’s sessions that had been developed with shell-shocked American veterans in the mid-1950s. The facilitators aimed to create a safe space in which the children’s needs for acceptance and accountability could be met (Harris, 2007, p. 150).

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In this scenario the patients also responded positively. Harris states that the group members demonstrated willingness to engage with each other and their facilitators through the movement exercises. This was particularly true in cases in which the exercises were conducted to Sierra Leonean popular music. Harris also notes that the members' openness to explore movement "rarely extended to overt emotional expression." In describing some of the horrific acts during sessions that they had been forced to commit, participants displayed little emotion. Yet Harris expressed the belief that overall, their DMT group achieved results (2007, p. 150).

"Ultimately participants demonstrated enhanced self-awareness, including through willingness to examine and symbolize through gesture their involvement in the suffering of others... By the 'closing' session... a high level of trust and dynamic interaction in the group had thus freed expression and enabled these 'victim-perpetrators' to identify their ambivalence and confusion over the dynamics of power and powerlessness in their lives" (Harris, 2007, p. 151).

As he notes in his conclusion, both of Harris' approaches to dance therapy ultimately provided ways for the two groups to overcome their post-conflict trauma. However, he does not go as far as to argue in defense of one mode of dance therapy working more effectively than the other. This is what I sought to discern through our experience in Northern Uganda.

### **Chapter 4: Tuzina's Arts Exchange**

Tuzina partnered with ChildVoice International, a nonprofit that serves former female child soldiers who have returned from the bush. The LRA had abducted these women to use them as child wives and sex slaves. ChildVoice built a long-term rehabilitation center for the women, providing them safety, housing, schooling, vocational training, healthcare, and a sustainable farming system. The women living on the compound receive care for their children and have earned the name "Bead Women" by rolling beads used for jewelry sold by

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ChildVoice. This empowers them to better care for themselves and their children by giving them a method through which to earn a living.

We traveled to Uganda in late May 2012 and stayed in the Gulu/Lukodi area for just under three weeks. During that time, we worked with six different local organizations: the ChildVoice Bead Women, two primary schools, and three dance groups including Asanti Afrika Performers, Alfred Duele's Memorial Dance Group (known simply as DUMDA), and Gulu Theater Artists. We spent one to three days, with a time slot of approximately six hours per day, with each group in order to take part in teaching and taking dance classes. For the sake of clarity and pertinence to my argument, and because we spent three days with these groups, I will focus on the results of our interactions with the ChildVoice Bead Women and Asanti Afrika Performers.

The Asanti Afrika Performers is a group formed by Onen Jimmy Goosen. Having lost his parents to the conflict with the LRA, Goosen was forced to flee south to Kampala at a young age. There he began dancing and decided to apply this experience to assist similarly vulnerable children in his hometown of Gulu. The mission of Asanti Afrika Performers is "to train local vulnerable children in traditional Acholi music, dance, and drumming and give them an opportunity to perform dances in the area to raise funds to cover their own school fees." Goosen consults local area leaders in order to locate and target the neediest children. As a Community Based Organization (CBO), the group receives its funding from some of the children's parents and guardians, members of the community, and money earned from performances (Asanti). The money allows Goosen to pay for meals, housing expenses, and schooling for the children, in addition to performance materials such as costumes, props and instruments. About twenty children are currently housed in the organization's base in Gulu.

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The children and teens attend school and then learn traditional MDD under Goosen's direction.

The blog post I wrote about our first day working with the Asanti Afrika Performers provides insight into the first lesson we learned through the arts exchange—the great sense of pride Ugandans take in their traditional MDD.

“The Asanti Afrika Performers welcomed us warmly this morning. Jimmy, the director of the group, said, “When we dance together, we become brothers and sisters.” We were prepared to teach them for at least half of the day (we were with them from 9 am to 4 pm with a break for lunch), but we didn't count on how excited they were to share Acholi dances with us. Jimmy led us to the backyard, where they began teaching us the *Larakaraka* and *Dingi Dingi* dances. The Asanti Afrika students were mostly older boys, though there were a handful of girls. [Two of us] learned the *Larakaraka* as boys—we wore a feather headpiece and played a *calabash* drum (the dried, hollow shell of a hard pumpkin). [Two others] learned the intense hip swinging of the girls' part. [The final team member] was given a lesson in drumming. The *Dingi Dingi* dance is one performed only by girls. The leader signals the other dancers when to perform the steps by using a whistle. All of the dancers were very friendly and happy to show us the steps. It was a lot of fun, but after a couple hours of learning the dances in the sun we starting feeling tired. The dancers seemed to have endless energy and kept saying, “Okay, one more time!”

After lunch we learned the traditional songs that accompany the dances we had learned. We then performed both of the dances in costume (a skirt with a layer of material with each color of the Ugandan flag) and with instruments on the front lawn. Neighbors stepped out to see what was going on. A few kids with schoolbooks paused on their way home to watch us. One older man corrected us on a turning step. It was obvious that everyone in the community takes great pride in their dances. Their pride is warranted—each dance has a song, specific costumes, and tells a story or celebrates an event. I was honored to be able to take part in these traditions. Because we had a little time left before we had to leave, we taught the dancers a few steps from the Horton technique (a modern dance technique). They were quick learners and demonstrated an acute awareness of rhythm. They weren't afraid to try anything we showed them and eagerly urged us to show them more. Dancing with them allowed us to bond in a way that wouldn't have been possible otherwise. The students speak Luo, the local language. Though many speak at least a little English, it was still difficult to understand each other through words alone sometimes” (Tuzina blog, 5/29/12).

Thus one of the first things we realized while working with this group was that for them, taking our dance classes was not the priority. This came as a surprise, not because of



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the Western superiority complex so often at work in exchanges such as this, but merely because there had been a miscommunication. The plan, or so we thought, was to teach the group dance classes in the morning, and in the afternoon we would take classes in traditional Ugandan MDD. I point this out in order to demonstrate the fact that it was not from a lack of courtesy that this misunderstanding stemmed. Admittedly, I was frustrated that we did not stick to the schedule as planned. I was also somewhat annoyed that when I mentioned the schedule to Goosen, he insisted on beginning with traditional Ugandan MDD. Yet I now understand that this was their way of welcoming us into the community. They were giving us the tools to speak their language so that we could converse with them clearly from then on. Learning Ugandan dances was the key to understanding their way of life, and though we were slow to catch on, it allowed us to enter into their physical sphere in order to better communicate within the emotional sphere.

The first day with the Asanti Afrika Performers was our introduction to the atmospheric “arena” in which these dancers live and work. Goosen led us through the open-roomed, cement house to the backyard, an area of dirt marked with footprints surrounded by patches of grass. The most striking aspect of this seemingly benign space is the direct sunlight—at no time of day is there any semblance of respite from its rays, for there were no trees nearby and the house and small shack behind it provided no shade. This too was good reasoning behind beginning the day with traditional MDD, for at least the morning hours presented a breeze, however small and infrequent. As dancers who train daily in highly-equipped studios in New York City, we had prepared logistically to dance without the sprung floors, air conditioning, and surround sound speakers to which we were accustomed. However, we could not have prepared to face that direct, unwavering sunlight. As the sweat

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dripped from our faces, we began to give begrudging looks toward each other every time we heard, “One more time!” Did they not see that we were tired? Did they not care that we were not used to the heat? Yet this too was an added dimension of cultural expectation to which we must be introduced. In fact, put alongside Nakaweesi’s stories of being beaten for messing up steps, the group was notably gracious to us. As dancers trained in various Western techniques, we thought we maintained a high endurance for the tasks usually facing our bodies. We quickly learned that our endurance was lacking compared to the grueling endeavor of dancing in the sun for hours at a time. Somehow we endured those hours, though, and enjoyed them besides.

I bring this “arena” up to point out the importance of the difference in each group’s perception of the learning process. The Tuzina team learns on an individual basis while taking dance classes, taking personal corrections and applying them based on our level of commitment, diligence, or desire. The Asanti Afrika Performers, on the other hand, learn dances as a group. While they too receive personal corrections, those corrections directly reflect upon the group at large. If one student is performing the *Dingi Dingi*, a dance full of directional shifting, and faces the wrong direction, it reflects poorly on the entire group. They look unrehearsed and unprofessional. It was this that kept our team going though we were truly exhausted near the end of the morning session, the desire not to let the group at large suffer from our individual shortcomings. While this may seem inconsequential to someone who works within a team, such as a sports player, to us it was something of a revolutionary method in learning a dance technique. Never in a Western dance class will a teacher stop the class until every student picks up the step; by contrast, Goosen would not allow us to move on and learn more steps until all of us had fully mastered the steps. This kind of teaching

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occurs in the West when members are part of the corps de ballet and must rehearse cohesively for a performance, but never in a classroom setting. Thus Ugandan traditional MDD is in a sense fused with performance repertoire in its very technique. Learning the dances was akin to performing them every time—Goosen prodded us endlessly to smile and enjoy it despite our weary bodies.

The third observation that must be noted is that traditional MDD is exactly as Nakaweesi described it—a community event. At various times of the day, spectators would come over from their houses, peek over their clotheslines, or stop on the road to watch our classes. As my blog mentioned, these neighbors would sometimes nod their heads and dance along to the beat or offer corrections to us. It was learning in the open backyard space that provided this opportunity for passersby to watch us. Accordingly, the fact that an “audience” gathered periodically throughout the day added to the dimension of class being simultaneously a performance. Additionally, it was because we began our time with Asanti Afrika Performers learning traditional MDD that all of this resulted on the first day. Learning the Ugandan dances allowed us to: a) receive a full welcome into the community by the Asanti dancers, b) fully understand the environment in which we would be working—as a *group* of dancers in a communal space, c) learn to communicate through the common language of dance, and d) learn to negotiate the classroom within the context of performance.

Our second day with the Asanti Afrika Performers allowed us the opportunity to try our hand at teaching dance therapy for the first time in Uganda. My blog entry explains the process.

“This morning we learned the *Bwoila* (royal) dance. This dance is more subdued and demonstrates the stateliness of those dancing. In the afternoon, we had the opportunity to teach the group some dance therapy exercises. Our goal was to give them structured improvisational exercises so that they might explore the ways they

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enjoy moving and understand their personal style. In the process, we affirmed their movements so that they might appreciate their own creativity and develop it further. They were enthusiastic and participated in every activity. It was moving to see not only how comfortable they are around each other, but also how comfortable they had become with us. One exercise they enjoyed was one in which half of the group makes different noises in succession, creating a rhythmic “orchestra.” Then dancers in the other half of the group dance based on the rhythm created. After each dancer has a turn, the exercise changes and the “musicians” create a rhythm based on the dancers’ movements” (Tuzina blog, 5/30/12).

First, I must note that had we not learned traditional MDD the previous day, we would not have established the foundation of respect which I believe enabled them to take part in the dance therapy exercises that day. It was through learning traditional MDD that we obtained the keys of community, performance, teamwork, and communication within the cultural context of Gulu. They respected our leadership of dance therapy exercises because we accepted and respected their welcoming of us into their community first.

We chose to lead the Asanti Afrika Performers in the “rhythmic orchestra” exercise for two reasons. The first is that, due to the fact that the majority of the Asanti dancers are boys, we thought it would provide a more masculine approach to dance therapy versus some of the other more emotionally explorative exercises. In addition, we had witnessed their acute perception of rhythm knew that this might be a good dance therapy “icebreaker” in order to allow them to showcase this trait. As mentioned in the blog post, the Asanti dancers, and the Asanti boys in particular, took part in the exercise with energy. I had worried that we might have to work hard in order to entice them to participate; we had taught classes to middle school children in Brooklyn before our trip and very few joined in the exercises. Instead, the Asanti Afrika Performers jumped at the opportunity to show off their personal moves. Ironically, both the “orchestral” sounds and the dance moves accompanying them were centered in the hip hop style. The “orchestra” sounds consisted of beatboxing and

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intermittent interjections of phrases such as “Yo, yo!” and “Yeah!” The dancers took turns in the circle doing breakdance moves. Only the girls, when they chose to participate, did not do hip hop-related dance moves. Thus I wondered whether this exercise had really brought forth each dancer’s “authentic movement.”

Based on the dancers’ affinity for hip hop, and because one of the members of the Tuzina team has had training in the style, we decided to hold a hip hop class the next day.

“We started the day by perfecting the songs and dances we learned with Asanti Afrika Performers. They want us to be able to go back to America and perform them like true Ugandans. I think they were proud of us for picking them up quickly. This time, some of the neighbors who were watching joined in. It felt like a community celebration. This afternoon we taught them a modern dance class and a hip hop class... They poured themselves into the movement. My favorite part of the day was at the end of the hip hop class when we formed a circle and everyone took turns dancing in the center. Even girls who previously had been shy and stood in the very back enjoyed their moment in the spotlight” (Tuzina blog, 5/31/12).

This post reemphasizes the fact that it was learning traditional MDD that brought about our sense of community with the group and other members of the neighborhood, while our classes and dance therapy exercises, while enjoyable, fostered more a sense of playfulness than any aspect of working through emotional trauma. Integrating into their culture provided the foundation of acceptance for ours.

While we were not given information regarding the backgrounds of specific Asanti students with whom we worked, we were well aware of the backgrounds of the women living on the ChildVoice International compound before meeting them. The majority of these women had been abducted by the LRA as young girls and used as child wives. This means, under international human rights laws, that they are classified as child soldiers. Most of the women who have escaped the ranks of the LRA have returned from the bush bearing children. These women are often outcasts within their own neighborhoods. A respectable

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Ugandan woman remains chaste until marriage. To come back with child is unthinkable, and the fact that the child might be the son or daughter of Kony or one of his top generals more unthinkable still. Therefore the ChildVoice compound provides a safe haven in which the women are able to receive help with childcare, attend educational classes they missed during their abduction years, and develop relationships with others in similar situations. These women are provided primarily with the occupation of rolling beads out of paper to make jewelry to sell, earning the name "bead women," although several ChildVoice graduates have gone on to set up bakeries or dress shops.

This ChildVoice group was obviously much different than the Asanti group. First, this group consisted only of women, and the majority of them were our age or older. Second, they were not technically trained dancers, as were the Asanti Afrika Performers. Their dance experience was limited to the amount they had learned during community events when they were younger and after-church gatherings they presently attend. Additionally, the women had all experienced a particular kind of devastating trauma by having lived in the bush. This is not to discount the trauma faced by the Asanti group; indeed, I am certain that every single one of those dancers have lost a family member or friend to the conflict. However, there is an added dimension of psychological trauma involved with groups directly involved with conflict, as were the ChildVoice women. Thus we were met with a very different set of circumstances during our first day with the bead women.

ChildVoice's compound is located in Lukodi, a small village thirty minutes driving distance north of Gulu. Lukodi is the site of one of the biggest massacres by the LRA in 2009 (cite). The site, housed on seventy acres of land, hosts twenty-six huts, an education building, a bead center, a hospital, a pasture with livestock, and a section of land devoted to agriculture

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(Blog, 6/1). The women roll beads under a cluster of trees that provide shade over a large dirt backyard. It was here that we conducted our classes with them. The setting was very different from the one in which we had worked with the Asanti group. The ChildVoice compound is naturally secluded in order to provide safety for the women. Thus the element of a communal performance space was lacking. Unlike with the Asanti Afrika Performers, we did not learn traditional MDD from them first but instead began with dance therapy exercises directly, as my blog post from that day explains.

“We taught a dance therapy class to the women who work at ChildVoice’s Bead Center today. First we broke them up into five different groups so that each of us could learn their names and play a little game in which they used movement to demonstrate two things they like or like to do. Then each group showed the other groups the movement and rhythm they had prepared in the smaller groups. Some of the women were very silly, making faces or mooing like a cow. It was a great way to break the ice and make everyone feel comfortable. One of the exercises they particularly liked was “Pass the Movement.” We all stood in a circle and one person started doing a repetitious movement. Everyone joined in. Then the next person in the circle gets to choose the movement everyone does. It’s a simple exercise, but the women were inventive and even brought sounds and singing into it. At the end of the session we asked the women to share what they learned. One of them said, “Even though I am an old woman now, dancing together gave me the chance to play and be young” (Tuzina blog, 6/4/12).

To be honest, this post was slightly more optimistic than the reality of our experience working with the women. The first exercise is as simple as it sounds. The point of it is to establish some aspects of your personality for others through movement. To begin the exercise, everyone in the circle starts together by alternating between slapping their thighs and clapping their hands in a rhythmic pattern. We asked each woman to introduce herself and, while staying in time with the rhythm, use movement to show what they like or like to do. In my group of six, three of the women introduced themselves so quietly that even asking them to repeat their names a little louder did not work. There was also a lot of repetition within my group. For instance the first girl would say, “I am so-and-so, and I like to sing”

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while motioning with her hands that sounds are issuing from her mouth. Then girl three and girl five would choose the same motion.

The second exercise is one promoting synchrony among the group. The act of everyone joining in the leader's movement allows them to feel that person's physicality in addition to the physicality of the group as a whole. In a setting in which the group members have experienced similar trauma, as was the case with the bead women, this exercise was expected to be particularly beneficial. However, the quiet members of the group passed on taking their turns as leaders, while the more boisterous members enjoyed being very silly. As one of them noted, this does not mean that the exercise was a failure. It did make even the quiet ones smile and giggle at times, and I'm certain that it is rare that they have the opportunity to be so playful. However, the exercise did not bring about the unity of movement and emotional response to the movement that it had brought forth during our trials of it during the dance therapy workshop. It was also apparent at the end of the day that the bead women wanted more technical training from us rather than therapeutic exercises. They asked that we show them American "traditional" dance styles, and we promised them we would the next day.

Each of the team members put together a brief solo featuring choreography from each of the styles of dance in which we train, including jazz, the Horton modern dance technique, ballet, hip hop, and a contemporary dance solo. The women certainly seemed engrossed while they watched us, but when we offered to teach them a beginner combination of steps, only four participated. We realized later with disappointment that by performing our solos first, we had probably intimidated them by demonstrating the level of skill we'd acquired after years of training. Though the fact that the many of the women were holding their babies



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or had them strapped to their backs didn't help the situation, I don't think that that is the main reason behind their lack of participation. Afterward the women began performing the *Larakaraka* for us, with some of them performing the men's roles. When it ended, they motioned for us to join as they began a second round of the dance. They were surprised to find that we knew most of the steps, although there were some variations in the way they performed it that we had to pick up. In the end, we did establish relationships with the women, though not as in-depth as those we shared with the Asanti Afrika Performers.

Admittedly, we did not have enough time with the bead women to complete all the dance therapy exercises we had intended. However, I feel that we missed a great opportunity in not beginning by performing traditional Ugandan MDD with them as we did with the Asanti dancers. We did not take time to establish a foundation of trust through cultural communication and it depreciated our interactions. They respected us throughout the process, but it seemed that at times they did not see how our exercises were relevant to them. This is understandable, since the exercises tended toward playfulness and silliness. At the same time, they did not rely on Western influences that the Asanti dancers had. Rather, they did fulfill the objectives of "authentic movement." Because they are not trained dancers, this meant that their movements were often recreations of everyday actions, such as sweeping, walking, reading, or praying. It is interesting to note that during our collaborative process with the women, none of them mentioned their past or brought up any memories into the movement exercises. Instead they focused solely on activities that are obviously part of their new life on the ChildVoice compound.

### **Chapter 5: Using Dance as Therapy Effectively in a Post-Conflict Setting**

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Tuzina's work with the Asanti Afrika Performers and the ChildVoice Bead Women brought me to the conclusion that there are two stipulations in using dance effectively as a therapeutic practice within a post-conflict context. The first stipulation is the necessity of earning what is known in the humanitarian sector as acceptance. We essentially learned how to work within the cultural spheres of Ugandan society in order to earn this acceptance. We accomplished this by demonstrating respect for Ugandan traditional dance, recognizing gender role differences, and remaining flexible in all circumstances. The second stipulation we learned is that dance therapy is most effective when used in its traditional cultural capacity.

Usually the term "acceptance" reflects the ability of international nongovernmental organizations to gain acceptance from the communities in which they work in addition the local government and policymakers. Acceptance is acquired using a number of approaches, whether through INGO programming, employing locals as staff members, and building relationships with community members, local leaders, and local and national authorities (Fast, p. i, 2011). For example, Save the Children and USAID conducted research on the process of developing and maintaining acceptance for nonprofits working in South Sudan. Much of their research had to do with the political implications of working within this context, such as the INGOs' ability to develop a positive perception in the eyes of local governments (Fast, p. 7, 2011).

However, there are also many social aspects to be considered when establishing acceptance within communities such as those served in South Sudan. While it may sound obvious, respect is a major component of acceptance that is often underestimated as being able to greatly add to—and conversely, detract from—a community's trust of the INGO. For

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example, in the case of South Sudan there were two cultural elements of INGO's actions that either augmented or decreased the respect they earned from the community. The first, as one informant explained, was the INGO's treatment of women: "If you tamper with our women, you lose community protection." The second aspect was the quality of interactions between individual INGO staff and community individuals. Respecting the cultural dress code, being cordial when greeting people, and respecting authority figures were extremely valuable in promoting the INGO's reputation within the community (Fast, p. 8, 2011).

The study of acceptance of INGOs by international communities is a new field of research. The South Sudan case study was published in 2011 and is among the first of its kind. Therefore it is important to note the factors that increase acceptance in every area of humanitarian work--and in this particular case, earning acceptance in the context of a dance therapy exchange. Our work with the Asanti Afrika Performers and the ChildVoice Bead Women demonstrated many similarities in the ways we were able to earn acceptance, but also some notable differences.

In both cases, we learned that it was important to learn the Ugandan traditional dances before teaching the groups our own. With the Asanti Afrika performers, our desire to learn their dances and our diligent efforts in doing so visibly demonstrated our respect of their cultural values. This also gave even the youngest members of the Asanti group, such as an eight-year-old girl, the opportunity to teach us the steps, thereby feeling that each one was an integral part of our learning process. Because of this, I believe that she and other members of the group felt more confident in taking part in the dance classes we taught later on because we had taken their directions seriously. This was our chief mistake in working with the ChildVoice Bead Women. Since we did not give the women an opportunity first to

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demonstrate their cultural knowledge as well as demonstrate our respect for them, they were bashful and at times reluctant to join in. They were afraid of embarrassing themselves in front of us because we had begun not only by teaching our dances to them, but by showing them the different styles of Western dance techniques that had taken us years to learn. It is no wonder they were intimidated—we unintentionally gave them the impression that we were highly trained dancers approaching our classes with the attitude that they should be able to learn the choreography that we'd studied our whole lives in just a few days. Had we begun by learning traditional Ugandan dances from them as we did with the Asanti Afrika Performers, I know that our collaboration with them would have been much more effective.

The second aspect of cultural acceptance we learned was that flexibility was key to maintaining it. This was true of our work with each of the six groups with whom we collaborated. There were many situations in which we had to forgo our schedule, adjust our expectations of what we would accomplish, or simply throw out our plan in favor of ensuring that we learned the dances that the Ugandan groups were so eager to teach us. For example, we placed the emphasis of our first two days working with the ChildVoice Bead Women on DMT exercises. However, when we realized how much they enjoyed performing their traditional dances, we spent the greater portion of our third day with them joining in with their dances. At first, I felt discouraged that the therapy aspect of our classes was not “successful”; it was later that I realized that it was my definition of dance as therapy that was skewed. By the third day, the Bead Women had become completely comfortable with us and asked us to come back soon. It was not for our dance classes that they wanted us to return; rather, it was the sense of collectivity that we now felt together since we had spent three days collaborating in movement, whether Ugandan traditional dance or modern dance. Thus, it

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was imperative that we were willing to adjust our schedule according to what they felt most rejuvenated by, which was performing their traditional dances with us.

One important difference we soon noticed in working with these two groups was the way gender roles influenced dance classes in unexpected ways. For example, the Asanti Afrika Performers were composed mostly of teenage boys. There were 3-4 girls total, depending on the day, in a group of 15-20. Many traditional African dances are gender-specific—the girls have a set of movements distinct from those of the boys. Often boys and girls will interact during the dance, but the two genders will always remain separate groups. When we learned the dances, the Asanti Performers split our group into three groups. One group learned the boys' part, one learned the girls' part, and one group learned the drumming accompaniment. Though Tuzina's three groups rotated between learning and performing each of these three roles, the Asanti girls never rotated from teaching their designated parts. While this makes sense in light of the specific gender roles occurring within the dances we learned, I was rather surprised to find that the girls never played the musical instruments. This role was limited to the boys, who would play drums, whistles, and a Ugandan guitar-like instrument known as an *adungu*. This was also true of the two other organized dance groups we worked with, Alfred Dule's Dance and Movement Association and the Gulu Theatre Artists. I was intrigued by the fact that we were allowed to learn the drumming patterns and male dance movements but not the Asanti girls. Indeed, it was a little troubling in light of the fact that Onen Jimmy Goosen, the group's leader has stated, "Music is my mother, is my father" (Tuzina). Given his dream of developing Northern Uganda's first music center, I wonder whether girls will receive the same opportunities of musical training as the boys. Or perhaps, as with David Harris' work on the Dinka Initiative to Empower and Restore, the

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girls will fight for such opportunities (Harris, 2007, p. 145). Regardless, the fact remains that we were given preferential treatment over the Asanti girls in dance and musical opportunities. Yet we were careful to maintain respect for their cultural traditions regarding gender. For example, we wore long skirts while taking and teaching dance classes, despite the inconvenience of this apparel in constricting some movements and increasing our body temperatures. I believe that this deference was important, particularly since we were working with teenage boys, in establishing ourselves as respectable figures in their eyes.

The scenario was much different during our time with the ChildVoice Bead Women. Because they are obviously a single-gender group, they take ownership of all three roles of female movements, male movements, and musical accompaniment. In fact, the women who took on the male roles were highly enthusiastic, sometimes performing hilarious caricature representations of various aggressive and flirtatious men I assume that they have seen perform those movements. In this way, it seemed that they taking back some of the power stolen from them during their period of abduction and sexual enslavement. I note this in order to demonstrate that working with a single-gender group has certain benefits that are not possible when working with a mixed group. The ChildVoice Women were able to step outside of traditional gender roles in their dances in an empowering way simply because they didn't have to worry about respecting male authority within their group. Thus working with single-gender groups could potentially allow dance therapy facilitators the ability to promote female opportunity without challenging or disrespecting cultural traditions.

In the context of Northern Uganda, we soon realized that the individualistic, Western approach to Dance/Movement Therapy that we had learned in the U.S. was not relevant for the groups we worked with. For the Acholi society, coping with the realities of the Lord's

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Resistance Army conflict has taken communal efforts. Amy C. Finnegan argues, "Trauma is not the result of a group experiencing pain. It is the result of this acute discomfort entering into the core of the collectivity's sense of its own identity." Thus she describes how the Acholi do not consider traumatic experiences from the war as something that must be dealt with in the solitude of one's psyche. Instead, Acholi cultural rituals permit them to embrace rehabilitation in a communal way by participating in the pain of others in an understanding and sympathetic way (Finnegan, p. 437, 2010). Dance is one of these rituals. Thus, to take dance outside of its traditional cultural use as a collective experience of empathy is to deprive it of its greatest power within the Acholi community. Doing so can also potentially increase the victim's anxiety during the therapy process. As Panagiotopoulou notes, "Patients' cultural values might be in opposition to the therapist's theory and methods, which may create treatment obstacles as well as stress" (Panagiotopoulou, p. 104, 2011). She points to an example in which Western Europeans and Taiwanese were asked to perform the same kinetic exercises, even though these exercises were better suited for the Western, "individualistic" societal perspective. Since the Taiwanese group held a "collective" societal perspective, they could not even relate to the task (Panagiotopoulou, p. 103, 2011). We noticed a similar response during our collaboration with the ChildVoice Bead Women. When we gave them exercises to complete as a group, such as the one in which everyone participated by maintaining a rhythm while taking turns introducing themselves, they were happy to join in. But when we instructed them to lead a movement for the rest of the group, they became flustered. In fact, the exercises we had chosen for them were much more collectively focused than many others we learned during our Dance/Movement Therapy workshop. I can only

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imagine the dismay we might have seen in their faces had we asked them to perform authentic movement exercises that consist of individual movement exploration.

“The human body is the basic dance therapy tool...the human body is a text and the deepest meaning of its reading lies in the interrelation of body and the context in which it moves” (Panagiotopoulou, p. 105, 2011). The discouragement I felt when realizing the drawbacks of using DMT with the ChildVoice Bead Women, as I described earlier, was unwarranted in light of this statement. In the Western world, there is prevalence in the idea that dance therapy can only be described as such when one uses dance/movement therapy techniques. However, it is obvious that dance, using the body as its tool, is therapeutic in and of itself when practiced within its traditional context no matter where it is performed. In the individualistic society of the U.S., this means practicing personal authentic movement in order to get a better sense of the thought patterns and/or emotions that are hampering one’s ability to cope with traumatic experience. In the communal society of Northern Uganda, a large percentage of the population has returned in recent years after being displaced for a long period of time, while many of its members are deceased or remain missing. For children who were abducted by the LRA or who live as orphans on the streets, many have missed the community dances to which their parents would have introduced them. Thus dance therapy means performing traditional dances as an act of reintegration, communal tradition and memory, and rebuilding of kinship or friendship ties. As David Harris says of the former child soldiers with whom he worked, “Having found in dancing a culturally acceptable release of long held muscular and psychic tensions, the former soldiers reclaimed a capacity...for mindfulness, connecting to the reality of the present moment” (Harris, p. 154-155, 2007).



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The two stipulations of effective dance therapy in a post-conflict East African setting (earning cultural acceptance and using dance within its traditional cultural capacity) lead to an intriguing conclusion: that dance can be used as therapy without specific DMT training and even without advanced dance training. The implications of this conclusion are far-reaching. If, as I have argued, dance in East Africa is a communal activity, and if it is therapeutic in its own right as practiced within its traditional capacity, then there is great potential for East Africans to be at the forefront of the dance therapy movement within their region. Who better than the Ugandan, or the South Sudanese, or the Congolese to conduct dance therapy for their own communities? What better form of empowerment for those knowledgeable in their community's traditional dances than to teach them to younger generations as a resource of communal empathy and social reconstruction in the wake of traumatic experience? Equally empowering would be to make use of the ability of dance to transcend cultural boundaries, particularly among groups sharing the fundamental social perspective of collective identity. For example, if groups from one East African were to complete arts exchanges within surrounding nations, this could increase these groups' ability to identify with other arts groups from neighboring regions. This could be particularly within displacement camps. Sharing traditional dances with groups in a similar situation, whether displaced, resettled, or newly returned to the post-conflict region, would provide opportunities for communities to reconnect with their traditions and rebuild relational ties.

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