HELPING CHILDREN UNDERSTAND: USING PICTURE BOOKS TO AGE-APPROPRIATELY EXPLAIN DANCE/MOVEMENT THERAPY AND CHILDHOOD CANCER

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OVERVIEW

• Personal Bio & Inspiration
• Dance/Movement Therapy (DMT)
• Pediatric Oncology
• Vygotsky
• Children’s Literature
• Method
• Results
• Next Steps
PERSONAL BIO

• Began writing process in Summer 2016
• Found inspiration in friend’s battle with cancer & lifelong love of dance – How can I combine these two ideas?
• Children’s book as main platform for information with accompanying literature review
DANCE/MOVEMENT THERAPY (DMT)

“The psychotherapeutic use of movement and dance through which a person can engage creatively in a process to further their emotional, cognitive, physical, and social integration.”
DANCE/MOVEMENT THERAPY (DMT)

- American Dance Therapy Association (ADTA) was founded in 1966 by Marion Chace
- DMT was formed when St. Elizabeth’s Hospital began referring psychiatric patients to Chace’s modern dance classes after seeing an improvement in emotional exploration in her students
- Major Theoretical Principle: The mind and body are interactive with one another
- Movement as symbolism
- DMT sessions are highly personalized, and can look very different from one patient to the next
- Goals of DMT: Provide physical and psychological empowerment to the patient.
- Who can participate in DMT? Anyone – Inclusive of patients suffering from both physical and mental health ailments
- Emphasis on SAFETY
  - Environment
  - Attire
  - Physical mobility of patient
  - Respecting boundaries
- In order to become a Registered Dance/Movement Therapist (R-DMT), one must graduate from an ADTA approved graduate program
The branch of medicine that specializes in the diagnosis and treatment of cancer.

- Most prevalent types of childhood cancer:
  - Leukemia – 30%
  - Brain and Spinal Cord Tumors – 26%
  - Neuroblastoma
  - Wilm’s Tumor or Nephroblastoma
  - Lymphoma (Hodgkin’s and Non-Hodgkin’s)
  - Rhabdomyosarcoma
  - Retinoblastoma
  - Bone Cancer (Osteosarcoma and Ewing’s Sarcoma)
PEDIATRIC ONCOLOGY

- Treatment Options: Surgery, radiation, chemotherapy, targeted therapy
- Clinical Trials – “Whether a medical strategy, treatment, or device is safe and effective for humans”
- Differences between treating cancer in a child vs an adult
  - Intensity
  - Toxicity
  - Supportive Care
  - Family Context
- Biopsychosocial Approach – Medical intervention is based upon analysis of the patient, the social environment, and available health care system
- Family Systems Theory – Changes in one level of the family may affect the functioning of the whole family
- Average 5-year Survival Rates
  - 1975 – 50%
  - Today – 83-86%
DMT IN PEDIATRIC ONCOLOGY

• Many possible environments for DMT (focus of this presentation is the hospital).

• Corpo Ambiente – The interaction of the body & mind in the creation of the atmosphere within a patient’s hospital room.
  • What influences this?

• Therapist must:
  • Be aware of and sensitive to the atmosphere in each patient room
  • Separate one’s own mental and physical sensations from that of the patient
  • Become one with the environment be ready to provide the level of service that it requires.

• Initial interactions (verbal vs nonverbal) and how it affects the therapist’s approach
DMT IN PEDIATRIC ONCOLOGY

• Role of the family in hospital rooms
  • Can they engage in the DMT session?
• Are present family members aware of DMT?
• Therapist must assess the needs of the family just as she assessed the needs of the patient.
• Taking physical abilities & limitations into account
  • Assistive technologies
  • How cancer treatments affects children’s bodies
• Stress reactions (physical and verbal protests to the therapy)
  • Is this an age appropriate reaction?
DMT IN PEDIATRIC ONCOLOGY

• Social-emotional development in middle childhood (~5-10 years old)
• Coping with stress
• Body language to communicate emotional readiness of child
• Therapist must meet the child at their need level
• Working with children who have terminal diagnoses
  • How does this affect the DMT session?
• Ending the DMT session
  • What does this look like?
• Scaffolding – Created when assistance is provided to a child that allows them to reach beyond what they could have achieved on their own.

• How will Annalise’s Dance be used as a scaffolding tool?
  • Teaching children new concepts like cancer and DMT
  • Complex ideas are difficult for children to learn on their own, so when the information is presented at an age-appropriate level it becomes easier to grasp.
CHILDREN’S LITERATURE

Important Elements of Children’s Literature

• **Communication between words and pictures:** Words narrate the story, pictures create a representation of the story.
• **Audience:** Who are you writing for? How do you reach multiple audiences?
• **Setting:** Communicates the time and place of the story.
• **Characterization:** Physical and psychological descriptions of the characters.
• **Point of View:** Who is telling the story? Difference between point of view (who sees) and narrative voice (who speaks).
• **Genre:** *Annalise’s Dance* is realistic fiction (fictional characters encounter real-life events).
METHOD

• Began researching the topics of pediatric oncology and DMT through the ProQuest database (accessed through WMU library site).
• Spoke with a children’s literature professional (WMU faculty) who directed me towards reliable information on this topic.
• Using the information provided by the articles, books, websites, etc., the storyboard, synopsis, and character sketch were created for Annalise’s Dance.
• The storyboard was guided by information found in How Picturebooks Work (Nikolajeva & Scott, 2001).
• The synopsis and character sketch were created using background knowledge and my own imagination.
# RESULTS - STORYBOARD

<table>
<thead>
<tr>
<th>Element</th>
<th>Book Representation</th>
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<tr>
<td>Combination of Words &amp; Pictures</td>
<td>Annalise’s Dance is a picture book that will include both words and pictures on every page. The words on each page will dive deeper into thought and emotion, while the pictures will create a visual representation of the story.</td>
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<tr>
<td>Audience</td>
<td>The intended audience of Annalise’s Dance is upper elementary-age children (7 – 10 years old). However, the story discusses topics that adults may benefit from hearing about in more simplistic language. This language may assist adults with communicating with children in this age group who are sick.</td>
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<tr>
<td>Setting</td>
<td>The setting of Annalise’s Dance is the pediatric cancer ward of a fictional hospital. This story utilizes an integral setting, meaning that it cannot take place anywhere else. The story takes place in modern day America.</td>
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<tr>
<td>Characterization</td>
<td>Readers will receive both a visual and verbal description of the characters in Annalise’s Dance, as appearances will be both written out and represented in the pictures. The thought processes of each character will be described in the narrative, while emotions will be shown in both the words and the pictures. Relationships between characters will be discussed throughout the narrative, and readers will be able to see how they interact with one another in the pictures.</td>
</tr>
<tr>
<td>Point of View</td>
<td>Annalise’s Dance is written in the third-person limited perspective, meaning that pronouns like she, he, it, or they will be used. The story will focus on the main character’s point of view.</td>
</tr>
<tr>
<td>Genre</td>
<td>Annalise’s Dance is a realistic fiction story. This means that the people, places, and events are purely fictional, but elements of the story could happen in real life.</td>
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Surviving cancer is not something that every seven-year-old can say that they have done, but this is the story of main character Annalise. Six months ago Annalise was diagnosed with osteosarcoma, which is cancer that is found in bones, and now she is recovering from a tumor-removal surgery and undergoing chemotherapy. Part of Annalise’s rehabilitation process includes Dance/Movement Therapy (DMT), an engaging and creative way to regain her strength. Annalise's Dance walks readers through a DMT session with Annalise and her Dance/Movement Therapist, Kelsey. Readers will also meet Annalise’s best friend Sara, who is joining the DMT session as a guest. Throughout the story, Annalise experiences both physical and emotional struggles (such as weakened muscles and a tough battle with self-confidence), but with support from friends, family, and the amazing hospital staff, she finds the courage to persevere through the difficult moments.
RESULTS – CHARACTER SKETCH

All of the characters described below are entirely fictional, and have not been inspired by real individuals.

Main Character – Annalise
- Female
- 7 years old
- Caucasian
- Diagnosed 6 months ago with Osteosarcoma of the left femur.
- Recovering from tumor removal surgery.
- Currently in remission.
- Is participating in DMT as part of her rehabilitation process.

Supporting Characters
- Karen & James – Annalise’s parents
- Bailey – Nurse
- Kelsey – Dance/Movement Therapist
- Sara – Annalise’s friend
- Vanessa – Sara’s mom
DISCUSSION

• Next steps:
  • Create Annalise’s Dance
  • Locate & work with a publisher

• Plan to promote completed book through social media and word of mouth.
• Hope to make Annalise’s Dance available for purchase on an internet platform.

• Would like to donate copies to local hospitals to use at their discretion.
• Plan to share Annalise’s Dance with faculty at WMU who find this book to be relevant to the courses they teach.
DISCUSSION

How will *Annalise’s Dance* be used?

• Coping tool for children in similar situations
• Bring awareness to friends and family
• Healthcare professionals can use it as a teaching tool within the hospital
• Teachers can use it in schools/after school programs to teach children about the concepts of DMT and cancer

Overall, I hope that this book will reach multiple audiences and serve many different purposes.
References available upon request.
THANK YOU

• Questions?