



Art, Body, and Soul

A Conversation With Dancers David Leventhal and John Heginbotham

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Reach back a long distance into times of the Stone Age when humans lived together eating, sleeping, hunting game scraping, carving and making marks reflecting signs, language, and symbols on wall, floors, and ceilings of caves.

Life was vitally portrayed in rich and abundant ways when animals were imitated and admired yet, not exempt, from the food chain and prey. In recognition of seasons and cycles of the beauty and profundity of life and death rituals and sacred ceremonies were part of the whole. There were significant meanings and relationships in the living veins of art, body, and soul.

Frederick C. Tillis*
Art, Body, and Soul

Dance has been an important part of ceremony, rituals, celebrations, and entertainment since prehistoric times. “One of the earliest structured uses of dance may have been in the performance and in the telling of myths. It was also sometimes used to show feelings for one

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of the opposite gender. It is also linked to the origin of “lovemaking.” Before the production of written languages, dance was one of the methods of passing these stories down from generation to generation”.¹ Depictions of human figures dancing and primitive musical instruments have been discovered in prehistoric cave dwellings and rock shelters around the world.

There is a human need to tell stories and share myths and legends through art. It is the primary mode in which we learn about life and ourselves, discover human values, become sociable. Sharing myths and legends, of stories of loss and grief and hope and love is as old as the ancient Sumerian epic,² *Gilgamesh* which extends back to the third millennium, B.C.

There have been numerous articles in the press and professional medical, nursing, and allied health journals on the efficacy of dance for individuals who have Parkinson’s disease (PD). They discuss how and why dance is so important for people with this movement disorder. Most include commentary of the dance class participants, and they are heartening, instructive, and revelatory. Students’ comments reveal that the dance classes have renewed their spirits, allowed them to move more gracefully, so that when they dance they feel liberated and more hopeful. Several videos of the Dance for Parkinson’s classes in action have been produced.³ At present, neurologists and other scientists are researching this phe-

nomenon. They are looking at what actually happens neurologically, kinesthetically, and psychologically to participants in the dance class, trying to understand how music and dance are able to free those with this movement disorder in ways that exercise alone cannot.

MARK MORRIS DANCE GROUP AND THE DANCE FOR PARKINSON’S PROGRAM

There are dance classes for individuals with PD similar to the Mark Morris

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Dance Group (MMDG) Dance for Parkinson's Program throughout the United States, Canada, and elsewhere. But the concept was first conceived by Olie Westheimer of the Brooklyn Parkinson's Group in concert with Mark Morris and Nancy Umanoff in 2001. It has been creatively choreographed and developed by the MMDG dancers, David Leventhal[†] and John Heginbotham,[‡] from its inception. It is unique in many ways. In their approach, the dance class students learn and dance part of the repertory of MMDG. In addition, David and John offer Dance for Parkinson's classes in other cities around the world prior to the MMDG performances.

I wanted to explore the experience of the PD class from David and John's perspective, hence the discussion that follows.



John Heginbotham and David Leventhal discuss the Dance for PD[®] class at the Mark Morris Dance Center. Still from *Why Dance for Parkinson's Disease* by filmmaker David Bee.

[†]David Leventhal has danced with MMDG since 1997. He performs principal roles in *The Hard Nut*, *L'Allegro, il Penseroso ed il Moderato*, and *Romeo and Juliet*, on *Motifs of Shakespeare*. He is faculty member of the Mark Morris Dance Center in Brooklyn and teaches technique and repertory at schools and universities. He is one of the founding teachers of MMDG's Dance for Parkinson's and the program manager. He leads classes around the world for people with PD. Raised in Newton, Massachusetts, he received his early training from Boston Ballet School and graduated from Brown University with honors in English Literature.

[‡]John Heginbotham is from Anchorage, Alaska. He is a graduate of The Julliard School (FF '93) and has danced in the companies of Susan Marshall and Company, Pilobolus Dance Theater (guest artist), John Jasperse, and Ben Munisteri. His choreography is featured in the work of recording artists Fisherspooner and in *Champ: A Space Opera* (New York International Fringe Festival). He joined the MMDG in 1998. As a teacher, John works regularly with members of the Brooklyn Parkinson Group. He is one of the founding teachers of the MMDG's Dance for Parkinson's Program. He joined the MMDG in 1998.

THE CONVERSATION

David Leventhal and John Heginbotham graciously agreed to be interviewed on the day of the MMDG performance at the University of Massachusetts Fine Arts Center on February 2, 2010. This interview took place prior to the dance company class and rehearsal for the company performance that night.

JYM: To begin our conversation, I would like to say that after absorbing the literature published to date about the MMDG Dance for Parkinson's Program classes and viewing the videos, I have come to believe that the PD program is actually not dance therapy but is enrichment and fulfillment of a very particular kind. I think that something more is happening in the class, something mysterious...

David: I agree that we are not dance therapists. And we don't think of the class as dance therapy because we are not intentionally addressing psychological concerns or specific symptoms. We don't teach to the symptoms at all, really. The class is all about dancing for the sake of dancing... it's about music and community and expression. The class encourages people to tell stories through gesture, dance together in rhythm, and express creative ideas and feelings through movement. We believe our human brains may have been wired to do these expressive physical activities over hundreds of thousands of years of evolution, and when you look at it this way, dancing suddenly becomes a lot less scary and is really something everyone has the right and the ability to do—as a human being.

John: On a related topic, we acknowledge the importance of the setting. Whenever possible—which fortunately is most of the time—we offer the class in an artistic environment—a dance studio, rehearsal space, or theater. Our studios at MMDG are beautiful, large, airy—and it is clear that this is a place where dancing happens.

JYM: That's an important distinction to make. Entering a medical setting does not usually evoke joy even if one is not suffering from a chronic illness.

John: Yes, we don't actually talk *very much* about Parkinson's *during* the class. We're not scientists, but we are aware of the research being conducted, and we understand a bit about the disease itself, that it is a progressive neuro-

degenerative disease. We are aware of the effects of PD on the human body.

David: And we know that what helps dancers to learn complicated sequences of steps and movement concepts also helps people with movement disorders to develop their own strategies to regain grace and control. Over the past 9 years of teaching this class, we have learned a great deal about the power of dance to help people concentrate mind, body, and emotion on the process of movement. As a professional dancer, you take many of these things for granted—until you have to break these powerful tools down and explain them to people who cannot take movement for granted. Olie Westheimer, who approached the MMDG with the idea for the class, recognized that professional dancers are movement experts who have so much information to share with individuals who have a movement disorder. Everything dancers know—about stretching and strengthening muscles, finding your balance, matching your body's rhythm to the music you're hearing, and using all of the senses to control movement—is so useful for people with PD.

John: But of course, dance means different things to many different people, and we try to design our classes so that the content is appealing, relevant, and fun to each community we're working in. Some groups, like our flagship class in Brooklyn, know Mark Morris' repertory and like to learn more of it in class; other groups might be more interested in improvising their own choreography.

David: We want to be flexible and never dogmatic in our approach, and



David Leventhal (foreground) and John Heginbotham (back center) teach members of the Brooklyn Parkinson Group in a Dance for PD[®] class at the Mark Morris Dance Center. Still from *Why Dance for Parkinson's Disease* by filmmaker David Bee.

because different exercises can approach the same challenges from different sides, we believe it's all beneficial. So we do have a basic structure, and some combinations that we do no matter where we are. We always begin with seated torso, arm, and foot exercises and usually do some improvisation in chairs before moving on to ballet exercises at a standing barre. The class builds so that by the end, we're doing quite rigorous dancing in a circle and across the floor. The balance among these elements can change from place to place and from day to day—just as it can in any dance class.

As much as possible, we try to integrate physical storytelling into both the seated and standing parts of our classes. We've taught sections from several of Mark Morris' more narrative-driven pieces in the Dance for PD class, including movement from Mark's production of *Dido and Aeneas*. In *Dido*, all of the singers are in the orchestra pit, so it is up to the dancers to tell the visual story through physical gesture, which is one reason why movement from *Dido* works particularly well in our class. There is a heightened urgency and clarity to the gestural storytelling in that piece, and it focuses participants' attention on what I would call a practical aesthetics—they are trying to make their movement look a certain way to create a certain meaning—to say something very specific. This motivation encourages them to project their movement with great range and specificity. And of course, any time our students are engaged in Mark's choreography, the same choreography they've seen the company do in performance, they feel fully part of an active, legitimate community of dancers. They are fully removed from being patients.



David Leventhal (foreground left) and John Heginbotham (with arms open behind him) lead members of the Brooklyn Parkinson Group in a scene from *West Side Story* during a Dance for PD® class at the Mark Morris Dance Center. Still from *Why Dance for Parkinson's Disease* by filmmaker David Bee.

Even when we're not using specific stories in our class, we always used aesthetic goals to motivate our students. Dance is designed this way. When you think about how ballet is learned, it is really a language of images based on metaphor. For instance, if we say *fondue*, we're describing a melting action rather than just saying bend and place the legs and feet in this way. We appeal to the imagination and image of melting. If we say *plie*, we evoke the image of bending the knees rather than saying put this foot in this way and that foot that way and lower yourself to this level, and so on. The body and the imagination are working together, and we see people in our class using their imaginations in this way to initiation graceful and conscious movement.

John: I see that our students do not take movement for granted. To facilitate the best way into dancing, I try to use clear, descriptive language when giving our dance combinations. I also try to demonstrate the movements as clearly and expressively as possible. The students have taught me—and continue to teach me—a great deal about clear communication.

David: One of the things that make this experience so powerful is that the inspiration, exchange, and conversation go both ways. We are there to facilitate their experience and share what we know, but as in any good class, everyone is a student and everyone is a teacher. When those roles can oscillate, you find you've developed a very productive and beneficial class and model for learning.

JYM: In fact, they need you and you need them.

John: Exactly. We enjoy working with each other; that's what makes it a successful collaboration.

David: Mutual enjoyment comes first, of course. There's also an acute sense of mutual empathy. We don't know what it actually feels like to live with PD, and don't pretend to. But dancers have good days and bad days, days when our body just doesn't feel good or doesn't cooperate with the external demands that need to be met. And when we come to teach our class, we always remember that our students have more extreme degrees of this experience on many, maybe most days. So we share with them the strategies that we use to get ourselves going when

we feel listless right before a performance. The techniques we use to overcome our bad days—engaging the imagination, being deeply attuned to the moment and the music—seem to be helpful for the people in our classes.

JYM: This, to me, then, is compassion because compassion is an action and reaction, not simply a thought, and it depends on an interchange of desires in which one takes on and gives and another gives and takes on. Both teachers and students are transcending reasons to not act, and because of this, incredibly creative moments occur that would otherwise simply not be possible.

David: Yes, that's right. But of course, we have a very important partner in all of this—our musician, William Wade, who has worked as our company pianist and is a composer as well. Music, and William's music in particular, has the power to inspire all of us to dance, to find a common rhythm and our own emotional engagement with whatever he's playing, and share it with the group. William's music, like the movement we bring in to share, is rather eclectic: Broadway tunes, ballet music, folk songs, classical favorites. He'll try anything that seems to work, and so do we. And because music is the basis for Mark's entire creative process, and because live music is a hallmark of MMDG performances, it is doubly fitting that live music plays such a crucial role in the Dance for PD class.



David Leventhal (left) and John Heginbotham (far right), and musician William Wade, with members of the Brooklyn Parkinson Group in a Dance for PD® class at the Mark Morris Dance Center. Photo by Rosalie O'Connor.

John: There are several aspects of the class designed specifically for the comfort of the students. I believe that a certain degree of comfort is necessary to feel free. We want our students to feel free to move.

We teach a large portion of the class seated in a circle. The circle is important

because I think it is not intimidating. Because it diffuses the focus—and because it means one is never directly facing one's self in a mirror, the circle encourages movement that is not hindered by self-consciousness. Also, the circle creates a level playing field—as opposed to a teacher up front and the students in the back. It's friendly and social. This setup allows the students opportunities to make choices. They can follow any one of several teachers—they can follow one for awhile, then another for awhile. They have the option of mirroring what they see.

We want our students to feel comfortable, but we also want to offer challenges. Something that is fun about dancing is the sense of achievement one gets from attempting something beautifully out of the ordinary. We want our dancers to enjoy that experience. We sometimes offer dance combinations that are difficult—including for ourselves. It is fun to step up to a challenge. Having said that, David and I always encourage the dancers to modify anything that feels painful or uncomfortable. And there are no penalties for failed attempts—I mess up all of the time in class. The attempt is just as important as the achievement.

David: Yes, and that's a difference perhaps between this class and others that we teach. In other classes, attention can wander; people might be thinking about their jobs, or what they're going to eat for dinner, or about whether they're wearing the right thing. I know because I can sometimes find my mind wandering when I take a dance class. In Dance for PD, people are attentive in a way that I don't see in other groups, and that is particularly stimulating as a teacher, and energizing for the group at large. The participants watch us and each other like hawks and absorb as much as they can at all times. It's so exciting.

John: As a class, we have grown into a little society. The students have social relationships outside the class—David and I have social relationships with some of our students. All of this started from a single monthly class attended by maybe 5 people. Now our Brooklyn class has more than 50 consistent students, and we meet once a week. It's really wonderful to see how this has grown.

Something we have not discussed is something that happens at the end of class. After having danced across the floor, we reform our circle, take hands, pass a pulse—hand squeeze—around the room and thank each other, and our musician, for the class. In a ballet class, this would be known as the *reverence*. I have never not felt uplifted by this closing gesture.

David: That deep communal resonance, which can happen when people dance together, occupies such an important place in the lives of people with PD, who often experience a turning inward or closing off. By sharing this experience together, with us, they regain that thing that many of us have forgotten about—that dancing in a group gets at the essence of what makes us human.

JYM: What I have discovered anew in this conversation with you is that art, literature, and narratives of experience bring an essential knowledge to health-care education and practice that is unobtainable in ordinary textbooks. This essential knowledge is, I believe, a valuing of another's suffering and an awareness of the human need for compassion. I have learned a great deal from your narratives about that valuing of another. The mindful attention that your students give you, you also give your students. Your artistic training and this acute attention have allowed you to apprehend a kind of "fugitive truth."⁴ You are acutely aware that those with PD, as their illness progresses, have difficulty

with expression, communication, and fluid movement. The fugitive truth here comes through the art of dance to portray myth, stories, and legends in gestures and images, which unleashes the expressiveness you know to be trapped within. A medieval monk once said that the faculties of the soul were memory, reason, will, the imagination, and the 5 senses.⁵ If we accept this to be true, then this dance class speaks to that truth.

It seems to me, ultimately, that what is happening in these classes is "The recognition of seasons and cycles of the beauty and profundity of life and death rituals and sacred ceremonies..." The dance class is a ritual, a sacred ceremony that should have been theirs all along. It is as essential as medication and treatment, perhaps more so. The classes should be offered to all with PD as a normal part of the healing process. Myths and legends must be retold and handed down from one generation to the next. They forever renew us and remind us of who we really are. "There are significant meanings, and relationships in the living veins of art, body and soul."

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