



Dance movement therapy is a discipline in which Certified Dance Movement Therapists use dance purposefully within therapeutic relationships to support development, holistic health, and well-being. Dance movement therapists use dance safely and ethically to communicate co-created verbal and non-verbal narratives, to address cognitive, emotional, physical, and psychosocial challenges, inclusive of mental health and with consideration of diverse needs around race, ancestry, ethnicity, gender identity, sexual orientation and accessibility.

**Dance Movement Therapy** is the unique application of knowledge from 3 domains – **dance**, uses of dance in **rehab/health** settings, and **psychosocial** dimensions of dance.

**Dance-based skills** ground our practice and are the medium through which we work. Knowledge of dance and how it can support psychosocial and rehabilitation/health goals are key to working in this field. Creating, leading, and supporting dance-based interventions and experiences are what defines DMT.

**Rehabilitation/health** includes a basic understanding of (neuro)anatomy, kinesiology, movement analysis, and relevant models of health and disease. Working with specific diagnoses such as PD/AD, pain, stroke, TBI or other injuries is supported by biological knowledge of brain/body functions and how these can be improved through **dance**.

**Psychosocial** refers to aspects of development and well-being that can be addressed through **dance** experiences in group or individual settings, such as communication, integration, self-expression etc. Practicing *psychotherapy* requires further training, extending the psychosocial circle for those who have or wish to acquire this designation.

This model describes a broad field inclusive of Dance Movement Therapy, Adapted Dance, and rehabilitation/prehabilitation in Canada, and allows us to move forward expansively. This definition will be regularly reviewed and amended to ensure it reflects the reality and scope of DMT practice in Canada.

Further designations may be determined by additional/other training, related to the context people work in, responsibilities and pay scale as determined by prior education

and experience. These further designations are NOT provided or certified by DMTAC; they are regulated by professional orders such as those for PT, OT, psychotherapy etc. The model represents what is/can be provided by current and future domestic training programs (NCDT, The Movement Arc) and could thus be associated with DMTAC certification/accreditation.