

Cultural Competency Education in Approved Dance/Movement Therapy Graduate Programs

Lenore Hervey · Lindsay Stuart

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Abstract “What is the state of cultural competency education in the American Dance Therapy Association approved dance/movement therapy (DMT) graduate training programs in the United States?” This question was answered through 10 interviews with educators and administrators at six programs, as well as an examination of their course syllabi. Five of six schools have discrete dedicated courses and all claim to have some features within the curriculum that integrate multicultural and diversity education. Findings indicate that these educators are enthusiastically committed to diversity and multicultural education, and in most cases find their schools supportive as well. Pedagogical challenges include the relative homogeneity of their student and faculty body resulting in minimum contact with diverse role models and peers. Educators meet this and other challenges with a breadth of innovative experiential instructional methods. A compilation of educator-identified competencies unique to DMT is proposed.

Keywords Dance/movement therapy · Cultural competencies · Multicultural · Diversity · Education · Pedagogy · Evaluation

L. Hervey (✉)
Dance/Movement Therapy and Counseling Department, Columbia College Chicago, 514 Americas
Way #3388, Box Elder, SD 57719, USA
e-mail: lhsabbatical@gmail.com

L. Stuart
Dance/Movement Therapy and Counseling Department, Columbia College Chicago, 1510 N.
Campbell Ave, Apt. 1F, Chicago, IL 60622, USA
e-mail: lindsay.stuart1@loop.colum.edu

Introduction

The American Dance Therapy Association (ADTA) approves graduate dance/movement therapy (DMT) training programs based on multiple factors, including student competencies and content of curriculum. Students must demonstrate: “The capacity to engage in therapeutic relationships informed by self awareness, an understanding of cultural context, recognition and respect for diversity, and a commitment to social justice” (ADTA, 2009, p. 2). The curriculum must provide: “Theoretical information and practical application relating to individuals, families and groups in their psychosocial and *cultural contexts* [emphasis added], including knowledge of group processes” (ADTA, 2009, p. 4). How are the programs meeting these standards? Are DMT students being educated in ways that result in a culturally competent body of professional dance/movement therapists?

This research sought to determine the state of cultural competency education in the ADTA approved DMT training programs in the United States. Its purpose was not to compare programs or evaluate individual programs, therefore there are no findings in that vein. All references to instructors, administrators, and programs are, and will remain anonymous.

The Counseling and Dance/Movement Therapy Literature

Defining Cultural Competence

In 1999, the ADTA chose to affiliate with the National Board of Certified Counselors, in effect identifying DMT as a specialty of the counseling profession (NBCC, 2000). In the absence of specifically articulated cultural competencies in DMT at this time, the counseling literature has been accessed to define the concepts examined in this study. The culturally competent counselor, according to Sue, Arredondo, and McDavis (1992), demonstrates sufficient abilities in three areas: awareness, knowledge, and skills. First, awareness requires the counselor to be “actively in the process of becoming aware of his or her own assumptions...values, biases, preconceived notions, personal limitations, and so forth” (Sue et al., 1992, p. 481). Second, the knowledgeable counselor must “actively attempt to understand the worldview of his or her own culturally different client without negative judgments” (Sue et al., 1992, p. 481). Finally, the skilled counselor “is one who is in the process of actively developing and practicing appropriate, relevant, and sensitive intervention strategies” (Sue et al., 1992, p. 481). It is worth noting that these authors describe the competencies in an active, rather than static manner, as cultural competency is not a completed state of being, but a process of becoming.

The three dimensions of awareness, knowledge, and skills were developed into an operationalized model by Arredondo et al. (1996) as a means to “impart culturally specific interpersonal skills and increase knowledge of specific cultural artifacts that will facilitate communication, and, consequently, improve the consistency of behavioral health outcomes among persons from different cultural backgrounds” (Alberta & Wood, 2009, p. 565). This model has recurred

consistently and is generally embraced in cultural competency research throughout the counseling field (Alberta & Wood, 2009; Arthur & Achenbach, 2002; Cates, Schaeffe, Smaby, Maddux, & LeBauf, 2007; Dickson & Jepsen, 2007; Fouad & Arredondo, 2007; Pedersen, 2000; Pedersen, Crethar, & Carlson, 2009; Priester et al., 2008; Roysircar, Sandu, & Bibbins, 2003; Sue et al., 1992; Vereen, Hill, & McNeal, 2008; Worthington, Soth-McNett, & Moreno, 2007).

Cultural Competency Education and Credentials

In 2001, the Council for Accreditation of Counseling and Related Educational Programs (CACREP) generated standards to incorporate multicultural curricula in counselor training (Cates et al., 2007). In accordance with CACREP's bylaws, counseling programs have addressed multicultural training immersion in three ways: requiring at least one multicultural course, infusing multicultural training throughout all courses, or combining the two approaches (Arthur & Achenbach, 2002; Cates et al., 2007; Dickson & Jepsen, 2007; Vereen et al., 2008). Authors agree that attaining cultural competence cannot be accomplished through the completion of one course; it is an on-going process (Cates et al., 2007; Dickson & Jepsen, 2007; Suyemoto et al., 2007; Vereen et al., 2008). Additionally, it is believed that the inclusion of multiculturalism throughout the curriculum is the most effective means of generating competence among the trainees (Dickson & Jepsen, 2007; Vereen et al., 2008).

While the graduate training programs in DMT are not CACREP approved, it should be noted that the field aligns with the National Board for Certified Counselors (NBCC), in that five of the six DMT graduate programs comply with the NBCC certification requirement of at least one course of at least two semester hours (or the quarter hour equivalent) in *Social and Cultural Foundations* (NBCC, 2011). The NBCC (2000) confirmed that “a comparison of ADTA dance therapy graduate program requirements to CACREP requirements for counseling programs found dance therapy graduate programs to be similar and comparable to graduate programs in counseling” (p. 3).

Counseling Pedagogy

Dickson and Jepsen (2007) explained that within multicultural counseling curricula, the three most commonly used instructional methods are: (a) traditional strategies, which are discussion-based and promote increasing the cognitive understanding of different cultures; (b) exposure strategies, which primarily incorporate presentations by minority group members; and (c) participatory strategies, which emphasize the notion of self-awareness. The more progressive approaches to cultural competency training involve experiential and service learning teaching methods that go beyond traditional didactic approaches (Arthur & Achenbach, 2002; Burnett, Hamel, & Long, 2004; Ellenwood & Snyders, 2006). Service learning methods of teaching “combine classroom instruction with community service” (Burnett et al., 2004, p. 180). Burnett, Hamel, and Long's (2004) study explained that service learning has the trainees “working ‘with’ the community and is a method that embodies the

tenets of mutuality, collaboration, and equality that are critical for improving multicultural awareness and sensitivity” (p. 181). The authors postulated that the trainees are equipped with a “broader social and cultural context” (Burnett et al., 2004, p. 181) helping them to attain multicultural competency.

Arthur and Achenbach (2002) emphasized the use of experiential learning as a means to “raise awareness about multicultural issues to challenge students’ personal frameworks about cultural diversity and to help develop cultural empathy” (p. 3). The underlying motivation behind experiential learning is to increase the trainees’ self-awareness. As such, the importance of self-awareness in cultural competency acquisition is ubiquitous in the literature (Arthur & Achenbach, 2002; Burnett et al., 2004; Ellenwood & Snyders, 2006; Priester et al., 2008; Suyemoto et al., 2007; Tummala-Nara, 2009; Vereen et al., 2008). Although the literature suggests that self-awareness is an essential first stage of cultural competency acquisition Suyemoto et al., (2007) also strongly asserted that “it is not enough for a training program to initiate this learning process, it must also continually cultivate it in all aspects of training, including academic coursework, research training, and supervised clinical practice” (p. 211).

The American Dance Therapy Association and Cultural Competence

The question of cultural competence in the practice of DMT and the importance of diversity to the ADTA have been explicitly addressed by its Board of Directors. In 2008 it established a Multicultural and Diversity Task Force, which became a standing committee with representation on the Board of Directors in 2011. One of the Multicultural and Diversity Committee’s purposes is “to increase multicultural competence and awareness within the organizational structure of ADTA and in the related academic training, practice, and research of dance/movement therapy” (ADTA, “Multicultural and Diversity Committee”, n.d., para. 1). In 2011, more than a third of the presentations at the annual ADTA conference explicitly addressed diversity issues and/or multicultural competencies, demonstrating the current interests of the ADTA membership.

Cultural Competence in DMT

One of the earliest introductions of cultural literacy to DMT was through the groundbreaking choreometrics films of Alan Lomax and Forrestine Paulay (distributed now as *Dance and Human History*, 2008), which provided an anthropological study of the significance of movement and dance within various cultures. Hanna (1990) furthered anthropological discussions in her work stating, “by studying other societies’ cultural behavior, dance/movement therapists can better help clients from cultures other than their own” (p. 117). A 1997 special issue of *The Arts in Psychotherapy* seemed to signal an awakening of professional awareness of multicultural issues. Three dance/movement therapists contributed articles based on their practices with clients of different cultures, each in her own way emphasizing the importance of sensitivity to cultural differences in movement and nonverbal communication (Dosmantes-Beaudry, 1997; Farr, 1997; Pallaro, 1997). Although

research on diversity and multicultural competence in DMT published since 1997 has not been abundant, since the mid-1970s there has been a steady stream of master's theses in DMT that reveal consistent interest in cultural dynamics in DMT (Chaiklin, 1998; Fisher & Stark, 1992; Marian Chace Foundation, 2001, 2006).

In more recent DMT literature, the need for increased cultural competency training in DMT has been broached. Boas (2004) developed a theory revolving around what she labeled *transcultural competence*, and addressed implications for appropriate training using her framework. Like Suyemoto et al., (2007) in counseling, Chang (2006, 2009) has challenged some of DMT's assumptions about the universality of movement aesthetics and analysis that are core to DMT training. Caldwell (2011) has similarly suggested calling into question the biases inherent in the basic theories and practices of DMT. These recent publications, along with the maturing of the Multicultural and Diversity Committee of the ADTA seem to herald a change in attitude within the field, and a readiness to examine more closely the cultural competencies relevant to its practices.

Method

To determine how cultural competence is being taught in DMT, the following interview questions were asked of ten administrators and/or course instructors representing all of the six ADTA approved DMT programs. (Although the questions were framed in terms of "culture" in the most general and inclusive terms possible, respondents' examples included specifics in areas such as race, gender identity, sexual orientation, socio-economic status, ability, and/or religion):

1. Does your program offer a discrete course that trains your students to be more multi-culturally competent? If yes, what is it called? If no, why not?
2. When does this particular course come in the curriculum and why?
3. How does this course develop:
 - a. awareness of students' own cultural values and biases
 - b. knowledge of clients' worldviews
 - c. intervention strategies and skills
4. How are multicultural competencies supported elsewhere in the department's mission, learning outcomes, curriculum, and/or milieu?
5. What are two body- or dance/movement-based teaching methods that you feel are most effective or most valuable?
6. What have been some successes you have witnessed and challenges you have experienced in developing multi-cultural competence among your students?
7. Are there some cultural competencies unique to DMT?

Interviews were conducted in person or over the phone by the primary investigator with 10 respondents ($N = 10$), who were identified by the chairs or directors of the six approved programs. The interviews averaged about 45 min and were directed but not limited by the research questions, which the interviewees were given before the interview to facilitate preparation and complete answers. One of the respondents was

Table 1 Program representation in interview sample

	A	B	C	D	E	F
Instructors	1	1	3		1	1
Administrators			1	1		1

Note: Programs are identified in all tables by letters A–F in the same order

the primary investigator, who was also an instructor at one of the programs. Her interview was conducted by writing her answers to the questions. All respondents signed informed consent and understood that their responses would be used anonymously for a published article. Answers to these questions were also sought from the syllabi of the courses identified by the administrators of the six programs.

Interviews were transcribed and results were aggregated by program and organized by question. The results were then summarized and in some cases presented in table form. Responses that verged beyond the seven interview questions were also organized by theme and assessed for their relevance to the research question.

The results presented here are limited in several ways:

1. This analysis is only from the perspectives of the 10 educators involved. Assessment of learning outcomes, including data from student sources, was not within the scope of this research project, yet must be considered essential to completely answer the research question.
2. Information provided may not reflect the actual course content. For instance, information from a syllabus does not necessarily mean that the identified material was covered in the course, or inversely, failure of an instructor to mention a method used or content covered does not mean that it was not. Although a course is designed to deliver certain content, or an instructor believes information was imparted, does not mean that it was delivered effectively or received.
3. Finally, although the programs are all represented, they are not *equally* represented (see Table 1). Despite selection of ideal participants, respondents were in the end determined by availability and willingness. Three instructors, for instance, represented one program, because it had three courses. The more respondents a program had, the more data was gathered about that program. Programs were represented by instructors and/or administrators, and their different perspectives result in different kinds of information. Two instructor respondents were not dance/movement therapists, but were art therapists. And unfortunately, the data from questions 4–7 from program E were lost during transcription and were not able to be replaced.

Results and Discussion

The Courses and Their Locations in the Curricula

Cultural competency education is accomplished through three approaches: (1) the discrete course, (2) curricular integration, or (3) a combination of the two (Dickson

Table 2 Location of courses in curriculum

	A	B	C	D	E	F
First course						
2 nd Sem. 1st year						
1 st Sem. 2 nd year						
Last course						

& Jepsen, 2007). Five out of the six programs in this study had discrete courses addressing multicultural competency education exclusively. One of these five had three courses that addressed multicultural issues. The sixth program had a course that combined the topic with other professional issues, such as ethics.

Most of the discrete courses were offered during the first year of training, with the rationales being that: (1) these courses provide a core perspective or philosophical foundation upon which the rest of the training builds, (2) they establish the interpersonal/intercultural norms of the forming student cohort, and/or (3) teach the critical thinking needed to process subsequent material.

The rationale for offering courses later in the training is that the course content requires a more sophisticated level of understanding, more client experience, greater self-insight and maturity to address difficult issues, and greater group trust to be effective. One school felt that since this course was less skills based, it did not need to come earlier in the curriculum.

There was agreement that the location of the course within the two or more years of training had a powerful impact on its content and on the ability of students to engage that content. That said, courses must be located somewhere (see Table 2), and so their pedagogical capacity was in part determined by that location. The limitations of what can be offered in one course, or even three courses within a very full graduate curriculum, were openly and unanimously acknowledged.

Awareness, Knowledge, and Skills

Throughout the counseling literature, cultural competencies are divided into three theoretical categories: awareness, knowledge, and skills. Overall, instructors felt that their courses were best at awakening the student's awareness of the journey toward cultural competence, as the first step in a life-long endeavor. Notable changes in student self-awareness included owning their cultural and racial identities, social positions, values, biases, and prejudices. Processes of discovering the formative influences (e.g. personal encounter, family, community, education, and media) on these characteristics were often reported. Respondents frequently inferred or posited that awareness, knowledge, and skills are acquired developmentally, and that awareness is necessary before knowledge and skills can be truly understood and applied (Suyemoto et al., 2007).

Knowledge of the worldviews of others was somewhat of a challenge, especially because of the homogenous nature of many of the student and faculty bodies (primarily White, female, and privileged in many ways). It was agreed that knowledge of others' worldviews requires exposure, either directly or indirectly. This was accomplished across the board through readings and films, and in most cases by contact with community members, field placement clients, guest speakers,

and professionals representing diverse groups. Another method of knowing the worldviews of others that was identified by representatives from at least two of the programs was movement analysis of one's own and other's cultural dances. Five interviewees from three programs questioned the cultural bias of the most often-used movement analysis method. One interviewee strongly suggested, "Dance/movement therapists have to learn their way out of the roots of racism that are deep in nonverbal communication." Two respondents reportedly introduce movement appreciation or analysis methods developed by other cultures (African, Balinese, and transgender).

Many instructors expressed frustration in their course's ability to teach *skills*, the most sophisticated level of competence. Several instructors expressed limitation in either the course content or their teaching repertoire in this area. A variety of methods are used, with literature and films being reported by all. Interviewees from three programs identified becoming familiar with the limitations of one's own movement repertoire and body-based biases as a core skill that they taught. As one respondent said, "Students have to know themselves in movement very well in relation to their cultural, racial, and gender identity, because that is the filter through which they see and assess and are with their patients." It is very likely that this skill is taught in all programs, though it may not be associated directly with culturally competent practice. Two programs reported that learning dances from other cultures, and thereby expanding movement repertoire and empathic reflection skills, were central to their courses.

The wide variety of body- or dance/movement-based pedagogical methods with little concurrence across programs may be an indication of several things. One is the typical creativity of dance/movement therapy instructors in tapping the infinite possibilities of teaching methods to address similar learning objectives. The other is that two of the respondents were art therapists and so used little or no body- or dance/movement-based approaches at all. A more exhaustive exploration of this question would very likely result in greater overlap in common methods, such as spontaneous movement experientials, Authentic Movement, and knowing your own movement repertoire and biases (Table 3).

Integrated Support for Cultural Competency Education

All but one, program B, of the interviewees believed that multicultural education was supported throughout the program. Determining the actual extent of the support and integration in each program would be a very complex task, requiring detailed research at each site, which was beyond the scope of this inquiry. Table 4 itemizes the kinds of support respondents identified in their programs.

Respondents from four of the six programs claimed that cultural competence was supported in other departmental courses and/or their texts. Four of the programs reportedly include diversity issues in their new student orientation and initial departmental milieu building processes. Respondents from four of the programs also felt that the larger institution supported student cultural competence either in its

Table 3 Body- or dance/ movement-based teaching methods identified by educators or syllabi

	Programs					
	A	B	C	D	E	F
Knowing your own movement repertoire and biases	■		■			■
Sharing the dance of your culture						■
Learning dances of other cultures			■			
Creating a new cultural dance						■
Cultural sociograms						■
Dancing in the community						■
Choreometrics video (Lomax)						■
Spontaneous movement experientials based on course or discussion material					■	■
Attunement with the student by instructor				■		
Kinesthetic awareness of being in the minority in a community experience		■	■			
Moving like another gender/cultural group	■	■				
Sharing a dance about your own dance history			■			
Embodying cultural values			■			
Authentic Movement	■					
Blanche Evan's structured improv						■

milieu, the diversity of its student body, its involvement in the larger community, or its mission.

Half the programs identified student involvement in field placements, service learning, the departmental milieu, and the diversity of the surrounding community as contributing to the cultural competence of their students. Less than half the schools identified informal faculty discussions, faculty trainings, student research, and the departmental admissions process as factors in their cultural competency education. Unique initiatives in a number of programs (diversity scholarships, international student receptions, intentional or facilitated faculty discussions, student self-assessments, and learning outcome assessments focused on diversity) demonstrate the creative efforts of departments to support the diversity and the cultural competence of their students and faculty.

Challenges and Successes

Challenges were identified much more frequently than successes. One of the challenges identified most often was how little awareness students have of their own cultures, values, and biases at the outset of the courses, even when they come later in the program. The majority of students are White women, who seem to have little awareness of how White privilege has impacted their lives. This seems to be exacerbated by the minimal exposure students have with students and faculty representing diverse cultures and other minorities. Most respondents reported that students do get this exposure through their clinical field placements, internships, or service learning, where clients are often of minority races and cultures. The impact on students' cultural competencies resulting from cross-cultural encounters with faculty, site supervisors, or peers versus with clients (in terms of the power and privilege differential) is worth exploring further.

Another challenge that instructors identified was how to teach knowledge of other cultures from their own limited exposure and understanding of cultures different from their own. All faculty members interviewed were White women, and

Table 4 Types of support provided beyond identified courses

	Programs					
	A	B	C	D	E	F
Other courses, texts	■		■	■		■
Student research			■	■		■
Fieldwork/internships, and supervision	■		■	■		■
Learning outcome assessment			■	■		■
Student self-assessment			■	■		■
Departmental mission or learning outcomes			■	■		■
Departmental admissions process			■	■		■
Departmental milieu			■	■		■
Facilitated faculty discussion			■	■		■
Informal faculty discussion	■		■	■		■
Faculty training			■	■		■
Institutional milieu			■	■		■
Institutional mission statement			■	■		■
Institutional community involvement	■		■	■		■
Larger community	■		■	■		■
Increasing faculty diversity			■	■		■
Diversity scholarship			■	■		■
International student reception			■	■		■
New student orientation			■	■		■

teaching about other races, cultures, and genders was not always comfortable, or some felt appropriate, for them. In some cases guest speakers filled this knowledge gap. Course instructors were also challenged to teach skills to students who were developmentally just beginning a cultural awakening process, and within the time limits of a single three credit course.

Almost all the instructors were seasoned educators, many with decades of training and experience, yet across the board, instructors identified how difficult these courses were to teach, not just in terms of the content, but in managing the personal issues and delicate group dynamics of students, and the potential volatility of the process.

That said, all respondents reported successes, most in the area of significantly increased group safety and sensitivity among students, including some profound shifts in self-awareness. Other successes included increased numbers of projects and theses addressing issues of culture, diversity, and other social issues. Perhaps most poignant were the number of interviewees who identified and met their own challenges in this area, and acknowledged ongoing growth in their own cultural competence and teaching abilities.

Multicultural Competencies Unique to Dance/Movement Therapy

The following list extends the competencies identified in the counseling literature and suggests some of the unique ways culturally competent dance/movement therapists “engage in therapeutic relationships informed by self awareness, an understanding of cultural context, recognition and respect for diversity, and a commitment to social justice” (ADTA, 2009, p. 2). These competencies were synthesized from those identified by respondents and formulated into active statements within the often-used categories of awareness, knowledge, and skills.

Culturally competent dance/movement therapists are actively becoming aware of:

1. Their own culturally determined movement repertoire, including body knowledge/body prejudices.
2. Their own culturally influenced somatic or kinesthetic transference and countertransference.
3. The ongoing non-verbal communication around culture, power, and difference.

Culturally competent dance/movement therapists are actively gathering *knowledge* of:

1. The *non*-universality of movement, including the culturally informed nature of movement preferences, aesthetics, and assessment.
2. Cultural norms around body, touch, body parts, gestures, boundaries, eye contact.
3. How a healthy or desirable body is defined in different cultures.
4. How movement reflects the worldview of clients.
5. How the meaning of movement and dance differs between cultures.

Culturally competent dance/movement therapists are actively developing intervention strategies and *skills* in:

1. A wide range of dance forms from beyond their own cultural context.
2. Culturally competent movement observation and assessment.
3. Accurate and culturally sensitive attunement and empathic reflection.

There was a great deal of agreement among the respondents as to the importance of these competencies to the practice of DMT.

Findings Beyond the Seven Questions

Although this was not a predetermined interview question, there was consistent disappointment voiced by interviewees that there was not more diversity within their student and faculty bodies. There seemed to be agreement that cultural competence is greatly enhanced by meaningful encounters with diverse student peers and faculty members.

Although almost all respondents reported that the issues of diversity are of primary importance to their programs, and a source of concern and frequent discussion, not all respondents felt sure that their colleagues were as committed to this issue as they were. Interviewees from only two programs identified the intentional provision of faculty training by the school in the area of diversity or multicultural competence, and only one program considered this training mandatory.

Conclusion and Recommendations

The purpose of this research was to shed some light on the state of cultural competence education within the ADTA approved DMT graduate programs. Although there seems to be some variation in the extent to which different programs

in the United States are actively grappling with this pedagogical and administrative task at any given time, results suggest that in no cases is the task being neglected. All of those interviewed were passionately and actively committed to diversity education and to the development of their own and their students' cultural competence. Across the board, interviewees communicated their knowledge and sophistication in speaking about these issues. All recognized the immense opportunities and challenges presented by this educational imperative.

In the experience of the authors of the article, cultural competence has a paradoxical nature, in that the more you know, the more you recognize your incompetencies. Despite the extensive education and experience of the interviewees, they were frank about their limitations, which the interviewer found to be an indication of their cultural competencies as educators and therapists.

This research confirms that five of the six DMT graduate programs meet the CACREP standards of having at least one discrete course in Social and Cultural Foundations and at least five programs integrate multicultural and diversity education throughout their curricula to some extent. Findings also indicate that DMT pedagogy is at least equivalent to that of counseling educational programs, incorporating multiple methods beyond the didactic, and that most students are trained clinically in a "broader social and cultural context" (Burnett et al., 2004, p. 181). Furthermore, the ADTA approved programs also employ unique body- or dance/movement-based methods that facilitate not only awareness, but build knowledge and skill competencies that are core to the practice of DMT. The results of this research extend the widely accepted counseling cultural competencies by offering a preliminary set of unique DMT cultural competencies. After having this series of enriching conversations with educators, the researchers feel confident in making some recommendations to further cultural competence among dance/movement therapists.

1. Provide further multicultural and diversity training for all faculty, not just the instructors of the identified courses.
2. Seek an ongoing balance of free-standing courses and milieu support.
3. Actively increase diversity of faculty and student body.
4. Assess faculty and student cultural competence.
5. Embrace, develop, and teach to the cultural competencies unique to DMT.

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Author Biographies

Lenore Hervey

Lenore Hervey, PhD, BCDMT, NCC, REAT (retired) Dance/Movement Therapy and Counseling Department, Columbia College Chicago, Illinois.

Lindsay Stuart

Lindsay Stuart, Columbia College Chicago Dance/Movement Therapy and Counseling Master's Candidate. Lindsay Stuart, MA, Columbia College Chicago, Dance/Movement Therapy and Counseling.