

Teaching South Asian Dance with Older Adults

Dance Well Resource Book

2017



**NATIONAL
LOTTERY FUNDED**



DANCEWELL
Akādemi



Akādemi

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I ENJOY DANCING
BECAUSE.....
IT ENERGISES
ME!

I ENJOY DANCING
BECAUSE..... I CAN'T WALK
VERY WELL
AND THIS HELPS ME WALK
BETTY

I ENJOY DANCING
BECAUSE.....
IT'S GOOD
EXERCISE

I ENJOY DANCING
BECAUSE.....
IT'S VERY GOOD
FOR YOU

I ENJOY DANCING
BECAUSE.....
IT MAKES ME FEEL
FREE!

I ENJOY DANCING
BECAUSE.....
I find it enjoyable
we should dance

I ENJOY DANCING
BECAUSE..... it brings
people together having
enjoyment fun
& showing off
* * * * *

I ENJOY DANCING
BECAUSE..... IT is
RELAXING and
fun
Doreen

I ENJOY DANCING
BECAUSE.....
IT CONNECTS
MY BODY AND MIND

I ENJOY DANCING
BECAUSE.....
IT'S GOOD FUN
AND GOOD
EXERCISE

I ENJOY DANCING
BECAUSE.....
It makes me
feel good and
I love doing it with this
fantastic group!

I ENJOY DANCING
BECAUSE.....
It's relaxing and it helps
to make it happy and
it's my favourite

I ENJOY DANCING
BECAUSE.....
MY BRAIN SWITCHES OFF
and
THE BODY MOVES *
Vivian

Introduction

Over the course of the Dance Well Project to date, we have accumulated a collection of exercises, activities and experiences that we wish to share with the wider dance and arts for health community. Through collaboration, sharing of knowledge and experiential activities we have compiled this resource pack, which we hope will be a useful tool in the planning and delivery of dance for health workshops for older adults. Some of the activities herein are specific to the South Asian dance forms that Akademi promotes, develops and advocates for; others are more generalised.

This information is not prescriptive, or set in stone and we understand the need to adapt and adjust to different groups of people, different situations and different health conditions. We offer this resource book as a tool for exploration of South Asian dance forms for older adults and those living with dementia. You will find brief explanations of the different settings you may find yourself teaching in, how to work with participants of differing abilities, and how to plan a workshop using this information, and the exercises and suggested props described in this book.

We hope that this book will help dancers and non-dancers alike to explore the many benefits South Asian dance forms can bring to community and health settings, and the individual aspects of these dance styles that can enrich the experiences of older adults who may be lonely, isolated or living with a long-term health condition.

We would like to thank Heather Probert, Dementia Befriending Service, Dementia Pathfinders, Diane Amans and Danielle Teale for providing their expertise and training to the Dance Well artists throughout the project. Also, a huge thank you to Akademi's professional dance artists for their generous input into the dance workshops and this book.

Finally, a massive thank you and congratulations to all our wonderful participants, without whom this project, and this book, would not be possible.

Dance Well is Akademi's three-year community participation project, funded by the National Lottery through the Big Lottery Fund, providing dance and movement workshops for older adults.

Akademi is a South Asian Dance organisation, leading producer of South Asian Dance in the United Kingdom, and a registered charity.



Teaching South Asian Dance to Older Adults



“
The realisation of fragility of life is poignant. I no longer take my body, health, ability to move and dance for granted. Dance is not only a performing art, it is also a way to express and communicate with one another when cognitive behaviours fail us.”

Jane Chan
Artist

The Dance Well project began in January 2016 and it has been a pleasure to see the positive impact Akademi's dance artists have had on the participants since then. We have worked across a range of settings, exploring different dance styles, different abilities and different personalities, all adding something new and special to the workshops.

I have had the privilege to watch some wonderful transformations during the workshops, people realising their own creative potential, as well as new friendships blossoming. As a dancer myself, I have long believed in the power of dance to heal, to be a tool for communication, and to bring people from all walks of life together.

I hope that Dance Well, and other arts for health projects continue to grow and advocate for the huge benefit the arts can bring to people of all ages and abilities.

Claire Farmer,
Dance Well Project Officer

What does teaching dance to older adults mean?

Certainly, there are many ways to teach dance to people aged over 65, and it should be apparent that being over 65 doesn't imply having all the same abilities, interests, behaviours and limits.

The dancing older adults I have met so far challenged all the prejudices I might have had, but reminded me of something very important: at every age, growing means learning to cope with things and to act trustfully with the limited resources we have on hand. When tools and resources are reduced, there are more things that need to be taken care of and coping with daily problems can become more difficult. However this is also the moment where creativity can emerge and disclose new solutions.

This booklet aims to provide some prompts for structuring a dance class with older adults and gives advice on how to deal with different settings and possible issues. Applying this knowledge will help in creating a safe space to exercise and have fun.

The rest is upon you. To leave space for this creativity to be released, to transform possible obstructions in creative resources.

Giulia Ghinelli,
Dance Well Project Assistant

Teaching South Asian Dance to Older Adults

Dancing on into our later years as we progress through life is a natural and uplifting way of locating and exploring expression.

We also know that feeling connected with movement helps our bodies and minds to work at higher degrees. Our health, breath, mobility, happiness, concentration and mood improve with each new sequence of steps we learn and refine.

Akademi is working to ensure we have the best quality creative practitioners working in this ever-growing field. We consult with specialists in ageing, movement therapy, dance professionals dementia, social care, community outreach, clinicians, academics and evaluators because we see this as a big agenda for the future of communities and we want to support dancers to have the best resources available.

We are hopeful that we can continue to cultivate and acquire new ideas and approaches and build on thoughtful artistic approaches that our artists and project team have accomplished so far.

We invite you to share your insights as the project progresses so that we can transfer knowledge and continue to offer excellence to older dancers.

Christina Christou,
Education Consultant, Akademi



Shikhara

This mudra means
Madana, God of Love



Map Legend

Making the Reading Easier:

Legend



Dementia/Suitable for people with dementia



Helps balance



Heart and lung conditions/Helps those with poor heart and lung conditions



Exercise with caution when participants have heart and lung conditions



Community centres



Hospitals



Dementia day centres and care homes



Good for co-ordination



Helps with arthritis



First Aid, DBS and Safeguarding



First aid, DBS and safeguarding

First Aid qualification

If you are working in community associations and day centres there should always be a trained member of the staff on the site. However, having a First Aid qualification may also help you to feel more secure. Certificates need updating every 3 years.

With older adults, particularly those with pre-existing health conditions, it is better for them to be checked over by a health professional, and you should always gather information regarding their health before starting the workshop.

DBS certification

Criminal Records Bureau (CRB) checks are now called Disclosure and Barring Service (DBS) checks. Having this certificate is fundamental when volunteering or working with children, with vulnerable adults, and in healthcare.

Most institutions won't allow you to enter the building if you are unable to provide a DBS certification.

Only employers and licensing bodies can request a DBS check, and once you are sent the application form, you will need to complete it and send it together with all the requested original documents.

DBS certificates do not have an expiry date, but should be renewed every three years. Another option is to use the DBS update service to keep a certificate up to date, by paying an annual amount, without needing to request a new one.

Safeguarding

Safeguarding adults means protecting adults at risk of harm, neglect or exploitation caused by others, and also from self-neglect. An adult at risk of abuse is defined by the Care Act (2014) as someone who lacks mental capacity, and is therefore unable (permanently or temporarily) to understand, retain, weigh up and communicate information. You need to be trained in safeguarding awareness and procedures if working with children and vulnerable adults.

Being certificated will give you procedural and observational skills, that will allow you to identify abuse and/or neglect, deal properly with sensitive information, and take care of the people you will be working with. If you are not trained in safeguarding awareness and procedures always identify who is the trained personnel on site.

You should complete at least a level 2 certification. The certificate should be renewed every 3 years.

Note:

Always ensure you know the location of the nearest first aider and/or first aid box.

You are not allowed to give any medical advice or medication (not even light pain relievers.)

Note:

According to the Care Act Sections 6 and 7, safeguarding Adults from harm is everybody's business! Never work alone, but make sure that suspected abuse is ALWAYS reported and acted upon without delay.

Settings and environments



Settings and environments

While working with older adults you may find yourself in a range of settings, from care homes and day centres, to hospital community rooms and wards. Knowing what to expect in each of these settings will help you to structure your workshop and to know how to work closely with the staff.



Community centres

Many community centres will already be running some group activities including exercises. Therefore they will normally have a space suitable for gentle dance and movement classes and have chairs for use. Local residents will often already be attending some activities at the centre so it's worth trying to establish the best time of day to fit the workshops with their existing schedule. Some venues might not be equipped with the required facilities, therefore make sure all services and spaces are fully accessible (parking, access to restrooms, changing rooms, kitchenette).



Dementia day centres and care homes

Those attending a dementia day centre normally require some level of care throughout the day depending on the extent of dementia present. Check whether the centre you are working at has a "closed door" policy, meaning that the door is locked and all visitors must sign in.

In dementia centres and care homes there will be carers and staff present at all times, so ensure you speak with them before your first class to establish the aims and your requirements of them during the class. The carers and staff will take care of personal needs of participants and manage any difficult behaviour. These environments should already have clean and suitable spaces equipped with all necessities for participants. However, it is recommended to visit the venue prior to the first session.



Care Homes and Community Settings



What to do when working in a care home/community setting

- Sign in at the centre, when you arrive.
- Make sure you read the risk assessment and that you are aware of where the facilities for the participants are located.
- Set up the space and prepare the props before the session begins.
- Arrange the seating in an accessible and friendly manner, for example in a circle.
- Make sure there is enough space to move freely, but that chairs are close enough to each other to create a feeling of intimacy.
- Understand if the available chairs are suited for the workshop. Are there any armrest? Are they foldable? Do they have cushions? Make sure there is also space available for wheelchair users.
- Greet each participants personally before the class starts.
- Try to learn the name of participants and to get people to know each other. Use name badges, if needed. If the group is particularly active and sharp, challenge their memory through the use of name-games.
- Ensure that walking aids are put to one side and props are not left on the floor after use, to avoid tripping hazard or creating a barrier between the individual and the group. Some people might not want to part from their walking aids. In that case, do not insist, and just make sure they have enough space to move.
- Avoid unoccupied moments (different from resting moments) that might cause disengagement and boredom.
- Mix familiar tunes with new ones for a different experience, to maintain a higher level of attention. Do not assume music from the past is necessarily more suitable for older people than contemporary/unknown music.
- Make sure participants have access to facilities during the class.
- Encourage carers, and friends and family to join in with the activity not as helpers, but as participants.
- Encourage participants to share their feelings after the session
- Always remember to congratulate everybody at the end of a session.

Notes:

Observe and be sensitive to participants' reactions, but do not be afraid of challenging them.

Try not to explain or talk too much: try instead to find a dynamic and playful way to communicate and introduce each exercise.

Hospital settings



Hospitals

There are much more stringent rules in place when working in a hospital environment so always check with the specific hospital of their procedures. This will include notification if you are ill within 48 hours of your expected arrival at the hospital and may mean that you are not able to attend.

As far as possible, try to work closely with a member of the clinical team, and follow any instructions given by them when on site. If entering a ward ensure you wash your hands and use the antibacterial soap provided throughout the hospital. Try not to bring any dirt from outside into a ward, particularly if working with respiratory patients. Use clean props, and check the individual hospitals' policies regarding appropriate clothing, since some hospitals do not allow jewellery or clothing such as ties or scarves.

Please see below NHS guidelines to be considered in addition to any individual advice provided by the hospital (2017, nhs.uk)

- If you have an infectious condition (cough, cold, diarrhoea, vomiting) contact the ward for advice before visiting.
- Respect the hospital smoking policies.
- Where possible, use public transport when visiting someone in hospital, parking nearby might be restricted and is more expensive.
- Do not sit or put your feet on the patient's bed, as this can spread germs. Use the chairs provided.
- Do not touch the patient's wounds or any medical equipment they are attached to, such as drips or catheters, as this can cause infections.
- Do not use the patients' toilets. Ask the ward staff where the nearest public toilets are.
- Do not share props with the patients and always wash or freeze unwashable props after use, in order to kill germs.



Personal hygiene

Hand contact is the most common way in which bacteria might be transported and subsequently cause infections, especially in people who are already ill or have a reduced immune system. Washing hands with soap and water before and after any contact with the patients or with objects in their surroundings is a fundamental practice in reducing transmission of infectious agents. Jewellery, scarves and ties must be removed when working with patients.

If entering the room of a patient in isolation ALWAYS wear the protective apron and gloves provided. Throw these in the bin as you leave the room and wash your hands immediately. DO NOT use any props with this person until they have been washed and store them separately to other props in the meantime.



Mayura (peacock)

This mudra can represent the action of sprinkling water from a river.

When to clean your hands

Before patient contact:	To protect the patient against harmful germs carried on your hands.
After body fluid exposure:	To protect yourself and the health and social care environment from the patients.
After patient contact:	To protect yourself and the environment from the patients.
After contact with patient surroundings (even if the patient has not touched them in your presence):	To protect yourself and the environment from the patients.



Notes for all settings

Important Notes for all settings

Please restrict the use of mobile phones or electronic devices, unless they are for the class purpose.

If you are unwell within 48 hours of an activity where you will come into contact with older adults please contact the organisation for advice. It is unlikely you will be able to visit during this time, as to do so would put the older adults at risk of infection.

In a class of older adults you will have participants with a wide range of mobilities. It is therefore very important to encourage them to only work within their own capability, not to push themselves too hard, and to rest when necessary. There is no pressure to participate in all activities, and they may choose to complete as much or as little as they like. Sometimes, participants may want to sit and watch, listen to the music and maybe tap their feet or their hands. This should not be discouraged as social engagement is also one of the beneficial factors of a dance and movement class.

People with specific health issues may try to make movements they should not do or to challenge themselves too much (either consciously or unconsciously). Make sure you are aware of any injuries or restrictions before starting the workshop. If they are unable/reluctant to inform you, ask the day centre/association/hospital staff or their carers or relatives. Keep an eye on injured and more frail participants throughout the class. If they are challenging themselves too much try to divert their attention to another exercise.

The importance of risk assessment

Risk assessment is the examination of what might cause risks for people in a determined location.

Each venue should have one already, but make sure they are accurate and targeted to the people you will be working with (e.g older adults). It is likely you will need to write another risk assessment specific to the activity taking place.

1. Identify the hazards.
2. What might happen? (You should think of the worst thing that might happen, no matter how unlikely it sounds).
3. Think of what you or the association could do to reduce the risk (more staff available? Different chairs? less cables in the room?).
4. Estimate once again the risks after the changes produced.
The risks should decrease and the environment should be safer.

Note:

It is fundamental to work in a no-pressure environment and to have the patience to listen and to welcome different learning paces.

Always use clean props. If you cannot wash them (e.g feathers) remember you can freeze them: this will kill all the germs.

Never assume that just because older adults look fit, they actually are in good health: some health problems are not so easily detectable at a first glance.

Note:

A risk assessment has to be completed for each location, and it is extremely important to read it thoroughly before using the space. You can also write your own if required.

Older adults and health conditions



Older adults

Inclusion

You should remember to be inclusive in all situations. In your workshop you are likely to have people with different health issues, mobilities and abilities.

Everyone needs the opportunity to express themselves and to participate, and your role will be to create the environment for this to be possible.

A good idea is to structure a few variations of the same exercise in advance. If, for example, one of the participants is a wheelchair user, you should find a way to include this person in every exercise. If you have an assistant, or if a carer is taking part in the class, you can ask them to demonstrate the alternative exercise e. g. seated.

Do not make assumptions about what makes a person uncomfortable, but be always attentive to the relational dynamics that the exercises you structure might (or might not) create.

Frustration

Not all participants react in the same way in regard to their own mobility or health issues.

Some of them might get frustrated by not being able to move as they used to, or as they would like to, and might criticise the exercises, or lose confidence in themselves.

First of all, do not blame yourself. Sometimes a huge support is just being there to listen and to reassure that any exercise is good exercise, as long as it is done without putting oneself at risk.

Note:

Always be attentive to the relational dynamics you are producing with your work!

Challenge

Do not be afraid of challenging participants!
Do not assume they they won't be able to move in a certain way or to remember a piece of choreography.
Try instead to test their comfort zone, and decide how far you can go according to their reactions (talk test, observation).



Dementia is an umbrella term that covers a broad range of neurological disorders (2016, Dementia UK; 2016, Alzheimer's Society) and can manifest with different symptoms dependent on the type and stage of dementia. The word dementia describes a set of symptoms that may include memory loss, visual hallucinations and difficulties with thinking, problem-solving and language.

There are a number of different types of dementia including:

- Alzheimer's – One of the most common cause of dementia
- Vascular dementia
- Lewy bodies
- Fronto-temporal dementia
- Korsakoff's Syndrome

Every person with dementia is different and has their own their own personality. No one is affected in the same way. Some of the ways in which dementia can affect people include:

- Memory loss – especially short-term memory, for example forgetting what happened earlier in the day, not being able to recall the reason for being in a particular location, being repetitive or forgetting information, or mistaking known people for unknown and viceversa.
- Some people remember things from a long time ago much more easily.
- Communication problems – including problems finding the right words for things, for example describing the function of an item instead of naming it. People might also struggle to follow a conversation.
- Difficulties with thinking things through and planning – problems with carrying out everyday tasks such as getting dressed, or preparing a cup of tea.
- Confusion about time or place – not recognising or getting lost in familiar places or being unaware of the time or date.
- Sight and vision problems – increased difficulty with reading and judging distances or mistaking patterned objects or reflections (if working in a dance studio you might want to cover up mirrors).
- Unusual emotional behaviour or responses – becoming sad, angry, frightened or upset.
- Someone may seem to lack self-confidence or display changes in mood.
- Restlessness or disorientation are common in people living with dementia, and might be triggered by various factors (such as noise, voices, objects etc.)

There are around 850,000 people in the UK who have dementia, although there currently is no cure for dementia, research has shown that regular exercise can improve cognition and the ability to perform daily activities (2017, Alzheimer's Society).

Health - Dementia



When working with those living with dementia, their relatives and carers, it is important to be aware of their individual needs and to be able to adapt quickly to ever changing circumstances. This may mean adapting your lesson plan during the workshop, or altering an exercise to suit the participants.

Akademi recommends the following tips adapted from Loddon Mallee Regional Dementia Management Strategy:

- Do not talk to the person in 'baby talk' or as if you are talking to a child. Be patient, do not be afraid to listen, and do not finish sentences for them.
- Keep your explanations short and to the point. Use flexible language.
- Do not use complicated words or phrases and long sentences.
- Maintain eye contact by positioning yourself at the person's eye level. Look directly at the person and ensure that you have their attention before you speak.
- Do not glare at or 'eyeball' the person you are talking to. Do not get distracted and talk to a person without eye contact, such as while doing other activities.
- Always begin by identifying yourself and explain what it is that you propose to do.
- Use visual and sensual cues whenever possible (be aware that saying: 'move to the right' might not be an effective indication).
- Be realistic in expectations, and be ready to adapt your teaching; asking too much from participants may cause unnecessary stress.
- Observe and attempt to interpret the person's non-verbal communication.
- Use and learn participants names.
- Allow the person to take their time.
- Speak clearly and slowly. Use strategies to reduce the effects of hearing impairment.
- Do not ramble, shout, interrupt, talk negatively or talk too fast.
- Eliminate other distractions such as a television or radio. Create a calm and positive environment.
- Do not compete with a busy and loud room adopting an aggressive attitude.
- Encourage talking about things that they are familiar with and remember.
- Use touch if appropriate (do not touch or invade their personal space if they are showing signs of fear or aggression).
- Stay calm and give plenty of encouragement.

Note:

"Physical activity can also be beneficial in the later stages of dementia, if it is possible. Staying mobile may reduce the need for constant supervision from a caregiver. It may also minimise the need for certain adaptations, such as walk-in bathtubs or stair-lifts."

[Alzheimer Society, 2017]

Health - Heart and lung conditions



IMPORTANT: If working with cardiac or pulmonary rehabilitation patients, or those with respiratory diseases such as Chronic Obstructive Pulmonary Disease (COPD) or heart disease, the exercises should be focused on the lower body first. This will allow the heart to pump the blood around the body, without immediately putting too much pressure on the heart.

[Probert H. 2017, DanceWell training presentation, delivered 23/01/17].

Lifting the arms above chest height will increase pressure on the heart, so this should be reserved for later, and only in short bouts. Moving arms should be done progressively (one arm, the other arm, and then both), and it should be in proportion to the work done with the lower body. Warming exercises and cool-down exercises should occupy a consistent part of the lesson and last for an equal amount of time.

In the next sections you will find some suggested activities for dance classes with older adults that can be included in the above mentioned class structure. As for all groups, be aware that although you will plan an entire lesson, you may need to change it as you progress through the class, or throw the lesson plan out entirely, depending on the participants' reactions that day.

Moving is fundamental: cardiac patients need to strengthen their hearts and other muscles, especially in the lower body. However, take care they are exercising enough, but not too much. Without measuring their heart rate, you can still understand to what level of intensity they are exercising by observing their behaviour and by adopting the 'talk test', which means asking them about how they are feeling throughout the class.

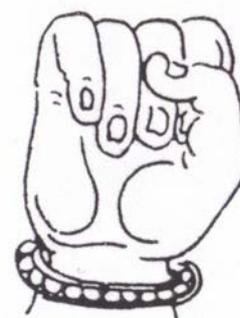
Clinical manifestation of an excessive exercise are [Probert H. 2017]:

- Use of accessory muscles to breathe, (contraction of the face and neck muscles) and pursed-lip breathing.
- Leaning forward to breathe.
- Barrel chest (chest stiffened by osteoarthritis, which causes the ribs to be less mobile and makes the breathing less efficient.)
- Hands clenched to the chest.
- Dyspnea, that is, feeling of not being able to breathe, on exertion (this is a late sign, which means that previous symptoms were unnoticed or neglected, resulting in a distressing and possibly harmful situation).
- Being unable to speak a full sentence and stopping to take a breath between every one/two words.

If the participants are able to speak a full sentence during aerobic exercise without problems, this means they are not exercising enough!

Note:

Those with respiratory diseases may become short of breath easily and may also carry a portable oxygen canister. Be aware of restrictions to movement that may be caused by tubes and canisters.



Mushti (Fist)

This mudra means immobility, firmness and fighting with the fists. It also represents determination.

Note:

When working with cardiac patients, the lower body should always be moving, helping the blood to be pumped through the body without putting too much pressure on the heart.

Heart and lungs condition



		1 week	2 week	3 week	4 week	5 week	6 week	7 week
20	MAXIMUM EXERTION							
19	VERY VERY HARD							
18								
17	VERY HARD							
16								
15	HARD							
14								
13	SOMEWHAT HARD							
12								
11	FAIRLY LIGHT							
10								
9	VERY LIGHT							
8								
7	TOO LIGHT							

Note:

The Borg Scale of Perceived Exertion is used to measure how hard you feel you are working in a range of numbers from 6 to 20.

Moderate activities register 11 to 14, while vigorous activities rate a 15 or higher. Older adults should not be reaching 17 or above.

The *Borg Scale* [Borg, 1982] records the level of perceived exertion during any given activity. This can be used by the teacher during the class to ascertain how hard they feel they are working and adjust accordingly.

Graph 1 represents the level of intensity that should be experienced during a session. It is important to increase the intensity of the exercise in a proportionate way.

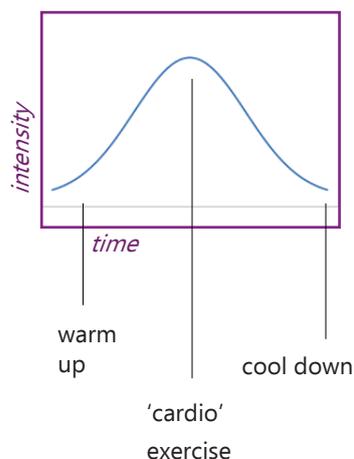
If the session lasts for 1 hour, the initial 15 minutes should be dedicated to the warm up, increasing to a high intensity at about half of the session.

When the aerobic exercise is reached and maintained for an appropriate amount of time, progressively decrease the intensity, leaving 15 minutes for the cool-down.

You can customise the session according to your target-group, but never change abruptly from a very intense exercise to a warm up or cool down exercise.

Remember to keep the feet moving in every exercise, since this will help the blood to flow better: the movements of the upper and the lower body should always be proportional.

Graph 1.



Props and Resources



Props

Props can be very beneficial when working with older adults, providing a tactile experience for those who might have restricted range of motion.

Props can also be used to introduce an exercise that might be too challenging at first. They can also help to engage those who may feel shy during the first few weeks of a class and to connect members of the group with each other.

This is particularly useful when working with those with advanced dementia, as it can help them to feel the movement of other members of the group through props such as scarves or a giant scrunchy, and thereby encourage them to move themselves.

In the following pages you will find some suggestions of props when working within a South Asian dance context. Additional props can be found online for creative movement workshops.

It is very important to ensure that the props are cleaned regularly to avoid the spreading of germs, especially when working in hospitals.

Note:

It is important to put all the props back on a table, box or chair, after use. Leaving props on the floor might cause people to stumble and fall.

Make sure you have enough props for the participants. If you don't, make sure you use your resource in a way that engages everyone equally.



“

Greeting participants individually is the first thing that I did and that helped to establish the connection between us. Finding activities that they could easily and quickly understand seemed to be the next step. We used props for almost every activity. That worked well I think, because it immediately gave them something tangible that they could grasp and hold on to.

”



Scarves



Scarves can be used for many exercises, according to their textures and size. The scarves shown in these pictures are particularly light and soft. They can be used to dance and draw in the air, but they also can be rolled into balls and opened slowly -creating a blossoming effect- or thrown in the air.

Scarves are also suitable to hold with both hands and used as stretch bands, creating strong, still positions, such as the 'warrior pose'. They can also be worn or can be tied together creating a parachute or a long rope. The size of the scarf should be proportionate to the movements. If it is too big it might obstruct the movement and tire the participant.

Raising the arms and shaking scarves in the air for a long time is not recommended for cardiac patients. This is because unmonitored arm work can cause sudden flow of blood and a compression that may be dangerous for a weak heart.

This prop is perfect for exercising alone or in groups of 2 or more.

Note:

Scarves work well in individual and group improvisations.

Props



Electric tea lights



Tea lights are a great prop to accompany dance improvisation and arm movements. These props are also ideal to focus on breathing through simple ascending and descending arms movements, or to meditate and relax at the end of a session, along with some music.

Tea lights create an intimate and relaxed atmosphere, and build confidence when improvising movements, since the participants are more focused on the tool they are using, rather than on the fact that they are moving without support.

Tea lights are also an intimate tool for communicative and interactive gestures within the group (getting closer to other participants to offer and exchange tea-lights).

Apart from the palm, they also can be placed on the back of the hand, on the elbow or forearm to help improve coordination, balance and proprioception (the sense of the relative position of one's own parts of the body in space and movement).

People living with dementia might refuse to interact with some props because these can activate bad memories or negative feelings. Some participants might love playing with tea lights, others could be afraid of getting burnt, and they might not understand the flames aren't real. People living with dementia can have hallucinations, therefore objects and props might appear different to



Note:

Do not try to convince people with dementia that what they see is not real. Hallucinations become a problem only when what they see causes them a feeling of distress. The best thing to do in these situations is asking them how you can be most helpful.



Touchable bubbles and feathers



“
**Fantastic,
 beautifully
 expressive,
 it enabled
 everyone
 to enjoy
 themselves**”

**Dance Well
 Participant**

Bubbles and feathers can be used for both contemplative or active exercises. They are extremely pleasant and relaxing to see or touch, although it requires a significant lung effort to create the bubbles and to keep the feathers suspended. Working in groups and exercising on rotation would allow to exercise and challenge breathing, without it being excessively tiring.

These props work very well in workshops with people in an advanced stage of dementia. For example, some people who do not want, or cannot take part in the exercise, sometimes end up stroking the feathers, or creating fans from them, enjoying their texture or observing their floating and falling.

The fact that a bubble or a feather can also float in someone's direction very slowly, allows the person to enter into contact with the object in a non-traumatic way and allows a spontaneous decision on whether or not to interact with it.

Keep in mind that white feathers are usually lighter than dyed feathers and therefore float for longer.

Props



Dandiya sticks, timbrels and ghungroos



Ghungroos

Note:

Participants who are hard of hearing may still struggle to hear the bells on their own ankles. Conversely, if working with people with dementia, it is important to keep in mind that noises can be extremely annoying and perceived as louder than they are.

“ The music is magical, it just lifts you up ”

Dance Well Participant

Dandiya sticks, timbrels and ghungroos are perfect to experiment with various rhythmical patterns, and if the participants are seated, these instruments can be used by hitting the floor, on the armrests and on the neighbor's instrument.

Rhythmic exercises require little verbal explanation, as most participants will be able to follow the pattern, if they are allowed enough time. In this process it is fundamental to start the exercise slowly and to gradually introduce possible variations.

Teachers could start with one simple pattern along with a rhythmic-music track, repeating it before introducing variations. There is no need to always call the variation, and it would be interesting to see the natural reactions and adaptations to pattern changes. This is not always possible, and it largely depends on the workshop's target group and on the individuals' needs.

Ghungroos (ankle bells) are particularly useful for walking exercises to help participants keep rhythm and concentrate on the movement of their feet. Depending on the number of participants they can have bells on both ankles or just one.

Ghungroos can also be tied to the wrists or held in the hand, but most chair based exercises lack leg movements, therefore it is advisable to experiment more with the lower part of the body. Moreover, if the participants' footwork is minimal, the ankle bells could help highlight it, or might act as an incentive to enhance it.



Dandiya sticks



Giant scrunchy



The giant scrunchy is an excellent tool to get everyone involved in the movements and it gives a sense of stability when held while standing.

This prop augments every movement and encourages shy groups to take initiative, since it requires coordination and teamwork to create harmonic swinging. Physical activities with giant scrunchies are good to break the ice and to warm up, and offer a more intense variation to chair-based stretches.

The giant scrunchy can be used for breathing exercises, lifting and lowering the arms in unison, or as a resistance band to help with stretching of the upper body or the legs.

Note:

This prop can be very good for enhancing social inclusion, especially for people in advanced stages of dementia if they are not particularly responsive.



Props



Balls, Squidgy Balls, Balloons

Similar to the touchable bubbles and the feathers, the giant balloons are very light and move slowly in the air, leaving enough time for people to acknowledge their movements and respond to it.

The balloon is a highly engaging tool and requires little energy to be moved, therefore it can be combined with various activities (i.e the name game).

Sitting or standing in a circle, the balloon can be thrown to each other. On a rotation, one person can enter the centre of the circle and facilitate the game, or improvise a series of movements by balancing the balloon on one finger.

Small squidgy balls and tactile balls can act as a support for people with arthritis when exercising hand gestures. If their mobility doesn't allow them to form a full mudra, design a simplified version of the same.

Finally, light plastic balls, balloons and other light objects can be combined with other props, and bounced on parachutes or octabands. Throwing a ball using the parachute instead of one's hands require team work, balancing each one's energy and acknowledging the group's intention.

Note:

The light giant balloons work well in dementia settings, since they allow for a gentle and non invasive approach, while also giving the opportunity to release one's energy by hitting it hard.

In dementia settings, people's moods and attitudes change quite quickly, and this prop adapts well on every occasion.

It is extremely important for facilitators and carers to take care of the balloon's trajectories and to divert it when thrown at someone's face.





Parachute and octaband

The parachute and octaband physically connect the whole group. This may be particularly useful when working with participants with different mobilities or in different stages of dementia. In fact, as already mentioned for the scrunchy, every movement is augmented and supported and doesn't depend solely on the individual.

These props improve individual and group coordination and can be combined with all sorts of exercises (for example the game "Simon says", or trying to create a mexican wave, or bouncing a soft ball or cushion on the parachute to pass it to someone).

If there are wheelchair users in the group, unable to hold onto the parachute when it is lifted in the air, one way to engage them and to not make them feel excluded, is to invite the participants to lift the parachute over them.

Note:

It is extremely important to set the participants' positions in advance, to avoid the parachute and octaband being too loose or overstretched.





Preparation and Setting up for class



Preparation and Setting Up For Class

“
It is not the activities
you choose to do
as a leader but your
relationship to the
individuals in the
group that really
makes a difference”

Rachel Waterman
Artist

It is imperative that you complete a lesson plan for your class in plenty of time for the first session, even if the lesson ends up changing on the day. The lesson plan should be sent to the organisation/client in advance of the class (at least 48 hours prior). This allows them to review the plan and to understand what to expect from the session. In healthcare setting it is important to ensure that nothing proposed in the lesson plan will put the participants at risk.

If you are unable to attend, another artist should be able to run your class from this lesson plan, so ensure you include enough detail.

Structuring your workshop

It is important for all workshops to contain a gentle warm up. This is to be followed by a period of slightly more vigorous activity in order to reach the Public Health England (PHE) recommended target for older adults of 150 minutes of moderate intensity activity or 75 minutes of vigorous activity per week. The workshop can also incorporate co-ordination, balance, and rhythm exercises before gentle stretching and a cool down.

Note:

It is important to talk in advance to a dementia day centre's or hospital's staff to exchange information regarding the participants and to avoid overstepping roles and goals.

Explaining in advance working methods and boundaries on both sides will allow a smoother running of the class and a reciprocal understanding.

Below is an example of lesson plan structure:

1	Exercise to Introduce each other	
2a	Warm up	Compulsory!
2b	Warm Up	Compulsory!
3	Co-ordination	
4	Cardiovascular exercise	
5	Balance	
6	Rhythm	
7	Cardiovascular exercise	
8	Storytelling	
9	Stretches	
10	Cooldown	Compulsory!

If the project is running for several weeks, it is recommended to complete a scheme of work, alongside the lesson plan. This will address the objectives, aims and improvements that the participants would like to achieve through their sessions.

It will also highlight the long term goals or “course outcomes” of the workshops. These could be: improved fitness, increased coordination, or learning a dance for a performance. The course outcomes may alter depending on the desired outcomes of the participants.

Preparation and Setting Up For Class

Below is an example of Akademi's lesson plan and Scheme of work:

Lesson Plan

Lesson Plan

School/centre/organisation:

Date and time of session:

Number of Participants:

Age of Participants:

Special requirements/things to consider:

Equipment/resources needed for the session:

Timing	Activity	How will I deliver this activity?	Objectives	What resources will I need?	What could go wrong? What steps will be taken to ensure this risk is minimised.	How will I know if this activity was successful?

Scheme of Work

Course Title							
Tutor				Course Code			
Day		Time		Term		Dept/Subject Area	

Course outcomes (what will students learn? Please include discussion, reflective and analytical skills, contextual awareness, design/aesthetical skills)

For example "Participants become healthier and increase their wellbeing, improvement to their balance, coordination and movement.

Beginners	Intermediate	Advanced
<i>(Aim and objective for the workshops. You should have at least five main objectives and improvements)</i>	<i>(How the skills will be developed at different levels)</i>	
1.	1.	1.
2.		
3.		
4.		
5.		



Exercising



Exercising

In the following pages, you will find a series of exercises, games and tasks to incorporate in a dance class with older adults.

The first part will introduce some warming up exercises and group activities to get to know the fellow participants and to create a comfortable and relaxed atmosphere.

The second part will focus on the core of a typical South Asian dance class for older adults, introducing Indian dance routines and cardiovascular exercise.

The last section will give a few cooling down exercises and relaxation.

The whole chapter will take inspiration from actual exercises that South Asian dancers applied during Dance Well workshops.

The aim of these workshops is to have a creative and fun social activity but also to break barriers regarding what it takes to learn something new or exercise while having fun.



What participants said during the workshops:

“ Carers enjoy it as much as the cared for ”

“ I absolutely love the dance routine; it’s amazing if you can get your body to do it right ”

“ It’s rare that you give your body the attention it needs ”

“ It’s good for my body, all my stiff parts get released ”

Getting to know each other



Although it is useful to wear name badges, particularly during the first few classes, name games can be good ice-breakers. Some participants may find this slightly intimidating so determine whether this is the best way to start your class or not.

Gesture name game

Start by pronouncing your name loudly and clearly and accompanying it with a gesture, this can be an everyday gesture or one from the dance style you are teaching.

Ask everyone in the group to repeat your name and the gesture. Moving around the circle ask each person to say their name loudly along with a movement of their choice. If they get stuck they can just say their name until they build more confidence in future weeks. The group then repeats the person's name and associated gesture.

Repeat until everyone in the circle has had a turn, then go around the group once more to reinforce names. People are likely to feel more confident the second time around.

Notes:

Encourage participants to meet others, while practicing their co-ordination and movement. For example, you can reach your neighbours' arm while stretching, or 'pass' them a gesture (the person you are passing it to repeats the same movement).



Pay attention when doing the ball game with cardiac patients: make sure they don't keep their arms in the air without moving their feet for too long.

Try bouncing the ball to each other first, keeping the arms low.

Ball or object name game

Start by pronouncing your name loudly and clearly, and then pass the ball to someone else in the circle. Once received, they then say their own name and pass the ball to someone else.

Once everyone in the circle has had their turn, the ball returns to the leader of the workshop. The second time around, each person says their own name as before, but then they also say the name of the person they are passing the ball to.

Getting to Know each other



Musical names: an exercise by Archana Ballal

- Start by pronouncing your name, breaking it down in syllables (Ar-cha-na).
- Pronounce it while clapping hands or playing a timbrel to accentuate the rhythm.
- Have one round where people say their own names and tap the rhythm
- Have a couple of rounds where everyone taps/says everyone's names.
- Eventually everyone stops pronouncing the names, keeping only the tapping of the syllable.

This is a great exercise both to learn participants' names and to increase one's attention and sense of rhythm.



Hand shaking (for more mobile participants)

Participants are encouraged to shake hands with others in the room, and if they don't know each other, to say their name while doing so. Those who are more mobile can travel across the room to shake the hands of others who have remained seated.

They can also shake hands with others they pass on their journey across the space. This exercise should help in building confidence and exploring the space.

Note:

The music choice is extremely important! Search for an uplifting tune that can make people feel engaged and connected.

Individual hand shaking: an exercise by Rachel Waterman

This introductory exercise was designed by Rachel while working with a group of people with advanced dementia.

- Take an octaband (see props section for a full explanation) and put all the handles on your wrist.
- Greet everyone in the circle individually shaking their hands.
- While shaking their hand, pass one handle from your wrist to theirs. (always explain clearly what you are doing to avoid concern).
- At the end of the round, everyone will be connected via the octaband, and ready to start exercising.



Warming up

**Self massage (can also be used during cooldown)**

Self-massage can help to gently warm up the limbs. Touch might be beneficial and can create an immediate connection without the need for words or explanations. However make sure that touch is accepted and comes as an offer, rather than as an imposition. Visualisation through voice can also help with the motion of self-massage.

- Beginning with the hands, rub them together, gently covering all sides of the hands. Image that you are washing your hands with soap, rubbing the backs, and inbetween the fingers.
- Gently rub up one arm, all the way to the armpit.
- Next rub the top of the chest, across the collarbone and sternum with both hands.
- Move down and rub the bottom of the ribcage and the stomach, moving in circles around the stomach.
- If possible reach around to rub the kidneys on the back (you may need to lean forward to reach here).
- Next, rub the thighs, around the knees and as far down the shins as each participant can reach. It is okay if they can only reach their knees.
- If possible, lean forward, rub the tops of the feet, and then return up the backs of the legs, rubbing the calves.
- Rub the face, moving the cheeks, opening the mouth to relax the jaw.
- Then bring the fingers to the top of the head and tap as though rain drops are falling on the skull, moving around the head and down the cheeks.

Guide this routine gently and use visualisation, imagining daily gestures (washing hair, hands, reaching for an object) to guide the warmup.

Doing this is also a good way to remind people that it is possible to exercise while doing daily gestures.

Note:

Always ensure a thorough warm up has been carried out before proceeding to cardiovascular activities. Be aware of anyone who is struggling and ensure they rest whenever they need.



Chandra-Kala

This mudra means the crescent moon face.

Note:

The self massage is also a good moment to provide people with a space where they can focus on their feeling and aches and communicate them.

The artist should acknowledge and take note of participants' reactions. Are they frowning while rubbing their back, knees, neck? Do they look tense?

Warming up



Stretching and twisting with Hetel Gokal



Extend the neck [Fig. 1-2]

Sit straight with both feet on the ground and one hand on your thigh. Incline your head on one side and place the hand on your head.

Without pushing, allow the weight of your arm to stretch your neck. Open the chest and breathe deeply.

Repeat a couple of times on both sides. For a lighter version do not use your arms.



Extend the spine [Fig. 3-4]

Sit straight with both feet on the ground. Rotate your torso, trying to keep your hips in the same position. Rotate your chest without putting pressure on your shoulders. If you can, hold the armrest and breathe deeply.

Try to rotate a bit more, this time aiming to extend your spine, rather than twisting it. Repeat a couple of times on both sides.

An alternative might be to rotate and reach the person beside you, instead of holding the armrest.

Repeat on both sides.



Improve your balance: root to the ground [Fig. 5-6]

Feet together:

Stand up straight with both feet on the ground and hold the chair with one or both hands.

Lift one heel, while the other foot is on the ground. Lower your heel while the other foot lifts. If your balance is good, try to do the exercise without holding the chair.

For more challenge, lift both heels and lower them at the same time.

Facial Warming up



Exercising facial muscles is good for loosening the tension in the face, but also in the neck and shoulders. In dance and chair-based exercise classes this part of the body can be overlooked, however the face has more than 40 muscles that need to be taken care of!

A good start could be introducing slow movements, and progressively building on expression and interaction among participants.

In the exercise below, Somita is keeping her eyes wide open and rotating her eyeballs clockwise and anticlockwise. Remember that giving spacial indications (right, left, up, down) could not work with people with dementia. Different, customised spacial clues have to be found such as moving in the directions they should be looking at/moving to and telling them to look at you, or move towards you.

“ In here I don't feel I have dementia, and I can just go silly! ”

Dance Well Participant



Facial expressions, or Navarasa, constitute one of the characteristics of South Asian Dance. Navarasa means Nine Emotions: Shringara (love), Hasya (laughter), Karuna (kind-heartedness or compassion), Raudra (anger), Veera (courage), Bhayanaka (terror), Bheebhatsya (disgust), Adbutha (surprise), and Shantha (peace or tranquility).

This exercise is beneficial for everyone. People often forget about training their facial muscles, and this might also be a fun and ice-breaking activity for the group.

Also, this exercise could be appreciated by those in their early stages of dementia, as a way to express feelings and articulate situations without the need to talk or to use words.



Somita Basak performing Adbutha

Joints articulation



It is likely that in South Asian dance workshops you will use many hand gestures and arm movements. Before jumping right into the various dance routines and mudras, you should start by warming up and mobilising the joints in the shoulders, elbows, wrists, hands and knees.

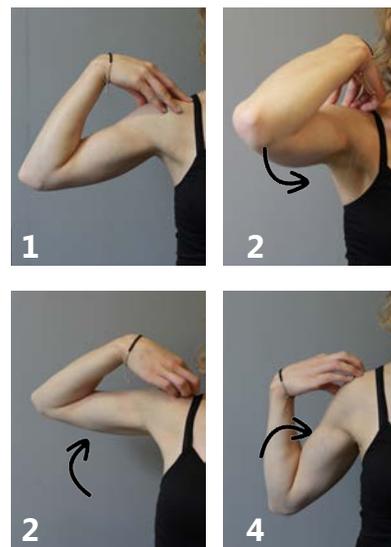
Elbows and shoulders:

Begin by keeping your arms down and rolling one shoulder backwards, followed by the other shoulder.

Repeat, rolling each shoulder forward. Repeat again, rolling both shoulders at the same time, first forward, then backward. Place your hands on your shoulders and draw big circles.

You can also place your hand on your shoulder and move your elbows pretending to draw something, to write your name or a word, imagining your elbow as a paintbrush.

Many people tend to contract their necks when moving shoulders and arms above their head. Remind them to breathe and keep the face relaxed and the neck loose and extended at all time.

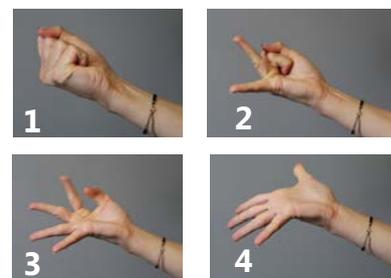


Hands and fingers:

Start with your hands closed in fists and open the fingers one by one starting from the little fingers or thumbs and closing again starting from the opposite finger you started with.

Next tap each finger with the thumb, trying to keep a rhythmical pattern and tapping simultaneously the right and left hand.

These exercises not only mobilise the fingers' joints, but they also help to improve coordination and proprioception (the ability of the body to sense its position in space).



Legs and feet

Straighten one leg out in front. Lift the leg in the air, keeping your spine long. If you need support you can hold the side of the chair, maintaining shoulders and neck relaxed. Now point and flex the foot. Rotate the foot clockwise and then anticlockwise. Repeat on the other leg.

For more of a challenge try lifting both legs at the same time. This is good for core stability.



Warming up through storytelling

**Going on a journey**

Tell everyone that you are going on a journey; this can be a holiday, a walk through the garden, walk to the shops, an encounter on the street and so on. Ask participants for input: "We're going on our summer holidays, what do we need to do before we go?" The answer could be "pack". Mime packing your suitcase.

Then you might walk to the bus stop, so you can march on the spot, either sitting down or standing up depending on the ability of the class. "Where are we going to go on holiday? How are we going to get there?". Continue the journey, either standing up or seated until the end of the song. Leave space and time for participants to tell their own story and express them in gesture.

'Going on a journey' adapts an important part of Indian dance which focusses on storytelling and the art of expression (Abhinaya).

This exercise not only makes people move and exercising without really noticing it, but allows to express topics or gestures of interest and to work on expression and creativity on a more performative and theatrical level.

Note:

Try not to make the story static by using only hand gestures. Where possible, make sure all the body is engaged in telling the story and moving throughout the space.



Storytelling



Mudras - hand gestures

Mudras help mobilise wrists, fingers, arms and hand movements as well as improving co-ordination. It is particularly good for participants affected by arthritis and those with aches and pains as the exercises help to strengthen the joints and muscles.

- Introduce a simple Mudra.
- Introduce new ones as participants start mastering those already introduced.
- Attempt to do them together one after another in unison and if possible in rhythm.
- Select a couple of the mudras you have taught participants and give them an example of how it can be used in telling stories, i.e. the mudra for picking flowers, holding veil etc.



Bhramara

This mudra means wings, and can represent a bee.

Note:

Mudras improve coordination. However, they can be frustrating for people unable to move hands freely. Support participants by providing squidgy balls, and encourage them to work within their own limits.



'Calling for Mudras' exercise by Jesal Patel

- Choose a certain amount of Mudras that the group can remember and match each one of them with a number (for example number 1 might be Bhramara, number 2 might be Alapadma, and so on).
- Repeat the mudras and their corresponding numbers until participants have memorised them.
- Call the numbers in a random order (1, 3, 1, 2, 3, 3 etc.), challenging participants to respond immediately with the right gesture.
- Speed up or slow down according to reactions.





Reminiscence: storytelling through mime, objects & words

Reminiscence work is very popular with elderly groups as they have a wealth of life experience to draw from and lots of stories to tell. However, it is important to note that reminiscence should not be understood as a simple exercise of memory, but instead should be looked at as a creative re-enactment, and ultimately as the opportunity to create something new.

Use of props or objects to which they can associate is an easy and non-intrusive way to learn and engage with the participants. It helps to stimulate their imagination and re-connect with their past.

A few ideas to use gestures and storytelling could be:

- Mime: Introduce a simple idea for a story i.e. picking flowers/ washing face/getting dressed/going somewhere etc. As they get familiar with the exercise, get them to create their own stories and get them to mime using face, body and gestures.
- Depending on the group and on the setting, you can use some elements ranging from props, to musical and narrative clues to stage a scene and stimulate the group's creativity.
- Create a sequence/story starting from the words of a song
- Ask participants what they like, or pick an object or a theme and ask for variations. Ask them to think about the names/objects/ colours they like, and for every choice pick a gesture. Then call the name and do the gestures, creating a sequence (eg. if you are talking about favourite colors - green, purple, yellow, pink- the sequence might be green-yellow-yellow-purple = mudra1-mudra3-mudra3-mudra2).

Notes:

Reminiscence work is just one approach to storytelling. It is certainly important to start from something familiar that participants can connect to. However, some individuals might enjoy more to imagine new scenarios and unfamiliar gestures and situations.

When working with reminiscence, leave space for participants to express themselves and do not assume they will like or will recognise certain behaviours just because they are 'typical' of a certain age, genre and gender!

Storytelling to a familiar song



1
Doe, (one hand)
A deer (other hand)



2
A female deer (both hands)



3
Ray, a drop of



4
of golden sun (draw a circle with your arms)



5
Me, a name, I call myself



6
Far a long long way (keep your spine extended, twist from left to right and viceversa)



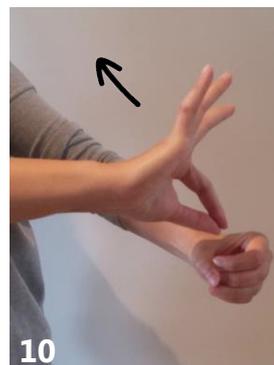
7
To run (run on the spot, or just use arms if legs are not very mobile)



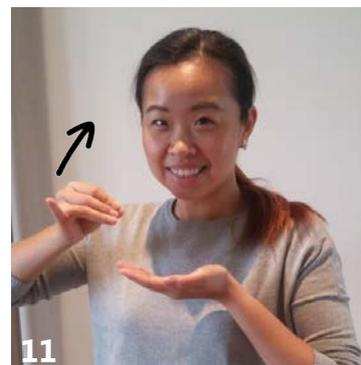
8
Sew, a needle pulling thread (open your arms wide while 'pulling the thread')



9
La a note



10
to follow sew (repeat exercise 8 pulling the right hand up in the air)



11
Tea I drink with jam and bread

That will bring us back to doe (repeat sequence, make bigger movements and practice while standing)

Cardiovascular exercise



After the warm up and the introductory exercises (approximately 15 minutes for 1 hour session) it is important to increase the intensity of the exercise.

Cardiovascular exercise increases the heart rate and makes the body stronger and healthier.

In this part of the class it is extremely important to maintain good observation skills: participants should never reach the maximum exertion!

If participants do not have good balance or are not very mobile, it is nevertheless important to keep the legs moving, even while seated. Feet should always keep tapping and legs marching, especially if the movement entails moving arms above the head.

Cardiovascular exercise for less mobile participants:

Dancing from a seated position.

Effective exercise can be done while sitting on a chair or in a wheelchair.

Start from simple movements that do not require a huge amount of coordination, and start progressively to build a challenging sequence.

Example:

- Create a sequence by tapping the feet. It could be alternating right and left foot following a certain rhythmic pattern, using flat feet.

To make it more complicated you might start alternating toe and heels, or toe/heels/flat feet, and maybe stepping the feet to the side (this might be also a good alternative to a dance sequence for people who are unable to stand).

- You could then create a sequence with arms or hands, with or without the use of props.
Make it as complicated as the group allows (can you twist with the upper body, while hitting the bell?)
- Finally combine the upper body and the lower body movements.
- Repeat several times, keeping the sequence upbeat, and eventually alternating the speed.

Note:

Cardiovascular exercise is what raises your heart rate. This means that what could be perceived by someone as a light exercise, might challenge another who is less used to physical activity.

The exercise described at page 50, for example, might be either intense or gentle, according to the group or individuals you are working with.

Make sure you can read signals from your group and that you can understand their level of perceived exertion!

Note:

Do not put participants at risk! If you are not sure whether an exercise might be dangerous or not, try something different instead.

Cardiovascular exercise



Ball Games

Another effective cardiovascular exercise is playing with a big and light balloon.

Moving the hands up in the air will increase the heart rate, but it will be less tiring, since participants are absorbed in the game. Remind them to keep the legs moving. If participants cannot coordinate both movements, they can do so by alternating 30/60 seconds of arm work with 30/60 seconds of footwork.

You can invite participants into the centre to lead the passing of the balloon or to improvise with it.

Dance improvisation with scarves.

Dancing and improvising movements with the scarves is a good cardiovascular exercise, but it is important to interrupt the exercises with short breaks, and lower the arms from time to time. This can be done both sitting or standing, and people who cannot stand can partner with others standing in front of them.

Note:

This is the part where you should be the most attentive. Use the talk test and your observation skills and ask participants if they are feeling ok. If they are presenting signs of exertion, pain or uneasiness customise the exercise according to their needs, or ask how you can help (do they need to drink some water, or take a break?).



1. Hold the edges of a scarf and maintain a still position for stretching your arms.



2. Crumple your scarf and throw it in the air, or pass it to someone else.



3. Swing your scarf following the music. 'Draw' in the air, moving the scarf as if it was a paintbrush.



3. Hold one hem of the scarf and give the opposite hem to a seated participant. Allow them to lead the movement.

Cardiovascular exercise

**Cardiovascular exercise for fairly mobile participants**

The 30 minutes in the middle of the class are the perfect moment to put to practice and coordinate all the movements that have been learned separately (legs, arms, hands etc.)

Try to keep these 30 minutes as upbeat as you can without giving too much break and focussing on a rhythmic repetition.

Try introducing a Kathak, Bharatanatyam, Odissi or other dance sequences and begin or end the sequence with a short storytelling.



Tripataka (In three parts)

This mudra means a crown or a tree. It can also mean weapons, light, flames of fire, arrows or turning.

Simplified Bharatanatyam sequence by Archana Ballal

In the following pages, Archana is showing a simplified Bharatanatyam sequence. In this sequence legs are parallel and feet are together. Feet can also be hip-width apart for better balance and control of the movements.

Turn out posture may be too challenging for hips and knees and the muscles needed to keep a lower centre of gravity might be not strong enough, but allow participants freedom to choose.



Cardiovascular exercise



Cardiovascular exercise



Cardiovascular exercise



Tapping sequence with Rachel Waterman

Choose music with a good beat that you enjoy listening to. Next choose a firm chair and sit towards the front of the chair with your feet flat on the ground. Lift both of your heels up and down in tune with the music. Keep this movement going throughout the exercise.



Step 1

Raise the right arm. Bend the arm at a 90° angle. Have your elbow the same height as your shoulder and your palm facing the front. Now use the left hand to tap the right elbow 8 times in time with the music.

Step 2

Change sides so that the left arm is raised & bent at a 90° angle. Use the right arm to tap the left elbow 8 times in time with the music.

Repeat Steps 1 and 2. If 90° is too challenging allow participants to keep their arms lower.

Step 3

Change sides so the right arm is raised and use your left hand to tap your right hip 8 times in time with the music.

Step 4

Change sides so your left arm is raised and use your right arm to tap your left hip 8 times in time with the music.

Repeat Steps 3 and 4

Step 5

Change sides so your right arm is raised and use your left hand to tap the right knee 8 times in time with the music.

Step 6

Change sides so your left arm is raised and use your right hand to tap the left knee 8 times in time with the music.

Repeat the sequence from the beginning with 4 taps each time you change sides. Then repeat again using 2 taps each time you change sides.

Then if you like a challenge repeat using 1 tap each time you change sides.

Cool down and Stretches



Hamstring Stretches with giant scrunchy

Sometimes it might be difficult to stretch legs properly, since older adults might not be able to reach their feet and apply enough pressure to make the stretching effective.

By placing the scrunchy underneath one foot and extending the leg while holding the scrunchy with both hands, the hamstrings will extend ensuring a proper stretch.

For this exercise, remind participants to sit straight and extend their back and neck.



Arms stretches with giant scrunchy

The scrunchy is a great prop for arm stretches, since it provides some resistance when opening and closing arms.

Always remember to favour a small and well structured exercise, rather than a wide movement done in a wrong posture.

When moving arms, remind people to inhale and exhale deeply, and to keep shoulders open and relaxed.



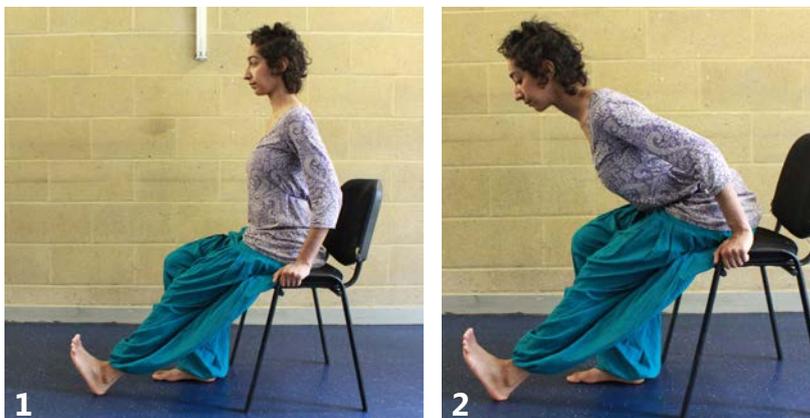
Cool down and Stretches



Chair-based stretches for lower back and legs with Maryam Shakiba

Another way to stretch the lower back and the legs is to sit on a chair and lengthen the spine whilst holding the side of the chair with both hands.

You can also hold the armrests, but make sure to keep the chest wide open.



Hamstring stretch [1, 2]

Bend one leg with foot flat on the ground and extend the other leg in front.

If possible, flex this foot towards you [1]. Hold the chair with both hands and slowly tilt the torso forward, keeping your spine long and your back in a neutral position [2].

Remain here for 5 counts, if possible. Gently return to upright and plant both feet on the ground.

Repeat on the other side.

Cool down and Stretches

**Lower back stretch [3, 4]**

Keep both legs bent and open with feet flat on the ground [3]. Holding the chair with both hands, tilt the torso forward, keeping a long and neutral back, and a relaxed neck and face. Legs do not have necessarily to be as wide as demonstrated in the picture. As long as the back is kept straight, participants can also keep their legs hip-width apart.

Always breathe out when lowering your upper body [4].

Repeat 3-5 times.

Note:

Try to maintain any stretching for at least 5 seconds

NEVER do ballistic stretching (bouncing repeatedly into a stretched position in an attempt to force the movement beyond its normal range of motion).

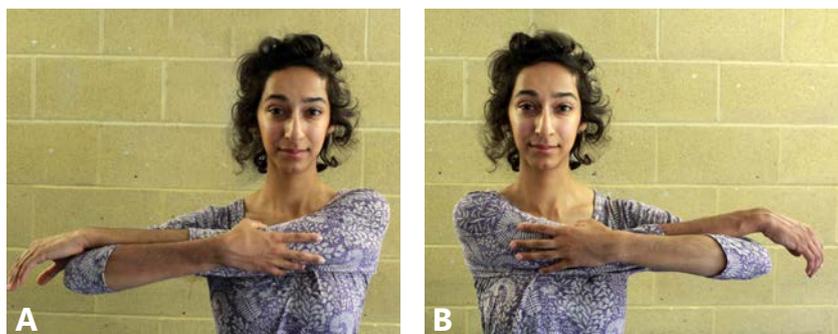


Keep your neck long and extended at all times

Cool down and Stretches



Arm stretch with Maryam Shakiba



Extend the right arm in front of you, and point it to the left.

Place your left hand on your right upper arm and pull the right arm closer to your body. If participants cannot reach the upper arm, allow them to place their hand on the lower arm, never on the elbow.

Keep the position for a few seconds and repeat on the other side.

Make sure this exercise is done properly, so that participants can feel a good stretch in their trapezius.

Alternative stretch:

Below, two participants are stretching their arms while reaching to each other.



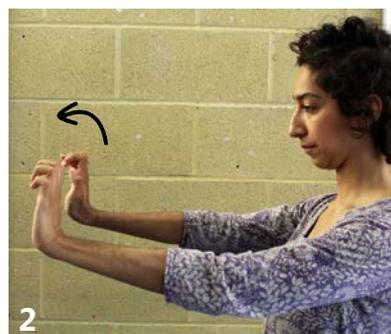
Note:

When working with cardiac patients do not stretch for too long, but try to alternate stretches and movements. Static stretches shouldn't last more than 8-10 seconds each. Moving the lower body helps slowly lower blood pressure.

Cool down and Stretches



Hand stretch with Maryam Shakiba

**Note:**

Start rotating your wrists only after curling your fingers completely.

Position the arms in front of you with the hands in line with your shoulders.

Try to keep your arms as extended as you can, without contracting shoulders and neck.

Push your palms in front of you, trying to create a 90° angle between the back of your hands and your wrist [1].

Roll your fingers slowly and then start to also roll your wrists [2,3].

Finally find yourself with open palms facing your torso, wrists flexed at 90° [4].

Repeat backwards, rolling the fingers starting from position 4 and arriving to position 1. Keep the movement slow.

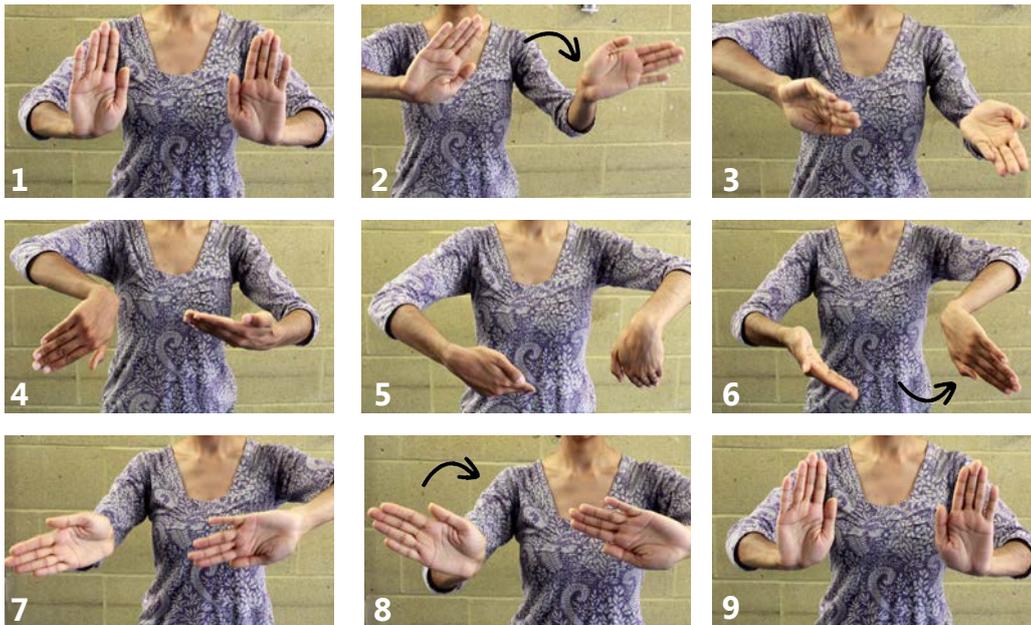
This movement is very beneficial not only for hands and wrist, but also for all the muscles in the forearm.

The Scoop - an exercise for wrists and coordination



Using some visualisation might be beneficial to get the movement right. Artist Maryam Shakiba suggests that the inward movement is similar to the action of scooping. This exercise could be used either as a warm up or cool down.

Repeat slowly both clockwise and anticlockwise.



Start with the hands in line with your shoulders. Keep the arms slightly bent, and extend them only if you feel comfortable.

The goal is to draw a figure of 8 or an infinity sign with both hands (∞).

Turn both hands clockwise, palms facing away from you. When arriving at 1/4 of a full rotation [Fig. 2], keep rotating your hands, but twist your wrists and start facing your palms towards the ceiling [Fig. 3].

Keep rotating hands in the same direction until you find both hands are facing the ceiling and pointing towards you [Fig. 5].

In the following position, both hands are pointing on the right side, with palms facing in your direction [Fig. 6].

Now flip your hands on the left side, so the palms will face opposite from you [Fig. 7].

Finally rotate them clockwise for another 1/4 of a full rotation and reach the starting position.

Repeat turning hands anti-clockwise.

Breathing and closing



Breathing exercises

When doing any kind of exercise, from warm up to cool down, it is fundamental to follow a correct breathing pattern, to ensure the muscles engaged in the exercises and connective tissues get enough oxygen. Proper breathing also helps keep joints lubricated. Be particularly aware if doing breathing exercises with people with chronic obstructive pulmonary disease (COPD), especially those with oxygen tanks.

Breathing is a natural process, and yet we often forget to breathe when we are concentrating on a task. During an exercise that we perceive as challenging and difficult, there is the tendency to contract the body and to hold one's breath. Conversely, training one's breathing technique means also reducing tension.

Simple breathing exercise

This simple exercise is useful to relax at the end of a class.

Invite everyone to sit down, comfortably on their chairs, with hands lying relaxed on their lap.

Ask everyone to close their eyes, and focus on slowly inhaling through their nose and exhaling through the mouth. Do this for at least two minutes. Look down to your hands, and slowly open the eyes.

This exercise can be used at the beginning to help the group relax and focus on the class. The same exercise can also be used at the end of the session, and it can introduce a series of humming or a moment of 'collective' breathing done while holding hands and moving arms up and down following inhalation and exhalation.

After this moment, leave time for the group to re-familiarise with the environment, and possibly to share thoughts, ask questions, or talk to each other!

Sitkari: A breathing exercise to fight the summer heat

There are plenty of breathing exercises done by alternating nostrils, using different parts of the throat and placing hands on various parts of the body. There is, however, a breathing technique that can be very refreshing in summer, and that can help to cool down after an intense class.

- Sit in a comfortable position with your eyes closed.
- Close your mouth so that your lower and upper teeth touch (without applying any pressure!)
- Open your lips so your teeth are exposed to the air.
- Inhale slowly through the gaps in the teeth and focus on the hissing sound of the breath.
- Enjoy the cool breeze coming in through your mouth.
- Close the mouth and slowly exhale through the nose.

Music

The Role of Music

Music is a powerful and necessary tool to support dance classes. Moreover, much research over the last decades has proven the dramatic effect music has on helping to support and interact with people with dementia [AgeUK].

The use of props such as timbrels, ghungroos and dandiya sticks enhance the musical experience and the rhythmic patterns of the movements, and contribute to create a cohesive environment through sound.

If it is true that people with dementia often react positively to old tunes they used to listen in the past, it is also true that experimenting with different tunes and music styles can be equally rewarding for the group and much more unexpected!

Moreover, can we really make assumptions on what music a person might like depending just on age and ethnic background?

Do experiment with music and learn participants' preferences.

During a class ensure the audio system is in a location where it is easily manageable.

Plan the playlist ahead of time. This will avoid wasting time during the class looking for new soundtracks and disrupting the group's attention.

Keep the volume high enough to be heard by everyone but not enough to dim your voice.

If you have a portable device, pay attention not to leave it on the ground, causing a trip hazard. If you need to have it close to you place it under your chair.

Notes:

Even sounds that are not particularly strong can be perceived as being very loud. Be attentive and respect their feelings and perceptions

If a group is particularly reluctant to listen to different music, then do not insist, but try to adapt the class to their preferences.

It is always good to try to offer a variety of music genres. However, if you can, try not to impose anything.

These classes should be a free and safe space to work together and forcing expectations on participants will only produce a negative effect.

Conclusion



Conclusion

Playing Vs Infantilisation

In this booklet, we suggested activities such as ball games and games involving giant parachutes and octabands. We used the "*Do, Re, Mi song*" as an example of storytelling through mime, together with a well-known children's game, called 'Simon says', where a group leader calls for an action while the group repeats it.

Is this a way to infantilise older adults?

There is undoubtedly a risk in providing simplistic or unchallenging exercises for older adults with reduced mobility, or specific syndromes. The risk is making the action of playing (that should be ageless) perilously close to infantilisation.

Where does the limit stand?

We should always ask ourselves where we are positioning the exercise in relation to the group, Are we on a different level? How and why?

What would it say about us practitioners, if we suggested an activity we ourselves find uninteresting or dull? Games can be considered child-like, but they are not always so.

If there is a sincere interaction and communication the class won't start with specific structures or boundaries based on prejudices. Hence the activity will be 'with older people', rather than 'for older people'.

However why would this be the case? Why are playing and having a playful attitude not a right of old people as it should be for children, teenagers, and adults?

And most of all: why shouldn't it be possible to combine professionalism and intellect with playfulness in the first place?

This booklet aims to make South Asian dance practitioners (but also all dance practitioners) more aware of the risks and the environments they may find themselves in and to provide a set of tools to deploy in different situations.

With less stereotypes, but with a good knowledge of what professionalism, care and respect mean when working in community, care homes and hospital settings, we hope this resource will be useful to support dance and movement practitioners and to inspire ground-breaking and challenging cooperative work.

Resources



External resources

DBS

<https://www.gov.uk/disclosure-barring-service-check/overview>

SAFEGUARDING

<http://artworks.cymru/uploads/images/page-images/Artist%20in%20Hospitals%20Toolkit.pdf>

<http://www.scie.org.uk/adults/safeguarding/>

HOSPITAL SETTING

<https://www.infectionpreventioncontrol.co.uk/content/uploads/2016/03/09-Hand-Hygiene-March-2016-Version-2.00.pdf>

<http://artworks.cymru/uploads/images/page-images/Artist%20in%20Hospitals%20Toolkit.pdf>

MEASURING EXERTION

<https://www.hsph.harvard.edu/nutritionsource/borg-scale/>

PROPS

www.jabadao.org

DEMENTIA

www.alzheimers.org.uk

www.dementiauk.org

www.dementiathfinders.org

www.arts4dementia.org.uk

DANCE TRAINING

www.greencandle.com

www.communitydance.org.uk

LONDON ARTS IN HEALTH FORUM

(for further publications, research and guidelines)

www.lahf.org.uk



*Permission to express ourselves
symbolically
enhances our ability to express
ourselves directly*

Alida Gersie

Special thanks

Thank you to the Dance Well Team, Giulia Ghinelli and Claire Farmer, who conceived and realised this resource booklet and to the Akademi Team, especially to Christina Christou, Rohanne Udall and Antareepa Thakur who contributed to the editing of the content.

Thank you to all Akademi associated artists who have been leading the Dance Well project and inspired it with their creativity.

A big thank you goes in particular to artists: Archana Ballal, Somita Basak, Jane Chan, Hetel Gokal, Archita Kumar, Jesal Patel, Maryam Shakiba and Rachel Waterman, who took time to contribute actively to the booklet.

Thank you to all past and present partners: The Alzheimer's Society, Age UK Camden, Camden Community Connectors, Camden Carers, Barts Health NHS Trust, Royal Brompton and Harefield NHS Trust, rb&hArts, Westminster Memory Cafe, Arts 4 Dementia, Shaw Healthcare, Vital Arts, Saint Pancras Community Association, Kentish Town Community Association, North London Cares, Third Age Project, Surma Centre, The Bengali Workers Association, Henna Asian Women Group, Netherwood Day Centre, West Euston Partnership.

Without your support, none of this would have been possible.

Finally thank you to the National Lottery through the Big Lottery Fund, for funding the Dance Well Project.

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Book designed by Giulia Ghinelli, 2017.

Dance Well workshops and case study



Dance Well Workshops and case study



Case study of E

I feel happy and it is great
that the staff are
taking part as well.
Here I feel I am cared for.

Dance Well Workshops and case study

E, unlike the other participants, came to the Dance Well workshop alone - without any carers or relatives. When she joined the group and started doing some exercises with the bells and hand gestures, she did not seem overly convinced on the usefulness of the workshop. She looked serious and gloomy, and didn't smile at all.

From the second session onwards, she became more engaged and smiled for the first time. She continued to attend alone and this did not seem to worry her. Over time, E got more and more enthusiastic about the workshop. In her diary¹ she wrote:

"This workshop seems to pull the group together, and we are working hard, and the same time laughing and enjoying! I start to feel how important it is to learn things together, it allows us to take our time".

Something clicked within her in the following weeks, and she started to bond with other participants, particularly with U and her daughter. Towards the end of the workshops she wouldn't start the class without greeting them or waving enthusiastically if they arrived late. She also started to stay back late to chat and laugh with the group. On the last day of the workshop, they were organising to meet again soon.

E was one of the most enthusiastic participants. She often cycled back home and attended a lot of other activities, from arts and craft to tai chi and drama. E had good mobility and was seriously committed to learning as many hand gestures and Bharatanatyam movements as she could. She was independent.

This is why I² was surprised to notice her confusion when I tried to interview her. She suddenly lost all the confidence and brilliance she had shown over the weeks, and became gloomy again. I was mortified. The last thing I wanted was to ruin a pleasant experience, and decided to cut the questions short. I soon realised that E avoided talking much and instead preferred to focus on gestures and movements. She put in significant effort and dedication to learn these. E was confident and outgoing; however this was not merely a trait of her personality, but a conscious decision to open herself to new things, and to approach them with enthusiasm and independence. E was brave.

What the workshops provided her with was space and time where she could experiment and be herself without being judged or questioned. She built a relationship with the group based on a common will to keep oneself active, social, alive.

¹ Participants were provided with a diary to reflect on their experience

² Giulia, Dance Well Project Assistant

Dance Well Workshops and case study



Harefield Hospital

Apr-Jul 2016
Sep-Nov 2017



Camden Carers

May-Jul 2016
Sep 2017



Third Age Project

Jul-Aug 2016



Henna Asian Women's Group

Jul-Sep 2016
Jul-Sep 2017



Saint Pancras Community Association

Sep-Nov 2016



North London Cares

Oct 2016

Dance Well Workshops and case study



Netherwood Care Home
Oct-Dec 2016



Arts 4 Dementia
Jan-Mar 2017



Wellesley Road Care Home
Mar-Apr 2017



Alzheimer's Society
May 2017



Bengali Workers' Association
Jul-Oct 2017



Westminster Memory Cafe
Jul 2017



The Royal London Hospital
Jul-Aug 2017



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